1914FACES2014 project report

University of Exeter

1914FACES2014 aims to analyse how the mutilated face of soldiers injured during the Great War influenced medical practice, social and political history, the arts and philosophy. In particular, we consider how the radically new forms of surgery pioneered during WWI owe a debt to artistic practices and practitioners and, conversely, how the cultural legacy of les gueules cassées continues to shape our experience and perception of disfigurement. The 1914FACES2014 research project is funded by the EU scheme INTERREG IVa, for cross-border cooperation, and brings together a UK team led by Professor David Houston Jones, University of Exeter and a French team led by Professor Bernard Devauchelle, Institut Faire Faces (lead partner), who carried out the world’s first partial face transplant in 2005. French partners include the Historial de la Grande Guerre and the Université de Picardie Jules Verne, along with the UK charities Saving Faces and Changing Faces.
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Photography: Suzanne Steele, Cristina Burke-Trees, Mark Austin
Summary

1914FACES2014 takes the experience of the facially injured soldiers of the First World War as the starting-point for an enquiry into disfigurement in the broadest sense, arguing that facial injuries in 1914–18 led to both unprecedented innovations in the surgical field and to permanently changed understandings of the face.

Just as artistic practice fed into surgical practice (in the work of sculptors as mask-makers or epithesists), so the radically new forms of surgery developed at this time changed the context in which artists represented the face. Looking at art-works and historical objects from the early twentieth century to the present day, we consider both the unique historical situation of facially injured soldiers in World War One, including the complex question of their social (re)integration, and the long-term cultural legacy of that situation.

Summary of Conclusions

Disfigurement and Society

Despite the advances represented by the Equality Act (2010) in the UK, much work remains to be done concerning perceptions of disfigurement. Questionnaires filled in by members of the public during the touring exhibition suggest a gulf in understanding between those well-informed about disfigurement and, on the other hand, others whose knowledge of the subject is minimal. The former group shows both a lack of familiarity with disfigurement as a social issue and limited awareness of how to approach it. Data from the questionnaire, and from that concerning the exhibition Faces of Conflict, suggest that exhibited works and objects contributed to raising such awareness, with many visitors commenting on changes in perception resulting from their viewing of the material.

Experimental work in social psychology carried out in the course of the project suggests a further gulf between perception and action. Although many participants ‘knew what to do’ when meeting a person with a disfigurement, in some cases their actions did not bear out this knowledge. In some individuals, the prospect of an imminent encounter with a person with a disfigurement produced cognitive depletion. As well as changes of perception when disfigurement is encountered, changes in behaviour are needed. These findings were put into dialogue with a parallel enquiry conducted by psychiatrists into self-perception of individuals living with a disfigurement.

Representing Disfigurement

Perceptions of disfigurement are bound up with cultural representations of the face. As the work of UK charity Changing Faces demonstrates, negative and stereotypical representations of disfigurement continue to be made. Challenging such representations remains an urgent priority. Perceptions are simultaneously bound up with long-standing cultural traditions of facial expression and beauty, and these are shaped by the evolution of visual media including painting, photography and film. Understanding these media is key to understanding, and reconfiguring, contemporary perceptions of disfigurement.
The enquiry conducted within FACES begins in the first two decades of the twentieth century, but also acknowledges the ongoing role played by nineteenth-century (and earlier) understandings of the passions in early twentieth-century culture. Research workshop presentations have encompassed Duchenne de Boulogne’s work on facial physiology; the connections between this work and photography; the photographic history of facially injured servicemen; the representation, and failure to represent, disfigurement in film during and following WWI; wounded faces and changing norms in the visual arts during and following WWI; and the ways in which visual norms and media continue to be challenged and defined in the century following WWI. Contemporary art, in particular, returns repeatedly to the subject of the gueules cassées in the early years of the twenty-first century. The insistent presence of this subject within contemporary art and literature indicates a deep-seated anxiety concerning the face in contemporary society.

Objectives

This report details the ways in which the project responds to the overarching objective of INTERREG IVa, to build an attractive region to live in and to visit, by means of Specific Objective 7: shared cultural and heritage-related activities. In particular, the project aims to:

- Enhance knowledge of the disfigured soldiers of the First World War by means of a a transdisciplinary and transgenerational approach;
- Capitalize on and disseminate the many items available on the subject from documentary, artistic, societal and medical perspectives
- Promote integration and understanding of the disability linked to disfigurement
- Improve integration of people living with disfigurement.

Outputs

All of the proposed outputs have been realised and are detailed below. Project outputs take the form of research publications; educational resources; research workshops and conferences; exhibitions. These outputs are complemented by public engagement activities; websites and social media activity; and by concerted attention to the project’s legacy.

Our commitment to produce collective research publications takes the form of the following outputs:

**Books**

- *Journal of War and Culture Studies*, special issue, *Assessing the Legacy of the Gueules cassées: from Surgery to Art*, ed. David Houston Jones and Marjorie Gehrhardt. Includes 5 journal articles of original research by members of French and UK teams of
1914FACES2014 plus Introduction by Jones and Gehrhardt. All articles submitted; peer review ongoing. Schedule: peer review completion September 2015; acceptance following revisions by December 2015.


**Articles**


- David Houston Jones, ‘Re-examining the Gueules cassées: the medical gaze, the archive and contemporary artistic responses to facial injury’. Under consideration, Social History of Medicine. Readers' reports received. To revise for publication by September 2015.


Educational resources

We have worked with teachers in the South West region in order to create relevant, responsive resources relating to First World War facially injured servicemen and, more broadly, disfigurement. The educational resources team was led by Jones, Gehrhardt and Pennell, and built upon Pennell’s previous research within the project World War One in the Classroom. Following a focus group meeting with teachers in Exeter in May 2014, we developed materials for a mini-pilot exercise. The pilot ran at Penrice Community College, St Austell, Cornwall in July 2014.

These resources look at the history of the facially injured soldiers of the First World War and the ways in which medicine and society responded to their needs. They are particularly suitable for GCSE syllabi concerned with Surgery in the Industrial Modern World and the impact of the First World War on surgery, or Middle School syllabi in the USA. In particular, they aim to correct the bias towards Second World War facial reconstructive surgery in GCSE syllabi in the UK (in which McIndoe is frequently mentioned, to the exclusion of Gillies and Morestin). The resources offered combine personal and official sources on the war, thereby enabling students to work with archives and contributing to developing their critical awareness of the sources.

There are two resource packs:

1. First World War Facial Injury & Reconstructive Surgery
These resources focus on the development of new surgical techniques; the social context of disfigurement and the ways in which the subject of the gueules cassées is understood in history and in secondary education. Pilot sessions with Key Stage 3 students highlighted the students’ interest in this aspect of the First World War and their willingness to engage with the material.

2. Disfigurement and Representing the Face
These resources consider how disfigurement is viewed today and look back at First World War facial injury. They are particularly suitable for PSHE (Personal, Social and Health Education) at key stage 3 and 4 in the UK and for English GCSE in the UK, or Middle School in the USA.

The materials proposed encourage the students to reflect on the evolution of perceptions of disfigurement and to address some of the preconceptions that are still prevalent in 21st century societies (for example, most facially disfigured characters in films are portrayed in a negative light).

For each pack there are two files:

(i) Resources
(ii) Teacher’s pack

The resources were reviewed by project partners in June 2015 (Changing Faces; Imperial War Museum, Conseil Général de la Somme); discussions with Mme Dournel (Conseil Général) took place in Amiens, June 2015.

Resources were published online in July 2015 at

http://humanities.exeter.ac.uk/modernlanguages/research/projects/1914faces2014/resources/.
Research Workshops

The following workshops were hosted by the University of Exeter in the course of the project:

1. Representing and Historicising les Gueules cassées (13th Nov 2013) (strand 2, 3)
2. The Face and the Passions (31st March 2014) (strand 1, 2, 3)
3. Facial Difference and Social (re)integration, 16th June 2014 (strand 2)
4. Visual Testimony and the Archive, 18 September 2014 (strand 3)

1. Representing and Historicising les Gueules cassées (13th Nov 2013) (strand 2, 3)

13th November 2013, Innovation Centre, Rennes Drive, University of Exeter

This workshop was concerned with history and social reintegration (strand 2 of the project) and representations of disfigurement (strand 3). It opened a number of lines of enquiry which stem from the facially injured soldiers of WWI and the relatively neglected position which their stories have occupied in histories of the First World War. The session indicated the challenges involved in documenting their experience as well as representations & perceptions of les gueules cassées and the contested medical histories which have arisen from their situation. The workshop involved members of both the UK and French teams for 1914FACES2014 and external speakers. The project was introduced, along with details of the three project strands. Following correspondence with M. Ludovic Klawinski (Archives départementales de la Somme), Prof Jones gave an introductory presentation and introduced the archiving and digitisation project being undertaken by colleagues at the Conseil Général de la Somme. The workshop took place in tandem with a temporary exhibition of Henry Williamson’s The Patriot’s Progress, illustrated by William Kermode, a remarkable First World War source held in Special Collections, University of Exeter. The exhibition was curated by Cristina Burke-Trees. Further details are given in the appendices.

A report on the workshop was submitted to the lead partner and a summary posted on the project blog.

The workshop followed the following programme:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>9.00</td>
<td>Coffee and registration</td>
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<tr>
<td>9.10-9.30</td>
<td>Presentation of the project: 1914 FACES 2014</td>
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<td>Time</td>
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<tr>
<td>9:30 – 10:30</td>
<td>Speaker 1 Dr Suzannah Biernoff (Birbeck) – ‘The Rhetoric and Representation of Facial Injury in WWI Britain’. Chair: David Houston Jones</td>
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<tr>
<td>10:30-11:00</td>
<td>Coffee</td>
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<tr>
<td>11.00-12.00</td>
<td>Speaker 2 Marjorie Gehrhardt (Exeter), ‘Rebuilding Men’: Facially Injured Soldiers at The Queen’s Hospital, Sidcup’. Chair: Suzannah Biernoff</td>
</tr>
<tr>
<td>12:00 – 1:00</td>
<td>Speaker 3 Dr Sarah Bulmer (Exeter), ‘Injury Politics in Contemporary Britain: Rethinking the body and war’. Chair: Suzanne Steele</td>
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<td>1:00 – 2:00</td>
<td>Lunch: Innovation Centre foyer</td>
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<tr>
<td>2:00-3:00</td>
<td>Speaker 4 Dr Tim Rees (Exeter), The Hidden Face of War? ‘Deformity’ and the Public Gaze before the First World War’ Chair: Laura Rowe</td>
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<tr>
<td>3:00-4.00</td>
<td>Speaker 5 Dr Sophie Delaporte (UPJV, Amiens), ‘Portraits de gueules cassées’. Chair: Marjorie Gehrhardt</td>
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<tr>
<td>4.00 – 4:30</td>
<td>Coffee</td>
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<tr>
<td>4:30- 5:30</td>
<td>Speaker 6 Kerry Neale (Australian War Memorial), Faces from the ‘uttermost ends of the earth’. Chair: Tim Rees</td>
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<td>5:30</td>
<td>Close</td>
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Abstracts are available in appendices, below.

2. The Face and the Passions (31st March 2014) (strand 1, 2, 3)

This workshop, held on 31st March 2014 at the Innovation Centre, University of Exeter, made a fruitful contribution to our exploration of the long-term cultural legacy of facial disfigurement. In underlining the close links between the face and the passions and studying their representations in
past and contemporary works, participants tackled questions that lie at the heart of the 1914 FACES 2014 project, such as the expressivity of the faces of First World War disfigured combatants and the perceptions and artistic depictions of disfigurement since the medieval period.

A key concern throughout the day was the legacy of Duchenne de Boulogne and the enduring influence of the idea of the passions in contemporary representations of the face. The starting-point for this dialogue was François Delaporte’s paper, ‘La Fabrique du visage et des passions’. Drawing upon Professor Delaporte’s landmark publications in the field, including L’Anatomie des passions (2003), the paper addressed the revolutionary influence of Duchenne, not only transforming understandings of the muscle physiology of the face, but also leading to repercussions in numerous other fields including medicine, art, literature, cinema and philosophy. The session was chaired by Professor Bernard Devauchelle, and led into a round table featuring François Delaporte, Bernard Devauchelle and the maxillo-facial surgeon Professor Iain Hutchison (St Bartholomew’s). The session identified numerous avenues for further discussion, and informed the consideration of modern and contemporary treatments of the face in philosophy and the arts later in the day. The second paper, by Julie Mazaleigue, discussed the representation of sexual desire, including representations of bodily dysmorphia, with special reference to the face and the gaze. The enquiry stretched from Franz von Bayros’ controversial illustrations of the nineteenth century all the way through to twenty-first century cinema. Alex Murray’s paper then questioned whether the face can be considered as biopolitical, assessing the brief analysis of the face in Agamben’s work and considering its articulation in technologies of security and surveillance. Joe Kember focussed on Harry Langdon’s facial performances in silent cinema of the early twentieth century. An exploration of facial grotesquery, the non-expressive face and the allegorical meaning of the face in silent cinema culminated in an analysis of the face in short silent film clips. David Houston Jones, meanwhile, discussed the enigma of the expressive and inexpressive face in the work of Samuel Beckett and the French photographer Luc Delahaye, considering Delahaye’s debt to Walker Evans and documentary traditions while also subverting contemporary and historical norms concerning the visual representation of the face. The final paper of the day came from Professor Patricia Skinner, who gave a cutting-edge account of the medieval face and the iconographical traditions which underlie it. In particular, Skinner’s paper considered the relationship of the passions to the deadly sins: love, pain, fear and anger and the pathological understanding of those states. Skinner assessed the diagnostic value of physiognomy texts - associating facial features with character traits and behavioural tendencies – frequently bound together with collections of medical texts after the 13th century.

Accompanying the workshop was a selection of artworks by Justin Jones, curated by Cristina Burke-Trees, ahead of the upcoming Faces of Conflict exhibition beginning in January 2015 at RAMM. Jones’s work draws upon two key strands of 1914FACES2014: the facially injured soldiers of the first world war, and the Passions, the theme of today’s workshop.

Programme:

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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>9.00</td>
<td>Coffee and registration</td>
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<tr>
<td>9.10</td>
<td>Welcome</td>
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<td></td>
<td>David Houston Jones &amp; Bernard Devauchelle</td>
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<td>9:30 – 10:40</td>
<td>François Delaporte: La Fabrique du visage et des passions Chair &amp;</td>
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<td>respondent : Bernard Devauchelle</td>
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<td>Round table : François Delaporte, Bernard Devauchelle and Iain</td>
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<td>Hutchison</td>
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<td>10:40-11:00</td>
<td>Coffee</td>
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<td>11.00-12.00</td>
<td>Julie Mazaleigue, Faces of desire : representations of sexual desire</td>
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<td>10</td>
<td>in the arts (18th – 21st century)</td>
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<td>Chair: Marjorie Gehrhardt</td>
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| 12:00 – 1:00 | Alex Murray: Can the face be biopolitical? The face and historicising biopolitics  
|              | Chair: David Houston Jones                                           |
| 1:00 – 2:00  | Lunch: Innovation Centre foyer                                        |
|              | Steering committee meeting, Strand 3                                 |
| 2:00-3:00    | Joe Kember: Reading the Inscrutable Face in Early and Silent Cinema   
|              | Chair: Beatriz Pichel                                                |
| 3:00-4.00    | David Houston Jones: Insignificant residues: the face, the grimace and trauma in Beckett, Agamben and Delahaye  
|              | Chair: Suzannah Biernoff                                              |
| 4.00 – 4:30  | Coffee                                                               |
| 4:30- 5:30   | Patricia Skinner: Reading The Medieval Face and its Passions         
|              | Chair: Michelle Webb                                                 |
| 5:30         | Close                                                                |

Abstracts are given in the appendices, below.

A project report was sent to the lead partner and a summary posted on the project blog.

3. Facial Difference and Social (re)integration, 16th June 2014 (strand 2)

This workshop arose from strand 2 of the project, specifically from the sub-project on ‘The socio-psychological consequences of facial disfigurement’. Further details are given in the appendices, below.

The workshop took place in the unique surroundings of Hannah’s at Seale Hayne, recalling their brief past as a centre for rehabilitation for soldiers suffering from shellshock following the First World War. The day combined research in health and social psychology with presentations from the chief executives of the two UK charities associated with the project, Saving Faces (director Iain Hutchison) and Changing Faces (led by James Partridge). James Partridge gave a powerful presentation on the background to his work with Changing Faces, ranging from personal experience to his discovery of the limited literature on disfigurement and stigma in the 1970s, to the foundation of Changing Faces and the variety of initiatives which the organisation has undertaken since then. In particular, James gave an overview of advocacy work for improved psycho-social care for those living with a disfigurement and of the recent Changing Faces campaigns for face equality. Iain Hutchison explained the background to the foundation of Saving Faces and of the Saving Faces art project, exhibited in part in the Chapel Gallery during the workshop. Iain referred in particular to the therapeutic potential of the art-works produced by Mark Gilbert and, equally, of their production. During a tour of the Chapel Gallery, we viewed a selection of the Saving Faces works in dialogue with work by Paddy Hartley, artist in residence on 1914FACES2014 (curated by Cristina Burke-Trees). The afternoon sessions were devoted to Psychology research concerning body image and facial difference. Professor Nichola Rumsey presented on ‘Developing Interventions: Promoting Social Integration for People with Visible Differences’. Nichola spoke on facial difference and personal identity and on the way current representations of the face and the body affect these. Nichola is Professor of Appearance Research at UWE and is Co-Director of the Centre for Appearance Research (CAR), which she founded at UWE in 1992.

The final paper was entitled ‘Understanding interactions between individuals with and without a facial disfigurement’, and was presented jointly by Dale Weston, Manuela Barreto and Thomas
Morton of the University of Exeter. Dale, Thomas and Manuela gave details of the experimental work carried out to date within the framework of the 1914FACES2014 project. The focus of this work is on assessing how individuals without visible social stigmas imagine and approach interactions with others with facial stigmas, and the psychological processes that are elicited by imagining and anticipating interaction. A key finding from both these studies is that imagining or anticipating interaction with another individual with a facial stigma is cognitively distracting – suggesting that people have to ‘work hard’ to think about interactions with partners who have facial stigma, and more so than is the case with partners who have other forms of stigma (eg to the body). Moreover, although peope expressed confidence when actually anticipating an interaction with an individual with a facial stigma, there was evidence of a disconnection between the confidence people felt and the way they acted in preparation for the interaction itself (ie with more distance). Future plans to delve closer into this disconnection between what people say about such interactions and what they actually do were outlined and discussed. The final part of the day was given over to free-form discussion and networking.

Programme:

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<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>9:30-10:00</td>
<td>Registration and refreshments</td>
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<tr>
<td>10:00-10:15</td>
<td>Welcome and introduction&lt;br&gt;David Houston Jones and Manuela Barreto</td>
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<tr>
<td>10:15-11:00</td>
<td>Living with facial disfigurement: Stigma, empowerment and face equality&lt;br&gt;James Partridge&lt;br&gt;Chair: Manuela Barreto</td>
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<tr>
<td>11:00-11:30</td>
<td>Discussion</td>
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<tr>
<td>11:30-11:45</td>
<td>Break and refreshments</td>
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<tr>
<td>11:45-12:15</td>
<td>The impact of the Savings Faces Art Project on the patients, the clinicians, and the public&lt;br&gt;Iain Hutchison&lt;br&gt;Chair: Thomas Morton</td>
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<tr>
<td>12:15-12:45</td>
<td>Guided tour to the Saving Faces Art project exhibition by Iain Hutchinson including questions and discussion</td>
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<td>12:45-13:45</td>
<td>Lunch</td>
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<td>13:45-14:00</td>
<td>Reconvene and Recap</td>
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<tr>
<td>14:00-14:45</td>
<td>Developing Interventions: Promoting Social Integration for People with Visible Differences&lt;br&gt;Nichola Rumsey</td>
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<td>Time</td>
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<td>14:45-15:15</td>
<td>Discussion</td>
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<tr>
<td>15:15-15:30</td>
<td>Break and refreshments</td>
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</tbody>
</table>
| 15:30-16:15     | **Understanding interactions between individuals with and without a facial disfigurement**  
Dale Weston, Manuela Barreto, and Thomas Morton  
Chair: David Houston Jones  
16:15-16:45     | Discussion                                                                |
| 16:45-17:30     | **Final discussion: Wrap up and plan for the future**  
Manuela Barreto |

A full report was sent to the lead partner and a summary posted on the project blog.

**Abstracts** are available in the appendices, below.

The workshop took place in tandem with phase 1 of the **touring exhibition** (see below), curated by Cristina Burke-Trees, in which a range of works by the artists Mark Gilbert and Paddy Hartley were shown in the Chapel Gallery, Hannah’s at Seale Hayne.

**4. Visual Testimony and the Archive, 18 September 2014 (strand 3)**

**18th September 2014, Innovation Centre, University of Exeter, Rennes Drive, Exeter**

This workshop, co-organised by David Houston Jones, Joe Kember and James Ryan (University of Exeter) focused on the capacity of the archive to produce visual testimony. Given the special status of many of the archival collections concerning the facially injured soldiers of WWI and subsequent developments in medicine (including the Gillies archive, Tessier, Pont, Bridge collections), to enquire into the cultural history of the *gueules cassées* is also to scrutinise and assess the archive. As part of our inquiry into the cultural legacy of the *gueules cassées*, we examined the uses to which archival images have been put, from magic lantern slides to newsreel footage and the intertwining of the documentary and the fictional. More broadly, the workshop examined the documentary traces of the First World War with particular attention to photography and film; what is the significance of these and other visual media for our understanding of the legacy of the *gueules cassées*?

The topic was introduced by **David Houston Jones**, with brief reference to the epistemological questions arising from visual archival materials, and the complex relation of the archive to understandings of testimony. The workshop was situated in relation to the three strands of 1914FACES2014, and an update on progress to date was given.

**Marjorie Gehrhardt**’s paper was entitled, *A ‘cruel testimony of the horrors of war’: visual representations of the Gueules Cassées in Interwar France*, and focused primarily on the film *J’accuse* (1938), in which *gueules cassées* featured. Gehrhardt’s analysis considered the positioning of facially injured soldiers in France as symbols of the brutality of war, with reference to
the variety of representations of facially disfigured veterans in interwar France. Drawing upon visual material representing or made by the Association des Gueules Cassées, this paper evaluated the symbolism associated with facially disfigured veterans in interwar France.

Suzanne Steele’s paper, ‘Re-Facing War: VAD Mary Borden’s ‘Unidentified’ and The Forbidden Zone’, argued that VAD Mary Borden’s poem, ‘Unidentified,’ from her sui generis, The Forbidden Zone (1929), puts a new ‘face’ on the Great War canon and its vision of the conflict as a place of collateral and psychic destruction. Often overlooked in historical and literary accounts, the forbidden zone—the dangerous territory behind the lines in which Borden worked in a surgical unit—was a geographic, psychological and metaphoric site in which innovation, through necessity, fluid ethics, and opportunity, thrived. Steele argued that the hyper-kinaesthetic environment of la zone interdite was a site of sanctioned disorder and paradoxical agency wherein the artist re-created and innovated. ‘Unidentified,’ one of Borden’s poems, attempts to have the reader cast the gaze, to ‘re-face,’ not only the fallen soldier, but also, narcissistically, Borden herself.

Jason Bate, meanwhile, set out to examine the ways in which photography played a key part in the development of facial reconstructive surgery in England during the First World War. Bate’s paper focused on photography’s emergence in a set of medical discourses during the war years, which evolved from an initial focus on language, written and spoken, to one that necessarily included illustrations and specifically photography. But why did surgeons employ photography into their practice? What was the value attached to photographs, and what were photographs expected to do? How did surgeons read these images? What information did they convey? Bate started from the Foucauldian position that photographs can be categorised as visual records that could substantiate and articulate medical knowledge and moved on to look at medical journals published during the First World War. Bate argued that from 1916, photography was employed as a pedagogic tool to develop typologies of medical practice and to organise knowledge through visual means.

These concerns are closely related to those in Julie Mazaleigue’s ‘The Albéric Pont Archive: nature, functions and aims of visual representations of the Gueules cassées, from medical uses to testimony’. This material introduces the Albéric Pont Archive, recently acquired by the Inter-University Science Library of Paris-Descartes. The archive is mainly composed of visual representations: photographs of injured soldiers before and after surgical procedures, drawings of orthodontic apparels, and mouldings of injured faces. On the one hand, they obviously had a medical and surgical function, in terms of recording and of scientific transmission. The broader purpose of the paper, though, was to increase our understanding of the kinds and aims of the ‘testimonies’ which these documents provide, whether professional or sociological.

Other parts of the workshop broadened the conception of testimony which visual materials may be said to bring to bear upon the cultural history of WWI. Lawrence Napper (King’s College, London) spoke on British films of the 1920s and the ways in which they represent WWI. The first part of the analysis considered the various schemes proposed by the cinema industry in 1919 for the training of what were described as ‘disabled ex-servicemen’ into suitable jobs in cinemas, particularly as projectionists. Such schemes created widespread debate and anxiety within the cinema trade which was already struggling to cope with the pressure of employing demobilized ex-employees. The second half of the paper turned to two films offering different approaches to the figure of the disabled ex-serviceman in fiction films. The Garden of Resurrection (1919) can be read, Napper argued, as a romance centering on a hero suffering from facial disfigurement. The Guns of Loos (1928) features a hero who suffers from temporary shell shock – a psychological trauma represented primarily through facial performance in a series of startling close-ups. In both the film texts, and in the 1919 debate, the subject of facial disfigurement is alluded to, but never explicitly expressed.
Beatriz Pichel (PHRC, de Montfort University, Leicester) spoke on ‘Historical Perspectives on the Medical Photographs of the Gueules Cassées: Disfigurement and Expression between 1870 and 1932’. The paper explored the photographic archive of the gueules cassées preserved at the Parisian hospital Val de Grâce. This medical archive includes series of photographs that document the different stages of the facial injuries and reconstructive procedures undergone by French soldiers during the First World War. By means of the analysis of the different meanings attached to these photographs during and after the war, Pichel assessed the specific role played by photography in the social, cultural and medical understanding of war facial injuries and disfigurement. Firstly, Pichel examined the cultural discourses about the gueules cassées created in the post-war years, especially in terms of the dynamics between the uses of photographs and their absence from public discourses that linked facial mutilations to the loss of humanity. Second, the paper analysed the specificity of these medical records by comparing them to other similar photographs, especially to the images of bodily mutilations and the pictures of facial injuries that were not made in medical contexts. Finally, the history of the different photographic constructions of facial and bodily mutilations was traced, arguing in particular that the use of photography at the turn of the 19th century in scientific debates on facial expressions and bodily gestures as the locus of human emotions created the conditions under which disfigurement could be understood as the loss of humanity.

The final presentation of the day was given by Karen Randell (Bedfordshire University) on ‘Masking the horrors of war: Lon Chaney, performance, prosthetics and the returned veteran’, and considered the visual representations of the First World War veteran and the silent films of 1920s Hollywood star Lon Chaney Sr. Through this analysis, questions of medical practice (in particular, facial reconstruction and prosthetics) art and sculpture and their relationship to film were explored in order to situate the images of the returned maimed veteran in mainstream popular culture. Randell argued that the damaged body as ‘spectacle’ presents a displayed excess that both exhibits the returned veteran body as fascinatingly grotesque and portrays the maimed male body as a site for sympathetic response. It was proposed that the films of Lon Chaney are able to represent anxieties that pertain to the First World War even though the war is absent from the texts themselves. The medical world infiltrates these narratives and the notion of spectacle provides the link between the competing discourses of deformity, art and performance present around these popular cultural texts. Randell’s conclusions suggested that there is still much to discuss and explore in the context of present-day conflicts and the contemporary struggles of returning soldiers and their visibility in popular culture.

The workshop was accompanied by a pop-up exhibition, curated by Cristina Burke-Trees, of works by the contemporary artist René Apallec drawn from the Gueules cassées series. The works, displayed in the foyer of the Innovation Centre, were juxtaposed with a copy of L’Illustration, one of the key archival sources for Apallec’s artistic practice.
Programme:

<table>
<thead>
<tr>
<th>Time</th>
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<td>9.00</td>
<td>Coffee and registration</td>
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| 9.10-9:30 | David Houston Jones  
1914 FACES 2014: from Visual testimony to the archive               |
| 9:30 – 10:30 | Marjorie Gehrhardt (University of Exeter), A ‘cruel testimony of the  
horrors of war’: visual representations of the Gueules Cassées in  
Interwar France Chair : Suzanne Steele                                    |
| 10:30-11:00 | Coffee                                                               |
| 11.00-12.00 | Jason Bate (Falmouth University): Facilitating knowledge:  
Photographs, exchanges, and facial reconstructive surgery in  
England, 1916-1924 Chair: Beatriz Pichel                               |
| 12:00 – 1:00 | Lawrence Napper (King's College, London), 'Reconstruction, fiction  
and trauma in 1920s British Cinema' Chair: Joe Kember                 |
| 1:00 – 2:00 | Lunch: Innovation Centre foyer                                       |
| 2:00-3:00 | Julie Mazaleigne (Université de Picardie Jules Verne): 'The Albéric  
Pont Archive: the nature, functions and aims of visual  
representations of the Gueules cassées, from medical uses to  
testimony'. Chair: Marjorie Gehrhardt                                      |
| 3:00-4.00 | Beatriz Pichel (DeMontfort University): ‘Historical Perspectives on  
the Medical Photographs of the Gueules Cassées: Disfigurement  
and Expression between 1870 and 1932’ Chair: David Houston Jones        |
| 4.00 – 4:30 | Coffee                                                               |
| 4:30- 5:30 | Karen Randell (Bedfordshire University): 'Masking the horrors of  
war: Lon Chaney, performance, prosthetics and the returned  
veteran' Chair: James Ryan                                               |
| 5:30   | Close                                                                 |

A report was submitted to the lead partner and a summary posted on the project blog.

