The Affective and Ideological 'Faces' of the Great War: Facial Disfigurement and Cultural Memory

"When would they all stop looking at me?"
(Marc Dugain, *La chambre des officiers*)

"It was crucial not to react to the patient's appearance. To see without being seen."
(Jodie Shields, *The Crimson Portrait*)

As Joanna Bourke writes, "the most important point about the male body during the Great War is that it was intended to be mutilated" (1999, 31). Referring only to the case of Great Britain, she provides the most shocking statistics: "Over 41,000 men had their limbs amputated during the war. [...] Sixty thousand five hundred were wounded in the head or eyes. Eighty-nine thousand sustained other serious damage to their bodies" (33). The consequences of this "biggest industrial accident in history," Jay Winter emphasizes, were far-reaching, "[transforming] [the] history of orthopedic medicine and of rehabilitation medicine, [...] [and] of other branches of medical care – neurology, psychiatry, surgery [...]." Most importantly, however, Winter argues, "the Great War [opened] a new era in the history of disability, and of our understanding of who the disabled are" (2011, 29). This may be too optimistic an approach, based on an assumption that our contemporary culture is empathetic simply because we know more about disability than the previous generations. Although the Great War mercilessly exposed a vast array of physical disabilities and deformities to the public eye, the question that needs to be asked is to what extent were societies ready to *see* (understand and empathize with) the mutilated veterans, and to what extent were – and are – image and film used/abused to evoke a desired ideological and/or affective attitude towards the mutilated soldier?

In the words of Marjorie Gehrhardt, "in the hierarchy of wounds, facial injuries are deemed the worst of all, not only in terms of physical disfigurement, but also regarding their psychological and social impact" (2015, 113). The starting point of my discussion is the representation of the 'horror' of encountering facially disfigured soldiers in Ward Muir's *The Happy Hospital* (1918) within the interpretative framework of "the culture of aversion" (Biernoff 2011, 669). Ernst Friedrich's *Krieg dem Kriege* (1924) will be discussed in the context of the ideological prerequisites of the futility myth, i.e. a deliberate foregrounding of the most 'shocking' aspects of trench warfare. The main focus will be placed on Marc Dugain's *La chambre des officiers* (1998), François Dupeyron's film adaptation of the novel (2001), and Jodie Shields's *The Crimson Portrait* (2007), all of which I classify as comparable (literary and cinematic) attempts at promoting empathy in our contemporary post-memory culture, wherein "violence is spectacular, immediate and entertaining" (Hatty 2000, 192).
1. The 'Horror' of Facial Disfigurement

Journalist and photographer Lance Corporal Ward Muir served with the Royal Army Medical Corps during the Great War. He published his sketches of hospital life in *Observations of an Orderly* in 1917, to be followed by *The Happy Hospital* in 1918, the last part of which is devoted to the facial ward:

> I feared, when talking to him, to meet his eye. (Generally there is only one eye left). I feared that inadvertently I might let the poor victim perceive what I perceived, namely that he was hideous. Hideous is the only word for these smashed faces […] To talk to a lad who, six months ago, was probably a wholesome and pleasing specimen of English youth, and is now a gargoyl e, and a broken gargoyl e at that […]. Without surgery's aid his face might have been unspeakably worse than it is. […] And yet! Surgery at last has washed its hands of him; and in his mirror he is greeted by a gargoyl e. Suppose he is married, or engaged to be married. Could any woman come near the gargoyl e without repugnance? […] Why, a child would run screaming from such a sight. To be fled from by children! That must be a heavy cross for some souls to bear. (1918, 143-145; my emphasis)

What is striking about the sketch is that it lacks even the most basic "passive" form of empathy that "serves to recognize the Other as a moving, breathing and living human being" (Calloway-Thomas 2010, 14). The young soldier appears to Muir as a "gargoyl e," a word repeated many times, as if deliberately "call[ing] up a long history of corporeal deviations or grotesques, from Pliny's monstrous races, to the hybrid creatures that crouch on the edges of medieval cathedrals and manuscripts, [and] the narrative deformations of Gothic horror […]" (Biernoff 2008, 223). The onlooker "fears" to look at the facially disfigured soldier because his own face, instinctively expressing aversion, becomes a mirror reflecting the man's 'otherness:' "disgust […] is a response to perceived transgression of natural order, a visceral (and frequently moral, social or political) casting out of things that we find unbearable because they confuse the categories by which we live and think" (Biernoff 2008, 223).