Abstracts are found in the appendices, below.
Conference
Les Gueules cassées: disfigurement and its legacies

12th – 14th March 2015, Innovation Centre, University of Exeter,

The UK conference took place at the University of Exeter from 12th-14th March 2015, and addressed all three project strands. The conference considered the long-term legacy of the innovations in the field of facial surgery seen during and immediately after WWI, and discussed the implications of the experience of the gueules cassées for our perceptions of disfigurement in the longue durée. Understandings and representations of the face have radically changed since the First World War, from segregation of facially injured veterans following the First World War to recognition of facial difference as a protected characteristic in the 2010 Equality Act. This conference explored the disputed histories of disfigurement in the British and French contexts and beyond, along with a broad-based consideration of the face and facial difference. It coincided with a major exhibition entitled Faces of Conflict: the Impact of the First World War on Art and Reconstructive Surgery at the Royal Albert Memorial Museum & Art Gallery, Exeter (curated by Cristina Burke-Trees); the second phase of the touring exhibition based on the Saving Faces art project (curated by Cristina Burke-Trees); and a site-specific installation entitled Champs de vision; Field(s) of vision (by SM Steele), at the University of Exeter. Feedback on the conference indicates that this provided a welcome forum for a highly engaged community of researchers from multiple disciplines, including history of art, literary studies, medicine, history of medicine, psychology, history and the medical humanities broadly conceived.

Keynote lectures

The following keynote speakers took part: Prof Bernard Devauchelle (Institut Faire Faces), Dr Suzannah Biernoff (Birkbeck, University of London), James Partridge (Changing Faces) and Louisa Young (novelist).

Prof Bernard Devauchelle is Professor of Maxillofacial Surgery and Stomatology, University of Amiens, France, and the president of the Institut Faire Faces. Prof Devauchelle carried out the first partial face transplant in 2005. His many publications include La Fabrique du visage : de la physiognomonie antique à la première greffe (with François Delaporte, 2010). Prof Devauchelle’s keynote was given on 12th March 2015 in the Alumni Auditorium in the Forum building, University of Exeter. Prof Devauchelle gave a wide-ranging presentation on the history and origins of cosmetic surgery, and enlarged upon this medical history in order to discuss recent developments in facial surgery, including the face transplant. The final part of Prof Devauchelle’s talk was devoted to a dialogue with Prof Sylvie Testelin on the possibilities and challenges of the face transplant and on the experience of the Amiens team operating on Isabelle Dinoire in 2005.
James Partridge is Founder and Chief Executive of Changing Faces, the leading UK charity supporting and representing people with disfigurements. James was appointed an Honorary Fellow of the Royal College of Surgeons of Edinburgh in 2005 and was the winner of Britain’s most admired Charity Chief Executive for 2010 and the Beacon Prize for Leadership, also in 2010. James Partridge’s keynote was entitled ‘Facial disfigurement and fairness: a journey… from Sidcup to today and tomorrow’, and considered the creation of L’Association des Gueules Cassées and its impact on the politics of the face in the era after WWI, an era when the visual public environment was changing dramatically with the coming of the cinema and when reconstructive surgery was growing in prominence and popularity in public opinion. What did Les Gueules Cassées and the organisations that followed such as the Guinea Pig Club seek to achieve – and what was their impact on the public’s perceptions of people with facial disfigurements? How did this affect their life prospects? The presentation then reviewed the experience of people with disfigurements today and what is known about public attitudes towards them. It argued that there is still quite some way to go in the pursuit of fairness and the elimination of prejudice, and outlined the progress and prospects of Changing Faces’ campaign for face equality.

Louisa Young graduated in modern history from Trinity College, Cambridge. She is the author of thirteen books, including The Book of the Heart (a cultural history of the human heart); A Great Task of Happiness, the life of Kathleen Scott, and most recently the novel My Dear I Wanted to Tell You, in which facial injury looms large, and The Heroes’ Welcome (HarperCollins, 2011 and 2014), set during and immediately after WWI. The third of this series is to be published in 2015. Her books have been selected for Cityread for London and the Richard & Judy Book Club 2012, nominated for the Impac Award, won the Galaxy Audiobook of the Year 2011, and been shortlisted for the Wellcome Prize, the Costa Novel of the Year, the Galaxy Book of the Year and the Orange Prize.

In her lecture, Louisa reflected both upon her family history and upon the writing of My Dear I Wanted to Tell You and its use of personal and archival sources. Louisa referred to the ways in which history feeds fiction, to the responsibility authors have to the real people whose stories we appropriate, and to the possibility of putting humanity back into the heart of history and science - one of fiction’s most important jobs - in a field as tender as facial injury and reconstruction.

Dr Suzannah Biernoff gave the closing keynote address, on 14th March. Dr Biernoff is Senior Lecturer in Modern and Contemporary Visual Culture, Birkbeck, University of London. Her research has spanned medieval and modern periods: her publications include Sight and Embodiment in the Middle Ages (2002), and she currently works on war and visual culture in early twentieth-century Britain. Her book Portraits of Violence: War and the Aesthetics of Disfigurement is due out later this year.

As Biernoff argued, one of the most poignant innovations of the First World War was the production of portrait masks for severely disfigured servicemen: the surgical ‘failures’. In London and Paris, professional sculptors were responsible for the provision of these delicate masks: their results are recorded in the photographs of British home front photographer Horace Nicholls and in a silent film of Anna Coleman Ladd at work in her American Red Cross studio in Paris. Both sources document the artistry of prosthetic repair, and Nicholls’ images dramatize the psychological impact of facial mutilation – regarded by many to be the most dehumanizing of injuries. Paradoxically, though, the juxtaposition of human face and portrait mask disturbs the equation of identity and appearance on which traditional portraiture depends. Given the professed ‘death of the portrait,’ one might expect a different treatment of disfigurement today; a loosening of the conviction that appearance and identity are relatively fixed; a more dispersed conception of personhood. Images from recent conflicts do not bear this out, however, and the representation of
disfigured veterans (indeed, disfigurement of any sort) in the press and popular culture remains convention-bound. An exception is the work of American photographer Nina Berman, whose portraits of veterans challenge the usual narratives of sacrifice, courage and redemption – including the fantasy of repair.

**Exhibitions and Artist in Residence**

Strand 3, Representations of disfigurement, was led by Prof Jones (University of Exeter). Central to this line of enquiry is the remarkable series of collaborations between artists and surgeons during the First World War and the hypothesis that current work in the visual arts which refers to the history of the *gueules cassées* draws upon this tradition. In order to pursue this line of enquiry, Jones, Gehrhardt and Burke-Trees worked closely with Paddy Hartley, 1914FACES2014 artist in residence. This work gave rise to research presentations; to new work, created in the course of the project and exhibited at Exeter and in the touring exhibition; and to a publication combining Hartley’s practice and research interventions by Jones and Gehrhardt, *Of Faces and Facades* (see above).

The following exhibitions took place in the course of the project

1. **Pop-up exhibitions accompanying workshops** (see above)
2. **Touring Exhibition**
3. **Faces of Conflict** exhibition, Royal Albert Memorial Museum and Art Gallery, Exeter

**1. Pop-up Exhibitions**

These events mobilised textual and visual resources relevant to the project and exhibited them at research workshops, thus facilitating direct engagement with textual and visual documents drawing upon the First World War (including resources from Special Collections, University of Exeter) and broadening the scope of discussions of the role of the visual arts in contemporary reassessments of the history of the *gueules cassées*.

**2. Touring Exhibition**

The touring exhibition was intended to show a range of contemporary art-works which respond to both the work of contemporary maxillofacial surgeons and to the collaborations between artists and surgeons which marked the context of the First World War. The exhibition comprised two phases, first visiting Hannah’s at Seale Hayne (Newton Abott) in June 2014 and subsequently coming to the Street Gallery, University of Exeter (25th February – 26th March 2015). The first phase coincided with the research workshop on The Face and Social (re)integration, also held at Hannah’s, Seale Hayne; the second phase coincided with the conference, Les Gueules cassées: disfigurement and its legacies. Both events included dedicated time for delegates to visit the exhibitions.

Further details of the touring exhibition are given below, in appendices.
3. Faces of Conflict: the impact of the First World War on art and facial reconstructive surgery

Royal Albert Memorial Museum and Art Gallery (RAMM), Exeter
17th January – 5th April 2015

Poster image: René Apallec, *Gueule Cassée Collage No 138*

This exhibition took the experience of the facially injured soldiers of the First World War as the starting-point for an enquiry into disfigurement in the broadest sense. Just as artistic practice fed into surgical practice so the radically new forms of surgery developed at this time changed the context in which artists represented the face. The exhibition looks at the unique historical situation of the facially injured soldiers of the First World War, the complex question of their reintegration into society and the long-term cultural legacy of that situation. By viewing these unique documents of the wounded face we can understand what facial injury meant in the First World War and how collaborations between artists and surgeons continue to suggest ways in which art and medicine can work together. It creates a dialogue between work created during and immediately after the First World War and the work of contemporary artists including the work of Paddy Hartley, artist in residence.


The exhibition was conceived and planned by an organising committee led by Cristina Burke-Trees, project curator, and including Marjorie Gehrhardt and David Houston Jones. Suzanne Steele acted as literary advisor. Further details are given below, in appendices.

**Exhibition evaluation**

All exhibitions were evaluated by means of questionnaires. At Hannah’s at Seale Hayne, a detailed ‘before’ and ‘after’ questionnaire was planned by members of the project team, and included substantial input by contributors to the Psychology sub-project (Barreto, Morton, Weston). 60 completed questionnaires were received. At the University of Exeter, a simple comments card system was used. Initial evaluation has been completed, including production of a summary of all questionnaire comments. At RAMM, a comments card system was used; approximately 480 cards...
we completed. The comments cards will be sent to the Exeter project team in early July 2015, following RAMM evaluation. Visitor numbers were 63,680.

Further details are given in appendices.

Public Engagement

Wherever possible, public engagement activities were built into research-related events in order to promote understanding of the disability linked to disfigurement; and to improve integration of people living with disfigurement.

A number of events were held in conjunction with the *Faces of Conflict* exhibition, including an exhibition opening featuring the poet Michael Longley (January 2015) and schools sessions. All were well attended, and schools sessions (run by Gehrhardt and Jones) involved students from King Edward Sixth College, West Exe School (January 2015) and St David’s School, Exeter (February 2015). In tandem with the exhibition, West Exe School staff created their own web page relating to *Faces of Conflict*, including extracts from the 1914FACES2014 Exeter website and intended to provide starting-points for discussion: [http://www.westexe.devon.sch.uk/up-for-discussion-faces-of-conflict/](http://www.westexe.devon.sch.uk/up-for-discussion-faces-of-conflict/)

A further session in the exhibition space was run by Burke-Trees for Blackdown Hills Artist Group (February 2015). In addition to this, Gehrhardt ran a dedicated hour-long session on the *Gueules cassées* as part of the University of Exeter’s Humanities Days; the session was delivered twice to two groups of Year 10 students (April 2015).

In turn, the exhibition and exhibition-related events helped generate media coverage which has helped inform the public about the *gueules cassées* and, more broadly, raise public awareness of disfigurement. Media coverage has included pieces in the *Mid Devon Gazette*, *Western Morning News*, *Plymouth Herald* (twice), ShowStudio blog, BBC Spotlight (twice), Phonic fm, BBC Radio Devon and ITV South West (twice). Further details are given in appendices.

Websites

Two websites have been created by the Exeter project team and hosted by the University of Exeter:

A static web page outlining the project and detailing key activities:


A blog, created in September 2013 and updated regularly in the lifetime of the project, with frequent news updates:


Both websites will be hosted by Exeter for the foreseeable future and updates will be made 2015-18. If in that period a ‘follow-on’ project is better able to capture the legacy of 1914FACES2014, web updates will be hosted by that project instead. Educational resources will be published on the static page in July 2015.
Project Legacy

We are committed to safeguarding and developing the legacy of 1914FACES2014, and project dialogue has already produced a number of lines of enquiry which take the project research into new areas. In particular, analysis of the specificities of WWI maxillofacial surgery has led to exchanges on subsequent surgical developments (in particular in the round table session of The Face and the Passions, featuring Devauchelle, Delaporte and Hutchison; Hutchison’s presentation at The Face and Social (re)Integration; and in Devauchelle’s keynote address at the conference Les Gueules cassées: Disfigurement and its Legacies).

Workshop and conference discussion has also led us to enquire into the ruptures and continuities in the understanding of disfigurement through the ages. Jones is now looking at the relationship of art and maxillofacial surgery in the Second World War and is in dialogue with the West Sussex Record Office concerning archival holdings relating to the Guinea Pig Club and the work of the artist Mollie Lentaigne, depicting surgical procedures carried out at Queen Victoria Hospital in the 1940s. Dr Nichola Court has led a Research Resources application to the Wellcome Trust on behalf of West Sussex, and Jones wrote in support of this application in March 2015. The application was successful and will allow work to begin on cataloguing and digitisation of Guinea Pig Club WWII medical files in 2015-16. **Jones** will apply for follow-on funding to undertake archival research in 2015-16.

**Dr P. Skinner** has led discussion of understandings of disfigurement in the earlier periods and, in consultation with **Jones**, applied for, and was awarded, a **Wellcome Trust Seed Award** in order to pursue work on The Disfigured and their Stories from Antiquity to the Present Day (ref 35098). The award will allow exploratory work on the realities of disfigurement across the ages to be carried out in 2015-16, with workshops taking place in Winchester and Cardiff at which Jones, Skinner and Biernoff will discuss future development of the project.

Archiving and Inventories

Following an Endnote training session held in July 2014, members of the Exeter team contributed to the 1914FACES2014 bibliography.

Steele has investigated the possibilities of OMEKA as an archiving tool, and has held initial discussions with colleagues at the University of Toronto. Further discussions will take place in 2015-16 concerning the project legacy and the creation of digital inventories relating to 1914FACES2014 materials. Jones has discussed the Conseil Général de la Somme digitisation and archiving project with M. Ludovic Klawinski, and it is hoped that this dialogue will continue in 2015-16 with a view to extending the Omeka project to collections such as those of the Conseil général.
1914FACES2014 Project Team, University of Exeter

Prof David Houston Jones (Coordinator, strand 3; Principal researcher, 1914FACES2014, University of Exeter)
Dr Marjorie Gehrhardt (Associate Research Fellow)
Cristina Burke-Trees (Curator and project co-ordinator, University of Exeter)
Suzanne Steele (Literary advisor)
Paddy Hartley (Artist in Residence)

Prof Tim Kendall (Professor of English, Director, Centre for SW Writing)
Prof Mark Jackson (Professor of the History of Medicine and Director of the Centre for Medical History)
Dr Catriona Pennell (History)
Dr Laura Rowe (History)
Dr Tim Rees (History)
Prof Manuela Barreto (Psychology; Social, Economic, Environmental and Organisational Group)
Dr Thomas Morton (Psychology)
Dr Dale Weston (Psychology)
Dr Joe Kember (Film)
Prof Martin Sorrell (Modern Languages) (emeritus)
Dr James Ryan (Geography)
Dr Alex Murray (English)
Emmanuel Destenay (Modern Languages, Exeter / UPJV)

UK Associates
Prof Iain Hutchison (Consultant Oral & Maxillofacial Surgeon, St. Bartholomew’s; Saving Faces)
Mr Andrew McLennan (Consultant Oral & Maxillofacial Surgeon, Royal Devon and Exeter NHS Trust)
James Partridge (Chief Executive Officer, Changing Faces)
Dr Patricia Skinner (University of Winchester)
Subproject: ‘The socio-psychological consequences of facial disfigurement’

Prof Manuela Barreto, Dr Thomas Morton, Dr Dale Weston (Social, Environmental and Organizational Psychology, School of Psychology)

This sub-project of 1914FACES2014 is part of strand 2, Disfigurement in society. It seeks to investigate the social consequences of disfigurement and to analyse the mechanisms by which we respond to disfigurement.

Summary

Facial disfigurement is likely to affect individuals in a variety of ways. At the psychological level, because physical appearance is often an important part of one’s identity, facial disfigurement is likely to be perceived as a significant stressor. More than this, changes in physical appearance might also precipitate identity change—whereby the individual comes to see themselves differently to who they were before. Recent research shows that identity transitions, in general, are times of heightened vulnerability and in which social support is especially valuable in buffering individual well-being during transition. However, because facial disfigurement is also a visible and salient source of social stigmatization, those who are facially disfigured are likely to be frequently perceived and responded to as (merely) bearers of such a disfigurement. This means that the social stigma of facial disfigurement is likely to exacerbate any negative personal consequences on identity because social stigma interferes with access to social support.

In a more general way, these features of facial scarring, and their consequences for individual well-being, can be seen as a consequence of identity discrepancies: A discrepancy between how one sees oneself (as an individual with numerous characteristics besides the facial disfigurement) and how one comes to be seen by others as a result of the disfigurement (as the bearer of a ‘mark’, or stigma). Discrepancies like these have important psychological consequences, and implications for whether and how stigmatised individuals engage in social interactions.

Interestingly, unlike many other stigmatised identities, modern medicine provides opportunities to remove the stigma, at least to varying degrees, via reconstructive surgery. Just as the experience of facial disfigurement involves identity shifts, reconstructive surgery also involves this process. The ways in which people experience themselves through this transition, and how this shapes internal perceptions of self and how one is perceived by others in one’s social environment, has consequences for patterns of social interaction and well-being following surgery. Again, these identity changes in response to surgery need to be understood.

In sum, this project aims to examine these socio-psychological consequences of facial disfigurement.

Activity

The sub-project focuses on the interactional motivations, attitudes, and behavioural responses of non-VFD individuals to those who possess a VFD (visible facial difference). In particular we: a) examine the mechanisms that underlie successful and unsuccessful interactions with those who have a VFD; b) assess the effectiveness of specific strategies that can be used to improve these interactions (e.g., mental rehearsal of interactions with an individual with a VFD, e.g., Turner et al., 2007); and finally, c) identify conditions and interventions that could improve these interactions. Examples of potential underlying mechanisms explored in our research to date include: expected self-efficacy (or ease) of interacting, evaluative concern (i.e., concern over how the self might be
perceived by the interaction partner), cognitive resource depletion, rumination (i.e., over the interaction), and both the location and nature of the visible difference.

An initial Study was conducted to explore some of these issues and develop measures of the constructs outlined above. Specifically, we started by examining people’s self-concerns when they anticipate interacting with an individual with a VFD, compared to when they anticipate interacting with individuals with other socially devalued characteristics (e.g., wheelchair user, homeless), or with individuals with characteristics that are not typically socially devalued. Participants’ responses to a range of items assessing the ease and valence of this imagined interaction, their evaluative concern, their expected efficacy concerning the anticipated interaction, their intentions to interact with members of this group in future, their social anxiety (or general sociability), and their performance on a memory task designed to act as a measure of cognitive depletion were measured. Analyses revealed that participants anticipated interactions with a homeless individual and individual with a VFD would be harder than interactions with a wheelchair user across most of our measures. In addition, participants who anticipated an interaction with an individual with a VFD scored worse on a subsequent memory task (indicating cognitive intrusion or depletion) than individuals who anticipated interacting with a wheelchair user. Thus imagining interaction with a facially different target seems to be particularly anxiety provoking and mentally depleting.

A second study was carried out to complement this work. Besides including some methodological improvements, this second study has two major goals: First, to focus on one factor that can potentially decrease the anxiety and mental depletion observed in Study 1: i.e., whether or not individuals are given the opportunity to mentally rehearse the interaction with the individual with a VFD (rather than with an individual without this difference) prior to interacting with this individual. Second, to examine social closeness relative to an interaction partner whom the participant believes either does or does not have a VFD (depending on experimental condition). This study will allow us to understand whether mental rehearsal reduces the anxiety and mental effort involved when people expect to interact with individuals with a VFD.

Study 3. 90 participants were recruited to participate in Study 3. Study 3 was a laboratory based experiment conducted from May – June 2014. This Study was conducted to explore whether giving participants an opportunity to prepare for the interaction might influence responses, and desired physical proximity, to an individual with a facial disfigurement.

Similar to Study 2, Study 3 was presented as an experiment exploring imagined and actual interactions. Participants believed that they would first imagine interaction with three individuals and would then actually interact with one of these individuals. As in Study 2, participants would not actually interact with anyone; we were instead interested in how participants prepared for a forthcoming interaction. In Study 3, all participants imagined interactions with the same three individuals: two individuals with no stigmatising conditions, and an individual with a facial disfigurement. The same measures from Studies 1 and 2 were collected here (e.g., imagined interaction ease, self-efficacy) with the addition of an imagined interaction vividness measure. Participants were then informed they would be randomly allocated an interaction partner when in fact all participants were assigned to interact with the individual with a facial disfigurement. At this point, participants’ degree of interaction preparation was manipulated: participants were either taken straight to the interaction room (a control condition), given 3 minutes to prepare for the interaction (a rehearsal condition), or were given a distracting task to stop them thinking about the interaction during a 3 minute delay (a thought-stop condition). When participants reached the
interaction room, their seat and task selection were recorded as measures of physical proximity as in Study 2.

The central results of Study 3 were as follows: providing participants with time to rehearse the interaction (the rehearsal condition) led participants to choose more physically close tasks for the interaction than bringing participants to the interaction room immediately (the control condition). We also found that distracting participants prior to the interaction (the thought-stop condition) led participants to sit further away from the interaction partner’s supposed belongings relative to taking participants straight to the interaction room (the control condition) but only for those participants who were high in self-efficacy concerning interactions with individuals with a facial disfigurement.

**Study 4.** 117 participants were recruited for participation in Study 4. Study 4 was a laboratory based experimental study conducted from September – November 2014. This Study was conducted to explore whether participants’ interaction focus (i.e., on ensuring a positive interaction or avoiding a negative interaction) and interaction preparation (rehearsal vs. thought stop) would influence how participants’ approached an interaction with an individual with a facial disfigurement.

As in Studies 2 and 3, participants were told that the experiment was concerned with both imagined and actual interactions. As in Study 3, all participants imagined interacting with the same three individuals: two individuals with no stigmatising conditions, and one individual with a facial disfigurement. The same measures from Study 3 were collected here (e.g., imagined interaction ease, self-efficacy). Following this, participants were again told that they would be randomly allocated an interaction partner when, in reality, all participants were assigned to interact with the individual with a facial disfigurement. Participants interaction preparation was manipulated at this point (rehearsal vs. thought-stop, as in Study 3, but with no control condition), as was their interaction focus (focus on ensuring a positive interaction vs. avoiding a negative interaction). As in Studies 2 and 3, participants were then taken to the interaction room, found it empty aside from their interaction partner’s ostensible belongings on one chair), and were asked to both take a seat and choose an interaction task.

The central results for Study 4 were as follows: participants who were told to ensure a positive interaction sat closer to the individual with a facial disfigurement’s supposed belongings than participants who were told to avoid a negative interaction. This difference was particularly pronounced among participants who were high in future intentions to interact with individuals with a facial disfigurement. There was no effect of interaction preparation on the indicators of physical proximity.

**Academic presentations**


Engagement of undergraduate students with the project

Study 1 conducted as part of PSY1203 (Introduction to Social Psychology), students participated and later wrote up a lab report of the experiment as part of the module assessment. As such, the results and rationale for Study 1 were presented to the students by Dr. Thomas Morton.

Study 2 was conducted as part of PSY3401 (Psychology Research Project), with two undergraduate students participating in the design, data collection and analysis of this Study.

Appendices

Paddy Hartley, Artist in residence

In the course of a 6-month Artist in Residence post at Exeter University Paddy responded to the life stories of facially injured WWI servicemen, working on a number of projects responding to and interpreting the stories of individuals and groups who lived with the consequences of facial injury. Paddy’s work featured in both the touring exhibitions and in *Faces of Conflict*.

Throughout Paddy Hartley’s career, a constant theme of investigation is the way in which the human body is changed, modified and reconfigured either by choice or circumstance, addressing subjects such as steroid use in bodybuilding, the discourse between faith groups and biomedical research, the ethics of human cloning and conflict acquired injury. His work has taken the form of installation, ceramic, assembled objects, garment creation and modification and digital embroidery.

Paddy’s artistic enquiry focuses predominantly on how the face can be transformed or manipulated both through deliberate and unintentional intervention and the way in which we subsequently respond to these changes. This is seen in the design and production of Paddy’s ‘Face Corsets’, producing facial implants for clinical use.

Paddy was born in Dewsbury, West Yorkshire and is a graduate of the University of Wales Institute, Cardiff with a Master’s degree in Sculpture and Ceramics. He is currently based in London’s East End and runs his practice from his studio base in London Bridge. Paddy’s work has been exhibited and published widely and displayed in the permanent collections of a number of museums in the UK and USA including the Welcome Collection and the Museum of Art and Design New York, in addition to presenting at the Victoria & Albert Museum and Science Museum London amongst others.

http://paddyhartley.com/
Representing and Historicising *Les Gueules cassées* 13th November 2013

**ABSTRACTS**

**DR SUZANNAH BIERNOFF (Birbeck)**

*The Rhetoric and Representation of Facial Injury in WWI Britain*

During and after the First World War the horror of facial mutilation was a common trope in the British press, but facial injury was almost never represented visually outside the professional contexts of clinical medicine and surgical training. Nor was the disfigured body of the war veteran exploited as a site of collective shame or trauma in Anglophone cultures the way it was in Weimar Germany. British journalists invariably praised the miraculous work of surgeons like Harold Gillies, but the story of medical progress did not easily translate into images. By comparing the rhetoric of disfigurement to the parallel treatment of amputees, an asymmetrical picture emerges in which the ‘worst loss of all’—the loss of one’s face—is perceived as a loss of humanity. The only hope was surgical or, if that failed, prosthetic repair: innovations that were often wildly exaggerated by enthusiastic reporters. Francis Derwent Wood was one of several sculptors whose technical skill and artistic ‘wizardry’ played a part in the improvised reconstruction of identity. We will look at Horace Nicholls’ official photographs of Wood—captioned ‘Repairing War’s Ravages’—alongside silent film footage of Anna Coleman Ladd at work in her Paris studio for portrait masks. These pictorial sources complicate both the rhetoric of stigma and the idea of surgical repair that dominates written accounts of facial injury and its treatment.

**DR MARJORIE GEHRHARDT (Exeter)**

*‘Rebuilding Men’: Facially Injured Soldiers at The Queen’s Hospital*

The Queen’s Hospital in Sidcup, Kent, was one of the first purpose-built maxillo-facial centres in the world, and thousands of injured servicemen from the United Kingdom and the British Empire were treated there between 1917 and 1925. This paper explores the origins and the workings of this institution, where the wounded spent months, sometimes even years. Whilst the medical treatment given to patients is mentioned, the main focus of this presentation is on the experiences of staff and facially injured servicemen in the first few months or years after they received their injuries. Indeed, the on occasion lengthy reconstruction process means that soldiers spent extended periods of time at the hospital, and they were far from inactive during this time. Drawings upon accounts by staff and patients, newspaper articles and visual documentation, this paper emphasises the holistic dimension of the treatment of facially wounded men at the Queen’s Hospital, with special focus on the implications of the idea of ‘rebuilding men’ expressed by contemporary observers.
Injury Politics in Contemporary Britain: Rethinking the body and war

This paper investigates the ways in which militarism is reproduced and legitimated in contemporary Britain. Responding to recent scholarship calling for a focus on the body and war, this paper examines the material, discursive and social practices surrounding war wounded bodies of servicemen and women returning from Iraq and Afghanistan. Critical scholarship has traditionally focussed on the marginalisation and effacement of war-wounded bodies in militarist cultures. It has also tended to view war injury and rehabilitation practices as consequences or legacies of war. In contrast, this paper argues that the injury and rehabilitation of the wounded soldier body are inextricably connected to the discursive imaginary and political economy of war-making in Britain today. Far from undermining militarism, the ‘circulation’ of wounded bodies in the ‘injury-rehabilitation complex’ is recognised as central to the production of military violence by contemporary neo-liberal states. I conclude by arguing that we need to rethink the relations between war, militarism and the body in order to develop a more effective anti-militarist politics.

The physical effects of violence upon bodies provide some of our most enduring images of the First World War, with the fate of those suffering mutilating facial wounds the most horrifying aspect. However, facial disfigurement was not a new phenomenon and awareness of ‘deformity’, attitudes towards it, and treatments of it, had to a great extent been formed before 1914. Congenital deformities, accidents, disease and deliberate acts of mutilation, had been part of every human society. This paper looks at this historical background. Attitudes towards disfigurement, as far as we can discern them, were historically mixed. Outward appearance could be seen to reflect inner moral deformity, with accidents and disease a result of providential intervention to punish wickedness. But disfigurement could also be seen as ‘heroic’ and certain forms of facial mutilation could be actively sought and celebrated. Public consciousness of facial deformity had grown prior to the war, not simply because of military conflicts, but because of the rising numbers of ‘wounded soldiers of industry’ created by new industrial processes and technologies. Confined to the so-called ‘dangerous trades’, and therefore to particular communities, the sufferers joined the ranks of military casualties as innocent victims of preventable circumstances. How to combat and treat these casualties also became an increasing political and medical issue. Public awareness and increasing horror of facial injuries, and a sense that these were needless products of an industrial society, were well established by 1914 in many countries.

Portraits croisés de gueules cassées

Les gueules cassées : portraits and perspectives

This contribution is the third part of a work to be published in 2014 entitled « Visages de guerre » ("Faces of War"), which studies firstly facial injury since the mid-nineteenth century to the present day, based on the American experience, and secondly, in a comparative perspective, how the face is reconstructed. The third part follows the paths taken by three gueules cassées, or facially injured soldiers, the first disfigured during the Great War, the second during the Indochina War (the French Vietnam War) and the third a disfigured man during the OEF-OIF. This is done in order to study the impact of this injury upon the trajectory of their lives, by resituting it in the process of acceptance of "disability of appearance" and, equally, in order to understand the breaks or continuities in these different contexts and periods, from the early twentieth century, to the second half of the twentieth century and the beginning of our era.

KERRY NEALE (Australian War Memorial)

Faces from the ‘uttermost ends of the earth’

Bringing together surgeons, staff and patients from across the British Dominions, the Queen's Hospital at Sidcup, Kent, was a sanctuary for men who had sustained horrific facial wounds during the Great War. They formed bonds and shared experiences that could only be understood by those who had been through the same. The experiences of British disfigured soldiers (and the French gueules cassées) have been, and are being, duly researched by a number of historians. The same cannot be said for those who returned to Australia and New Zealand after the war. Their experiences have been significantly overlooked in the military and post-war histories of these countries until recently.

What happened to those men from Australia and New Zealand once they left the hospital? How did their post-lives compare to those men who returned to France or Britain? The most significant difference is that unlike the gueules cassées they did not form a supportive community, but instead individually sought to come to terms with their disfigurement. Drawing on personal accounts and extensive archival material, including government documents and repatriation files, this paper extends the study of wartime facial wounds to include those men of the most distant of Britain's Dominions.

Exhibition

THE PATRIOT’S PROGRESS

Henry Williamson, illustrated by William Kermode

1st Draft Manuscript 1929 University of Exeter special collection

‘Apologia pro mea vita’ - ‘I believe in the men who died’

Williamson H, (1929) Newspaper article

The Patriot’s Progress is the account of the World War I experience of a plain, unassuming man, John Bullock. John Bullock represents ‘Every soldier’.
Striking on first encounter with this intriguingly visual manuscript is the fact that it was William Kermode’s lino cuts, documenting his experience of the Great War, which inspired Henry Williamson to write the harrowing account of John Bullock’s experience in the trenches on the battlefields of France.

Besides Williamson’s unsentimental and beautifully crafted descriptions, it is the precise rawness and immediacy of William Kermode’s imagery that compelled us to draw the attention to this treasure from Exeter University’s Archive. This minute snapshot might inspire and perhaps remind us of a reality that most of us can only vaguely speculate about. This window into the archive of Exeter University was realised through the swift and enthusiastic collaboration with Dr Christine Faunch Head of Heritage Collections, University of Exeter and the generous support of Exeter University’s Arts and Cultures Team to whom we owe many thanks.

HENRY WILLIAMSON 1895 – 1977

Born in Southeast London, Williamson became known for his natural and social history novels. He won the Hawthornden Prize for literature in 1928 with his book *Tarka the Otter*.

In January 1914 Williamson enlisted with the London Rifle Brigade and by November he was fighting in the trenches in Flanders. He was present at the famous Christmas truce of 1914 and like many of his fellow comrades he became disgusted with the apparent pointlessness of the war.

After a gas attack in January 1915, Williamson was invalided home with dysentery and fever, but returned to France as a Lieutenant with the Machine Gun Corps as a transport officer. By 1917 he was invalided home again after a gas attack and was kept on home duties for the remainder of the war.

After the war in 1921, Williamson moved to Georgeham in Devon, married Ida Loetitia Hibbert and together they had six children. By 1927, inspired by the soothing beauty of nature and the English Country Side, Williamson published his most acclaimed book *Tarka the Otter*. Through his writing, Williamson was determined to show the world that truth and peace lay in beauty and the open air, and that war should never occur again.


By 1935, Henry Williamson’s belief that Hitler was essentially a good man who only wanted to build a better Germany was well known and publicised. He subsequently joined Oswald Mosley’s British Union of Fascists. At the start of World War II, Williamson was investigated briefly for his political views and by 1969, in *The Gale of the World* (the last book of his chronicle), his main character questions the legal and moral validity of the Nuremberg Trials.

Perhaps the shadow cast over his political stance in the aftermath of the war made it too difficult for people to re-visit Williamson’s highly poignant and intimately humane account of his observations of the battle fields of the Great War. As a result it may have escaped the attention that it deserved in more recent years.
WILLIAM KERMODE 1895 – 1959

William Kermode was born 1895 in Hobart, Tasmania. It is thought that he came to England in 1911. Kermode served in the British Army on the Western Front between 1914 and 1918 and was awarded the Military Cross for gallantry. In the Second World War he served as an Observer Corps Liaison Officer at Fighter Command Headquarters in Uxbridge. Between 1925 and 1928 Kermode studied at the MacNab’s Grosvenor School of Modern Art and is believed to be the first artist to have exhibited lino-cuts in Britain. During 1928, whilst he was designing posters for the London Underground, the well-known literary critic Sir John (Jack) Squire introduced Kermode to Henry Williamson. William Kermode had made lino-cuts from his war experiences and was looking for someone to write short captions. Williamson decided to work with Kermode, crafting the story of John Bullock ‘Everysoldier’ in The Patriot’s Progress.

Beyond the success of The Patriot’s Progress, William Kermode’s work has been largely ignored and is as yet almost entirely un-documented. Kermode did however provide a cover design for an edition of Henry Williamson’s Tarka the Otter and illustrations for a variety of covers and dust wrappers. It is also said that he wrote on the subject of colour linocuts and that he demonstrated wood-block printing at Heatherly’s School of Art. William Kermode died in 1959, aged 64.

Curator, Cristina Burke-Trees 2014

The Face & the Passions 31st March 2014
Innovation Centre University of Exeter

ABSTRACTS

Image : Round table, Bernard Devauchelle, François Delaporte, Iain Hutchison

François Delaporte
‘La Fabrique du visage et des passions’

Depuis Le Brun, les rencontres du savoir et de l’art furent célébrées de tant de manières qu’il faudra rechercher ce qu’elles furent chez Duchenne de Boulogne qui, en 1862, publie Le mécanisme de la physionomie en mouvement. Par son application au domaine de l’anatomie, l’électrisation localisée, qui définit une vivisection sans mutilation, devenait un instrument d’exploration. De là, une réorganisation épistémologique de toute la physiologie musculaire. Elle a pour ultime conséquence, l’émergence des problèmes de l'expression lié à l’élaboration d’un langage des passions et définissant une fonction d'expression. Cette enquête historique définit une analyse transdisciplinaire. Pour décrire ce moment fondateur, il fallait articuler un ensemble de travaux sur l’électricité, l’anatomie, la physiologie, la pathologie, la médecine, la philosophie, la biologie, l'anthropologie et l’esthétique. D’un point de vue épistémologique, cette étude s’inscrit dans une histoire des ruptures. Rupture avec une anatomie et une physiologie qui n’étaient pas différentes de celles de l'époque classique. Rupture avec une perception des mimiques comme langage intentionnel qui restait dans la ligne de Descartes. Rupture avec la physiognomonie sans support organique de Lavater. Rupture, enfin, avec les normes d’un langage pictural illustrées par les schémas de Le Brun. Pour la première fois, dans l’histoire de
l’expression, le sens n’apparaît plus à travers la reconnaissance d’une parole silencieuse mais prend corps dans la mimique elle-même.

Since Le Brun, encounters of knowledge and art have been celebrated in so many diverse ways that we must look back and establish just what they represented for Duchenne de Boulogne, who, in 1862, published *The Mechanism of Human Facial Expression*. When applied to the field of anatomy, localized electrical stimulation, which is defined as a form of vivisection without mutilation, became an instrument of exploration. From there came an epistemological reorganization of the entire field of muscle physiology. Its ultimate consequence was the emergence of problems of expression linked to the development of a language of the passions which would define a method of expression. This historical investigation is a transdisciplinary analysis. This key moment takes the form of a series of works on electricity, anatomy, physiology, pathology, medicine, philosophy, biology, anthropology and aesthetics. From an epistemological point of view, this study was ground-breaking. It broke away from the classical views of anatomy and physiology. It broke away from the perception of facial expressions as intentional language, which had been maintained since the work of Descartes. It broke away from Lavater’s conception of physiognomy with no organic support. Finally, it broke away from the norms of a pictorial language, illustrated by Le Brun’s diagrams. For the first time in the history of expression, meaning no longer appeared through the recognition of a silent form of speech but took shape in mimicry itself.

Doctorate in Philosophy (History of Science), with a thesis entitled ‘Questions of vegetality in the XVIII Century’, Delaporte studied at the Collège de France under the direction of Michel Foucault, and was supported by the University of Paris-I Sorbonne on January 8th 1976. Scholar of the Arthur Sachs foundation, he spent a year in the History of Science department at Harvard University. He then spent several years at the Institute of historical research at the National Autonomous University of Mexico, invited as a researcher. He holds a diploma to supervise research (Philosophy and History of Science), presented on February 23, 1993, at the University of Paris-VII. He was invited to various opportunities in Latin and Central American Universities: The Universities of Santa Catarina and Goiaz (Brazil), and the Universities of Valparaíso and Santiago (Chile), the National University of Colombia (Medellin headquarters), University del Norte in Barranquilla and the University of Bogota. He has directed his work towards the history of medicine. Appointed Professor at the University of Picardie Jules Verne in 1993, he completed a critique of the birth of the clinic for Editions Gallimard and also prepared a history of vivisection in the classical age.


Iain Hutchison

Iain Hutchison specialises in Head & Neck Cancer resection and reconstruction following severe tissue loss after blast injuries and cancer resection. He organises free conferences for the public to demystify surgery; he created and funded the Saving Faces Art project which still tours the world; he leads national campaigns to reduce smoking and binge drinking; he runs the charity The Facial Surgery Research Foundation – Saving Faces (www.savingfaces.co.uk) and directs the National Facial Oral and Oculoplastic Research Centre whose missions are to train and assist surgeons conducting national and international clinical and translational studies to determine the evidence for best treatment practice now and improve patient treatment in the future.
Bernard Devauchelle

Bernard Devauchelle is head of Maxillofacial Surgery at Amiens University Hospital and President of the Institut Faire Faces (Université de Picardie Jules Verne). He is a member of numerous scientific institutions and an associate member of the French National Academy of Surgery, as well as being on the editorial committee of several international publications. Prof Devauchelle’s team carried out the first partial face transplant in Amiens in 2005.

Julie Mazaleigue-Labaste

‘Faces of desire: representations of the expression of sexual desire in arts (18th – 21st century)’


Le second engage les schémas de représentation de la sexualité : d’une part l’émergence et la diffusion des représentations de la « sexualité anormale » depuis le second 19e siècle, de l’autre des perceptions fortement genrées. En effet, la représentation artistique du désir dépend de sa définition culturellement partagée : le désir est-il une force (instinct et passion) qui peut dépasser la volonté des individus (comme sous les Lumières) ou une motivation que l’on peut maîtriser et investir de stratégies (20e et 21e siècle) ? Et si le désir peut-être pervers, comment l’expression de cette perversion est-elle dépeinte ? De plus, les représentations des visages du désir masculin et feminin sont différentes : des Lumières au 20e siècle, alors que le visage masculin semble exprimer maîtrise et activité, le visage féminin exprime la pudeur (yeux baissés, visage détourné, la violence subie face au désir des hommes (mouvements des sourcils) et de la passivité face aux passions (alanguissement des traits). Les mutations culturelles, sociales et politiques dans les rapports de genre depuis la seconde moitié du 20e siècle ont cependant conduit à des mutations dans ces schémas classiques de représentation genrée du désir et à la redistribution de l’expressivité masculine et féminine.

Du 18e au 21e siècle, du verrou de Fragonard à Nymphomaniac de Lars von Trier, nous analyserons les transformations des représentations artistiques des expressions du désir sexuel, dans leurs relations avec les évolutions des connaissances scientifiques et médicales sur l’expression faciale des émotions et les mutations des schèmes culturels de représentation de la sexualité.

The representations of erotic desire, like the ones of all passions, change through history. While desire engages the whole body, their expressive surface is more the face, as for other emotions.

The transformations of these representations are visible in literature and in pictorial/plastic arts: drawing, painting, sculpture, photography since the second 19th century, and cinema in the 20th century. They involve in particular eye and mouth movements: half-closed or wide open eyes, blurred eyes, closed or open mouth, all these elements are significant for an analysis of the patterns that underlie representation of erotic desire. Two historical factors are at work in these transformations. The first is common to all representations of passions: the dialectic between arts and scientific theories about expressivity, from “shining eyes” (18th-19th c.) to pupillar dilatation and “body (or comportemental) language” (20th-21st c.). The second involves the ways of thinking and perceiving sexuality: on the one hand, the emergence and diffusion of representations of “abnormal sexuality” since the second 19th century; on the other hand, gendered perceptions. Artistic
representations of desire actually depends on his culturally shared definition: is desire a force (instinct and passion) which can overtake the will of the individuals (18th and first 19th century), or more a kind of motivation which can be mastered and used in practical strategies (20th and 21st century)? And if desire can be perverse (second 19th – 20th c.), how is the expression of this perversion depicted? Furthermore, these representations are gendered and different if masculine of feminine: from the Enlightenment to the 20th century, the face of desiring man seems to express control and activity, whereas the face of woman express modesty (downcast look, face turned away, blushed cheeks), the experience of the violence inflicted by man sexual desire (particularly eyebrows movements), or passivity in the passion (langouer of face). The cultural, political and social mutations in gender relations have nonetheless led to mutations of these traditional gendered schemes of representation and to the redistribution of the masculine and feminine expressive elements.

From the 18th to the 21st century, from Fragonard’s Le Verrou to Lars von Trier’s Nymphomaniac, we will analyse these transformations in artistic representations of the expressions of erotic desire, in relation to the evolutions of scientific and medical knowledge about human emotions and to cultural mutations in the ways of thinking sexuality.


Julie Mazaleigue-Labaste is currently a post-doctoral researcher at the Institut Faire Faces at the Centre d’Histoire des Societes, des Sciences et des Conflits at the University de Picardie Jules Verne, and associate researcher at U.M.R. Knowledge, Texts, Language (U.M.M. 8163, Lille). At the intersection of epistemology, the history of science historical anthropology, her research focuses on mental medicine, sexuality and deviances of the contemporary period.

Alex Murray

*Can the Face be Biopolitical?*

The work of Michel Foucault, Giorgio Agamben, Roberto Esposito, Thomas Lemke and others has, over the past 20 years offered a series of challenges to the ways in which we think about the intersection between politics and human life. The apparatuses they analyse - from the concentration camps of National Socialism to immunisation - all examine the body as a site of political manipulation and control. Yet in all of this the human face seems to somehow be immune, or certainly removed from these paradigms. This paper will examine whether or not the face can be biopolitical or not and, if it is, whether the biopolitics of the face always need to be historically contingent, as François Delaporte has suggested.

Alex Murray completed a BA (Hons) and a PhD at the University of Melbourne, Australia, before moving to the UK in 2006. He was teaching fellow at University College London before joining the University of Exeter as a lecturer in English literature in September 2007. In July 2012 he was promoted to Senior Lecturer. His research is primarily in the literature of the nineteenth and twentieth centuries with particular interests in Decadence and writing of the fin de siècle; Travel Writing and Transnationalism; Contemporary literature; Literary London; Critical Theory; Philosophy and Literature.

Joe Kember

*‘Reading the Inscrutable Face in Early and Silent Cinema’*

Film theorists, from Bela Balazs in the early twentieth century to the new generation of neuroscience-influenced scholars in the early twenty-first, have regularly returned to the topic of the human face. Presented full size on the screen, the facial close-up has often appeared to such writers to guarantee a degree of proximity or intimacy, becoming one of the cinema’s foremost mechanisms for establishing
empathy with international and inter-generational audiences. Unlike performance on the stage, the moving image delivered emotional movement via the most insignificant of gestures: a deepening wrinkle, tightening of the lips, or nuance of the eyes. According to Balazs, by the late 1920s the “microphysiognomy” permitted by the close-up had not only enabled the development of a “silent soliloquy” quite unlike anything that had been possible within other artistic traditions, but it had also begun to generate a new age of the passions, in which the human face had begun to recover much of its former visibility and expressivity.

This type of model of the face as the privileged location for the direct expression of interiority drew clearly upon nineteenth-century physiognomic discourses, and would subsequently feed powerfully into models of the cinema that privileged individual-expressivity. The seamless exchange of glances between characters onscreen, the reaction shot that provides emotional context for a scene witnessed, or the “scenes of empathy” (Plantinga) that leave actors isolated across long seconds of virtuoso facial performance; all are aspects of cinema that depend upon the articulacy and eloquence of facial performances, and upon the audience’s capacity to read the passions from them. Guidebooks to professional film acting, which became available from the early 1910s onwards, reinforced this type of model for effective, but minimal facial performance, modifying and updating earlier texts dedicated to gestural performance on stage and platform.

However, the tradition of individually-expressive acting performance most directly drawn from legitimate theatre represents only one of the dominant modes of facial performance that the early and silent cinema adapted. This paper seeks to trace the inheritance of what I will call ‘weakly-expressive’ and ‘non-expressive’ facial routines within early and silent cinema, which were drawn from a range of other popular and artistic traditions of the late nineteenth and early twentieth centuries, such as those of the variety stage, of the popular fairground and sideshow, magic lantern show, and of the protean performer. For example, in the films of late-1920s comedian, Harry Langdon, facial performance tended to eschew the individual-expressive mode of performance we have come to expect from classical cinema, instead presenting a succession of poorly-emoting faces: infant or baby-face, dough-face, sleepwalker-face, mask-face, grimace-face, debility or illness-face, and so on. Employing images from a range of popular postcards, publicity images, and variety stage autobiographies, as well as scenes from a selection of silent films, this paper will show that weakly- and non-expressive modes of facial performance such as these presented a quite different range of attractions to their audiences, tending to prompt a more active and inquisitive response. Failing to generate the sustained emotional allegiance with audiences that might permit characters to evolve, these faces became apt objects, instead, for the emergence of curiosity, pathos, or sheer exasperation.

Joe Kember has been a Senior Lecturer in Film at the University of Exeter since 2008. His research is in popular and visual culture throughout the nineteenth and early twentieth centuries and especially in early and silent cinema. He has released a number of notable publications, including Marketing Modernity: Victorian Popular Shows and Early Cinema (Exeter: University of Exeter Press, 2009). He is the reviews editor for Early Popular Visual Culture, and in 2009 he co-organised the major international conference ‘Instruction, Amusement and Spectacle: Popular Shows 1800-1914’. In the same year he was Visiting Associate Professor at Vassar College.

David Houston Jones
‘Insignificant residues: the face, the grimace and trauma in Beckett, Agamben and Delahaye’

In this paper I’m going to be looking at a series of encounters between the arts and recent continental philosophy in order to pin down the indirect responses to traumatic experience they make by means of the face. Many of the representations I’ll mention challenge our assumptions about the expressive face, either placing an apparently inexpressive face at the centre of an artistic project, or putting the expressive face to apparently inexpressive ends. Here the work of Samuel Beckett, with its notorious ‘expression that there is nothing to express’, is a case in point, and displays a provocative and rather inscrutable treatment of the face. I want to suggest that the philosophy of Giorgio Agamben provides an apt starting point for thinking about the faces of Samuel Beckett and of the French photographer Luc Delahaye, and which comments in provocative ways on the face’s expressive potential. This discussion will bring us to a seam of references to the divine image which may help tease out what is at stake in the faces of modern and contemporary visual culture, while illustrating the ongoing debt of our understandings of the face to the work of Duchenne de
Boulogne in the 1860s. My understanding of ‘passions’ here is twofold: that of the language of emotions, which subtends Duchenne’s work, and the unexpected encounter with the iconography of the Crucifixion which continues to mark the face in Beckett and Delahaye.

David Houston Jones came to the University of Exeter in 2005, having taught previously at the University of Bristol, Oxford and Paris VIII Vincennes-St. Denis. His interests span literary and visual culture, from trauma and testimony to visual archives and installation art. He leads the Exeter team for 1914FACES2014, based in the Colleges of Humanities and of Social Sciences and International Studies, and leads the third project strand, on Representing the Face. David and his team collaborate with French partners including the Historial de la Grande Guerre, the Université de Picardie Jules Verne and the Institut Faire-Faces led by the world-leading surgeon Prof Bernard Devauchelle.

Patricia Skinner
‘Reading the Medieval Face and its Passions’

For a medieval historian, the word ‘passion’ immediately conjures up images of late medieval affective religion, with devotees contemplating the passion of Christ on the cross and endeavouring to share in His pain and suffering. These came to be etched upon representations of Christ’s face in text and iconography (for example in the mystic Julian of Norwich’s (d.1413) descriptions), but the connection between the two may have not been so strong earlier on. St Thomas Aquinas (d.1274), for example, devoted a section of his Summa Theologica (questions 22-48) to considering the nature of the passions and their relationship to the deadly sins: love, pain, fear and anger were all emotions to be kept under control, and he later discusses the ‘shame-faced’ person (Q.144) in relation to these, but did not make an overt connection. Rather than representing latent and hidden emotions attached to the heart or soul, these conditions were thought to be connected medically to an imbalance of humours, and thus to be treatable. Hence when physiognomy texts - associating facial features with character traits and behavioural tendencies - began to be copied again after the 13th century, they were frequently bound together with collections of medical texts, forming an extension of medical practice through their diagnostic value.

Martin Porter sees the 15th-18th centuries as the high-point for the dissemination of physiognomy works, many based loosely on Michael Scot’s 13th-century Liber Phisionomie. Porter links their popularity to the Renaissance ‘discovery of the individual’. However, the self-awareness about which Gordon writes is already evident in texts of the eleventh century in Europe, and arguably the association of the facial features with character traits continued to be understood in early medieval Europe even if the ‘science’ of physiognomy was not overtly practised or written about extensively in the Christian regions (in contrast to the Muslim world, where it had already taken its place in many texts alongside medical treatises.) This paper will consider the evidence for such associations.

Trish Skinner is Research Professor in Arts & Humanities at Swansea University. She is a medieval historian with interests in women, medieval Italy, Jewish history, and medical history. Her current project is Losing Face? Disfigurement in Medieval Europe, sponsored by the Wellcome Trust and running until 2015.
Exhibition of paintings by Justin Jones

Justin’s work is remarkable both for its treatment of the Passions (the theme of this workshop) and of the facially injured soldiers of World War One.

‘..if painting cannot go beyond or in-between words, what is the point of painting at all?’ Justin Jones

‘La passion de Jeanne d’Arc’ 2007, 52 x 50 cm, pigment on hessian

LA PASSION DE JEANNE D’ARC

Early in Jones’ career, observation of the complex issues arising from the extraordinary condition of visual agnosia inspired his concern with the truth of individual identity. This is a continuing theme in his work and remains his main point of interest. The idea of looking at the same image and seeing something different every time suggests a state that will open an image to endless interpretation. What is truth? What are the boundaries between what is ‘real’ and what is imposed or imagined? How much do we take in, and how much do we choose not to see? How many interpretive decisions do we unconsciously make every waking moment of our lives? How often do we project our own mental state onto others and the world in general? We like to think that we see the world as it really is but in fact it would seem we live in a world of our own making. Our interpretation of the world is entirely our own. ‘The world is as you dream it’.

Verbal and visual communication can only ever be an abstraction, an expression of the truth, but the ‘truth’ can never be comprehensively expressed. This naturally leads on to questions about how well we can ever know ourselves and the world around us. The big questions, maybe the only questions worth asking - Who? What? Why?

Jones’ concern is not so much with the philosophical issues; it is with the spiritual - understanding, fulfillment, self-knowledge and inner peace.

This series was conceived and executed in the village of Saurat, nestled snugly in a valley high in the Ariège Mountains of the French Pyrenees. It is a kind of paradise, a small slice of which can be seen through the window in the paintings. Yet people suffer here too, there is still pain and sadness. Misery and one’s own daemons will find you out wherever you may hide.

“For there is no place that does not see you. You must change your life”.

Rainer Maria Rilke (1929)

Can we not change ourselves, our mental state?
If we change ourselves do we not also change the world?

The central image of the woman’s head and the title of the series is taken from the 1928 film by Carl Theodor Dreyer, the part of Jeanne played unforgettabley by Renée Falconetti, oozing martyrdom from every pore. Dreyer made brilliant use of the close-up shot throughout this film. He was a great portraitist. These paintings are - if they are anything at all – an homage to this old master.
LES GUEULES CASSÉES

"It is possible that when we travel deep enough, we always encounter an element of sadness, for full awareness of ourselves always includes the knowledge of our own ephemerality and the passage of time. But it is only in that knowledge—not its denial—that things gain their true dimensions, and we begin to feel the simplicity of being alive."

Eva Hoffman (1989, 'Lost In Translation')

There is the source of a work of art and then there is the subject of a work of art; these two things are not always the same. Ideas often start out as a sort of internal pressure or ache, and it can take a long time to discover exactly what it is that needs to be expressed.

Henry Tonks’ pastel series from 1917 of the Gillies patients at Sidcup were imprinted on Jones’ mind since his early student years. Years later and seemingly out of nowhere, coming across the phrase *les gueules cassées* in a French magazine article sparked this series which was to occupy him for almost a decade.

“I have a slow mind, things are fed into it and disappear for years before popping out again. Whilst it is quite easy to have ideas, it is more difficult to devise the best method of expressing them, what I call the delivery system”

Using documentary archival photographs of the wounded soldiers, the first portraits turned out to be fairly naturalistic and Jones was ultimately dissatisfied. The photographs asked questions about the nature of identity, recognition and humanity. His interest was not as such in individualised portraits; he wanted to capture what these images tell us about ourselves, our ‘human condition’. Human vulnerability is a common enough theme, but human resilience in the face of that shattering vulnerability is Jones’ ultimate concern. He uses his portraits, collages and sculptures as metaphors for their sense of presence – a sense of recognition one might have standing before them.

*Justin Jones 2014  ji@justinjones.info*

*1914FACES2014 Curator/ Project Co-ordinator, Cristina Burke-Trees 2014*
SAVING FACES meets the 1914FACES2014 project

The SAVING FACES art project presents us with a unique opportunity to study the present-day collaboration between the maxillofacial surgeon Professor Iain Hutchison (St Bartholomew’s) and portrait painter Mark Gilbert.

It is part of our enquiry into questions of social reintegration which we are conducting within the 1914FACES2014 EU/Interreg research project at the University of Exeter. We put the exhibition into dialogue with a workshop on Facial difference and social (re)integration. The Psychology sub-project of 1914FACES2014 considers the factors that affect social relationships between people with visible facial difference (VFD) and those without this difference, and these will be discussed by researchers in Social Psychology and other experts including Professor Hutchison. The project also examines the potential for initiatives such as the Saving Faces art project to contribute to social (re)integration.

We are delighted to present The SAVING FACES exhibition in the Chapel Gallery at Hannah’s at Seale-Hayne, Newton Abbot from the 5th – 29th June. On display is a selection of portrait paintings of patients before and after (and occasionally during) facial surgery as well as detailed information by the surgeon, artist and patients about their extraordinary journey during the making of this project.

FACES Psychology project outline

Traditionally, research in psychology suggests that individuals have negative non-verbal responses to interactions with those who possess some form of visible difference (i.e., cardiovascular response, maintaining distance from the interaction partner; e.g., Blascovich et al., 2001; Houston & Bull, 1994; Rumsey et al., 1982; see Hebl & Dovidio, 2005 for a review). However, more recent research suggests that prejudice is not necessarily driven by a desire to do harm, but instead by feelings of shock and uncertainty over how to interact with individuals who have a visible facial difference (VFD, Stock et al., 2013). As a consequence, the psychology strand of the FACES project aims to focus on the interactional motivations, attitudes, and behavioural responses of non-VFD individuals to those who possess a VFD. In particular we are interested in examining: a) the mechanisms that underlie motivations to interact successfully with those who have a VFD, and consequently: b) various conditions and interventions that could improve these interactions.

Speakers

James Partridge

James Partridge is Founder and chief Executive of Changing Faces, the leading charity supporting and representing people with disfigurements, which is now a £1.5m organisation with a 30-strong staff team. Before setting up Changing Faces in 1992, James worked as a health economist in public health in the NHS in the 70’s, established a dairy farming business, and thought A level economics in Guernsey in the 80’s. As well as directing Changing Faces, James has served on many committees and panels bringing disability, human rights, user, consumer and lay perspectives to bear on a range of subjects. He is also a founding partner of Dining with a Difference, which aims to challenge and change the way chief executives/directors of private and public organisations address disability as a strategic business issue. Dining has made major impact on the thinking of organisations such as Royal Mail, Barclays and Jobcentre Plus. James was appointed an Honorary Fellow of the Royal College of Surgeons of Edinburgh in 2005 and has Honorary Doctorates from both of the Universities in Bristol, his
birthplace. He was the winner of Britain’s most admired Charity Chief Executive for 2010 and the Beacon Price for Leadership, also in 2010.

Prof Iain Hutchison

Iain has been Consultant Oral & Maxillofacial Surgeon at St Bartholomew’s, the Royal London Hospital and Homerton Hospitals since 1989. Iain was appointed to a professorship in 2007. He founded the United Kingdom Oral Cancer Research Group. Iain is also the Chief Executive and Founder of Saving Faces, the facial surgery research foundation, and was responsible for initiating and sponsoring the Saving Faces art exhibition. A selection of the portraits from the Saving Faces exhibition is on display in the Chapel Gallery here at Seale-Hayne, which is the site of a former WWI Military Hospital for soldiers suffering from shell-shock.