Muir takes it for granted that the repugnance he himself felt would also be the 'natural' reaction of the soldiers' families. Once looking at facial injuries is assumed to be emotionally impossible, then the only available reaction that remains is to look away: "[the] anxiety […] was specifically visual. Patients refused to see their families and fiancées; children reportedly fled at the sight of their fathers; nurses and orderlies struggled to look their patients in the face. […] This collective looking-away took multiple forms: the absence of mirrors on facial wards, the physical and psychological isolation of patients with severe facial injuries, […]" (Biernoff 2011, 668). Among the various forms of physical mutilations, facial disfigurement was the most shocking because the loss of face took away the man's human identity: "the very term gueules cassées, widely used in France, coined and claimed by veterans themselves, suggests this de-humanizing aspect: 'gueules' do not belong to humans but to animals" (Gehrhardt 2015, 109). Muir's sketch has two parts, "Faces" and "Masks." The first section invokes Mary Shelley's canonical story of great aspirations and ultimate disenchantment. Victor Frankenstein desired to make a perfect human being. Disappointed with the outcome of his experiment, he rejected what he saw as a 'monster,' only because 'it' failed to conform to accepted social norms of human appearance. For Muir, the facially disfigured soldiers are the Great War incarnations...
of Victor Frankenstein's creature, they are monstrous 'Others,' who can only be accepted within the frames of society if they are 'mended.' Therefore, the second part of Muir's sketch "take[s] the reader into the Masks for Facial Disfigurements Department at the 3rd London General Hospital" (Muir 1918, 146). This section is an apotheosis of "the artist[s]" (146), i.e. the creators of new faces, the anti-Victor Frankenstein figures who 'unmake' the monster, and yet this 'un-making' is only a cover up of an identity (and humanity) irrevocably lost, for the masks are overtly stated to be safeguarding the society from an 'inhuman' appearance: "Instead of being a gargoyle, ashamed to show himself on the streets, he is almost a normal human being and can go anywhere unafraid – unafraid (a happy release!) of seeing others afraid" (152; my emphasis).

One should note here Muir's blatant admission that a mask is only a simulacrum of humanness, for beneath it still lurks the 'monstrous' truth of what the war could do to men. Muir pays tribute to Francis Derwent Wood, "the sculptor" (146) who attempted to 'resurrect' the lost faces: "He worked from a pre-war photograph. [...] The mask was attached to the face usually with strong spectacles. It was pigmented to match the patient's coloring" (Deranian 2007, 114). However, such masks allowed only for a semblance of the pre-disfigurement identity: "the masks were at once lifelike and lifeless, [...] Nor were the masks able to restore lost functions of the face, such as the ability to chew or swallow" (Alexander 2007). Though the purpose of the masks was to ensure that the facially disfigured soldier was, in the words of Francis Derwent Wood, "no longer a source of melancholy to himself nor of sadness to his relatives and friends" (qtd. in Deranian 2017, 114), their use affirms the prevailing "culture of aversion," wherein facial disfigurement was seen as an aberration from the social norms of physical appearance and thus needed to be hidden from the social eye.

Analyzing Muir's discourse in the sketch "Masks and Faces" in The Happy Hospital, Suzannah Biernoff indicates an ethical difference between the past "culture of aversion" and today's social and cultural acceptance of physical 'otherness:'

[There are] passage[s] which [point] to the fear, disgust and shame surrounding facial disfigurement, both for the men who suffered these injuries, and for those – like Muir – who came into contact with them. The Happy Hospital probably would not find a publisher today: we have come to expect a more sensitive (and more euphemistic) treatment of disfigurement and disability. (2011, 671)

It is beyond doubt that contemporary social campaigns for the rights of the disabled, as well as contemporary media's visual familiarization of various forms of disability, have all had their share in the making of "[an] ability [to] imaginatively enter into and participate in the world of the [...] Other cognitively, affectively, and behaviorally" (Calloway-Thomas 2010, 8). Concomitantly, however, the potential of empathetic identification is thwarted by a consistent promotion of "[a] 'wound culture' in which the traumatic, the injurious, and the violent are not only visible, but also an integral aspect of individual and social functioning – [which] is premised on the pathologization of the public sphere, the rendering of the public sphere as a place of abjection" (Hatty 2000, 196).

As Marjorie Gehrhardt notes, "evidence of the fact that disfigurement may still be associated today with dubious moral or intellectual ability can be observed for example in the almost systematic portrayal of disfigured people as evil characters in
contemporary film” (2015, 110). It is essential to distinguish at this point between ‘negative’ (undesired) and ‘positive’ (desired) evocations of aversion. Muir's reaction is an instinctive recoiling from an unexpected ‘otherness’ (negative aversion), and we may today think of this as an ethically unacceptable looking away. However, Jay Winter aptly states that although "[i]t is an essential moral act" to look at those wounded in the war, "the gaze is [yet] deeply problematic. If we turn away completely, we are hardly human; if we don't feel the impulse to run away, we are not human at all" (2011, 29). In contrast, ‘positive’ aversion is aversion we want to feel, and thus we seek an impetus in popular culture. It is more unethical than what we encounter in Muir, for aversion is desired here for our very own pleasure. The most spectacular abuse of facial disfigurement, as well as the use of masks as a disguise of the abject and/or evil, occurs in the genre of the horror film: “the Western notion of the monster as a creature whose intellectual and moral aberrations are mirrored by its physical deformities [...] is closely related to ideological agendas committed to the identification and curbing of degenerate drives” (Cavallaro 2002, 171).

Across the different subgenres of the horror, the disfigured face is devised to evoke disgust as much as fear. In The Exorcist (dir. William Friedkin, 1973), Regan's physical ugliness signifies the external satanic evil that is overpowering her. The horrendously burnt face of Freddy Krueger in A Nightmare on Elm Street (dir. Wes Craven, 1984) reflects his previous devious nature that had impelled him to murder helpless children. Masks in horror films, worn by Leatherface (The Texas Chain Saw Massacre, dir. Tobe Hooper, 1974), Michael Myers (Halloween, dir. John Carpenter, 1978), or Jason Voorhees (Friday the 13th, dir. Sean S. Cunningham, 1980), all serve only to augment the fear of the psychopathic killer, evoking suspense as to what is so terrible about the face that it needs to be hidden. Significantly, the masks themselves are terrifying, giving their wearer an inhuman or even corpse-like appearance. These are all extreme examples of the exploitation of facial disfigurement and covering masks for the sake of ‘positive’ aversion. There exists, however, a unique horror, where the facially disfigured character is an innocent victim of a terrible accident (as much as the patients in The Happy Hospital are victims of war's "destructiveness," [Muir 1918, 145]). Despite all the efforts put into creating masks as closely resembling the face of the patient as it looked before disfigurement, and even though the "macabre and sometimes brutish physiognomies [were] metamorphosed into sane and reasonable ones" (Muir 1918, 153), the final result could never be the same natural face.

In Georges Franju's film Les Yeux Sans Visage (Eyes Without a Face), released in 1960, this inability to restore the naturalness and beauty of a mutilated face is given a sinister twist. Christiane Génissier's mask gives her an expressionless appearance, her mask-face is simply not 'alive.' Dr Génissier, a surgeon under the weight of personal guilt, murders young women in order to take off and graft their faces onto his daughter, whose face was brutally scarred because of the car accident he had caused. Perhaps inadvertently, Franju offers a judgment on the persistent "culture of aversion." It is Christiane's father who makes her wear a mask, and pronounces her dead to the world until she looks like the 'normal' women he murders. In an iconic scene, Christiane, without her mask, leans over one of the kidnapped women, who screams in terror. However, her face is not actually terrifying, but simply different from the face of the woman about to be killed. A contrast is implied between what is generally as-
sumed to be a 'normal' appearance and what, in relation to this socially-imposed standard, is deemed 'abnormal,' 'inhuman,' 'monstrous.'

2. The Ideological Uses/Abuses of Aversion

Muir's 'repugnance' appears to have derived very much from a sense of disillusionment with a war that was expected to create super-masculine heroes whose wounds could only be ennobling but – instead - brought into being 'terrifying' creatures: "He is haunted by what remain [...] metonyms of [...] English masculinity. [...] this is not simply a story of lost and ruined youth; the faces that Muir describes present something akin to vandalism: a defaced ideal" (Biernoff 2008, 225).

The social ostracism of facially disfigured soldiers in wartime and the inter-war period clearly indicates that idealistic and patriotic misconceptions of what war entails prevailed among civilians. The depiction of soldiers as deserters (Wilfred Owen's "S.I.W." Herbert Read's "The Execution of Cornelius Vane," A.P. Herbert's The Secret Battle, A.D. Gristwood's The Coward) or, alternatively, 'beast-like' perpetrators of violence (as in James Hanley's The German Prisoner, Erich Maria Remarque's All Quiet on the Western Front, Liam O'Flaherty's Return of the Brute) served an explicitly didactic purpose, i.e. to warn against war. One may speak of a deliberate 'dehumanization' of the facially disfigured soldiers in inter-war documentary and literary narratives, aversion being the chosen ideological weapon for perpetuating the 'futility' myth of the Great War.