Prof Nichola Rumsey

Nichola is Professor of Appearance Research at UWE and is Co-Director of the Centre of appearance Research (CAR), which she founded at UWE in 1912. Following the completion of her PhD “Psychological Problems Associated with Facial Disfigurement” in 1983, Nichola has built an international reputation for her research in this field and has attracted over £7m funding to support research on appearance. She was British Psychological Society Consultant at the UK Dept of Health 2004-2010, is an Honorary Life Member of the South African Burns Society, and an Honorary Life Member of the British Association of Aesthetic Plastic Surgeons (BAAPS). Her current projects include: establishing the psychological needs of people who are distressed by their appearance and developing interventions to meet these needs; interventions to promote positive societal attitudes towards diversity in appearance; and screening and follow-up of patients seeking cosmetic surgery.

Dr Dale Weston

Dale completed his PhD in Social Psychology at the university of Exeter in 2013 and is currently working as an Associate research Fellow at the University of Exeter. His current work is focused on the social reintegration of individuals with a facial disfigurement. More specifically, his work focuses on examining some of the psychological factors that affect social relationships between people with a facial disfigurement and those without this disfigurement. His other research interests include the application of social psychological theories and models to the context of health promotion.

Prof Manuela Barreto

Manuela studied Work and Organisational Psychology at the University of Porto, Portugal and obtained her PhD in Social Psychology in 2000 from the Free University, Amsterdam. Manuela worked as an Assistant and then Associate Professor at Leiden University, the Netherlands (where she received the Heijmans early career prize), and is since September 2011 a Full Professor of Social and Organisational Psychology at the University of Exeter. Manuela leads the University of Exeter’s humanities, arts, and Social Sciences research strategy theme on “Societal and Lifestyle Shifts” and is part of the University’s Athena Swan Working Group. Manuela’s research focuses on the impact of prejudice and discrimination on its targets, on perpetrators, and on interactions between the two. Manuela also works on morality in intra and intergroup relations.

Dr Thomas Morton

Thomas received his PhD in Social Psychology from the University of Queensland in 2005 and is currently a Senior Lecturer in the School of Psychology at the University of Exeter. His research interests cover a variety of topics connected to social identity, communication, intra-group processes, social influence, persuasion and behaviour change, deviance, political behaviour, gender, essentialism, prejudice, discrimination and stigma.
SAVING FACES meets the 1914FACES2014 research project

1914FACES2014 is a EU INTERREG IV-funded project, led by Professor Bernard Devauchelle (Institut Faire Faces) and Professor David Houston Jones (University of Exeter). The project takes the experience of the facially injured soldiers of the First World War as the starting-point for an enquiry into disfigurement in the broadest sense, arguing that facial injuries in 1914–18 led to both unprecedented innovations in the surgical field and to permanently changed understandings of the face. Just as artistic practice fed into surgical practice (in the work of sculptors as mask-makers or epithesists), so the radically new forms of surgery developed at this time changed the context in which artists represented the face. Looking at art-works and historical objects from the early twentieth century to the present day, we consider both the unique historical situation of facially injured soldiers in World War One, including the complex question of their social (re)integration, and the long-term cultural legacy of that situation.

Drawing on the close collaboration between pioneering plastic surgeon Harold Gillies and the artist Henry Tonks, leading to a series of drawings of casualties of the Western front at the Cambridge Hospital in Aldershot in 1916, the SAVING FACES art project presents us with a unique opportunity to study the present-day collaboration between the maxillofacial surgeon Professor Iain Hutchison (St Bartholomew’s) and the acclaimed Glaswegian portrait painter Mark Gilbert. Iain Hutchison established the Saving Faces project in 1999, funded by a small legacy following the death of his mother, Dr. Martha Redlich. Painter Mark Gilbert took up the offer to work within the surgical department of St Bartholomew’s and soon started painting the portraits of patients before and after (and occasionally during) facial surgery. At the outset it was hoped that the project would illustrate, in a form that was accessible to the general public, what is possible with modern facial surgery, and show that people with facial disability are able to enjoy happy, successful and fulfilled lives. Iain Hutchison also wanted to give an artist the opportunity to paint these unique faces as they progressed through their surgical and emotional journey. Finally he felt that sitting for and seeing their portraits might have a cathartic effect, allowing the patients to come to terms more rapidly with their altered appearance.

Our presentation of the Saving Faces exhibition is part of the enquiry into questions of social reintegration which we are conducting within 1914FACES2014. On 16th June, we put the exhibition into dialogue with a workshop on Facial difference and social (re)integration. The Psychology sub-project of 1914FACES2014 considers the factors that affect social relationships between people with visible facial difference (VFD) and those without this difference, and these will be discussed by researchers in Social Psychology and other experts including Professor Hutchinson. In its concern with social reintegration and rehabilitation, this event...
draws upon the rich history of Hannah's at Seale Hayne, including a brief era as a military hospital for soldiers returning from the trenches with shell-shock in 1919/20.

We are delighted to announce The SAVING FACES exhibition in the Chapel Gallery at Hannah's at Seale-Hayne, Newton Abbot from the 5th – 29th June 2014. On display is a selection of portrait paintings of patients before and after (and occasionally during) facial surgery as well as detailed information by the surgeon, artist and patients about their extraordinary journey during the making of this project.

Visitor questionnaires

The SAVING FACES art project presents us with a unique opportunity to study the present-day collaboration between the maxillofacial surgeon Professor Iain Hutchison (St Bartholomew's) and portrait painter Mark Gilbert.

This is part of the enquiry into questions of social reintegration which we are conducting within the 1914FACES2014 (an EU/INTERREGIVa research project) at the University of Exeter. We put the exhibition into dialogue with a workshop on Facial difference and social (re)integration. The Psychology sub-project of 1914FACES2014 considers the factors that affect social relationships between people with and without disfigurement, and these will be discussed by researchers in Social Psychology and other experts including Professor Hutchison. The project also examines the potential for initiatives such as the Saving Faces art project to contribute to social (re)integration.

Thank you for filling in a visitor questionnaire! The purpose of the questionnaires is to gauge visitor reactions to the exhibition, to encourage people to think further about representations of the face and issues relating to disfigurement and to measure the impact of the research carried out within the 1914FACES2014 project. When you complete your questionnaire, you will receive a token entitling you to a free cup of tea or coffee at Hannah's at Seale Hayne.
Consent Form

1914FACES2014: Responses to the Saving Faces art exhibition, 5\textsuperscript{th}-29\textsuperscript{th} June 2014.

Purpose of Study
These questionnaires are intended to help us understand the responses of visitors to the Saving Faces art exhibition. The exhibition includes images of disfigurement and we are interested in gauging responses to those images.

Procedure
Participating in the study will require completion of two short questionnaires about your perceptions of facial disfigurement and your reactions to the Saving Faces art exhibition. The first part of the questionnaire is to be completed before viewing the exhibition whereas the second part of the questionnaire is to be completed after you have viewed the exhibition.

Potential Risks and Ethical Consideration
The main risk associated with this questionnaire is possible discomfort when answering some of the questions concerning perceptions of and responses to facial disfigurement. No other risks are known to the investigators at this time.

Participation will be remunerated with the receipt of a token worth one cup of coffee from Hannah’s bistro on completion of the questionnaires. Participants will still receive this token even if they decide to withdraw themselves or their responses at any time.

Confidentiality
The information you give which is recorded will be kept strictly confidential, except as may be required by the law or professional guidelines for psychologists. All information will be identified by an identification code, not your name. Any form that requires your name (e.g., this consent form) will be stored separately from the other material. Your name or other identifying information will never be associated with any research reports or publications that use the results of your questionnaires or interviews. Your participation in this study is voluntary, and you may discontinue and withdraw yourself and/or your responses at any time, without prejudice. Should you wish it, your responses can be destroyed at any time.

Finally, please ask any questions you have concerning this study before you sign this consent form.

Consent
I give my informed consent to participate in this study entitled ‘1914FACES2014: Responses to the Saving Faces art exhibition, 5\textsuperscript{th}-29\textsuperscript{th} June 2014’. I have read and understand the consent form.

Questions or concerns about the study can be addressed to the Chair of the Ethics Committee, School of Psychology, University of Exeter.

Please complete this part before viewing the exhibition

1. When you think about facial disfigurement, what thoughts and feelings enter your mind?

2. If you were to encounter an individual with some form of facial disfigurement, how do you think you would react?

Thank you for completing these questions. Once you have viewed the exhibition, please turn the page and complete the remaining questions.

1. When you think about facial disfigurement, what thoughts and feelings enter your mind?
2. If you were to encounter an individual with some form of facial disfigurement, how do you think you would react?

3. Had you thought about facial disfigurement previously? (Please circle) Yes/No

   If yes, what did you think about it?

4. What was your reaction to the images of people with a facial disfigurement?

5. How has the exhibition changed the way you think about facial disfigurement?

6. In what ways did you find the explanations of facial disfigurement research useful?

7. How do art-works help us understand facial disfigurement?

8. How important were the art-works in helping you understand the issues presented? Can you give examples of how the art-works helped you understand disfigurement?

9. In what ways has the exhibition changed the ways in which you will approach your future professional activity?

10. Any other comments

   Thank you for your participation!

Debriefing form

The purpose of this questionnaire is to help us understand the responses of visitors to the Saving Faces art exhibition. The exhibition includes images of disfigurement and we are interested in gauging visitor reactions to these images, and encouraging people to think further about representations of the face and issues relating to disfigurement.

The questionnaire that you have just completed involved completing questions at two time points in order to capture your perceptions of facial disfigurement both prior to viewing the exhibition and after viewing the exhibition. Using your answers, we hope to explore the impact of the Saving Faces exhibition on your responses to the paintings and related information, and on whether the exhibition has changed your perceptions, and understanding, of facial disfigurement.

As mentioned in the consent form, all of the information collected for this study is completely anonymous and confidential. You may also withdraw your responses from the study at any point.

It is possible that you experienced some distress as a result of this study. If you felt any distress at all due to the content of this questionnaire, please feel free to contact the principal investigator of this project Prof David Houston Jones d.h.jones@exeter.ac.uk. Alternatively, you may wish to contact the Samaritans on 08457 909090 to talk about any issues that were raised during this study. Finally, for further information regarding facial disfigurement, or the Saving Faces art exhibition please visit Changing Faces (https://www.changingfaces.org.uk/Home) or Saving Faces (http://www.savingfaces.co.uk/).

Thank you for participating in this study—your participation is extremely important to us and is much appreciated.
The workshop was accompanied by a pop-up exhibition, curated by Cristina Burke-Trees, of works by the contemporary artist René Apallec drawn from the Gueules cassées series. The works, displayed in the foyer of the Innovation Centre, were juxtaposed with a copy of L'Illustration, one of the key archival sources for Apallec’s artistic practice.

**ABSTRACTS**

**Marjorie Gehrhardt**

**A ‘cruel testimony of the horrors of war’: visual representations of Gueules Cassées in Interwar France**

‘Témoignage cruel des horreurs de la guerre prolongées en stigmates atroces sur les faces mutilées de nos blessés’ is the phrase Colonel Picot used to describe his facially injured comrades who attended the Peace Treaty conference in 1919. Quoted in publicity material for Abel Gance’s second version of his film J'accuse (1938), these words from the president of the Association des Gueules Cassées point to the status of reminders of the horrors of war ascribed to facially disfigured combatants in the interwar years.

In France, the Gueules cassées of the First World War were commonly viewed as symbols of the brutality of war, and this role is examined in this paper with special reference to the film J'accuse (1938), in which gueules cassées featured. However, and although Colonel Picot himself presented his comrades in that way, the image of facially disfigured veterans in interwar France was much more varied, as will be shown. Drawing upon visual material representing or made by the Association des Gueules Cassées, this paper therefore interrogates the symbolism associated with facially disfigured veterans in interwar France.

**Jason Bate**

**Facilitating knowledge: Photography and facial reconstructive surgery in England, 1916-1924**

This paper examines the ways in which photography played a key part in the development of facial reconstructive surgery in England during the First World War. I focus my analysis on photography’s emergence into this particular medical discourse which changes over the years of the war, from one that was
primarily carried in language, written and spoken, to one that necessarily included illustrations and specifically photography. But why did surgeons employ photography into their practice? What was the value attached to photographs, and what were photographs expected to do? How did surgeons read these images? What information did they convey? From a Foucauldian perspective, the photographs can be categorised as visual records that could substantiate and articulate medical knowledge. Using medical journals that were published during the First World War to explore how these photographs were originally read and used by surgeons, this paper argues that from 1916, photography was employed as a pedagogic tool to develop typologies of medical practice and to organise knowledge through visual means. The use of photographs to illustrate and support surgical progress was integral in the shaping of medical thinking. I shall argue that within facial reconstructive surgery, this new importance of photographs involved a shift in medical discourse toward visually encoded information. These photographs were being used to teach dental and plastic surgeons to see in a specific way.

Lawrence Napper  
(King’s College, London)  
'Reconstruction, fiction and trauma in 1920s British Cinema'

This paper will draw on material from my forthcoming book on British films of the 1920s and the ways in which they represent WW1. In the first half of the paper I will consider the various schemes proposed by the cinema industry in 1919 for the training of what were described as 'disabled ex-servicemen' into suitable jobs in cinemas, particularly as projectionists. Such schemes created widespread debate and anxiety within the cinema trade which was already struggling to cope with the pressure of employing demobilized ex-employees.

The second half of the paper will focus on two films offering different approaches to the figure of the disabled ex-serviceman in fiction films. The Garden of Resurrection (1919) can be read, I will argue, as a romance centering on a hero suffering from facial disfigurement. The Guns of Loos (1928) features a hero who suffers from temporary shell shock – a psychological trauma represented primarily through facial performance in a series of startling close-ups. In both the film texts, and in the 1919 debate, the subject of facial disfigurement is alluded to, but never explicitly expressed.

Julie Mazaleigue  
The Albéric Pont Archive: nature, functions and aims of visual representations of the Gueules cassées, from medical uses to testimony.

In this paper, I will present the Albéric Pont Archive, which has recently been acquired by the Inter-University Science Library of Paris-Descartes. This collection is entirely original and has not yet been analysed. It is mainly composed of visual representations: photographies of injured soldiers before and after surgical procedures, drawings of orthodontic apparels, and mouldings of injured faces.

My purpose is to analyse the dual function of these representations.

On the one hand, they obviously had a medical and surgical function of recording and of scientific transmission: showing the techniques (and their successes) through the pictures of the apparels and instruments and through the results of the procedures. On the other hand, they were also testimonies. The point is to understand what are the kinds and the aims of these testimonies: are they professional and sociological? (An element in his teaching method? The testimony of Pont’s personal medical experience, exposed in his dental surgery to show his successes to his bourgeois clientele?) But don’t they also have a political and cultural function (from war and post-war « propaganda » to collective memory)? We will determine this point by analysing the function of these representation in the career of Alberic Pont, and more widely by retracing their uses and destinies during and after the First World War.
Beatriz Pichel
Wellcome Trust Research Fellow, PHRC, de Montfort University, Leicester

**Historical Perspectives on the Medical Photographs of the Gueules Cassées: Disfigurement and Expression between 1870 and 1932**

This paper will explore the photographic archive of the *gueules cassées* preserved at the Parisian hospital Val de Grâce. This medical archive is compounded by series of photographs that document the different stages of the facial injuries and reconstructive surgeries experienced by French soldiers during the First World War. By means of the analysis of the different meanings attached to these photographs during and after the war, this paper attempts to determine the specific role played by photography in the social, cultural and medical understanding of war facial injuries and disfigurement.

With this aim in mind, this article will proceed in three steps. First, it will examine the cultural discourses about the *gueules cassées* that were created in the post-war years. Especially, the focus will be on the dynamics between the uses of photographs and their absence from public discourses that linked facial mutilations to the loss of humanity. Second, this paper will analyse the specificity of these medical records by comparing them to other similar photographs, especially to the images of bodily mutilations and the pictures of facial injuries that were not made in medical contexts. Finally, this paper will trace the history of the different photographic constructions of facial and bodily mutilations. In particular, it will argue that the use of photography at the turn of the 19th century in scientific debates on facial expressions and bodily gestures as the locus of human emotions created the conditions under which disfigurement could be understood as the loss of humanity.

Karen Randell
Professor of Film and Culture at the University of Bedfordshire and the Head of Department for Media Arts and Production

**Masking the horrors of war: Lon Chaney, performance, prosthetics and the returned veteran**

This paper considers the visual representations of the First World War veteran and the silent films of 1920s Hollywood star Lon Chaney Sr. Through this analysis, questions of medical practice (in particular, facial reconstruction and prosthetics) art and sculpture and their relationship to film are explored to provide a discussion that identifies where the images of the returned maimed veteran are placed in mainstream popular culture. I argue that the damaged body as ‘spectacle’ presents a displayed excess that both exhibits the returned veteran body as fascinatingly grotesque and portrays the maimed male body as a site for sympathetic response. I also argue that the films of Lon Chaney are able to represent anxieties that pertain to the First World War even though the war is absent from the texts themselves. The medical world infiltrates these narratives and the notion of spectacle provides the link between the competing discourses of deformity, art and performance present around these popular cultural texts. My conclusion will suggest that there is still much to discuss and explore in the context of the current allied war and the contemporary struggles of returning soldiers and their visibility in popular culture.

Biography:
Karen Randell is Professor of Film and Culture at the University of Bedfordshire and the Head of Department for Media Arts and Production. She received her doctorate from the University of Southampton in 2003. Her research focuses on the depictions of trauma in popular visual culture. She has articles published in *Screen, Film & History* and *Cinema Journal* and has numerous chapters in anthologies concerning war, trauma and gender. She is editor of: *Screen Methods: Comparative Readings in Film Studies* (Wallflower/Columbia UP, 2005); *The War Body on Screen* (Continuum/Blombs, 2008); *Reframing 9/11: Film, Popular Culture and the “War on Terror”* (Continuum/Blombs, 2010); *Screening the Dark Side of Love: From Euro-Horror to Contemporary American Cinema* (Palgrave-McMillan, 2012) and *The Cinema of Terry Gilliam: It’s a Mad World* (Wallflower/Columbia UP, 2013). She is currently writing a monograph: *Lon Chaney Sr: Performance and Post-WWI Visual Culture* (forthcoming: Rowman and Littlefield, 2016)
Faces of Conflict: the impact of the First World War on art and facial reconstructive surgery

Exhibition in the Royal Albert Memorial Museum (RAMM), Exeter

17th January – 5th April 2015

Poster image: René Apallec, Gueule Cassée Collage No 138

This exhibition takes the experience of the facially injured soldiers of the First World War as the starting-point for an enquiry into disfigurement in the broadest sense. Just as artistic practice fed into surgical practice so the radically new forms of surgery developed at this time changed the context in which artists represented the face. The exhibition looks at the unique historical situation of the facially injured soldiers of the First World War, the complex question of their reintegration into society and the long-term cultural legacy of that situation. By viewing these unique documents of the wounded face we can understand what facial injury meant in the First World War and how collaborations between artists and surgeons continue to suggest ways in which art and medicine can work together. It creates a dialogue between work created during and immediately after the First World War and the work of contemporary artists including the work of Paddy Hartley, the College of Humanities’ artist in residence.

Faces of Conflict is a collaboration between the University of Exeter project team Professor David Houston Jones, Dr Marjorie Gehrhardt, Suzanne Steele, PhD candidate, Curator Cristina Burke-Trees, and the Royal Albert Memorial Museum (RAMM). It is part of the EU INTERREG IV-funded project 1914FACES2014.

www.rammuseum.org.uk/whats-on
A walk through the exhibition:

The impact of the First World War on art and facial reconstructive surgery

But look!—look at the stillness of that face
Made up of little fragile bones and flesh,
Tissued of quivering muscles, fine as silk,
Exquisite nerve endings and scarlet blood
That travels smoothly through the tender veins;
One blow—one moment more—and that man’s face will
be a mass of matter, horrid slime—and little brittle bits—
He knows—
He waits—
His face remains quite still.
And underneath the bullet-spattered helmet on his head his steady
eyes look out.

Mary Borden, from ‘Unidentified’, original version included in the The English Review, December 1917

The experience of facially injured soldiers in the First World War led to both radical new forms of surgery and to new understandings of the human face in art.

This exhibition explores the influence of surgery on art and art on surgery. During the First World War, pioneering plastic surgeons began to work in new ways, including in collaboration with artists. In turn, their surgical innovations changed the context in which artists represented the face. Today, a new generation of artists is re-engaging with the medical archives which tell the story of First World War facially injured soldiers. Here, we see their contemporary responses alongside artworks and historical objects from the early twentieth century.

By viewing these unique documents of the wounded face we can understand what facial injury meant in the First World War and how collaborations between artists and surgeons continue to suggest ways in which art and medicine can work together.


Harold Delf Gillies 1882 – 1960, studied medicine at Cambridge and completed his training at St Bartholomew’s Hospital in London where he worked with surgeon Sir John Milsom Rees. Gillies joined the
army in 1914 and returning from France, he started his work in the Cambridge Military Hospital in Aldershot and soon after, founded Sidcup which later became the Queen’s Hospital. Facial reconstructive surgery had been practised for many centuries, but in 1920, New Zealander Surgeon Harold Delf Gillies standardised the fast advancing techniques in his textbook ‘Plastic Surgery of the Face’. Gillies was not only concerned with restoring the function, but was keen to improve the aesthetic appearance as much as possible. To achieve his ambition and an amateur painter himself, Gillies initially made pictorial records of pre- and post-facial reconstruction cases, before giving the task to painter Henry Tonks and photographer Sidney Walbridge.

‘The officers’, Queen’s Hospital. Frognal, Sidcup 1917 Photograph by Sydney Wallbridge, Bapras archive (RCS)

This photograph was taken shortly after the hospital’s opening in July 1917. Chief Medical Officer Harold Gillies sits in the middle and above him is the artist Henry Tonks wearing a bow tie. The men pictured worked together but had different specialties: Rubens Wade was an anaesthetist, Johnston was in charge of the X-Rays department, Henry Tonks drew pastels of the patients, Geoffrey Seccombe Hett specialised in nose injuries, William Kelsey Fry (the Chief Dental Surgeon) in jaw wounds. The concentration of highly skilled professionals in one hospital allowed for a better level of care and permitted innovations thanks to close collaborations.

Queen’s Hospital football club, F.C. Sidcup 1921 -1922 Photo by Sidney Walbridge, Bapras archive (RCS)

During the long time facially injured soldiers spent in hospital, they had to find ways of passing the time. The Recreation and Comforts Fund was created to help them: activities such as sports, a writing class, cinema and concerts, and even occasionally trips, were organised. Sports events led the men to compete against other teams and thus to meet people outside hospital. Workshops and training in many trades was also offered over the years. It gave the patients and the general public a chance to see that despite their disfigurement they were still competent people who could earn a living. But even with these efforts, finding a job was not always easy in post-World War One society.

Loose photo album page unidentified, Bapras archive (RCS)

Clinical photographs were not the only ones taken at the hospital. Images of moments of relaxation, of the surroundings and of the people were made to send to the families or to keep as souvenirs. During the time spent in hospital, strong bonds developed between the men and with the staff. The nurses and VADs fulfilled a maternal role, feeding the men and comforting them. A few romances even bloomed, between the patients and the women who were looking after them. If pain and depression were ever-present, friendships made the hospital if not a happy place, at least a temporary shelter from the violence of war and the challenges of returning to civilian life.

Archibald ‘Archie’ Lane’s photo album 1917 – 1925, blue scrapbook, Bapras archive (RCS)

Archibald Lane worked as a dental technician at the Queen’s Hospital. In this capacity, he collaborated with Chief Dental officer William Kelsey Fry and made splints and dentures, as well as tin masks. The introduction in 1913 of Eastman portrait film, later to become Kodak, began the transition from the use of sheet film instead of glass plates, which were widely used for the photography during WWI. In 1914 the first 35mm still camera was introduced, which made photography much more easily accessible and instantly available. Already a hobby photographer, Archie Lane recognised the immense benefit to the medical treatment which a pictorial record can provide. He created his own scrapbook of photographs of his designs and of the patients he helped, and in support of the surgeon’s treatment plans he recorded the healing process of the soldiers who were undergoing multiple operations.
Mary Borden Turner Spiers, 1886-1968, was an American writer, married to a Scottish missionary, living in London at the time of the outbreak of the Great War. An established and popular novelist and playwright, she was patron and lover of the Vorticist, soldier, and war artist, Percy Wyndham Lewis. She counted Ford Madox Ford, George Bernard Shaw, Gertrude Stein, and many other significant artists and writers of the early 20th century amongst her friends. In January 1915 she left her family to volunteer as a Volunteer Aid Detachment Worker in a typhus hospital near Dunkirk. Finding the work unsatisfactory, and with permission from the French Army, Borden established l'Hôpital Chirurgical Mobile No 1, near the front line. The mobile surgical unit functioned as a front line receiving unit, and as a teaching hospital for battle surgeons. In 1916, at Bray-Sur-Somme, Borden ran the largest military hospital in the entire French army during the Battle of the Somme. At the Somme she met and married her second husband, Captain Louis Spiers. For her war work she received France’s highest honours, the Croix de Guerre and the Légion d’honneur. Astonishingly, Borden repeated this feat in the Second World War, serving in the Middle East with the Hadfield-Spiers Ambulance Unit.

Borden’s war narrative, The Forbidden Zone (1929) was begun in 1915, with sections of it published under the pseudonym Bridget MacLagan in 1915-1917 in The English Review, and the Atlantic Monthly. Possibly dissuaded from publishing, following the institution of censorship via the Defense of the Realm Act (1914), Borden waited until the war book ‘gold-rush’ years of 1928-1931 to publish her full account. The Forbidden Zone was met with mixed reviews and quickly went out of print. Borden’s book is now considered to be one of the best, yet least read Great War texts, and is notable for its frank exposure of the work done by medics behind the lines. From a literary point of view, Borden’s use of a subversive tenor, and mixed form, display an innovative which places her on the borders of the modernist canon. The original edition concluded with a pro forma epilogue of 11 of her original war poems. The omission of these poems from the 2008 Hesperus reprint is odd and detrimental to the whole. Borden’s contributions as a nurse, especially in the context of this exhibit, cannot be underestimated. Borden, her nurses, her orderlies, and her surgeons, were the first stop on the long, long road to the recovery of the faces of the disfigured soldiers. She and her team wished to identify the ‘Unidentified’ of war, and to restore dignity and hope. Her poetry displays an intimate knowledge of the physical and psychological anatomy of the wounded soldier.

From ‘Unidentified’, one of the poems included in the The English Review, December 1917, and in the original 1929 edition of The Forbidden Zone.

Look well at this man. Look!
Come up out of your graves, philosophers,
And you who founded churches, and all of you
Who for ten thousand years have talked of God […]
Look at his ugliness.
See how he stands there, planted in the mud like some old battered
image of a faith forgotten by its God.
Look at his grizzled head jammed up into that round, close hat
of iron […]
But look!—look at the stillness of that face
Made up of little fragile bones and flesh,
Tissued of quivering muscles, fine as silk,
Exquisite nerve endings and scarlet blood
That travels smoothly through the tender veins;
One blow—one moment morere—nd that man’s face will be
a mass of matter, horrid slime—and little brittle bits—
He knows—
He waits—
His face remains quite still.
And underneath the bullet-spattered helmet on his head his steady
eyes look out […]
Go back, poor ghosts—go back into your graves.
He has no need of you, this nameless man.
You philosophers, you scientists, you men of God, leave this man alone.
Leave him the grandeur of obscurity.
Leave him the great loss of his identity.
Let the guns chant his death-song down the world;
Let the flare of cannon light his dying;
Let those remnants of men beneath his feet welcome him mutely when he falls beside them in the mud.
Take one last look and leave him standing there,
Unfriended—Unrecognised—Unrewarded and Unknown.

Developments in facial reconstructive surgery prior and during WWI

Harold Delf Gillies was born in New Zealand in 1882 and came to Great Britain, his family’s home country, to study medicine. During the First World War, he served with the Royal Army Medical Corps and specialised in the treatment of facial injuries. He is often described as the ‘father of plastic surgery’ but in fact maxillofacial surgery existed long before his time. It was often seen in a negative light because of the association between disfigurement and condemnable practices (such as duelling) and conditions (smallpox and syphilis). Reconstructive techniques were developed in Ancient India to help people accused of adultery and whose noses had been cut off in punishment. The ‘Indian rhinoplasty’, as described in the late eighteenth century, involved taking skin from the forehead to make a new nose. Renaissance surgeons practised the ‘Italian method’ of reconstruction, which involved grafting skin from the patient’s upper arm to their face to shape a new nose. The process was long and painful, as the patients had to keep their arm lifted for as long as necessary for the new blood supply to be established (around three weeks). In the 1800s concerns with beauty led more and more wealthy people to undergo facial operations, giving plastic surgery the image of a vain and even dangerous practice.

During the First World War, however, the number of combatants injured to the face by machine gun bullets and shrapnel forced surgeons to rapidly improve existing techniques and experiment with new methods.

Key figures such as Gillies, Varztad Kazanjian, Hippolyte Morestin and Léon Dufourmentel on the side of the Allies, and Jacques Joseph and August Lindemann in Germany, were pioneers in this emerging field. Innovations travelled across national borders, even beyond enemy lines. Bone grafting techniques, learnt from French and German doctors, were especially useful to rebuild jaws and at The Queen’s Hospital, the dedicated maxillo-facial centre in Sidcup, Kent, Gillies perfected the technique of the tube pedicle and significantly reduced the risk of infection. The novelty of this method of skin graft was that the skin flap was stitched into a tube during the time when it was attached both to the donor and recipient sites. More than 11,000 operations were performed by Gillies and his team on more than 5,000 patients at The Queen’s Hospital. Progress was made because different specialists (dental surgeons, plastic surgeons, anaesthetists, radiographers) worked together in one place.