In 1924 there appeared in Germany one of the most powerful pacifist renunciations of war. Ernst Friedrich's Krieg dem Kriege may well be defined as a two-in-one photographic (hi)story of the Great War, deliberately creating a contrast between the state-controlled official narrative of the war, bespeaking duty, honour, glory etc., and the allegedly 'true' version of the conflict, which emerges from the ideologically-motivated compilation of photographs of decomposing bodies, soldiers enduring the worst of conditions in the trenches, starving civilians, desolate landscapes. In the words of Susan Sontag, "this is photography as shock therapy [...] designed to horrify and demoralize" (2003, 13). Friedrich includes a series of images depicting the most horrifying facial mutilations, adding the following captions, "[not] supposing that heartrending, stomach-turning pictures would speak for themselves" (Sontag 2003, 13):

Upper lip and nose torn away. Flesh taken from forehead, arms and ribs to make artificial nose and lip. (Friedrich 1980, 205)

To the present day are lying in hospitals gruesomely disfigured soldiers on whom operations are still being performed. Many of these unhappy victims have undergone thirty [...], and in some cases more than forty operations. In the case of thousands, the medical treatment has not yet been ended. Very many have to be fed artificially. (207)

Lower jaw, teeth and tongue torn away. Parched up with flesh from head and chest. (209)

[...] particularly those gruesomely mutilated did not allow themselves to be photographed, as they feared that their relatives who had not seen them again, would either collapse at the sight of their misery, or would turn away from them in horror and disgust. (211; my emphasis)
There can be no doubt that it was not pity that Friedrich aimed for by including such images and comments but "empathic unsettlement" (LaCapra 2004, 135), for only such a powerful emotion as aversion could lead viewers/readers to question the political/national justifications for war. Is there any better way of proving the inhumanity of a military conflict than by putting on display images of men dehumanized by the loss of their faces? However, this also means that empathy should be measured by the degree to which non-combatants are willing to see (i.e. to be able to look at and understand) the mutilated male body as an effect of war.

The facially disfigured soldier is exploited in a similar ideological manner in William Faulkner's Soldiers' Pay (1926): "'Come darling,' she said, taking the girl's arm, 'come inside. He is not well and the light hurts his eyes. [...]' She led the girl into the house. [...] 'Donald! Donald! She says your face is hur – ooooh!' she ended, screaming as she saw him. The light passing through her fine hair gave her a halo and lent her frail dress a fainting nimbus about her crumpling body like a stricken poplar" (2000, 78). In Faulkner's novel, the disfigured war veteran has no prominence in the plot beyond being the catalyst of various reactions to his return, proving the American soldiers' suffering to have been in vain. The eponymous "soldiers' pay" is the civilians' lack of understanding, compassion, or even, at the very least, a sense of indebtedness: "from the living tomb of Mahon's flesh comes the parody of affirmation: [...] mock[ing] the impotence which he represents, and the futility of an entire world surrounding him" (Cooperman 1970, 162).

William March's Company K (1933) comprises monologues of all the officers and men of the unit, including the voices of the dead. Private Walter Webster, a survivor, recounts his return home, and the reaction of his sweetheart to his disfigured face: "How she trembled and covered her face with her hands because she couldn't bear to look at me. [...] I got down on my knees and rested my face in her lap. [...] If she had only touched my head with her hand! If she had only spoken one word of understanding! [...] She closed her eyes and pulled away. I could feel the muscles in her legs rigid with disgust" (2006, 226-227). As Steven Trout emphasizes, William March "had more combat experience and more decorations than perhaps any other American First World War writer," and yet he deliberately chose to show the war as "the ultimate irredeemable social evil:" "Men die of gas, gunshot, grenade. They die by bayonet. They are literally disintegrated by high explosives. They commit suicide. They murder prisoners. They murder each other" (2010, 150-151). And only those with 'lookable' wounds may expect a hero's welcome at home. If empathy is defined as "a vicarious, spontaneous sharing of affect, [which] can be provoked by witnessing another's emotional state, by hearing about another's condition, or even by reading," neither Faulkner nor March offers the reader a possibility of an empathetic identification with the facially-disfigured soldier, evoking instead "personal distress," which is "an aversive emotional response also characterized by apprehension of another's emotion, [which] differs from empathy in that it focuses on the self and leads not to sympathy but to avoidance" (Keen 2010, 4).

3. Propagating Empathy for Physical 'Otherness:' Marc Dugain

Marc Dugain's La chambre des officiers/The Officers' Ward (1998/2000) is a post-memory novel in which the facially disfigured soldiers play a role not to be found in...
wartime and inter-war literature. Dugain talks in an interview about how he discovered a photograph of his grandfather, a Great War veteran: "It was profoundly shocking because this was a picture of a handsome young man looking with an assured and expectant air into the future" (qtd. in Lennon 2002). Dugain's empathetic depiction of the facially disfigured soldiers was profoundly determined by the fact that he was his entire life exposed to physical disfigurement and disability:

[He] had only known his grandfather as a man with half his face blown away, mouth, cheek and nose gouged out by a shell in the first week of hostilities. [...] Dugain says that, while his grandfather never talked to him about his experience, he held reunions with his disfigured comrades. He even founded a society called Les Gueules Cassées (The Broken Mugs). "The government provided a chateau in the country for these reunions," Dugain says, "and as a child on summer holidays, I often sat with all these disfigured people. I did not think it exceptional." [...] He says his father contracted polio in early life and was partly paralyzed. Then he reveals the final tragedy, which appears to have happened just before he threw himself into examining this world of disfigurement with such passion. His wife was involved in a terrible car accident: "She lost her leg. So there are three generations of deformity in my family." (Lennon 2002)

The use of the first-person narrator was a deliberate choice, forcing the reader to immerse himself/herself into the world of the facially disfigured men. This is, in essence, a novel of inaction, set in a confined environment of the hospital ward. The characters in the novel live from operation to operation, some successful and some failed. The soldiers soon become aware that, despite all their efforts, the doctors are unable to restore their previous appearance, and thus they must learn to live with their new 'non-identities.'

The protagonist, Lieutenant Adrien Fournier, does not experience the hell of trench warfare. As an expert on constructing mobile bridges, he is ordered to find the best crossing place over the river Meuse. During his first reconnaissance mission he is hit and loses a part of his face, after which he spends the whole war in hospital. At the casualty station, Adrien, unable to talk, is forced to listen to doctors who appear to perceive him as an interesting 'case,' yet the medical discourse used in the novel also serves to prevent possible aversion on the part of the reader:

"He's definitely the first casualty of the type we've had. His wounds are a swamp of pus. The cavity is full of purulent matter." (Dugain 2002, 19)

Let's have a look. Severe maxillofacial damage. Look at this man! Everything from the top of the chin to halfway up the nose. Upper maxilla and plate both completely gone. Space between mouth and sinuses no longer compartmentalized. Tongue partially gone. Organs at the back of the throat unprotected and visible. (21)

There is at least one situation in the novel that is humorous: when offended by the contemptuous manner in which a nurse has treated his friend, Adrien puts his tongue out at her, though he can only do it through his nose. The comic nature of this scene serves to invoke an empathetic reaction.

Without the bonds of friendship, the patients would never manage to accept their 'new' identities and restore their own sense of dignity: "the gueules cassées found their own forms of sociability both in hospitals and after the war. [...] Veterans founded [the Union of those wounded in the Face] in 1921. As late as 1953, it still had over 10,000 members from the Great War" (Smith, Audoin-Rouzeau, and Becker
Dugain’s protagonist forms a close friendship with Henri de Penanster, "a cavalry captain who had fallen in a morning offensive in the Argonne" (Dugain 2002, 49), and Pierre Weil, "the pilot with burns" (50). He wonders what brought them together, besides propinquity and wounds: "[…] a tacit decision to reject introspection and avoid thinking about the disaster of our experience, because that would only lead to bitterness, a bitterness made up in part of disenchantment and in part of a martyr's selfishness" (65).

If the ward marks the boundaries of their new reality, the three friends counteract their social non-existence by transforming their predicament into a universe of its own:

While the mutilated men (and the one disfigured woman in the novel) suffer physically and emotionally, they are also, in a sense, liberated. This is because they are so grotesquely defaced that they are no longer bound to participate in what Dugain's compatriot, the psychoanalyst Jacques Lacan, would call the "symbolic order" of things. For the facially disfigured, there is only the ever-present "real" of the now, where any fantasy of immortality or agency collapses. (Morris 2013)

The world the facially disfigured soldiers create for themselves within the confines of their ward is a reverse of the exterior reality from which they are hidden. In contrast to the society beyond the walls of the hospital, their world is one where "a Jewish aviator, a deeply devout Breton aristocrat and a secular Republican from the Dordogne" (Dugain 2002, 65) become friends, where one's social background, political views, and religious convictions cease to have any importance whatsoever, i.e., the 'democracy' of war wounds that render all equal.