Surgical instruments collection 1880’s – 1930’s, Bapras archive, RCS Collection

This selection of surgical instruments would have been used to perform a total rhinoplasty (nose reconstruction) as in the treatment of Private Edward Palmer and described by Harold Gillies in his textbook case 111. Some of the instruments are engraved with Harold Gillies initials HDG.

1 Cartridge Syringe, 2 Solid scalpel, 3 Nasal Forceps, 4 Skin Grafting knife, 5 Blade sharpener for skin grafting knifes, 6 Toothed forceps, 7 Haemostatic clamp forceps with ratchet handle, 8 Septum Nasal Raspetory, 9 Solid bone awl with eye, 10 Needle holder, 11 Kidney dish, 12 Box containing aseptic dressing material, 13 Box of dental tools.
Private Edward Palmer, medical records, Gillies collection, RCS archives

Private Edward Arthur Palmer was admitted, aged 23, to the Cambridge Military Hospital, Aldershot on the 2 October 1916 with severe injury to his entire nose, upper lip and much of the upper jaw. Surgeon Harold Gillies notes in his text book ‘Plastic Surgery of the face’, that Palmer’s total nose re-construction was only the second case attempted and that it was particularly challenging. It required alternative methods in administering anaesthetics and imaginative new techniques to achieve an extra-large skin flap which would enable a reasonable outcome. Palmer was discharged home on 21 March 1918 and enjoyed an active life until he died in 1979.

Daily life at The Queen’s Hospital

During the long months facially injured soldiers spent in hospital, they had to find ways of passing the time. Activity, especially physical exercise, was regarded as a way to prevent boredom and fight off the depression from which severely wounded men were likely to suffer. It was hoped that the ‘pleasant surroundings’ of the Frogmal estate where the hospital was built would lift up the men’s spirits. In addition to the activities made possible by the extensive grounds, events and workshops were also organised.

The Recreation and Comforts Fund

As early as 1917, a group of benefactresses founded a dedicated Recreation and Comforts Fund. A resident staff in charge of recreations and instructional workshops was appointed, and activities started to be offered, for example cinema and concerts. The aim was to entertain patients, but it was also a means for the general public to support wounded servicemen. Some local residents would thus come to bring cigarettes to the wounded, or donated goods like a gramophone or a billiard table. Benefactors, and benefactresses especially, also gave of their time to the wounded. One lady ran a writing class and encouraged her students to tell their war reminiscences (these were usually rather positive stories). Other people took small groups of men on outings to London or to the countryside. Since the hospital itself was set in a large estate, patients were able to participate in agricultural and poultry-farming activities. These had the advantage of being immediately useful to the hospital as they provided food for consumption. For the many men whose jaws had been damaged and who could not eat solid food but needed a lot of energy, eggs were a key supply. This rural environment was believed to be particularly conducive to restoring the health and spirits of the wounded.

Vocational training

Over the years, a number of workshops were also developed: patients at The Queen’s Hospital could for instance take part in a commercial class, a carpenters’ class, a toy making workshop or a dentistry workshop. They were offered French lessons, training in cinema operating, boot repairing, hairdressing and many other trades. Learning new skills would, it was hoped, help their professional reintegration. It gave the gueules cassées and the general public a chance to see that facially disfigured men were not ‘useless wrecks’, as one article puts it, but that they could still make a productive contribution to the economy. Despite these efforts, finding a job and proving to society that they were still capable men was not always easy in post-World War One society.

Facing others

Meeting a facially wounded combatant face-to-face could be a challenging experience. For the injured men too, the stares of others could be uncomfortable. But encounters between disfigured soldiers and others could not be avoided forever. The benches painted blue give the impression that wounded Tommies and other people kept separate but in fact there was more interaction than it first appears.
Hospital staff and visitors

The staff working at the hospital had to get used to looking after facially wounded patients. Nurse Catherine Black recalls that the time she was looking after men who had been facially injured was the hardest in her career and confesses that she sometimes felt powerless. The presence of nurses and VADs was very important, from a medical point of view but also because they acted as confidantes and helpers. For example, some of them taught the blind patients how to read Braille, they wrote and read letters for them. A patient at The Queen’s Hospital reports that the men sometimes flirted with the nurses; in fact some romances were even born in the wards. Famous guests also came to the hospital. Journalists and surgeons from other hospitals and from abroad came to observe the work that was being carried out and visit the small museum. Several royal visits are also recorded at The Queen’s Hospital, which benefitted from this prestigious patronage.

Strangers

Less famous visitors also came to visit the patients. One benefactor ran a writing class whilst others took groups of men out on day trips. This shows that not everyone shied away from the presence of the wounded, and that they themselves did not always mind mingling with people outside hospital. However, being seen in public could be problematic and a woman reports that the men she took to a concert in London asked that the curtains be drawn to avoid being seen by other people.

In the village of Sidcup, the local residents gradually got used to the presence of the hospital and its patients. They would meet them in the ground near the hospital, in the local tea room and sometimes attending shows in the village (local children for example gave a performance to raise funds for the hospital). As suggested by the blue benches, precautions were taken, but not everyone reacted negatively to the presence of facially wounded servicemen.

Family

The reaction of a patient’s relatives was one of the most important steps in a man’s rehabilitation. Facially injured men often expressed fears at how their families may feel: they were worried that the people closest to them might not recognise them, that they might pity them or find them repulsive. For the many young men who had been injured, the prospect of being rejected by their sweethearts was particularly distressing. One of Gillies’s patients, refusing to impose his disfigured face upon his fiancée, broke up his engagement with her before she had even seen him in hospital. Some of the servicemen went back home to find that their bosses did not want to employ them anymore. But many also learnt to cope with family and professional changes, and found their place in post-war society.

Blue bench (signified with bench engulfed in blue light in the exhibition)

The story goes that some benches near The Queen’s Hospital were painted blue to warn the locals that they might encounter a disfigured man if they sat there. The colour was the same as that of the injured Tommy’s hospital uniform, which set them apart from their serving comrades as well as from civilians. The identification of these ‘special’ benches suggests that relations between the Sidcup population and the patients were not always easy.
Early life

Bertram William Brown Blight was born in the parish of STOE DAMAREL, DEVONPORT, PLYMOUTH, on 10th November 1890. His father William Blight was listed in the 1891 census as a Royal Navy pensioner who was then still working as a writer for the Ordnance department, and the family lived at 16 CHAPEL STREET, ST JOHN’S PARISH, DEVONPORT. Bertram lived with his parents William and Ann Blight (née Brown) but also his maternal grandmother Louisa and his uncle Thomas, who was working as a joiner in the dockyard.

By 1901, the family had moved to 15 ACRE STREET in the parish of ST MICHAEL, DEVONPORT, and another son, William was born around 1892.

In 1911, Bertram was 21 and he was working as a bank clerk for Capital and Counties bank (later taken over by Lloyds) in Plymouth whilst living at 60 PEVERELL PARK ROAD, PLYMOUTH, with his parents and his brother, himself a County Court Clerk. Bertram's father sadly died in the summer of 1914.

War years

Bertram was attested on 25th November 1915 and he was mobilised as a Sapper with the Devon Royal Engineers on 24th January 1916. On 1st March 1916 he was appointed 2nd Lieutenant. He was temporarily demobilised from 26th June until the 17th July 1916 to assist his civilian bank employers, before returning to his battalion. On 5 October 1916 he was admitted to No. 5 Officer Cadet Battalion, to join at TRINITY COLLEGE, CAMBRIDGE. Over the course of the following year he would be trained to use various weapons, and he was probably wounded on 12th April 1917, but he soon returned to the front.

On 26th October 1917 he was serving with his battalion (9th Battalion, Devon Regiment) in GHELUVELT, NEAR YPRES, when he was hit by machine gun bullets and left for dead. He was initially declared missing; in fact he was thought to be dead and left on a pile of bodies. He later described to the War Office what happened on this fateful day:

On the morning of the 26th October 1917, I was in charge of a platoon in the front line, orders had been received to advance and capture the village of Gheluvelt and ground to the left. At zero hour the advance started and all went well until we reached a railway embankment on the left of the village. This embankment proved to be strongly held but by rushing this front we drove the enemy back. We were then subjected to machine gun fire from the village and at the same time the enemy appeared behind the embankment and tried to cut us off, in endeavouring to prevent this I was hit and rather badly wounded in the face, probably by a machine gun bullet fired from the village, and rendered unconscious [sic], the next I remember was being bandaged and am sorry to say by a German. (18 July 1918)

Bertram told his family his memories of his capture: the danger that he knew he was facing when attacking a small village well defended by German guns, the smoke when he came out for the attack, the knowledge that there were three machine guns and his almost miraculous survival. Indeed, Bertram was a Freemason and it may be his masonic ring that saved his life: a German combatant noticed it and, perhaps wanting to take it, realised that Bertram still alive. From then on Bertram was taken as a Prisoner of War. He travelled via COLOGNE; there his stretcher was left outside the train station during an air raid alert. He was extremely thirsty but thankfully a young German boy brought him water. He was then transferred to a prisoner of war camp in STETTIN, IN THE NORTH OF PRUSSIA, near the Baltic Sea.
During his time at the prisoners of war camp, Bertram was reasonably well treated, although he and his fellow prisoners were constantly hungry. Several photographs were taken of him and the other men, some of them from Great Britain, others from Russia, and Bertram kept the photos with messages from the men they represented. He was however in a great deal of pain due to his injuries, so a German doctor from the camp offered to perform an operation. Bertram was given one week to decide, but a fellow prisoner, of Russian origin, advised him against accepting as he thought the doctor did not have the right equipment and was simply trying to spare Bertram more misery by putting an end to his pain. Bertram asked for more time to think but before the time came he was transferred to HEIDELBERG, probably to be part of an exchange of prisoners which would take place across the Rhine.

Once he was no longer in the hands of the Germans, Bertram was transferred to THE HAGUE (in April 1918), and on 1st July 1918, more than eight months after his capture, he embarked for Great Britain. On 2nd July 1918 he set foot again on British soil, at Gravesend, from where he was promptly transferred to QUEEN ALEXANDRA MILITARY HOSPITAL, MILLBANK, LONDON. A medical board examined him on 4th July and declared him unfit for 4 months. He was then granted a 10-month leave, which was then extended to a period of ‘over 12 months’. He was also granted a gratuity and a wound pension, from October 1918 until October 1919, which would then be renewed.

Bertram did not stay in London for very long and he was sent to the OFFICERS’ HOSPITAL, EVEREST, TEIGNMOUTH, a private hospital run by Lady Cable. This enabled him to be nearer his family, which he probably saw. On 1st September 1918 he was promoted to the grade of Lieutenant. From then on he spent time in different hospitals and he was regularly re-examined and deemed unfit ‘A& B’, which means that he was not well enough to stand active service abroad but could serve at home.

Early in 1919 he was transferred to a convalescent hospital but in May of the same year he was declared unfit for any service, which suggests that his condition had worsened. His medical notes mention his presence at the 3RD LONDON GENERAL HOSPITAL, a large hospital in WANDSWORTH, LONDON, where many facially injured soldiers and servicemen who had suffered wounds to their eyes were treated. It is in this hospital that the sculptor Francis Derwent Wood was working, making facial masks for severely disfigured men in his ‘Tin Noses Shop’.

On 8th April 1919, after his case had been investigated by the War Office, he was officially exonerated and assured that no blame was attached to him for his capture. He was placed on a list of ‘exonerated officers’. Two months later, on 17th June 1919, he was admitted to the specialised maxillofacial QUEEN’S HOSPITAL, IN SIDCUP, KENT. His initial diagnosis describes the wound to his nose and scarring of his upper lip and cheek. Between August 1919 and 7th October 1920, when he was finally discharged, Bertram underwent at least 12 operations. Most of them were performed by Captain Russell under local anaesthesia, and a pedicle was used to form a new nose for Bertram. His health was however quite poor, and one operation even had to be interrupted in November to allow for the patient to recover. Over the next year or so, Bertram would have several other operations, his wound pension would be renewed and the Ministry of Pensions would ‘place [him] on the retired list on account of ill health caused by wounds.’

When he left the hospital he was still suffering from functional problems (to chew and breathe) and the aesthetic result was not perfect, which led the Ministry of Pensions to make a case for Bertram Blight to receive a higher rate of wound pension in 1921, his injury being described as ‘equivalent to loss of limb’.

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Back to Devon

After being discharged to home in the autumn of 1920, Bertram returned to PLYMOUTH, where the Lloyds bank, the company which had taken over City and Counties bank, offered him his job back. It is whilst walking on Plymouth Hoe that he met Margery Stroud, who was there with friends. They warned her that Bertram, who was known to be disfigured, was approaching. Far from being shocked at his appearance, she got to know him and in 1926, Bertram and Margery got married. They moved to TOTNES, in ‘THE SHANTY’ ON STATION ROAD, where their two sons Alan (1928) and Gerald (1931) were born.

In the 1930s Bertram was transferred to the Ashburton branch of the Lloyds and when he became the bank manager, his family moved to ASHBURTON to live above the bank. Bertram was a respected member of Ashburton community, he occasionally played the organ in the parish church and served as Honorary Treasurer of the Royal British Legion and of the Ashburton Community Hospital. He was also involved in the rebuilding of Buckfast Abbey.

Bertram only retired when his health deteriorated. He died in TORQUAY in 1952 and was survived by his wife Margery, who passed away in 1989. His children Alan and Gerald joined respectively the Royal Navy and the Army. Bertram passed away before his three grandchildren were born, but he is fondly remembered by all who knew him.

The treatment of facially injured soldiers in France

Historians estimate that between 11 and 14% of all wounded French soldiers were injured in the face, and that around 15,000 remained severely disfigured. French combatants and doctors faced similar challenges as their Allied counterparts, however a unique organisation was born out of this conflict in France.

Treating wounded soldiers

Specialised maxillo-facial units opened to treat facially injured combatants, first in Paris and Lyon, then throughout the whole French territory. Surgeons exchanged their experiences via medical journals. Inter-Allied conferences and visits from foreign doctors helped spread innovations internationally. The surgeon Harold Gillies worked with dentist Auguste Charles Valadier and observed the work of surgeon Hippolyte Morestin at the Val-de-Grâce hospital, in Paris. This hospital was one of the pioneering centres in reconstructive surgery and the records show that a small number of facially injured women were also treated there. One of the young Parisian women who volunteered to work there during the war noted the joyous atmosphere that reigned in the ‘No 5 Droolers’, as this service became known. She also mentions that young women like her were sent to these wards in priority, as the hospital authorities thought that they were less likely to fall in love with facially injured patients than with any other wounded combatants. The work of Suzanne Noël, then a medical student but who went on to become a famous plastic surgeon, is also worth noting.

A public presence

French combatants benefited from advances in reconstructive surgery, and also from the work of sculptor Anna Coleman Ladd and her colleagues at the American Red Cross Portrait Masks Studio, Paris. There the
men were fitted with masks that concealed their wounds. If they effectively concealed their damaged faces, the masks however failed to convey the wearer’s emotions and were quite uncomfortable to wear. Many French disfigured men therefore chose to wear a piece of cloth to cover their scars, or to leave their faces uncovered. This did not prevent them from appearing in public and in 1919, the French Prime Minister Georges Clemenceau invited five facially wounded patients from the Val-de-Grâce hospital to attend the signing ceremony of the Versailles Peace Treaty. A group of them also marched down the Champs-Elysées during the Victory March on 14 July 1919. Disfigured veterans were thus present at public events.

The Association des Gueules Cassées [‘Union of Smashed-up Faces’]

Once the war ended, however, many of them were left to look after themselves without further help from the state and the army. A few of them gathered and founded an organisation, which they called Union des Blessés de la Face – Association des Gueules Cassées. They claimed the name ‘Gueules Cassées’ [smashed-up faces] for themselves and encouraged the other disfigured combatants to join them and proudly bear their scars. Their group, which numbered around 8,000 members in the 1930s, worked to improve the material circumstances of facially injured combatants at the same time as it offered them and their families a support network.

Painted metal prosthesis attributed to Anna Coleman Ladd, Bapras archive (RCS)

Anna Coleman Watts Ladd (1978 – 1939) was born in Philadelphia US and educated in Europe where she studied sculpture in Paris and Rome. Already well regarded for her portraiture, in late 1917 Ladd founded the American Red Cross Studio for Portrait Masks to provide cosmetic masks for the men who had been badly disfigured during the war. ‘There, she worked with French sculptors Robert Wlérick and Jane Poupelet to create new features for the men who had lost theirs, her hard work earning her the Légion d’Honneur.

Film footage Anna Coleman Ladd in her studio in Paris, Smithsonian Institute

After surgery could do nothing more to help the appearance and functioning of the badly injured faces, the soldiers would come to Ladd’s studio to have a cast made of their face and their features sculpted onto clay. This form was then used to construct the prosthetic piece from extremely thin galvanized copper. The metal was then painted to resemble the recipient’s skin and the prosthesis was fixed with strings or eyeglasses for retention, much like the prosthetics created by Francis Derwent Wood in the Tin Noses Shop.

The Tin Noses Shop

Give us golden masks, eyebrows and eyelids
Hammered out of gold, and Schliemann claiming
’I have gazed on the face of Agamemnon.’

Michael Longley, 2014

Art influences surgery, surgery influences art

Plastic surgeon Fred Albee, who worked on the Western Front during the First World War, noted that successful plastic surgeons ‘must combine mechanical dexterity with artistic feeling for the desired cosmetic
result'. Surgeons sought primarily to restore facial functions so that soldiers could return to the front, but were also aware of the importance of their patients’ appearance, especially when it came to their future prospects.

Artistic practice fed surgical practice, with practitioners such as Gillies drawing sketches in preparation for operations and working with sculptors and painters. One of these, Henry Tonks, produced a series of documentary pastel drawings recording the progress of plastic reconstruction. Artists were also involved in the very process of remaking features with, in Gillies words, ‘the reconstruction of features on the casts as a preliminary to surgical reconstruction’. The masks and prosthetics made by sculptors Francis Derwent Wood and Anna Coleman Ladd provided disfigured patients with temporary or permanent covers, should the men want to go out during treatment or if their appearance was not sufficiently improved by surgery.

Images: Henry Tonks pastels, RCS collection

As art informed surgery in the First World War, then the reconfiguration of the face through the destructive power of the war and the reconstructive efforts of the surgeons also exerted a long-lasting influence upon artists.

Although in Europe artists such as Otto Dix and George Grosz responded directly to the disfigurement, no analogous approach is seen in British art of the same period. It was as though the injured face produced not expression but silence in art. During the war, visual depictions of wounding were extremely rare and art in the aftermath tended to embrace landscape and abstraction. The paintings of Wyndham Lewis, for example, avoid depiction of the dead and disfigured, yet the inhuman features of his almost mechanical figures are imbued with the violence done to the face during the war. It is, arguably, only in the last decade of the twentieth century and in the first decade of the twenty-first century that art has come to terms with the facial wounds of First World War. A generation of artists active in Britain and France has reassessed the problem of expression posed by the injured face, revisiting historical sources in new ways and instituting new collaborations which straddle the fields of medicine and art.

**Henry Tonks (1862-1937) Pastels**, Cambridge Military Hospital in Aldershot, 1917 -1925 Queen’s Hospital in Sidcup, Kent, (RCS) collection

The battle of the Somme in 1916 caused a huge rise in the numbers of soldiers with facial injury admitted to the Cambridge Military Hospital and later to Queen’s Hospital in Sidcup where Harold Gillies was pioneering facial reconstructive techniques. Qualified in both medicine and art, Henry Tonks, later appointed Professor at the Slade School of Fine Art, was invited by Gillies to sketch diagrams and pastels of the soldiers before and after surgery, recording the procedures and the soldiers advancing recovery. Not all treatment was successful as for example in the case of Henry Ralph Lumley who died 3 weeks after his last operation but the pastels were considered most effective for the training of medical officers and many of the diagrams were reproduced in Gillies’ text book *’Plastic Surgery of the Face’*.

**Tonks pastels - individual soldiers as in exhibition**

- Private Harold Burbridge
  Henry Tonks 1916 and 1917, pastel on paper, 29 x 21cm
Age 37
Gunshot wound to the chin October 1916
Four operations by Harold Gillies
Discharged May 1918

- Private Edward Moss
  Henry Tonks 1917, diagrams, ink on paper
  Henry Tonks 1918, pastel on paper, 27 x 21 cm
  Age 34
  Gunshot wound to the face, losing eyes, half his nose, bones of the upper jaw and most of his palate
  Five operations by Harold Gillies
  Discharged 1920 with external facial prosthesis

- Private Walter Ashworth
  Henry Tonks 1916, pastel on paper, 27 x 21 cm
  Henry Tonks 1916, diagram ink on paper
  Age 23
  Gunshot wound to mouth and fractured lower jawbone
  Two operations by Harold Gillies, one operation by J L Aymard and Francis Sprawson
  Discharged 1917 with upper and lower dentures, allowing him to eat.

- Second Lieutenant Henry Lumley
  Henry Tonks 1917, pastel on paper, 26 x 18 cm
  Age 24
  Petrol burns to face, hands and legs
  After several attempts with skin grafts and new treatment exposing the skin to ultraviolet rays, Henry Lumley died of his injuries on 11 March 1918, three weeks after his final operation.

- Unknown Serviceman
  Henry Tonks 1917, pastel on paper, 28 x 20 cm

- Private Edward (Herbert Arthur) Palmer
  Henry Tonks 1917, pastel on paper, 28 x 21 cm
  Age 23
  Loss of nose, upper lip and bones of the upper jaw
  Harold Gillies describes the case in his textbook ‘Surgery of the Face’, as the nose reconstruction being difficult and the team had to overcome difficulties administering anaesthetics because of the location of the injury, which led to new techniques in anaesthesia. (see medical records)

- Patient Wood
  Henry Tonks between 1916-1918, pastel on paper
  Detail of a facial reconstructive procedure
The sculptors’ contribution

The collaboration between surgeons and artists contributed to rebuild the faces destroyed by the war. It lastingly impacted not only individuals, but also surgical and artistic practice as a whole.

The sculptors’ role in surgical treatment

In his book on plastic surgery, the surgeon Harold Gillies praised the work of sculptor Lieutenant Edwards. He wrote:

Lieutenant J. Edwards has not only been responsible for the preparation of routine plaster-cast records, but for a very important part of our work, the reconstruction of features on the casts as a preliminary to surgical reconstruction. Herein, guided by the surgeon in the matter of surgical possibilities, he strives, sometimes for the ideal, more often for the best possible surgical compromise; and his work calls for constructive imagination of a very high order. Where chances of surgical repair are not evident he co-operates with Captain Fry in the provision of as perfect a mechanical restoration as possible.

The contribution of sculptors was indeed not limited to producing records of surgical procedures, instead they played an active part in the preparation and execution of the operations. Edwards was not the only sculptor to put his skills to the service of wounded combatants, so did other sculptors in Great Britain and France.

Taking over from the surgeons

Another important facet of the sculptors’ contribution is their mask-making practice. Anna Coleman Ladd in Paris and Francis Derwent Wood in London produced facial masks and epitheses aimed to cover the disfigured combatants’ faces. At the 3rd London General Hospital, Wandsworth, London, Wood set up the Masks for Facial Disfigurement Department, which became known as the ‘Tin Noses Shop’. He insisted that he only started work when all the surgical options had been explored. His goal in making masks was not to relieve pain or restore function, but to equip the disfigured man to face the world. An enthusiastic description of Wood’s practice by an observer praises the quality of the masks made and even suggests that some men fitted with these attachments looked better than before they were injured. The promotion of Wood to the rank of Captain testifies to the recognition he was given by the military authorities.

In Paris, Ladd worked not in a hospital, but in an artist’s studio. It was located in a sunny courtyard where fresh flowers were growing; the atmosphere was very different from the hospital ward where the injured men had spent so long. There, she worked with two French sculptors: Robert Wlérick and Jeanne Poupelet. Together they made similar masks as the ones Wood was making and the success of their creations was praised in the newspapers. Despite these very positive views on facial masks, many disfigured men soon stopped wearing them. The masks were heavy, hot and soon deteriorated; pollution and weather altered their colour so they no longer matched the man’s natural skin colour. Most importantly, the masks’ fixed expression failed to convey the men’s emotions. Their immovability could appear more frightening to the onlooker than the damaged faces or the piece of cloth that some disfigured men chose to wear to conceal their wounds. Masks were thus not widely used in the long term, but they were sometimes used as a temporary cover between operations, in the first few months following the man’s discharge or occasionally on outings.

Life masks or plaster casts are a modern copy of the originals made in Queen Mary’s Hospital, Sidcup by Lieutenant John Edwards between 1917 – 1920 (RCS). Original collection in the Royal Australian College of Surgeons

Aiding the surgeons in a better understanding of the injuries, the skilled practice of mask making was an essential tool in advancing the techniques of facial reconstruction. Many of these soldiers are recorded in the medical records of surgeon Harold Gillies and represent a clear depiction of the complexity of the injuries which the surgeons tried to repair in an age before Penicillin was discovered.
Private G Wallace  
Age 26  
Injury: Gunshot wound to the chin, fractured mandible

Private T James  
Age 47  
Injury: Wounded face

Private G Nesbitt  
Age: 23  
Injury: Gunshot wound to the nose and jaw

Private M McWilliams  
Age: unknown  
Injury: unknown

Private E.L Winter  
Age: 26  
Injury: Gunshot wound to the chin, fractured mandible

Private F Hamlett  
Age: unknown  
Injury: unknown, before and with skin flap
Dr Albéric Pont (Bagnols-sur-Cèze, Gard, 24 February 1870 – Lyon, 2 February 1960)

Pont’s training and career took place in Lyon, an important centre for dental medicine in France. He began his medical studies in 1888 and specialised in odontology and stomatology on the advice of Dr Claude Martin, a reputed physician and dentist from Lyon and president of the Association des dentistes du Rhône. Martin became his thesis supervisor, and Pont completed and published his thesis in 1899 (De la cataphorèse en art dentaire). Later, before and during the First World War, Pont borrowed and improved upon many of the apparatus and techniques invented by Claude Martin in the field of dental medicine.

In 1899, Pont set himself up as an odontologist and stomatologist in Lyon, founding the Dental School and becoming its director. A year later he created the Odontological Society, and soon became as renowned as his former teacher, with particular expertise in fractures repair, braces, dentures and prostheses. He invented an orthodontic index (later named ‘Pont’s index’) in 1909, created a medical journal, La Province dentaire, in 1910, and between 1912 and 1913 brought to France France a new kind of facial prosthesis made of soft plastic paste invented by the Viennese Carl Henning, used in particular for reconstruction of the nose. With an assistant, Dr Duplant, he developed a new formula for this plastic paste. This method was considered to be better than the earlier prostheses in ceramic or vulcanite (a type of heavy plastic), because of its lightness, its adaptability, its ease of use and its aesthetic results. During the War, Pont often used this method on the Gueules Cassées to reconstruct noses and parts of the cheeks, and thus gave back a face to soldiers suffering from major injuries.

Because of his expertise and reputation, Pont was named by ministerial circular as-director of the centre of stomatology, maxillofacial prosthetics and facial reconstruction in December 1914, two months after he had become a nurse at the Perrache Station in Lyon and had created a clinic for facial injuries in the Dental School. During the First World War, more than 7000 injured soldiers were treated in this centre that counted 850 hospital beds in 1917.

Pont’s skills were very valuable in emergency situations during the First World War. His work with the facially injured servicemen was of three kinds. Firstly it consisted of immobilising and stabilising fractures with orthodontic appliances, to straighten teeth, jaws and noses, and to dilate the scars and the soft-tissues in order to prepare surgical reconstructions and the fitting of an orthodontic prosthesis. The immobilisation of fractures was urgent in order to avoid poor consolidations, facial deformations and functional defects (such as the incapacity to speak or eat), and in 1917 Pont invented in 1917 « Dr Pont’s emergency kit » with orthodontic appliances and medical supplies that could be used on the frontline. The second element was the surgical reconstruction of the face (lips, nose, cheeks) through transplants (autoplasties: reparation of the injured tissues of the face by tissues taken from another part of the patient's face or body). The third part was prosthetic, both for functional restoration (especially for the jaws, with orthodontic appliances and dentures) and aesthetic reconstruction (particularly for the nose, using the plastic paste).

Pont received recognition for his work during and after the War. In 1917 the French government made him “Chevalier de la Légion d’Honneur”. In 1919, he was officer in the Inter-Allied Conference on the After-care of Disabled Men in Roma; in 1926, he was one of the honorary presidents of the First International Orthodontic Congress in New York, and in 1936, he was the President of the Stomatologic Congress in Paris. He received an honorary distinction for his whole career in 1928, the « Médaille commémorative de ses vingt-cinq années de directeur de l’Ecole Dentaire de Lyon », became administrator for the civilian hospices of Lyon in 1937 and president of the directorial board of the civilian hospices of Lyon in 1950.
Nonetheless Pont returned after the War to stomatology and odontology and never became a maxillofacial surgeon despite his experience in treating major facial injuries, for several reasons. Firstly because his success as a dentist and his middle-class clientele guaranteed him a comfortable income, but also because he never really became a surgeon and remained a stomatologist, even during the War. Indeed, the surgical procedures were often performed by his assistants and not him, he did not innovate in the field of facial surgery, and his most renowned invention, « Dr Pont’s plastic paste », was quickly abandoned in favour of surgical reconstruction of the face (especially rhinoplasty). The prostheses were not satisfactory from a medical point of view, and the injured soldiers perceived the modelling of their nose and cheeks with a paste that deteriorated in a few days as a further humiliation.

Today the work of Pont is known to us through his writings, his medical drawings, but also-through his personal archives: mouldings and plaster casts of injured faces, albums with photographs of the soldiers before and after surgical and dental procedures, and pictures of the orthodontic and prosthetic apparatus.

**As art informed surgery in the First World War**, then the reconfiguration of the face through the destructive power of the war and the reconstructive efforts of the surgeons also exerted a long-lasting influence upon artists.

None saw their spirits' shadow shake the grass,
Or stood aside for the half used life to pass
Out of those doomed nostrils and the doomed mouth,
When the swift iron burning bee
Drained the wild honey of their youth.

*Isaac Rosenberg, 1917, from Dead Man's Dump*

Although in Europe artists such as Otto Dix and George Grosz responded directly to the disfigurement, no analogous approach is seen in British art of the same period. It was as though the injured face produced not expression but silence in art. During the war, visual depictions of wounding were extremely rare and art in the aftermath tended to embrace landscape and abstraction. The paintings of Wyndham Lewis, for example, avoid depiction of the dead and disfigured, yet the inhuman features of his almost mechanical figures are imbued with the violence done to the face during the war. It is, arguably, only in the last decade of the twentieth century and in the first decade of the twenty-first century that art has come to terms with the facial wounds of First World War. A generation of artists active in Britain and France has reassessed the problem of expression posed by the injured face, revisiting historical sources in new ways and instituting new collaborations which straddle the fields of medicine and art.
George Grosz 1893 – 1959, Das Ende (the end) from the Ecce Homo series (1917), offset lithograph 1923

George Grosz was born in Berlin and studied at the Academy of fine Arts in Dresden. He volunteered for service in the German army but on his way to the front became ill and was discharged with the understanding that he might be recalled to the front. During the battle of the Somme in which around 1 million British, French and German soldiers died, Georg Gross would change his name to George Grosz as a mark of his contempt for German warmongering. In his own words ‘utterly disillusioned by the vile excesses of German society’, it was in this period that he began the sketches for Ecce Homo. Grosz paints a portrait of German society so brutal that it goes beyond caricature or satire. With minimal brush strokes the artist demonstrates the violence beneath the surface of ‘normality’, and leads the viewer to make a choice between identification with the figures in the image or reflection on the moral conduct of society which is prevalent at this moment in time. In 1917 Grosz is drafted back to the front and after a break-down only escaped execution for desertion by being sent to an asylum for the insane. Twenty years later the series was condemned by Hitler as ‘degenerate art’ but Grosz managed to escape to the United States just in time to avoid certain arrest.

Otto Dix 1891 – 1969, Transplantation 1924 (from portfolio ‘Der Krieg’) Etching and aquatint

Born in Thüringen, Germany, Dix was exposed to the arts from an early age through his father, an iron foundry worker, and his mother, a seamstress with a love for poetry. At age 18, he was accepted into the Academy of Applied Arts in Dresden where he was taught by the printmaker Max Klinger and encountered the texts of philosopher and poet Friedrich Nietzsche. Nietzsche’s pamphlet Zarathustra accompanied Dix in his uniform pocket from the outbreak of World War One at which point he was quick to volunteer for the German army. Soon profoundly affected by the war, Dix chronicled his experience in the form of over 600 raw, uncensored sketches during his service on the frontline. This visual diary was subsequently the source for the series ‘Der Krieg’ which he produced on his return from the Western Front at the end of the war, and which was first published in 1924. The portfolio contains 50 etchings and aquatints with imagery of the violent trauma inflicted on persons and landscape alike, rarely depicting living figures. Contrary to British war artists and accounting for the lasting, suggestive power of this portfolio, Transplantation highlights Dix’s relentless intention to confront the viewer with a perspective which does not allow for comforting distance or for the gaze to be averted from the brutalised face of war.

Wyndham Lewis 1882 – 1957

Combat No 3 1914, Pen and ink, chalk, V&A collection

Moonlight 1914, Pen and ink, chalk, V&A collection

Wyndham Lewis was born in Canada to an English mother and American father and at the age of 11 was send to preparatory schools in England. Lewis attended the Slade School of Art for a short while where he was taught by Henry Tonks, but expelled for bad behaviour when he was 19. He decided to travel around Europe and explore the works of the Goya and Velasquez in Madrid and Paris. On his return to London, Lewis was instrumental in the launch of the Vorticist group with his extensive contribution to the publication ‘Blast’ in March 1914. In this context, with the idea of a de- humanised and heavily mechanised future already in the air, Lewis makes barely human figures blend in and out of a brutal, inorganic landscape. He speaks of the industrial violence fast approaching and in which he would soon be engulfed. In 1916 Lewis volunteered as a gunner and studies trigonometry and ballistics at the Artillery Cadet School in Exeter. He was send to the Franco –Belgium border and remained in France with the Royal Garrison Artillery until the end of the war.
Contemporary responses to WWI facial injury

A generation of artists active in Britain and France since the 1990s have produced some extraordinary visual responses to First World War facial injury. The majority take as their starting point the remarkable archival holdings of institutions such as the Royal College of Surgeons of England and l'Hôpital Val de Grâce, Paris.

Much of their work is inspired by recent innovations in facial reconstructive surgery that have focused on both the face’s aesthetic form and its expressive function. As a result, the question of just what facial expression is, and what it can express, has come to the fore. For Paddy Hartley, this results in a series of ‘uniform sculptures’ in which the face remains an enigma, or a space for the projection of narratives which must be gleaned elsewhere. In other artists’ work, the face is fragmented through collage (Apallec) or mediated through drawing (Manigaud).

Several of the artists shown here collaborate with scientists and surgeons, recalling the early twentieth-century collaboration of Tonks and Gillies. Mark Gilbert critically examines the form of the portrait in the course of his collaboration with the surgeon Iain Hutchison, while Hartley collaborates with materials scientist Ian Thompson in the production of bioglass implants. Eleanor Crook combines the teaching of drawing and anatomy with the creation of anatomical waxworks which straddle the divide between medicine and art.

**Eric Manigaud** (1971 - ) *Gueule cassée no 3* 2006, pencil and graphite on paper, British soldier, a patient and later driver of Harold Gillies

French artist Eric Manigaud concerns himself with images of catastrophic events which affect society’s collective memory. He attempts to uncover the power of the photographed image beyond the material reality of that photograph, and so, on a monumental scale, is projecting an emotional perception of his own response onto this same image. In his own words: ‘I don’t consider that I am reproducing a photograph, but in fact a projection, with all the likely modifications that this entails. Under these conditions the image becomes diaphanous, or spectral, because it has lost its materiality.’ For example, the translucency of the emerging image does not soften the apparent violation that was inflicted upon this face and person, but contrary to hyper-realistic painting, Manigaud introduces an almost tangible expansion of time and momentary emotional realism in layers upon layers of pencil marks. He encompasses what he imagines this soldier was subjected to at the very instant the photograph was taken and adds cumulatively his own thoughts and subconscious memory onto the image without changing the subject of the instantaneous photograph. Crucially, the artist is offering us the possibility to experience a sense of what lingers beyond materiality and might therefore reposition our own perception of the trauma in the image.
Eleanor Crook

‘And the band played on’ 2013, life-size in wax and mixed material a military band of historic plastic surgery from the Crimean war until now.

The sculpture presents a military band of wounded soldiers, subjects of reconstructive plastic surgery, dating from 1855 to the present day. They represent survivors of the Crimean War, the First World War, the Second World War and the War in Afghanistan. The individuals depicted are fictional but the wounds and surgical procedures are documentary and real, researched from medical archival sources.

1. Cavalry Officer of the Yorkshire Hussars at the time of the Crimean War, 1853 – 1856. The facial injury is typical of those caused by musket balls, large calibre metal shot which smashed through skin, muscle and bone leaving large wounds. This soldier has lost much of his mandible, teeth and the muscles of his cheeks and chin. Anaesthetics were available, if crude, which meant that surgeons could take some time over sewing (suturing) the loose flaps of shattered skin together, allowing the lower jaw to be reassembled from muscle tissue, although as it healed the opening of the mouth would shrink with scars, making speech, eating and drinking difficult.

2. British infantry captain of the First World War 1914 – 1918. The facial injury is typical of those received in trench warfare, which left the head and neck vulnerable to shots and to shrapnel from explosions. The bony and cartilaginous parts of the nose have been cut away by flying shrapnel. The blast has also burst the eardrums of the officer and caused paralysing “shell shock”. The surgical procedure, a forehead flap nasal reconstruction, is typical of those developed and improved by the innovative British plastic surgeon Sir Harold Gillies during his intensive years working on facial and other plastic surgery for the wounded of the First World War. A strip of skin containing a blood supply is raised from the forehead and a strip of rib bone (for the bridge of the nose) and two short stubs of rib cartilage (for the nasal alae) are grafted into it. The shape is swung down and sewn in place, together with an inner lining, whilst maintaining the blood supply, then some weeks later the long strip of forehead skin is detached and replaced after the new nose has grown its own blood supply.

3. Wounded soldier of the First World War 1914 – 18 in uniform worn by British forces whilst in medical facilities during and after the First World War, known popularly as Hospital Blues. These were unpopular with the men as they were shared with psychiatric patients. The facial injury is a loss of lip, cheek and bony eye socket, loss of the right eye and lacerations. The surgery shown is a composite of two operations performed and documented by Sir Harold Gillies, firstly a transposed skin flap reconstruction, whose stitches are protected from bursting by the use of buttons to spread the tension; and secondly a tubed pedicle on the neck where skin for transplantation is prepared by being rolled into a tube to train a new blood supply for the graft. The flat
end of the pedicle will be raised to cover the loss to the upper lip and cheek when the blood supply within it is ready. This technique is still in use today and was developed by Gillies as early as 1916. Later a skin flap will be sewn in place to support a glass eye in the empty eye socket.

4. British Flight Lieutenant from the Royal Air Force, Second World War 1939-45. This figure shows injuries and surgery typically received by pilots during World War 2, where the petrol engine of a fighter plane was prone to catch fire on impact or by being shot, which would douse a trapped airman in burning fuel. Much of the body, neck and hair were protected by clothing and leather flying cap but the face and hands were left vulnerable. Many received their burns pulling comrades from wreckage, or even from touching the metal doors of a plane at altitude and having frostbite from contact with freezing metal. Sir Archibald McIndoe was the charismatic surgeon who cared for many of them at East Grinstead Hospital, where he developed surgical techniques and emphasized social and psychological rehabilitation with inventive skill and a hearty irreverent enthusiasm. This figure shows a tubed pedicle reconstruction of the nose, restoring undamaged skin to cover the contracting scars caused by the burn. The good fellowship of McIndoe’s patients led to their forming a club known as his “Guinea Pigs", in affectionate acknowledgement of the experimental nature of his surgical innovations.


The surgery shown is a full facial transplant and a double hand transplant, with the face and hands of a deceased tissue donor. This type of surgery is still in its early days but is available for the victims of catastrophic injury. Improved battlefield medicine means the wounded now can survive injuries that would have proven fatal until comparatively recently and plastic and reconstructive surgeons are called upon to solve increasingly complex surgical challenges. The transplantation of whole faces including even sections of skull has recently been pioneered both in civilian and military contexts and offers an improved quality of life for survivors of severe facial trauma. The sculpture shows a recent transplant which has yet to gain muscular strength and develop nerves, feelings and control, but these will improve as the months go by, as will use of the new hands. Improvements in anti-rejection medication are giving hope to such patients that the side effects of their drug regime will in future be less severe. The extraordinary gift of a new face, by the generosity of a donor and their bereaved family, and the skill of a reconstructive surgeon in microsurgery, can mean a viable future for a person whose facial injury made their life almost intolerable.

Eleanor Crook is a British artist who trained in sculpture at Central St Martins and the Royal Academy and makes figures and effigies in wax, carved wood and lifelike media. She has also made a special study of anatomy and has sculpted anatomical and pathological waxworks for the Gordon Museum of Pathology at Guy’s Hospital, London's Science Museum, and the Royal College of Surgeons of England. She exhibits internationally in both fine art and science museum contexts. She learned the technique of forensic facial reconstruction modelling from Richard Neave and has demonstrated and taught this to artists, forensic anthropology students, law enforcement officers and plastic surgeons as well as incorporating this practice in her own sculpted people.

Following a lifelong interest in Northern Renaissance woodcarving, and influenced by the experience of dissecting in order to learn anatomy, she studied limewood carving at the Giesler-Moroder wood carving school in the Austrian Tyrol. In the interest of making figures more lifelike than the living, using a generous grant from the Wellcome Trust she developed the incorporation of electronic animatronics systems into the sculptures so that her moribund and macabre creations now can twitch and mutter.

Eleanor is artist in residence at the Gordon Museum of Pathology, a member of the Medical Artists’ Association, runs a course in Anatomy drawing at the Royal College of Art and lectures on the M. A. Art & Science course at Central St Martins School of Art in London.
PADDY HARTLEY ARTIST IN RESIDENCE


Plymouth-born Warrant Officer Water Ernest O’Neil Yeo was amongst the early patients who received life-changing, pioneering facial surgery at the hands of surgeon Sir Harold Gillies. Having suffered very serious facial burns during the Battle Of Jutland, and subsequently undergoing surgery which, by Gillies’ high standards, had its flaws, family man Walter subsequently lived a remarkably public and well-adjusted life with his wife and children. In later years Walter became a builder of crossword puzzles and his life story is portrayed here as a freeform crossword puzzle. Naval signaling flags of the type used to communicate over a distance are used to relay his story. Each character represents a character from the alphabet or numeral from signalling flag codes used by the Royal Navy during WWI. The fabric forming the flags is treated in such a way as to add context to the meaning of each word and its significance in Walter’s story. Burned edges relate to battle and injury; turned flaps of fabric form the flag designs for those describing surgery and skin grafting. Black-bound edges refer to negative experiences and death.

**Uniforms**


 Pt 1. Uniform. Depicts events leading up to and including the burns injury received by Walter Yeo.

 Pt 2. Hospital Gown. Elaborates on the surgery Walter underwent and reflects upon the surgery carried out by Gillies.

Paddy Hartley was born in Dewsbury, West Yorkshire and is a graduate of the University of Wales Institute, Cardiff with a Master’s Degree in Sculpture and Ceramics. He is currently based in London’s East End and runs his practice from his studio base in London Bridge.

The origins of Hartley’s work on the face lie in the facial surgery he witnessed at Guy’s hospital as part of a collaboration with Dr Ian Thompson, and in the archival research he subsequently undertook in the Gillies Archives. Those archives, now housed at the Royal College of Surgeons of England, bring together the
medical records of many of the men on whom Gillies operated, and constitute a vital resource in understanding the medical history of the period and so bring about a virtual dialogue between the medical records and the visual responses to the facial injuries of WWI.

Hartley’s work has been exhibited and published widely and displayed in the permanent collections of a number of museums in the UK and USA including the Wellcome Collection and The Museum of Arts and Design New York in addition to presenting at The Victoria & Albert Museum and Science Museum London. Hartley’s work is documented and discussed in *Paddy Hartley: of Faces and Facades* (Black Dog: 2015), which brings together previously unpublished texts, drawings and photographs documenting Hartley’s creative practice and the history of the facially injured soldiers of the First World War.

**René Apallec**

Les Gueules Cassées 2006 – 2013, sutured collage, magazine paper from original French newspaper *L’Illustration* 1914 – 1921

René Apallec’s work draws its inspiration from the medium of illustration, and from the depiction of military officers in periodicals such as *L’Illustration*. In constructing collages of facially injured soldiers based on drawings such as these, Apallec asks searching questions of the public documentation of conflict, and graphically reconfigures documentary images of veterans. *L’Illustration* itself plays a notable role in the visual history of the early twentieth century. It was known for its pioneering use of photographs, and is reputed to have been the first mass-circulation newspaper in France to publish a colour photograph (1907). Its illustrated coverage of WWI gives rise to the comment in Apallec’s fictionalised biography that ‘the war looks beautiful in the newspapers and magazines’, and suggests a dialogue with British publications of the period such as *The War Illustrated*.

**Inventing a persona**, René Apallec (nee Hervé LaPlace) imagines himself as the young soldier René Apallec eager to serve and following the heroic actions of his fellow countrymen just as depicted in the magazines that he collects. Apallec was declared unfit for service but, by assuming the identity of another soldier less eager to get to the front, he ends up in the operating theatres behind the front line. Noted for his skill, he finds himself assisting plastic surgeons in their attempts to repair the faces of the traumatised soldiers being brought to the makeshift triage centres en masse.

A stack of the illustrated newspaper journal *L’Illustration* (1843-1944) found coincidentally in the house where the artist rents a studio flat is the source for Apallec’s Gueules Cassées collage series. The publication was known for its pioneering use of photographs, and is reputed to have been both the first mass-circulation newspaper to publish a photograph (1891) and is thought to be the first French newspaper to publish a colour photograph (1907). Throughout the war years the newspaper printed colour photographs of specially commissioned portrait paintings of the Generals and prominent war leaders who were the topic and the celebrities of the day.
With a deliberate physical gesture but surgical precision, Apallec cuts into the fancily portrayed portraits of the Generals which he extracts from the original magazines. He then re-assembles the faces with delicate sutures to reveal newly juxtaposed and distorted faces of the same Generals, effectively reinterpreting the face of war. Despite the suggestion of horrific injury the faces have an air of defiant pride; other interpretations become comical caricatures, bluntly suggesting stupidity and ignorance. Others suggest shattered stoicism and in the case of a rare relief the expressed pain becomes excruciating. Symbolic of the inhumane demands of a war machine, each face portrays the conflict of an emotional state in the scramble for self-preservation.

By re-facing the heroic images with the grimaces he revives the memory and haunting reality of the consequences of the actions of these men. Apallec refers to the specifically frequent facial injuries inflicted by modern warfare, which spurred the frenzied attempts of facial reconstructive surgeons to pioneer restoration of the face, as a symbol for hope and return to normality. Mirroring the huge numbers of killed and injured soldiers, the artist produces close to a hundred Gueules Cassées collages exclusively from portraits of Military leaders, questioning their wisdom in a most subtle manner. As it was well noted by the common soldier going over the trenches, it was not the generals’ faces that normally got shot to pieces.

René Apallec’s concern with the face as a symbol for the ‘face of war’ is no exception or coincidence. All of his great-grandfathers died in the war. He mentions his present concerns about hatred, racism and the imbalance of power. In his own words, his art is his way to ask questions to himself and others, but also to “honour all of the men who died or were injured physically or mentally by the slaughter” and to express his deep respect for his forefathers, Les Poilus (the hairy soldiers) and Les Tirailleurs Sénégalais (Senegalese Riflemen from West Africa).

The subtle intelligence and not unlike the anti-war comics C'était la guerre des tranchées (1993) of his ‘contemporary’ idol Jaques Tardi, the technique of combining myth, with reality, with implied critique and with humour, does not fail to evoke an emotional, questioning and lasting response to these delicate collages.

The Generals

No 144 GENERAL SIR DOUGLAS HAIG

General Sir Douglas Haig (1861 -1928), British Commander on the Western Front for most of World War One. Original portrait painted by French artist Lucien Jonas (1880 – 1947), the portrait was subsequently published in the French newspaper magazine L'Illustration.
No 88 GENERAL HENRI GOURARD

General Henri Gourard (1867 – 1946) Leader of the French Fourth Army towards the end of World War One (leader of the French Expeditionary Corps). Gourard lost his arm in battle. Original portrait painted in 1919 by Marcel Baschet (1862 – 1941) French portrait painter. The image was subsequently reproduced in the French newspaper magazine *L'Illustration* around 1919. His brother René Baschet was the editor of the magazine.

No 76 GENERAL VICTOR D'URBAL


No 83 GENERAL JOSEPH MAUNOURY

General Joseph Manoury (1847 – 1943), Commander of the 6th Army 1914 in Amiens. Portrait painter's signature on reproduction not identified, subsequently published in the French newspaper magazine *L'Illustration*. Covered by the hat, the original portrait suggests barely visible bandages over is right eye and around the back of the head. It is thought that Maunoury was saved by the swift action of General De Villaret who also sustained a head injury in the same incident.
No 138 GENERAL GEORGES HUMBERT


No 142 GENERAL PAUL PAU


No 84 GENERAL LOUIS FRANCHET D’ESPÉREY


No 141 GENERAL PETER 1ST OF SERBIA

General Peter 1st of Serbia (1844 – 1921) King Peter I was proclaimed King of the Serbs, Croats and Slovenes in 1918. Original portrait French school, subsequently reproduced in the French newspaper magazine *L’Illustration* 1915.
No 79 GENERAL ETIENNE DE VILLARET

General De Villaret (1854 -1931) French Commander of the 14th Infantry Division 1914. Villaret received a penetrating wound to his forehead above the left eye but avoided cerebral complications and resumed command barely recovered a month later. General Mounoury was insured by the same bullet. Original portrait by French artist Lucien Jonas 1916, subsequently published in the French newspaper magazine L’Illustration.

No 90 PRINCE ALEXANDRE OF SERBIA


No 139 GENERAL AUGUST HIRSCHAUER

General August Hirsc...
No 68 GENERAL HENRY HORNE


No 137 GENERAL ARTHUR CURRIE


No 8 GENERAL JULIAN HEDWORTH BYNG

General Byng (1862 – 1935) British Army Officer, Commander of Canadian Corps at Vimy Ridge and as Commander of British 3rd Army. Original portrait by French artist Lucien Jonas 13 May 1917, Consequently reproduced in the French newspaper magazine *L’Illustration*.

No 125 Collage - Relief

General unknown, original portrait painter not identified
Scottish artist Mark Gilbert earned a BA in Fine Art from Glasgow School of Art in 1991. After ten years of studio practice, The Royal London Hospital, England offered him a post as artist in residence. There he worked in collaboration with maxillofacial surgeon, Professor Iain Hutchison and his patients within what was to become the Saving Faces project. Inspired by the collaboration between Harold Gillies and Henry Tonks during the First World War, Iain Hutchison had the notion that the act of being painted and the images themselves might help the patients come to terms with their experience of illness or the trauma of altered appearance. Initially, the artist feared that it was unlikely that those who took part would benefit, but his fears proved groundless. Indeed the more harrowing the image, the more acute the condition, the more the sitters seemed to benefit from the images. Evidently, the patients would use their portraits in their own individual ways to facilitate their recovery or to help them come to terms with their post-surgery appearance and feelings. The resulting exhibition and international tour led to Gilbert’s next research project and exhibition entitled, Here I am and Nowhere Else: Portraits of Care in the Medical Sciences Interdepartmental Area (MISA) program at the University of Nebraska Medical Centre where he recently completed his PhD. His studies continue to be focused in the interdisciplinary field of Art and Medicine.

The patient’s story: Roland S
Roland was the 51-year-old owner of a transport company. He lived in London with his wife Iris and had two sons and a daughter and five grandchildren. He liked to play golf. In 1999, Roland thought he had toothache and an abscess on his left upper jaw. It turned out that this swelling was in fact caused by a malignant cancer of his upper jaw and maxillary sinus (squamous cell carcinoma).

'It was rather urgent because it was spreading across the roof of my mouth. The surgeon cut around the nose and up right underneath the eye. He had to put a brace in under the eye so I wouldn't lose it. Obviously I lost my nostril.

When they asked me if I minded being painted I thought it would be good for me, and I thought it would be good for other people, to make them aware of what can be done. During the painting I used Mark like a doctor, he was getting all my little troubles. I’d tell him about things that weren’t right, then I’d get a phone call from one of the surgeons and it would all be sorted out. It was especially helpful with the radiotherapy. I had major problems with that and the mask I had to wear. I would tell Mark about the mask, how I could hardly breathe out of it and how it came right down my throat. You’re lying on your back and the machine starts up and you can feel a noise humming in your ears and you can taste burning flesh and then you get the smell. It was horrible. They gave me some tablets to calm me down. That happened every day for twenty minutes for six weeks. I dreaded it. I wanted Mark to paint me in the mask because I felt the mask was an important part of the process. When he did the painting I was standing up with the mask on and I could feel the tension rising again. When I look at that picture I say to myself, yeah, that’s how I used to feel, and it doesn’t bother me at all to look at it. I’ve got the mask at home. I couldn’t leave it at the hospital. My grandson plays with it. He thinks it’s lovely.'
FACE

Idomeneus takes perfect aim
And hits Erymas in the mouth
And the spear penetrates the brain
And splits the white bones, and the teeth
Blow out and from the eye-sockets
Blood squirts and open-mouthed he
Vomits blood from lips and nostrils
And death’s black cloud encloses him.

Homer gets no nearer than this
To the anonymous Tommy,
His human face blasted away.
What can surviving hands reach up
To touch? Tongue-stump? Soul-meat?
Homer’s ghost has nothing to say.

Michael Longley, 2014

Michael Longley

Michael Longley is a key figure in contemporary English-language poetry. He was born in Belfast in 1939 and educated at the Royal Belfast Academical Institution before reading classics at Trinity College, Dublin. He has published over 20 collections and has won the Whitbread Prize, the T S Eliot Prize, the Hawthornden Prize, the Irish Times Irish Literature Prize for Poetry and the Librex Montale Prize. He was made a C.B.E in 2010. Many of Longley poems are inspired by his father's military service in the London-Scottish regiment during the First World War. Through linking conflicts between past and present, and through its particular attention to Northern Ireland, Longley’s poetry explores complex questions arising from the legacy of violence. He and his wife Edna Longley, live and work in Belfast.

Michael Longley kindly endorsed the exhibition at the opening event with a reading of ‘Dead Man’s Dump’ by Isaac Rosenberg and with poems from his own collection.

The poems ‘The Tin Noses Shop’ and ‘Face’ have been published in Michael Longley’s most recent collection The Stairwell (2014 Cape Poetry)

Image: Michael Longley reading at the opening event, 16th January 2015

Photography: Matt Austin © 2015
Images: Simon Weston visiting the Faces of conflict exhibition
From left to right: Tom Calbury, Suzanne Steele, Marjorie Gehhardt, Cristina Burke-Trees, David Houston Jones
Photography: Matt Austin
Exhibition feedback

Press coverage (selection):

Visual Arts South West pick of the week 16th February

An exploration of the influence on artists and surgeons of the facial injuries suffered during the First World War. This exhibition brings together collections of objects and artworks from the last hundred years.

‘There have been exhibitions about the effect of surgical innovation and on art during the First World War before and the current WW1 centenary commemorations may have created an overkill (and we’re only a quarter of the way through!) but this is an extraordinary and well researched exhibition led by a team of academics from a number of disciplines at the University of Exeter. It differs from many of the previous exhibitions because it sets a unique context relating to the relationship between art and surgery of the time. The exhibition itself features historical artefacts, archives as well as works of art from all periods between 1914 and the present. The relationship between art and surgery begins with the fact that artists were used as model makers, as well as documenters of some of the extraordinary innovations.

‘It is argued that the relationship between art and surgery was driven at a time when there were huge developments in both, the former led by Sir Harold Gillies’ pioneering surgical work at the Queen’s Hospital, Sidcup. At the same time many significant artists have been included. The work on facial reparation led to a permanently changed understanding of the face.

‘The art works in the exhibition are from the whole of the hundred year period, and features a number of contemporary artists, including the 1914/2014 Artist in Residence, Paddy Hartley.’

Guest Editor Stephen Foster

Mid Devon Gazette
When surgeons needed artists

By Mid Devon Gazette  |  Posted: January 20, 2015

A new exhibition exploring how facial injuries suffered by soldiers during the First World War have influenced artists and surgeons opened at the Royal Albert Memorial Museum, Exeter, last weekend.

Faces of Conflict is a collaboration between Exeter University and Ramm, bringing together historical objects including surgical instruments and masks and works of art from artists such as Otto Dix, Wyndham Lewis, René Apallec and Paddy Hartley.

It is part of the European Union-funded project 1914FACES2014 led by Professor David Houston Jones from the University of Exeter and the renowned facial surgeon Professor Bernard Devauchelle from the Institut Faire Faces, who carried out the world’s first partial face transplant in 2005.

The exhibition demonstrates how surgeons worked with artists during and after the First World War, and stories of some of the facially injured soldiers from Devon will be told for the first time.

Professor Houston Jones, said: "Sculptors and artists became a vital part of the treatment of facially injured men. The masks and drawings they produced complemented the work of surgeons in crucial ways which are only now being fully understood."

Faces of Conflict, also looks at how artists' understandings of the face changed in the years following the First World War and, in particular, how artists have revisited the injured face in recent years.

Works by University of Exeter artist in residence Paddy Hartley will form part of the exhibition, including a uniform sculpture based on the life story of Plymouth sailor Walter Yeo. Yeo was badly burned at the battle of Jutland in WWI and Paddy's sculpture refers both to Yeo's wartime experiences and the pioneering facial surgery he underwent after returning home.

The Faces of Conflict exhibition is free-of-charge and runs from January 17 to April 4.

Exeter Daily

http://www.theexeterdaily.co.uk/whats-on/exhibitions/faces-conflict

The Faces of Conflict

New exhibition reveals the impact of the First World War on art and facial reconstructive surgery

A new exhibition exploring how facial injuries suffered by soldiers during the First World War have influenced artists and surgeons will open this weekend.