An obvious literary precedent for Marc Dugain's *The Officers' Ward* is German author Paul Alverdes' *Die Pfeiferstube* (*The Whistlers' Room*), published in 1929. Though it does not deal with facially disfigured soldiers, it projects a similar image of a hospital ward as an enclave where indissoluble human bonds are forged despite social, political and national differences. Alverdes volunteered to fight in the Great War and was wounded in the throat. The ward he depicts in his novel is one inhabited by soldiers sharing the same type of throat injury which required a cutting of a small hole in the neck of the old wound, which was causing a more and more impassable block. At this point a tube was sunk into the windpipe, and the air then passed freely in and out of the lungs. […] When they breathed quickly or laughed, a soft piping note […] came from the silver mouth. Hence they were called the neck whistlers, or simply the whistlers. (1930, 10; 12)

The three main characters are introduced in separate chapters, throat injuries bringing together men of different backgrounds and temperaments: Pointer, "a peasant's son from Bavaria" (21), Kollin, "a volunteer and Prussian pioneer" (29), and a boy called Benjamin, most probably from a Westphalian unit (37-39).

*The Whistlers' Room* and *The Officers' Ward* deliberately present the combined patients' stories as a mirror pattern of the combat narrative, the structure of which includes the arrival of the inexperienced young man at the front, his initiation into war with the first sighting of the wounded and/or dead, and the ultimate loss of innocence due to the experience of the realities of trench warfare. In the case of Alverdes's and Dugain's hospital narratives, we encountered a similar structure, with the focus on the arrival of the patient at the hospital, his ritualized introduction into hospital life.
through first encounters with other casualties of war and the lengthy adjustment to hospital routine, and, finally, the inevitable effect of the series of operations on the patient's psyche.

Concomitantly, the depiction of the hospital ward as an enclave where a new system of values is forged in opposition to the system of values of the outside world reflects the predicament of the soldiers at the frontlines:

The soldier was a man who had lived for a seemingly endless period of time beyond civilian social categories, beyond any but purely formal and mechanical social distinctions. The experience of living outside of class, but in ranks, as socially declassified or not yet classified individuals, was productive of an undeniable sense of comradeship among those who shared this situation. (Leed 1979, 200)

In both novels, an 'Other' is accepted by the patients within their isolated universe. In *The Whistlers' Room*, the German 'whistlers' take under their protection an English prisoner of war, Harry, and the ease with which they all become friends, developing their own "German-English" (Alverdes 1930, 101), is an implicit attack on the nationalist politics that had led to the war. In the case of *The Officers' Ward*, the 'Other' is Marguerite, a former nurse with a severely damaged face, who becomes the men's equal and friend, a gender-based critique of the sexism at the core of the patriarchal society: "The most extraordinary thing was that in the years that followed [the war], all my companions ended up getting married. All except Marguerite, because she was a woman, and a disfigured woman is something that the world cannot deal with" (Dugain 2002, 127).

Dugain's story of facially-disfigured soldiers continues beyond the First World War. He underscores both the political exploitation of the wounded veterans: "The Prime Minister [Clemenceau] advanced towards us and shook our hands. Above the din, I hear him say: 'I want them [the German delegation at the signing of the treaty of Versailles] to see and know’" (110), as well as their social exclusion: "Please don't take this personally, but in your state, I can no longer employ you as a commercial engineer. [...] There may be something for you in the research department [...] something comfortable, without too many outside contacts" (105). The most empathetically persuasive part of the novel is, beyond doubt, the effort of the one-time patients – 'comrades-in-arms' – to save the Jewish Weil from Nazi persecution. This is, in fact, a deliberate construction of an extremely contrived and ideologically motivated comparison between the hiding of the facially disfigured soldiers from public view during the Great War and the hiding of Jews from the Nazis during the Second World War, constituting an implicit moral judgment on societies unable to accept 'otherness.' Weil and his family survive deportation only thanks to his friends from the ward, who hide and support them. Dugain's novel is an uplifting one, the entire effort put into evoking empathy on the part of the reader, providing him/her with a sense of satisfaction that, ultimately, all will turn out well for the characters.