The ‘Faces of Conflict’ exhibition is a collaboration between the University of Exeter and the Royal Albert Memorial Museum (RAMM) in Exeter, and brings together historical objects such as surgical instruments and masks and works by artists such as Otto Dix, Wyndham Lewis, René Apallec and Paddy Hartley.
It is part of the European Union-funded project 1914FACES2014 led by Professor David Houston Jones from the University of Exeter and the renowned facial surgeon Professor Bernard Devauchelle from the Institut Faire Faces, who carried out the world’s first partial face transplant in 2005. It also includes two French partners, the Historial de la Grande Guerre and the Université de Picardie Jules Verne, along with the UK charities Saving Faces and Changing Faces.

Marjorie Gehrhardt, an Associate Research Fellow, University of Exeter said, “The lives of disfigured combatants were transformed by their war experience and by their injuries. This exhibition gives us a unique insight into how they coped with the wounds, their long-term treatment and the return to civilian life.”

The exhibition shows how surgeons worked with artists during and after the First World War. Stories of some of the facially injured soldiers from Devon will be told for the first time, informed by new research.

Professor David Houston Jones, from the University of Exeter explained: “Sculptors and artists became a vital part of the treatment of facially injured men. The masks and drawings they produced complemented the work of surgeons in crucial ways which are only now being fully understood”

Faces of Conflict, also looks at how artists’ understandings of the face changed in the years following the First World War and, in particular, how artists have revisited the injured face in recent years.

Project curator, Cristina Burke-Trees said of these contemporary works: “It tells us important things about how we think about the face today. They also reflect upon how surgeons and historians continue to learn from artists’.

Works by Paddy Hartley, University of Exeter artist in residence, will form part of the exhibition, including a uniform sculpture based on the life story of Plymouth sailor Walter Yeo. Yeo was badly burned at the battle of Jutland in WWI and Paddy’s sculpture refers both to Yeo’s wartime experiences and the pioneering facial surgery he underwent after returning home.

Western Morning News | Posted: January 09, 2015


Breaking the Code: Faces of Conflict and the resumption of Project Facade


13th January 2015

Summary of media coverage

Niamh White, 'Faces of Conflict' features work by Patrick Ian Hartley, 18/1/15

SHOWstudio blog

http://showstudio.com/blog/post/faces_of_conflict_features_work_by_patrick_ian_hartley

Paddy Hartley, Breaking the Code: Yeo Crossword unveiled, 18/1/15

BBC Spotlight 19/1/15
Faces of Conflict
http://www.bbc.co.uk/iplayer/episode/b04y8yjw/spotlight-19012015
at 19”35 – 22”35 (3 mins) Featuring Michael Longley, DHJ, Eleanor Crook

When surgeons needed artists
By Mid Devon Gazette | Posted: January 20, 2015
Read more: http://www.middevongazette.co.uk/surgeons-needed-artists/story-25892461-detail/story.html#ixzz3PS0Zz5wt

The Faces of Conflict
The Exeter Daily, Mary Youlden. 17 January 2015
http://www.theexeterdaily.co.uk/whats-on/exhibitions/faces-conflict

Phonic fm
Culture & Review on Phonic FM: 8th February 2015
30 minutes coverage as part of culture review programme lasting 1 hour 16 minutes. Coverage includes interviews with David Houston Jones and Tom Cadbury and discussion by invited studio guests.
Touring Exhibition at University of Exeter

Saving Faces meets 1914FACES2014 research project in the University of Exeter Forum

Portrait paintings by Mark Gilbert

25th February – 26th March 2015, University of Exeter, Forum

The presentation of the Saving Faces exhibition is part of our enquiry into questions of social reintegration which we are conducting within the 1914FACES2014 research project. Drawing on the close collaboration between pioneering plastic surgeon Harold Gillies and the artist Henry Tonks, leading to a series of drawings of casualties of the Western front at the Cambridge Hospital in Aldershot in 1916, the SAVING FACES art project presents us with a unique opportunity to study the present-day collaboration between the maxillofacial surgeon Professor Iain Hutchison (St Bartholomew’s) and the acclaimed Glaswegian portrait painter Mark Gilbert.

On display, is a selection of portrait paintings of patients before and after (and occasionally during) facial surgery as well as detailed information by the surgeon, artist and patients about their extraordinary journey during the making of this project.

MARK GILBERT
Scottish artist Mark Gilbert earned a BA in Fine Art from Glasgow School of Art in 1991. After ten years of studio practice, The Royal London Hospital, England offered him a post as artist in residence. There he worked in collaboration with maxillo-facial surgeon, Professor Iain Hutchison and his patients. The resulting exhibition and international tour entitled ‘Saving Faces’ led to his next project: a two-year research project and exhibition, ‘Here I am and Nowhere Else: Portraits of Care’.

His studies continue to be focused in the interdisciplinary field of Art and Medicine and in 2014 he completed his PhD in the Medical Sciences Interdepartmental Area (MSIA) program at the University of Nebraska Medical Center with his dissertation The Experience of Portraiture in a Clinical Setting (EPICS). Through EPICS, both artist/researcher and sitters/participants were able to overcome what was threatening, painful or isolating by focusing on what was reassuring, pleasant and social. Past, present and future, silence and dialogue, listening and questioning, reflecting and experiencing, analysing and imagining all converged in the resulting narratives of EPICS.

“My aims were largely concerned with amplifying a sense of human individuality. I wanted to become increasingly informed by the development of a relationship between myself and the sitter. It was critical when first meeting new sitters that they were initially informed and reassured as to the nature of the project. I would show them all the previously completed paintings and where relevant, relate these to their imminent or completed surgery. To have been given the opportunity to work in such an intense and fascinating environment, and to have had the privileged access to such intimate, sensitive subject matter, thanks to the
generosity of my sitters, has hopefully resulted in an exhibition that is both informative and emotionally positive for those who see it, and most of all those who took part.”

Mark Gilbert

**PUBLICATIONS**


‘Here I am and Nowhere Else: Portraits of Care. Works by Mark Gilbert.’ The Bemis Centre of Contemporary Art, USA.

**Tuba K.**

Tuba is an 8-year-old girl who at the time of this painting lived with her parents and two sisters in London. Her parents, who come from Turkey, spoke little English but Tuba and her sisters were fluent. At that time Tuba’s 13-year-old sister wanted to be a lawyer whilst Tuba wanted to be a doctor.

Tuba started to develop two painless, but unsightly, swellings on the right side of her nose and around the outside of her right eye in 1998. These grew steadily and upset Tuba so that she changed from her normal outgoing personality into a rather shy, reclusive character. She was also teased at school. These benign growths were caused by abnormal collections of blood vessels in the bones (cavernous haemangiomas). In 2000, these growths were reduced in an operation. To avoid facial scarring, the growths were approached and reduced through an incision over the top of the head and the scalp was then “peeled down” to expose the bones of the face (bicoronal flaps). The scalp was replaced at the end of the operation and sutured in place.

**Thomas H.**

Thomas was a 27-year-old advertising executive who enjoyed scuba diving, mountain biking and flying kites. His nasal tip was bitten off by a dog in 1998. Despite attempts to graft the separated piece of nose, skin, cartilage and mucosa, this did not take and he was left with a blackened nasal tip. His first operation involved transferring skin from his forehead down to his nasal tip. It was then left joined to his forehead and connected to his nasal tip for three weeks until it had taken. After three weeks it was cross-clamped with a metal clamp for one hour to ensure that it had taken to the tissues at the nasal tip. This pedicled skin flap was then divided and the excess material discarded. At this same operation ear cartilage was used as scaffolding to rebuild the underlying architecture of the nose. He has undergone two subsequent operations to thin the skin and he will have a further operation to build-up the nose slightly more and to thin the nostrils.
Noora A.

Noora was the 12-year-old daughter of a fisherman. She came to the UK from Omani for treatment of this benign tumour on the right-side of her face (plexiform neurofibroma), which had destroyed the vision in her right eye and created a massive asymmetry of the right-side of her face. Her right eye was positioned much lower than the left, pendulous lumps of skin containing abnormal proliferations of nerve and fibrous tissue hung down from the right side of her skull and face, and her right upper jaw and lower jaws had grown down much more than the left in response to these abnormal tumours.

When she came to the UK for treatment she used to wear a hood over her face and always wore black clothes. Her father recounts that as a very young girl she had been cheerful and outgoing, but as the tumour had grown she had become increasingly introverted and succeeded less well at school. She also had continuous pain from the tumour and its pressure on her face and brain. In 1994 she underwent surgery by Iain Hutchison and his neurosurgical colleague, Ian Sabin in which the neurofibroma was removed, the eye socket was reconstructed and the right eye lifted to a more correct position. At a second operation with John Hungerford, Iain Hutchison’s ophthalmology colleague, her right upper eyelid was reduced.

Following these two operations, her personality changed dramatically. She started to wear earrings and brightly coloured clothes and no longer covered her face. Her father, who had accompanied her to the UK for treatment, also changed in character and wore a permanent smile.

Gordon Read - poem

“This poem ‘Gaining Face’ – in Haiku form – was inspired by an earlier Saving Faces exhibition of Mark Gilbert’s portraits at the RAMM. I found them all sympathetic and, having worked in courts in the past, warmed to Henry. However, it was the pre and post operation portraits of Mazeeda which touched me most. Coincidentally, I was drawing together a collection of poems entitled Painted Ladies, a device to look into a world of daughters, so the idea of having a princess (Begum) appealed to me. Trying to imagine how a four year old explained to herself the representations she had been viewing, I thought her imagery might come from nursery rhymes and hoped she would be familiar with those in English as well as Bengali. Looking back over the years, I feel a little uneasy that I may have saddled Mazeeda with yet another manifestation, especially with the final line; but then, four year olds can be both cute and astute in their use of adult expressions.”

Gordon Read, who lives in Exeter, describes himself as an occasional poet. Painted Ladies also resonates with the ‘Faces of Conflict’ exhibition currently at RAMM, having a number of poems with World War I material. He has also published a collection associated with the pervading influence of the Holocaust, an epic poem about the Battle of Waterloo and a number of humorous accounts of family weddings.
This balloon growing at the side of my head, dragging down my eye, is Humpty Dumpty, who hasn't got a shell but is so full of yolk he makes me look skew whiff, twists my mouth and jams the eye so it can't see.

One day he'll burst and all the Queen's horses and all the Queen's men may not be able to put him – or me – together again. I'll need a Play-Doh specialist to scoop the yellow out and knead and shape the fleshy clay into bandages to strap the sculpted cheek and chin back into place.

then I shall have my own face nice and whole at last. That's when I wear my beautiful green dress for Mark to paint, in what he calls my Chair of State.

Fit for a princess, so he says, empowered to take my picture place alongside the Queen's daughter and daughter-in-law. No egg on my face.
LA CHIRURGIE NOUVELLE
(OR THE BIRTH OF COSMETIC SURGERY)
Prof Bernard Devauchelle, Institute Faire Faces
Plenary Lecture, Alumni Auditorium, Forum
Thursday 12th March 2015 6.00 – 6.45pm

In 2005 Bernard Devauchelle, at the head of a team of surgeons at the University of Amiens, carried out the world’s first partial face transplant. The operation heralded a watershed moment in the history of medicine, and radically transformed the prospects of patients suffering from severe trauma, burns, disease, or birth defects affecting the face. Prof Devauchelle reflects on the history and evolution of maxillofacial surgery, from La Chirurgie nouvelle to the era of the face transplant.

CONFERENCE
Les Gueules cassées:
disfigurement and its legacies
12th – 14th March 2015 University of Exeter,
Innovation Centre
Programme
Thursday 12th March 2015
12.00 onward Registration
12.30-1.30pm Buffet Lunch
12.30-1.30 Artist’s demonstration: Paddy Hartley – Boardroom
1.30 -3.00pm Welcome; Panel sessions

1. Revisiting the Stories of WWI Disfigured men – Conference room 1
   i) Anna Branach-Kallas: ‘Abjection, Masks, and Cultural Trauma: Les Gueules Cassées in Recent Great War Fiction in English and French’
   ii) Marzena Sokolowska-Paryż: ‘The Ideological “Faces” of the Great War: the “Culture of Aversion” versus the Post-Memory Culture of Empathy’
   iii) Suzanne Steele: “‘The Tin Nose Shop”: les gueules cassées and Michael Longley’s Great War poetry’
   Chair: Richard Perceval Graves

2. Visual Representations of Disfigurement – Conference room 2
   i) Emmanuelle Raingeval: ‘L‘atelier des masques: quand la sculpture se fait soin’
   ii) Rossella Bondi: ‘Giorgio de Chirico and Alberto Savinio: the Aesthetic of the Faceless Man during World War I’
iii) Nicola Baird: “Let the atrocious images haunt us”: Artistic Representations of and Responses to the Disfigured Faces of the Great War
Chair: Karen Shepherdson

3.00-3.30pm Tea

3.30-5.00pm PANEL SESSIONS

3. Responses to Disfigurement in the Visual Arts – Conference room 1
   i) Monika Keska: ‘Deformony and Facial Disfigurement in Francis Bacon’s Portraiture’
   ii) Paul Rousseau: ‘Francis Bacon and the Visages of War’
   iii) Karen Shepherdson: ‘Picturing Aftermath - a visual response to the broken faces of the First World War’
Chair: Beatriz Pichel

4. Disfigurement before the First World War – Conference room 2
   i) Patricia Skinner: Taking the Long View on Disfigurement
   iii) Céline Cherici: ‘Alexis Carrel et la Grande Guerre’
Chair: Julie Mazaleigue-Labaste

5.00-5.15pm Tea/Coffee

5.15-6.00 Artist’s demonstration: Eleanor Crook: tube pedicle - Boardroom

6.00-6.45pm Plenary Lecture, Alumni Auditorium, Forum
   Prof Bernard Devauchelle, Institut Faire Faces
   La Chirurgie nouvelle (or the birth of cosmetic surgery)
Chair: David Houston Jones

6.45pm Reception & refreshments
Visit, Saving Faces exhibition, Forum

Friday 13th March 2015

9.00-11.00am PANEL SESSIONS

5. Surgery and the Face – Conference room 1
   i) Jean-Claude Dupont: ‘Les blessures de la tête et la Grande Guerre’
   ii) Andrew Brown: ‘From Gillies to the Guinea Pigs’
   iii) Julie Mazaleigue-Labaste: ‘Les cultures médicales face aux Gueules Cassées: place et fonction des croisements entre chirurgie et odontologie dans le soin des blessures de la face, à partir du cas d’Albéric Pont’
Chair: Sylvie Testelin

6. Archives & Museum Studies – Conference room 2
   i) Ruth Neave: “The Progress of Plastic Surgery”: An Insight into the Antony Wallace Archive, British Association of Plastic, Reconstructive, and Aesthetic Surgeons’
   ii) David Houston Jones: ‘Facial repair: from the Medical Archive to contemporary artistic practice’
   iii) Paddy Hartley, ‘Patchwork narratives and the archive: a visual interpretation of the life of Walter Yeo’
Chair: Cristina Burke-Trees

11.00-11.30am Tea/Coffee
11.30-12.45  Plenary Lecture
James Partridge (Founder and Chief Executive, Changing Faces), ‘Facial disfigurement and fairness: a journey… from Sidcup to today and tomorrow…’
Chair: Manuela Barreto

12.45-1.45pm Lunch, Innovation Centre

2.00-3.15pm Visit, Faces of Conflict exhibition, Royal Albert Museum and Art Gallery

2.00-2.25 Steering committee meeting, Strand 1: Medicine & Epistemology (project team only)
2.25-2.45 Steering committee meeting, Strand 2: Disfigurement in society (project team only)
2.45-3.15 Steering committee meeting, Strand 3: Representing the Face (project team only)

3.15-3.45 Tea & coffee

3.45-5.15pm PANEL SESSIONS

7. Photography – Conference room 1
i) Jason Bate: ‘At the cusp of medical research: surgical societies, facial injuries, and the role of photography in exchanging, debating, and disseminating methods and ideas during the First World War’
iii) Ulrike Zitzlsperger: ‘Losing Faces – Gaining Perspectives in 1920s Germany’
Chair: Joe Kember

8. Disfigurement and identity – Conference room 2
i) Sophie Cremades: ‘La naissance d’un visage, une identité en marche’
ii) François Delaporte: ‘De la face au masque : les questions de l’identité au sortir de la Grande Guerre’
iii) Anne-Marie Martindale: ‘“When I look in the mirror, I see a mixture of the two [of us]”: Some thoughts on identity shift and facial transplantation’
Chair: Marie Le Clainche-Piel

5.15-5.45 Refreshments

5.45-6.45pm Plenary Lecture
Louisa Young, Innovation Centre
‘My Dear, I Wanted to Tell You that I have received a Slight/Serious Wound…’: A novelist’s approach to the human, individual and family experience of maxillofacial reconstruction in WWI.
Chair: Marjorie Gehrhardt

7.30pm Conference dinner, Rougemont Hotel

Saturday 14th March 2015

9.00-11.00am PANEL SESSIONS

9. Film studies – Conference room 1
ii) Evelyne Jardonnet: ‘Défigurations dans le cinéma de la Grande Guerre: de l'infilmable à l'image-spectrale’
iii) Karine Chevalier: ‘The Disfigured Face or the Absent Signifier: Faces and Masks in French Cinema’
iv) Richard Woodall: ‘“Circus of Horrors”: Disfiguring the Feminine in 1960s Cinema’
Chair: Jason Bate

10. Literary representations of disfigurement and identity – Conference room 2
i) Martin Hurcombe: ‘The Return of the Brute’
ii) Kate Macdonald: ‘The facially impaired First World War soldier in British popular culture’
iii) Kamilla Pawlikowska: ‘Imagination, the Face and Surgical Intervention’
iv) Marjorie Gehrhardt: ‘La Greffe Générale: the voice of French facially injured soldiers’
Chair: Suzanne Steele

11.00-11.30am Tea and Coffee
11.30-12.45pm Plenary Lecture
Dr Suzannah Biernoff, Birkbeck, University of London
85 Portraits of War
Chair: David Houston Jones
12.45-13.45pm Lunch
13.45-15.45 PANEL SESSIONS

11. Artistic Practice – Conference room 1
i) Mark Gilbert: ‘The Experience of Portraiture in a Clinical Setting’
ii) Luke Shepherd: ‘If a surgeon can’t draw, would you trust them to hold a scalpel?’
iii) Eleanor Crook: tbc
Chair: Suzannah Biernoff

12. Psyche and Society – Conference room 2
i) Sophie Delaporte: ‘L’atteinte, XIXe-XXle siècle’
ii) Marie Le Clainche-Piel: ‘Committing to Face Transplantation: From the Challenge of Singularity to the Return to the Community’
iii) Emmylou Rahtz: ‘The complex course of psychological distress following facial injury’
Chair: Dale Weston

15.45 END OF CONFERENCE
**Poster session participants**

**Nichola Court and Jennifer Mason, Queen Victoria Hospital Archive and the Guinea Pig Club files**

The Queen Victoria Hospital Archive is an important source for research into the history of plastic surgery. In addition to administrative records and patient files, the archive includes the ‘Guinea Pig Club’ patient files which provide a detailed record of pioneering treatment administered to badly burnt air force personnel by Sir Archibald McIndoe during the Second World War. The files contain extensive photographic evidence of the progress of patients during treatment and some also include drawings of surgical procedures as they took place in theatre. This poster outlines the main series of records in this collection and their significance to researchers. It also describes West Sussex Record Office’s proposed bid to the Wellcome Trust for funds to catalogue the Queen Victoria Hospital archive and digitise the Guinea Pig Club patient files.

**Marjorie Gehrhardt, A Story to Teach History: Lieutenant Bertram Blight in the Classroom**

This poster presents an example of how the research carried out by members of the 1914FACES2014 project can be used in the classroom. The proposed History pathway takes the journey of a Devon serviceman as the starting point for an enquiry into the First World War and its impact, moving from the local to the national and international levels. It addresses the following National Curriculum aims: knowing and understanding British and European history, understanding the connections between local, regional, national and international history, understanding the methods of historical enquiry. The poster presents a summary of Lieutenant Bertram Blight’s story and suggests possible themes that can be further developed, as well as ways of addressing methodological questions.

**Luke Shepherd, Drawing…a surgical skill?**

This poster gives an insight into the innovative sculpture course taught by Luke Shepherd, in which he teaches perception, visual acuity and 3-D language to plastic and maxillo-facial surgeons as a visual aid for clinical work. The course is currently convened by Mr Simon Withey and its unique approach gives the surgeon a quick, yet thorough appreciation of 3-D form in a relevant and instructive way. The poster complements Luke’s presentation, in which he demonstrates how he trains surgeons and shows that seeing is a language which all can readily learn. He argues for including the artistic element of “Sculpture for Surgeons” as an integral part of surgical education and shows that drawing is simply a visual language with grammar and rules that are easily learnt, but rarely taught, leaving people feeling unnecessarily awkward by the fact that they feel they can't draw.

**Dale Weston, Not so easy to imagine: The consequences of imagining interactions with differently stigmatised targets**

Mentally simulating interactions has been used as a method of improving actual interactions with various stigmatised targets (e.g., Crisp & Turner, 2009). However, the effects of mentally simulating interactions may differ depending on the stigmatising condition in question (West, Holmes, & Hewstone, 2011). This study aimed to explore how imagining interactions with differently stigmatised individuals (an individual with a facial disfigurement, an individual in a wheelchair, or an individual who is homeless) might influence the nature of responses to these individuals. The results of this study revealed that imagining interactions with individuals with a facial disfigurement seems to be particularly difficult, mentally taxing, and anxiety provoking (particularly in comparison to imagining an interaction with an individual in a wheelchair). This may have negative implications for the use of imagined interaction as a method of improving interactions between individuals with and without a facial disfigurement.
Gili Yaron, Prosthetic faces, (re)covered selves

Drawing upon my qualitative analysis of the stories of users whom I have interviewed - people with facial disfigurement who receive and wear facial prostheses as part of their medical trajectory, this poster provides a taste of the sometimes unexpected answers to questions such as ‘what do facial prostheses do?’ and ‘how are facial prostheses done?’ My poster will explore the theme of concealment and the various strategies people deploy in dealing with revelation, and their attitudes towards it (anxiety, longing). It will also investigate how the facial prosthesis appears in cherishing practices: people’s collecting and displaying their old, used prostheses. Here, it appears as a material reminder that participates in the shaping of users’ identity narratives.

Exhibitions

To accompany the 1914FACES2014 closing conference, we are delighted to announce the following exhibitions:

**Faces of Conflict: the impact of the First World War on art and facial reconstructive surgery**

Royal Albert Memorial Museum and Art Gallery, Exeter 17th January – 4th April 2015

This exhibition takes the experience of the facially injured soldiers of the First World War as the starting-point for an enquiry into disfigurement in the broadest sense. It creates a dialogue between work created during and immediately after the First World War and the work of contemporary artists including the work of Paddy Hartley, artist in residence, College of Humanities.

**Saving Faces meets 1914FACES2014**

Exhibition of portrait paintings by Mark Gilbert 24th February – 26th March, University of Exeter, Forum (main campus)

Our presentation of the Saving Faces exhibition is part of a research-led enquiry into questions of social reintegration. The Saving Faces art project presents us with a unique opportunity to study the present-day collaboration between the maxillofacial surgeon Professor Iain Hutchison (St Bartholomew’s) and the acclaimed Glaswegian portrait painter Mark Gilbert.

Front cover/poster image:

**Eric Manigaud.** Gueule cassée no 3 (2006), British soldier, and a patient of Harold Gillies, Pencil and graphite on paper

French artist Eric Manigaud concerns himself with images of catastrophic events which affect society’s collective memory. He works on a monumental scale and attempts to uncover the power of the photographed image beyond the material reality of that photograph. In his own words: ‘I don’t consider that I am reproducing a photograph, but in fact a projection, with all the likely
modifications that this entails. Under these conditions the image becomes diaphanous, or spectral, because it has lost its materiality.' He imagines what this soldier was subjected to at the very instant the photograph was taken and adds cumulatively his own thoughts and subconscious memory onto the image without changing the subject of the instantaneous photograph. Crucially, the artist is offering us the possibility to experience a sense of what lingers beyond materiality and might therefore reposition our own perception of the trauma in the image.
The original drawing on an impressive scale, can be seen in the Faces of Conflict exhibition.

**Installation**

**Champs de visions/field of visions/Blickfelder by Suzanne Steele**

![Image of installation]

SM Steele
Mary Harris Memorial Chapel, University of Exeter
12th - 14th March 2015 from 10 am to 9pm
This video and sound installation was made for 1914FACES2014, and was shot in France and Belgium in 2014, the centenary year of the Great War. It is a 34-minute loop and available to be viewed, in part or in its entirety, 24 hours a day for the duration of the FACES Conference *Disfigurement and its legacies*.

1914FACES2014 Project Curator Cristina Burke-Trees
Conference Abstracts in session order

Anna Branach-Kallas

Abjection, Masks, and Cultural Trauma:
Les Gueules Cassées in Recent Great War Fiction in English and French

The purpose of my paper is a comparative analysis of the representation of disfigurement and mask(s) in recent fictions of World War One published in English and French. Starting with the now classic La Chambre des officiers (1998) by Marc Dugain, which explores the pain of facial surgery and the stigmatization of les gueules cassées in the post-war context, I move on to the interpretation of Toby’s Room (2012) by Pat Barker, Au-revoir, là-haut (2013) by Pierre Lemaitre, and Broken Ground by Jack Hodgins (1998). In all these novels, disfigurement is represented as embodied abjection, violating the boundaries of inside and outside, but also of private and public, as the brutality of the war becomes virtually inscribed on the victim’s body. While Barker develops, moreover, an interesting analogy between wounded face and destroyed landscape, Lemaitre and Hodgins posit the disfigured veteran as the victim of trauma, the abject testimony of which, readable on the face, must be hidden from view. In the three novels, the disfigured soldier protagonist is forced to wear a mask to conceal not only the abject wound that puts social reintegration at risk, but also to hide an embodied history of the war, unacceptable in a post-war culture devoted to the politics of grief. Applying the theory of cultural trauma, I attempt to explore how the removal of the mask, staged by Barker, Lemaitre, and Hodgins in the respective novels, represents the split between the perfomative and the pedagogic discourses of the nation (acc. to Bhabha) and responds to our contemporary concerns with the ethical legacies of the First World War.

Anna Branach-Kallas (Ph.D., D.Litt.) is Associate Professor in the Department of English at Nicolaus Copernicus University, Toruń, Poland. She is the author of three books and over fifty essays, which express a range of interests from intertextuality and historiography to corporeality, trauma, war, and postcolonialism. Currently, she is the director of the project “The Great War as Cultural Trauma in Contemporary English, French, and Canadian Fiction”.

Marzena Sokołowska-Paryż

The Ideological ‘Faces’ of the Great War: the ‘Culture of Aversion’ versus the Post-Memory Culture of Empathy

Ward Muir’s The Happy Hospital includes passages describing the author’s encounters with facially-disfigured soldiers, passages permeated by the emotion of disgust. Ernst Friedrich’s Krieg dem Kriege comprise a series of photographs of soldiers with horrific facial wounds, gathered together under the meaningful title “Das Antlitz des Krieges” [“The Visage of the War”], the aim being to shock the readers/viewers so as to bring them to a realization of the ‘true’ realities of the war. Alongside these documentary narratives there appeared significant novels, likewise intent on exploiting the emotion of aversion to this type of wounds in order to render the anti-war message even stronger, the most important examples being William Faulkner’s Soldiers’ Pay and William March’s Company K. In contrast, the depiction of the facially-disfigured soldiers in Marc Dugain’s La chambre des officiers (as well as François Dupeyron’s film adaption of the novel) and Jodie Shields’s The Crimson Portrait is filtered through our contemporary social and cultural acceptance
of physical disability. The focus of this paper will be a comparative analysis of the past and contemporary images of the facially-disfigured soldiers (Friedrich versus Dupeyron), as well as the past and contemporary discourse on such cases (Faulkner and March versus Dugain and Shields). My argument will revolve round Suzannah Biernoff’s analysis of “the culture of aversion” which explains the appearance of such narratives as The Happy Hospital, Krieg dem Kriege, Soldiers’ Pay and Company K, in comparison to contemporary texts and film promoting a culture of empathy. Concomitantly, my discussion will focus on Jodie Shields’s commemorative “fictionalization” of the person of Varaztad Kazanjian, in comparison to Pat Barker’s and Jane Urquhart’s ‘uses of,’ respectively, the historical figures of W. H. R. River and Walter Allward, so as to convey a ‘contemporary’ meaning of the Great War.

Marzena Sokolowska-Paryz is Associate Professor at the Institute of English Studies, University of Warsaw, Poland. She is the author of Reimagining the War Memorial, Reinterpreting the Great War: The Formats of British Commemorative Fiction and The Myth of War in British and Polish Poetry, 1939-1945. The Great War in Post-Memory Literature and Film, co-edited with Martin Löschnigg, has recently been published.

Suzanne Steele

Michael Longley’s ‘The Tin Noses Shop’: the poet’s imperative and the Great War

For the Irish poet, Michael Longley, his father’s Great War is as artistically embedded in him as is his father’s DNA. In ‘Anniversary’ (1996), written in honour of his father’s birth centenary, Longley writes to his long dead father as a young officer serving in the trenches. Longley sees his father lift ‘with tongs from the brazier an ember, / And in its glow reads my words’, an image that provokes a profoundly healing image for combatants and next-of-kin. For Longley, the son of a ‘gentle father’ who survived the Somme, the Battle of Loos, and wounding at High Wood as the teen-aged commander of the infantry battalion, ‘Longley’s Babies,’ combined with a Catholic youth in the de facto war zone of Belfast, the Great War became both an ‘obsession’ and a contact zone of the intensely personal, artistic, and political. While Longley’s reading of the Great War employs the Homeric, Christian, and trench tropes of the canon, his unique perspective as poet and veteran’s son, contra Paul Fussell, Jean Norton Cru et al., re-faces the combatant from the perspective of a century, culminating in the masterful, achingly beautiful poem, ‘The Tin Noses Shop.’ This paper explores issues of poetic voice, autobiography, appropriation, the idea of ‘combat Gnosticism,’ and the concept of témoignage as the poet’s ethical heritage, privilege and imperative. The paper proposes that poets, through studious connection with the deep past, may be akin to the sculptors who fashioned tin noses for faceless soldiers returning from the front, and that they, through social and personal rites of poetry, may offer empathy and a real connection for those who served, those who survived, and those yet to be born, on a personal, national and international level.