It was only a question of time when Dugain's novel would be filmed; after all, facial disfigurement is all about how we see physical 'otherness.' Filmmaker François Dupeyron faced a seemingly impossible task. A naturalistic visual showing of mutilated faces could well result in an instinctive recoiling ('negative' aversion) or be seen as a fascinating pornographic spectacle of the sublime abject ('positive' aversion). Dupeyron's aim was to engage the viewer in an active form of empathy, i.e. "attempt-
seeing to 'see through the eyes of others,'" which means "we suspend judgment [and our affective reactions] and seek to enter their minds and feelings through 'imaginative placement'" (Calloway-Thomas 2010, 9):

I understood it straight away," he says. "I wrote the script, which came easily, but the visualisation presented problems." With all those disfigured people on screen, the first difficulty must have been to avoid it collapsing into a horror film. "For a long time, you do not see the hero's face. The figures are often in the shadows, or covered by bandages. I wanted to avoid a sense of repulsion in the audience. I wanted them to get to know the characters as human beings and distinct personalities, so I waited and waited. But I was not trying to create suspense. I just waited until I felt the audience was demanding to see them. (Dupeyron qtd. in Lennon 2002)

The first time we see Adrien in the film is when he is being awarded a medal for his courage, and he is 'lookable,' as his face has been reconstructed. His story is, in fact, a long flashback, beginning with scenes focusing on his pre-war self and his brief sexual affair with Clemence, to be followed by his wounding and the ordeal of facial reconstruction in hospital. In order to invoke "imaginative placement," the visual exposure of Adrien's face is delayed. For a very long time, the viewer sees what Adrien sees and hears what he hears, but he/she cannot see the soldier's face, which remains covered. What is more, the viewer is shown the face of another patient before Adrien takes off his bandages, and when finally he/she sees the protagonist's wounds, they do not appear as terrifying – a visual manipulation for the purpose of evoking a feeling of relief rather than of disgust. In the film, Adrien is predominantly seen through the 'compassionate look' (the motherly nurse who takes care of him), a look that is in stark contrast with the 'aversive gaze' constructed in Friedrich, Muir, Faulkner and March; the difference between the 'look' (affectively and ideologically neutral, accepting difference) and the 'gaze' (hierarchy-oriented, wherein the onlooker is assumed a priori to be superior to the object of the gaze). This is a deliberate strategy, teaching the viewer how to see the facially disfigured soldiers. In effect, the viewer is prepared to condemn the woman who recoils in disgust at the sight of her husband in a later scene.

4. Remembering/Creating Empathetic Doctors: Jodie Shields

The setting of Jodie Shields's The Crimson Portrait is an English country house, requisitioned by the British military for a hospital for facially disfigured soldiers. In contrast to The Officers' Ward, the emphasis is on doctors: the fictional surgeon McCleary and the real-life figure of Varaztad H. Kazanjian. Though much is said about the inmates of this house-turned-hospital, including suicide cases and those successfully reunited with their families, the one facially disfigured soldier to feature prominently in the plot is Julian: "He had been injured by shrapnel and layers of gauze hid the wrecked symmetry of his face as neatly as a cocoon. His right eye had been only slightly injured and was uncovered to aid healing" (2008, 53). The owner of the house is Catherine, an upper-class widow, who cannot accept her husband's death or the intrusion of doctors, nurses and patients into her home. The requisitioning of her estate marks the end of her pre-war world, the death of her husband shatters her identity, for without him she feels she is unable to exist. She searches for signs of him everywhere, and leaves signs for him to return to her.
Catherine begins a relationship with Julian, seeking for an impossible restoration of her marriage, wanting Julian to become a living embodiment of her dead husband. This is the point where the real-life Anne Coleman Ladd is used by Shields. Coleman Ladd was an American sculptor who made masks for the facially disfigured French soldiers, and her objective was "to put in the mask part of the man himself – that is the man he had been before the tragedy" (Deranian 2007, 115-116). Shields's Julian does not wish to see a photograph of his pre-wound self, preferring to forget his former identity, and Catherine takes advantage of this, replacing his photograph, necessary for the fictionalized Anne Coleman Ladd to reconstruct his features, by a photograph of her own husband. Julian is thus, unknowingly to himself, given the face of another man. The Crimson Portrait ends with an epilogue, set in 1919. It offers, similarly to The Officers's Ward, a positive ending. Catherine manages to free herself from her melancholic desire to 'resurrect' her husband, and becomes a nurse who helps others. Julian manages to find a job despite his deformity. Their relationship is resumed when "she fell ill and he cared for her" (Shields 2008, 382).

One of the most prominent characters in the novel is Armenian-born, and American-educated, Varaztad Kazanjian, a historical person. Already as a student at the Harvard Dental School, Kazanjian was interested in taking up particularly difficult cases: "This early interest in the treatment of unusual formal facial and jaw deformities, either congenital or acquired, by means of prosthetics gave his life its singular direction" (Deranian 2007, 33). By 1915, when Kazanjian headed for France with the first Harvard Unit to provide dental surgery at the front, he was already well-established professionally, yet it was his work with the facially disfigured soldiers in France that earned him the nickname of "the Miracle Man of the Western Front" (Deranian 2007, 83). He became renowned for his groundbreaking methods of facial reconstruction, including such creative inventions as the Kazanjian Clamp, the Kazanjian Button, or the Kazanjian Nasal Fracture Splint (Deranian 89). It is clear that Jodie Shields conducted extensive research on Kazanjian, so as to be able to provide the reader with detailed descriptions of his pioneering methods. Her emphasis is placed on his inventiveness, a precious talent in the yet undeveloped field of plastic surgery: "Once they had improvised a jaw splint from a silver teaspoon and gutta-percha soaked in hot water" (Shields 2008, 139). He was also a man whose skill and creativeness broke through social and professional prejudices: "The doctors were never quite comfortable with Kazanjian. He was a foreigner, a dentist. But he proved to have an uncanny gift for improvisation – which was necessary given the shortage of supplies – that they lacked" (104). Though the reviews of the novel were not all that complimentary, pointing to "voluminous detail about facial reconstruction," one cannot agree that "the lush and detailed description distances the reader from the characters, slows down the story to yawning pace, and blurs whatever interesting things Shields has to say about identity and desire" (Cuthbertson 2007), for this discourse effectively neutralizes potential negative emotions (aversion) on the part of the reader.

In The Crimson Portrait, the fictional version of Kazanjian reconstructs the patients' faces, whereas the entirely fictional character of Dr. McCleary cures the patients' souls. He is "worshipped" by the soldiers, who "distanced him from the rest of the staff" (113). McCleary is said to have been inspired by the writings of the medieval surgeon Henri de Mondeville, who "urged the healer to be silently present
for the patient, secretly directing positive thoughts toward him, binding them together in a web that only one of them had spun" (51; see also 113; 145; 291).

At one point in the novel, McCleary expresses his concern about the mistreatment of facially disfigured soldiers who cannot count on the psychological support that was offered to "nerve-shattered soldiers" (190). If empathy entails "understanding and communication" (Calloway-Thomas 2010, 15), then McCleary's role in the novel is to foreground a psychological approach necessarily complementing the surgical innovations of Kazanjian: "Plato believed there must be a bond between doctor and patient, a profound understanding. This would be created by 'a beautiful discourse,' a charm […]. The patient must relinquish himself, offer his soul to the doctor, or the medicine would not work and no cure could take place" (Shields 2008, 50). The overt references to Plato and Mondeville, within the context of Great War casualties, undermine the assumption that empathy towards various forms of 'otherness' is a 'product' of contemporary culture; rather, Shields suggests that aversion and empathy are 'twin' responses across time.

5. Conclusion

In contrast to the manner in which facially disfigured soldiers were represented in Ward Muir's The Happy Hospital, or ideologically exploited in Ernst Friedrich's Krieg dem Kriege, William Faulkner's Soldiers' Pay and William March's Company K, Marc Dugain and Jodie Shields use the subject matter to elicit empathy, which "discloses an ontological kernel of otherness in the other that is worthy of respect – and, in that sense, has a core integrity that points towards morality" (Agosta 2010, 72). My brief comparison with horror films serves to highlight the fact that physical 'otherness' continues to be treated as an 'abnormality,' exploited for the 'pleasure' of fans of the genre, a tendency harking back to what is called 'tradition: 'Many cultures associate monstrosity with physical defects, these are often rendered ideologically coterminous with intellectual and moral flaws. […] Western history abounds with cases in which the disabled body has not only invited feelings of repugnance and dread but also the desire to ostracize, domesticate or utterly destroy its image" (Cavallaro 2002, 186). The Officers' Ward and The Crimson Portrait are literary contributions to the cultural memory of the Great War, asking for a 'remembrance' of the soldiers whose faces were – literally speaking – taken away from them. I would argue that these novels make an ethical demand on the readers to really 'see' (i.e. look at and understand) the consequences of disability and deformation in individual and social terms, indicating a problem at the very core of contemporary culture, which is not – however strongly we wish it to be – a culture of empathy.

Works Cited