Suzanne Steele is an award-winning poet, installation artist, and doctoral researcher at the University of Exeter. From 2008-2010 Suzanne was an official war artist, Canada’s first poet bear witness to a war zone. Her research into ethics and aesthetics of the Great War narrative arises from this experience. In 2012, SMSteele premiered her critically reviewed, symphonic/choral work, Afghanistan: Requiem for a Generation. She is a member of eXegesis, an international poetry collective, which produces installations and performance art. On 4 August 2014, the centenary of the start of the Great War, her major public engagement, The Long Goodbye: a conversation across a century, was installed in Reed Hall gardens. SMSteele has been broadcast and has presented internationally, most recently at Oxford, and is a Named Collaborator, the literary advisor
to the 1914FACES2014 project. In late May she will be giving a paper at Aftermath (London Kings College).

Emmanuelle Raingeval

L’atelier des masques. Quand la sculpture se fait soin.

« Pour moi, la merveille, le mystère, c’est justement le visage de l’individu dans la masse. Une fois au musée, j’ai pris garde à ces visages, et tout d’un coup m’est venue la conscience de ce qu’il y a d’extraordinairement vivant et inatteignable en eux – si différent de ce que l’on trouve dans les œuvres d’art que celles-ci me parurent soudain congelées, mortes. Une sorte de désespoir s’empara de moi, car je me disais : personne n’a jamais pu saisir vraiment le prodige de ces visages ni de la vie qu’ils reflètent. »

Alberto Giacometti

Au printemps 1918, l’artiste américaine Anna Coleman Ladd et sa collègue française Jane Poupelet ouvrirent à Paris, rue Notre-Dame des Champs, un atelier des masques où elles mirent leurs compétences au service des gueules cassées de la Grande Guerre. Au Studio for Portrait Masks, placé sous l’égide de l’American Red Cross, les deux artistes façonnaient pour les hôpitaux militaires des prothèses d’un type très particulier, sortes de simulacres en métal des parties manquantes du visage, que le mutilé plaçait comme un masque sur ses blessures. Cette collaboration singulière entre art et médecine, suscite un intérêt de premier ordre. Mais d’emblée, la citation de Giacometti interroge sur la possibilité de se saisir réellement du prodige des visages et, a fortiori, de le restituer par la greffe ou le masque. Par analogie avec les mots de l’artiste, les prothèses des gueules cassées qui camouflent les lésions ne correspondaient qu’à des fragments congelés ou morts qui détonnaient par leur immobilité, incapables de se fondre dans la chair et de s’assouplir, de plisser, pour suivre les traits expressifs du vivant. Quelle est donc cette part inatteignable du visage qui pourrait faire concéder l’art du portrait et la chirurgie de la face réunis dans l’objectif commun de restaurer les faces écorchées par la mitraille ? Qu’advient-il de l’être qui a perdu son visage ? Sa réparation est-elle seulement possible ?

The mask workshop: When sculpture becomes therapeutic

‘To me, the face of a stranger in a crowd is a marvel, a mystery. Once, at the museum, I paid attention to all these faces and all of a sudden I became conscious that they have something extraordinarily alive and unfathomable, something so very different from what we can find in works of art that the latter suddenly seemed frozen, dead. A form of despair took hold of me, for I thought: no one has ever been able to capture the wonder of the face and of the life they reflect.’

Alberto Giacometti

In the spring of 1918, the American artist Anna Coleman Ladd and her French colleague Jane Poupelet opened a workshop rue Notre-Dame-des-Champs, in Paris. There, they put their art at the service of the Gueules Cassées of the Great War. In their Studio for Portrait Masks, supported by the American Red Cross, the two artists made prosthetics for use in military hospitals; these artefacts were metal replicas of missing parts of the face, which disfigured servicemen could wear like a mask covering their injured face. This unusual partnership between art and medicine triggered a lot of interest. But as Giacometti points out, is it ever possible to capture the wonder of a face and to recreate it in a mask or through transplantation? Giacometti’s observation, when applied to the situation of First World War Gueules Cassées, suggests that the prosthetics that concealed their damaged faces could hardly be more than frozen and dead fragments, unable to
blend in, to move and follow the face’s expressions. Their immobility was striking. What, then, is this unreachable essence of the face that escapes both surgical and artistic attempts? What happens to the soldier who has lost his face? Is any form of repair even possible?

Emmanuelle Raingeval, Doctorante en Arts, Philosophie et Esthétique sous la direction de Lorenzo Vinciguerra et Androula Michael à l’UPJV d’Amiens.
Sujet de thèse : Art + médecine : quand l’art contemporain met en œuvre la science.

Rossella Maria Bondi

Giorgio de Chirico and Alberto Savinio: the aesthetic of the faceless man during World War I

In 1914 the famous Italian painter Giorgio de Chirico and his brother, the writer, musician, playwright and painter Alberto Savinio (his real name was Andrea de Chirico), were both in Paris attracted by the innovative atmosphere of the French capital and by the development of the Avant-Garde movements. In 1915 they returned to Italy for the outbreak of the Great War to enlist in the Italian army. However de Chirico was never accepted in the army for health reasons. During the conflict he remained in the city of Ferrara where he elaborated the aesthetics of metaphysics. Savinio instead was sent to the Eastern Front as an officer until the end of the war. Unlike his brother, Savinio then experienced war in its reality: the destruction, the mutilation of the wounded and the presence of dead bodies. And yet, Giorgio de Chirico, influenced by his brother, adopted since 1915 in his paintings a disturbing character, the faceless man, that anticipated the state of mutilation from the war.

The objective of this proposal is to show how Savinio’s and de Chirico’s iconography of the faceless man embodies the anguish and the absurdity of war through the close analysis of Savinio’s literary works Chants de la Mi-Mort (1914) and Hermaphrodito (1916-1918) and de Chirico’s paintings Le duo, Le Vaticinateur in 1915 and Hector et Andromaque in 1917. We will also show how de Chirico’s mannequins are derived from Savinio’s characters: “the bald man”, “the target men” and “the wrought iron men”. By focussing on the staging of these controversial characters, we will assess the symbolism of the faceless man in art and literature at the beginning and during the First World War.

Rossella Maria Bondi has just passed her PhD in Comparative Literature at Oxford Brookes University in November 2014 with a thesis entitled “In Search of the New Man: Alberto Savinio and the Avant-Garde in Paris (1911-1937)”. In 2015 she will give a paper on “The modern myth: Savinio and the Surrealism” for University of Cardiff. She is currently preparing two academic articles on Futurism, Apollinaire, Savinio and the beginning of 20th century Avant-Garde.

Nicola Baird

‘Let the atrocious images haunt us’: Artistic Representations of and Responses to the Disfigured Faces of the Great War

While more traditional studies have neglected the field of medicine in their analysis, my paper takes the surgical developments of the First World War period, in plastic and reconstructive surgery, as key to understanding the concerns of contemporary literary and artistic production. Whilst Henry Tonks’ portraits of facially wounded servicemen have not received much attention, a small number of essays have been published in addition to Joseph Hone’s discussion of the
pastels in his biography of the artist. My work on Tonks might be considered alongside other recent projects on this topic, namely Emma Chambers’ ‘Fragmented Identities: Reading Subjectivity in Henry Tonks’ Surgical Portraits’, 2009, Suzannah Biernoff’s ‘Flesh poems: Henry Tonks and the Art of Surgery’, 2010 and Tom Lubbock’s ‘Doing Damage’, 1999. Unlike these publications, however, my paper will not focus solely on Tonks as I address the wider context in which the art of facial disfigurement might be discussed.

In my first subsection, ‘Masking Facial Injury’ I will consider Francis Derwent Wood and Anna Coleman Ladd’s tin masks, bespoke creations designed to conceal the wearer’s shattered visage and to reproduce, as far as possible, his pre-war appearance. I will discuss the significance of these masks in both masking and marking horror, their efficacy and their limitations. I will also assess their impact upon the difficulty of a face-to-face exchange of looks. Secondly I will examine Tonks’s ‘remarkable’ series of pastels. It is often the case that Tonks drew his subjects before and after surgery, documenting the repair of war’s ravaged faces. The impact of plastic and reconstructive surgery is also something that I will discuss in relation to Otto Dix and Max Beckmann’s representations of facial deformity. Much has been written on Dix and Beckmann’s war art, however, there has been little enquiry into the art of facial disfigurement within these two artists’ oeuvres. In this, my third subsection, I will also engage with the literary and artistic productions of Dada- namely Tristan Tzara’s 1921 play, The Gas Heart and Marcel Janco’s ‘terrifying’ masks, ‘most of them daubed with bloody red ’ worn in Dadaist performances at Zürich’s Cabaret Voltaire . I will consider Dadaist distortions of the face in relation to the ‘paralysing background of events’ taking place on the western front. Dada, I will argue, is clearly preoccupied by issues of defacement and disfigurement as a result of war injury.

Nicola Baird has postgraduate degrees from Queen Mary and Birkbeck College in Modernist English Literature and History of Art. She is currently working for Christie’s, and as a researcher at the Ben Uri Art Gallery and the New Walk Museum and Art Gallery, Leicester.

Monika Keska

Deformity and Facial Disfigurement in Francis Bacon’s Portraiture

My paper focuses on Francis Bacon’s response to facial disfigurement, based on an analysis of the source material found in his studio and personal library. Bacon rarely painted from life and preferred to employ photographs and a wide range of visual material instead of sitters. The floor of his London studio was littered with photographs, journals and illustrations removed from books and magazines. The photographs of his models and of the artist himself functioned as a trigger of ideas and images, provided a starting point for experimentation and distortion in his portraiture. The faces of Bacon’s sitters merge with the visual material from his studio that often represented facial deformities.

In this paper I will study Bacon’s source material related to disfigurement, including medical manuals of plastic surgery, dermatology, and war photography documenting injured soldiers and civilian victims of both world wars and contemporary African conflicts. Most of these books were profusely illustrated, often with graphic photographs of facial and bodily disfigurement. The sources I will employ in this paper include Eighteen Fourteen (1965) The People’s Verdict (the Krasnodar and Kharkov German Atrocity Trials, 1944), and The True Aspects of the Algerian Rebellion (1957). I will give special attention to the last book, as it features mainly photographic material that documents facial injuries and mutilations. Bacon’s copy of the book reveals numerous pigment accretions and torn pages that suggest its relevance in his creative process. The purpose if this paper is to establish connections between facial disfigurement and the deformation in Bacon’s portraiture, from mid 1950s till 1970s. I will study Bacon’s reading of disfigurement as the artist’s
reflection on contemporary historical events and human condition in the 20th century. I will base my research on recent findings from Francis Bacon's library and studio preserved in the Hugh Lane Gallery in Dublin.

Monika Keska holds a PhD in History of Art from the University of Granada. In 2011-12 she worked in the Hugh Lane Gallery as researcher and cataloguer for the ‘Bacon’s Books’ project and continued with her research in King’s College London with a postdoctoral mobility grant. Monika currently works in the University of Granada.

Paul Rousseau

Francis Bacon & The Visages of War

The fractured faces in the portrait style of the artist Francis Bacon after 1958 show distinct intimations of deformation and disfigurement, yet no formal material link has been established to images of facial injury printed in published material. This is all the more surprising considering Bacon’s working practice of using printed material as a jumping off point to a new work, and a near industry of Bacon scholars which has grown up around the investigation of his source material, specifically that found in the detritus of his studio.

I would like to present new research that suggests a definite link exists between Bacon’s portrait, face and head style post 1958 and a series of images of facial disfigurement in German soldiers from WW1, first published in the book Krieg dem Kriege in 1923.

I would explain how I discovered the book and what that suggests about its provenance in connection to Bacon. I’d present research that locates specific source material in his studio and its link to the 1923 book, and look at the problems with this attribution. I’d touch on the history of the book and an early opportunity Bacon had to see it, as well as the significance of the post 1958 date of his style of painted faces. I would explore in detail some specific examples of similarity using slides of visual comparisons with Bacon paintings. Then I’d offer an interpretation of the psychosexual influence these images might have had on Bacon, and postulate his reactions through a “gay-reading” of the soldiers faces in the context of mid 20th century attitudes to homosexuality. Finally I would refer to a specific case that reflects the wider cultural impact Bacon’s facial iconography has had on the presentation of facial disfigurement in modern film, ironically one that refers straight back to the actual facial disfigurement seen in WW1 soldiers.

Paul Rousseau works at The John Deakin Archive since 2007, as collection manager and lately as R&D director. In April 2014 he was research assistant to Robin Muir on a book and exhibition at The Photographers Gallery London titled Under the Influence: John Deakin, Photography and the Lure of Soho. His research into a suggested Deakin photograph of Francis Bacon in drag was covered in The Guardian, Le Monde and LA Times in June 2014.
K.J.Shepherdson

Picturing Aftermath - a visual response to the broken faces of the First World War

This illustrated artist paper seeks to provide insight into contemporary creative practice-based research, exploring themes of human ruin, (re)membering and remembrance. In doing so, the research specifically examines and contextualises the photographic series Aftermath (Shepherdson, 2014) which was commissioned to commemorate the centenary of the First World War’s start. Aftermath in reappropriating the found images of Ernst Friedrich’s 1924 Krieg dem Kriege examines ‘ruination’ relating to the human form, a form all too vulnerable to mechanical warfare. In addition the paper will discuss how physical vulnerabilities might be translated forcefully, yet simultaneously tenderly, through images of the damaged human face.

The presentation will demonstrate Aftermath’s use of the esoteric photographic technique of emulsion lifting, whereby the photographic emulsion - similar to that of a fine layer of skin - is lifted away, re-echoing the fragility of the face and the utter devastation at its loss. As Sally Minogue comments “The damaged face was one of the most difficult disfigurements for a surviving combatant to bear because of the public response of disgust and rejection, as well as the sufferer’s own deep loss of confidence and sense of identity. In facing Shepherdson’s photographs we take on a responsibility to face up to what modern warfare means” (2014:23).

A characteristic of emulsion lifts are tears and creases which subsequently require slow, gentle teasing and stroking out by hand using soft natural bristle brushes. This act of stroking and easing the face back into shape is of course in sharp distinction to the moment of facial destruction. The specificity of this process also limits scale and thus distils each work into a unique artefact with consequent ‘flaws’ accepted and welcomed. In considering photography’s potential to connote human fragility and ruin, the paper will draw upon the salient writings of Derrida, Sontag and Berger.


Dr Karen Shepherdson is principal lecturer in photography at Canterbury Christ Church University, UK and Director of both SEAS Photography (South East Archive of Seaside Photography) and the Old Lookout Gallery in Broadstairs, Kent. Visual catalyst for Karen’s work resides in her environment; in memory; (re)membering and remembrance. Her photographic work has been exhibited in the UK, Scandinavia and North America. In addition to her visual practice, she has published a number of articles and co-edited the four- volume Routledge collection on Film Theory.

Patricia Skinner

Taking the Long View on Disfigurement

Working on a project that explores the representation of acquired facial disfigurement in early medieval Europe, I am struck by the sheer number of instances recorded in the medieval evidence. The disruption of the facial features - by far the most visible of sites - resonates with observers; it is threatened as a corporal punishment in legal traditions from Europe to India (where it has been cited as the reason for that subcontinent’s precocious textual tradition of reconstructive surgery); it features in folkloric tales, often as a warning against transgressive behaviour. It is also, I will argue, highly gendered. But almost all of this evidence comes from the pens of those observing or imagining facial disfigurement: like many apparently marginal groups in medieval history, the voices of the disfigured themselves are very seldom heard. Yet the patient acceptance of disfigurement is also held up in medieval religious texts as a sign of sanctity or humility before
God. My paper will explore this ambivalence surrounding disfigurement, drawing on comparative material up to the 18th century, and try to draw out some themes that I believe represent a continuity in the history of the disfigured over centuries.

Patricia Skinner is Reader in Medieval History at the University of Winchester, where she is completing a Wellcome Trust-funded project on medieval disfigurement. Her book, Living with Disfigurement in Medieval Europe, will be published by Palgrave Macmillan (US) in 2016.

Michelle Webb

‘I did perfectly make him whole’: Facial Damage, Surgery and Objectification in England, c.1500 – 1700

When the sixteenth-century surgeon William Clowes wrote a case history relating to his treatment of Robert Clare he detailed the terrible damage done to this patient by the pox. It had caused, ‘in divers places of his face corrosive, virulent and malignant ulcers with corruption of the bones’. In referring to ‘his face’, and later to ‘his nose’, Clowes demonstrated a notable lack of objectification, shared by many of the early modern medical practitioners who treated diseased and injured faces. Clowes concluded his account of the treatment of Robert Clare’s face by proudly stating: ‘I did perfectly make him whole and so continued to his dying day’. He did not state that he had saved his patient’s nose or even his face; he had, instead, made him ‘whole’, thereby restoring his previous identity.

This paper will detail how, rather than referring to de-personified facial features or areas of damage, sixteenth- and seventeenth-century physicians, surgeons, and empirical healers habitually used personal pronouns and other forms of language that demonstrated a reluctance or inability to consider the damaged face in isolation. It will demonstrate that there is evidence that early modern medical practitioners viewed the face as being synonymous with identity. It will also provide an account of how the overriding concern when treating patient’s faces was the preservation or restoration of appearance. References to impairment of facial function, including speech and the ability to eat, are notably absent from case histories and other accounts of treatment. Such was the importance of facial appearance that practitioners were even prepared to attempt to divert smallpox from the face to the feet, potentially sacrificing their patients’ mobility for the chance of an unblemished face.

Michelle Webb is currently in the second year of an AHRC funded PhD in Medical History at the University of Exeter, researching facial disfigurement in sixteenth and seventeenth century England. She completed an MA in Early Modern History in 2012 and a BA in History in 1987.

Céline Cherici

Alexis Carrel (1873-1944) et la Grande Guerre

Dans les premières années du XXe siècle, Alexis Carrel débute une carrière aussi riche que controversée. En poste au sein de l’institut Rockefeller, il réalise en 1908 la première auto-transplantation rénale animale, puis reproduit cet exploit avec la plupart des organes (cœur, thyroïde), devenant ainsi un pionnier de la transplantation. Des problèmes immunologiques l’empêcheront de passer au stade humain. En 1912, il obtient le prix Nobel de physiologie et de médecine pour récompenser ses travaux sur la suture vasculaire et la transplantation de cellules sanguines et d’organes avant d’orienter ses travaux vers la culture tissulaire. En 1914, il rentre en
France, où, avec le chimiste anglais Henry Drasdale Dakin, il développe une méthode de traitement et de désinfection des blessures de guerre. Entre 1912 et 1936, il ouvre ainsi la voie à de nombreux thèmes de recherches tels que:
- La prise en charge d'urgence des blessés
- La désinfection
- La conservation d'organes vivants à des fins de transplantation.
- L'étude de l'activité cellulaire
- L'étude des mécanismes du vivant.
- L'invention avec Lindbergh d'un coeur artificiel

Pour l'ensemble de ses découvertes, il est décoré de la légion d'honneur et est nommé membre de nombreuses académies scientifiques. On peut considérer qu'il représente une des étapes majeure de l'avènement de l'ingénierie du vivant.

In the early years of the twentieth century, Alexis Carrel began a career as rich as it was controversial. In 1908, while stationed at the Rockefeller Institute, he carried out the first animal kidney autotransplant and subsequently repeated the feat with most organs (including the heart and the thyroid), becoming a pioneer in transplantation. Immunological problems prevented him from applying the technique in humans. In 1912, he won the Nobel Prize in Physiology and Medicine in recognition of his work on vascular suture and the transplantation of blood cells and organs before orienting his work towards tissue culture. In 1914, he returned to France, where, with the British chemist Henry Dakin Drasdale, he developed a method of treatment and disinfection of war wounds.

Between 1912 and 1936, Carrel’s work opens the door to many research topics including:
- Emergency care of the wounded
- Disinfection
- Conservation of living organs for transplantation
- The study of cellular activity
- The study of living mechanisms.
- The invention (with Lindbergh) of an artificial heart

For the totality of his discoveries, he was awarded the Legion of Honor and was appointed member of many scientific academies. Carrel’s work may be considered to represent one of the major steps towards bioengineering.

Céline Cherici, Maître de conférence en histoire et philosophie des sciences au sein de l'UPJV, appartenance au laboratoire CHSSC.

Bernard Devauchelle

La chirurgie nouvelle (or the birth of cosmetic surgery)

In 2005 Bernard Devauchelle, Institut Faire Faces, at the head of a team of surgeons at the University of Amiens, carried out the world’s first partial face transplant. The operation heralded a watershed moment in the history of medicine, and radically transformed the prospects of patients suffering from severe trauma, burns, disease, or birth defects affecting the face. Prof Devauchelle reflects on the history and evolution of maxillofacial surgery, from La Chirurgie nouvelle to the era of the face transplant.
Bernard Devauchelle is head of Maxillofacial Surgery at Amiens University hospital and President of the Institut Faire Faces (Université de Picardie Jules Verne). He is a member of numerous scientific institutions and an associate member of the French National Academy of Surgery, as well as being on the editorial committee of several international publications.

Jean-Claude Dupont

Les blessures de la tête et la Grande Guerre

Les plaies crâniennes et cranio-cérébrales occupent une place importante parmi les blessures de la Grande Guerre et une part très significative des morts au combat. Les traumatismes cranio-cérébraux font le lien entre la chirurgie crânienne et neurochirurgie, dont la Grande Guerre vit l’émergence en même temps que celle de la chirurgie reconstructrice de la face, amorçant ainsi toute la chirurgie de l’extrémité céphalique. La guerre rendit possible des innovations des doctrines et des techniques concernant les méthodes de diagnostic, le déroulement des interventions et les tactiques opératoires, ainsi que les méthodes thérapeutiques de réparation des plaies crâniennes et cranio-cérébrales, innovations dont certaines seront utilisées ultérieurement. Elle a aussi considérablement contribué à la normalisation des pratiques. Ce sont quelques-unes de ces données que nous voulons rappeler, en insistant ici sur l’apport particulier de la radiologie.

Par ailleurs, selon le neurologue Pierre Marie, les blessures cranio-cérébrales et les lésions balistiques sont des pathologies nouvelles qui ont permis de faire progresser la neurologie, en donnant accès à des régions cérébrales encore inexplorées. La Grande Guerre devient ainsi un champ d’expérimentation médicale, qui aboutit selon lui une sorte de réinvention de l’anatomie cérébrale, où là encore la place de la radiologie semble inestimable. Nous tenterons de vérifier cette affirmation, et peut-être de la relativiser, de manière à mieux cerner la place de la Grande Guerre dans l’histoire de la neurologie.

Cette étude des blessures de la tête s’appuiera principalement sur les sources médicales françaises et britanniques : articles scientifiques et communications aux sociétés savantes, rapports des centres neurologique militaires, recueils d’articles, ouvrages d’ensemble et manuels.

Head injuries and the First World War

During the Great War, cranial and craniocerebral wounds were frequent and they accounted for a significant number of deaths on the battlefield. Craniocerebral trauma is at the intersection of cranial and neuro-surgery these two specialities emerged during the war alongside facial surgery, in response to injuries affecting the cephalic region of the body. It is this conflict that made such advances possible. It led to doctrinal and technical innovations in a range of areas such as diagnostic methods, surgical procedures and therapeutic approaches to the reparation of cranial and craniocerebral wounds. The advances made during the war contributed to a normalisation of practices and some of these innovations continued to be used long after the conflict itself had ended.

This paper gives an overview of these evolutions, with special emphasis on the role of radiography. According to neurologist Pierre Marie, carniocerebral injuries and bullet wounds were new pathologies that gave access to little explored brain zones, thereby enabling new discoveries in the field of neurology. The Great War was thus a period of medical experimentation that led, according to Marie, to a re-invention of cerebral anatomy. This paper explores the key role apparently played by radiography in this process and discusses its importance in order to better understand the place of the Great War in the history of neurology. This study of head injuries draws upon French and British medical sources, including scientific publications, papers given at learned societies’ meetings, reports from military neurology centres and textbooks.
Andrew Brown

From Gillies to Guinea Pigs – the establishment of British maxillofacial units in World War II and one remarkable, enduring legacy.

The pioneering collaboration between Harold Gillies and William Kelsey Fry during and after World War I established the concept of a plastic surgeon and a dental surgeon working together to treat the severely facially injured. In 1935 the British Army Council appointed an advisory committee to plan the facilities that would be required for the treatment of maxillofacial injuries in the event of a future war in Europe. Not surprisingly the model that had been so successful under Gillies and Kelsey Fry was recommended as a template and, as a result, dedicated maxillofacial units were set up at the onset of hostilities in 1939. One of these units at the Queen Victoria Hospital, East Grinstead rose to prominence as a result of the work of Archibald McIndoe, one of Gillies’ disciples, who treated many of the fighter pilots disfigured by facial burns in the so-called Battle of Britain in 1940. Many required multiple surgical procedures to restore appearance and function. As a result they formed an association for mutual social and welfare support which they named the Guinea Pig Club, since they joked that the pioneering procedures they underwent were probably experimental! This presentation will consider the influence of World War I on the planning of maxillofacial surgery services for World War II and will outline the way in which maxillofacial units were subsequently established in the UK. The history and work of the Guinea Pig Club will be briefly summarised with an emphasis on its importance for the social, psychological and welfare support of its members, many of whom were disfigured as a result of their facial burn injuries. The mutual aid association they developed shows many similarities with Les Gueules Cassées and can be considered a forerunner of several contemporary patient support groups.

Andrew Brown was Consultant Maxillofacial Surgeon at the Queen Victoria Hospital, East Grinstead from 1981 – 2008. His main interest was surgery for head and neck cancer and facial and jaw reconstruction. He is a Past President of the British Association of Oral and Maxillofacial Surgeons.

Julie Mazaleigue-Labaste

Les cultures médicales face aux Gueules Cassées : place et fonction des croisements entre chirurgie et odontologie dans le soin des blessures de la face, à partir du cas d'Albéric Pont

Nous interrogerons la fonction des Gueules Cassées dans la constitution du champ de la chirurgie maxillo-faciale en France, à partir d'un point précis : le croisement de deux cultures médicales de la réparation, la chirurgie et l'odontologie-stomatologie, dans l'émergence de nouvelles pensées et pratiques. Nous nous appuierons sur les archives du Dr Albéric Pont, qui a assuré durant la Grande Guerre la direction du centre dédié aux blessures de la face à Lyon, les comptes-rendus
mensuels du Centre de Lyon, et leur comparaison avec d’autres sources (en particulier du Val-de-Grâce). Trois questions seront abordées :
(1) Le réinvestissement de la culture odontologique dans le soin des blessures de la face : en effet, les pratiques d’odontologie et de stomatologie ont trouvé une application immédiate dès les débuts de la guerre. Nous souhaitons explorer en détails les raisons et les modalités de ce fait : adaptation aux types de blessures, au contexte d’urgence, etc.
(2) La combinaison de cette culture odontologique avec une culture chirurgicale, et ses raisons : limites des pratiques odonto-stomatologiques face à certaines blessures, nécessité d’adoindre au travail de reconstruction mécanique (appareillages et prothèses) des pratiques de reconstruction chirurgicale et de greffe en raison de la gravité des atteintes.
(3) Les conséquences de ce croisement de ces deux cultures dans la constitution du champ de la chirurgie maxillo-faciale. Il s’agit alors d’identifier les innovations issues du traitement des Gueules Cassées. Dans ce cadre, nous mettrons en perspective l’échec de Pont à renouveler ses pratiques après-guerre. Son cas semble en effet exemplaire d’un point : la trop grande place, chez certains médecins, de la culture odontologique, a été un obstacle au développement d’une pratique de chirurgie maxillo-faciale. C’est donc la culture chirurgicale qui semble avoir été déterminante pour l’histoire de la chirurgie maxillo-faciale en dépit des apports de l’odontologie-stomatologie.


In this paper we will analyse the role of the Gueules cassées in the constitution of the field of maxillofacial surgery in France, from a specific point of view: the intersection of two medical cultures of repair, namely surgery and odontology / stomatology, in the emergence of new thoughts and practices. I shall refer to the archives of Dr Albéric Pont, who served as director of the centre for facial wounds in Lyon during the Great War and, equally, to monthly reports of the centre of Lyon, alongside other sources (especially those of Val-de-Grâce).

Three questions will be addressed:

(1) The reinvestment of dental culture in the treatment of injuries of the face: in fact, the practice of dentistry and stomatology found immediate application from the beginning of the war. We wish to explore in detail the reasons and the terms of this application: the adaptation of techniques to the types of injuries seen in the context of war-time emergency etc.

(2) The combination of this culture with dental surgical culture, and the reasons for such a combination: the limits of dental practices when faced with certain injuries; the necessity of adding to the work of mechanical reconstruction (devices and prostheses) surgical reconstructive practices and techniques of transplantation due to the severity of injuries.

(3) The consequences of the intersection of these two cultures in the constitution of the field of maxillofacial surgery. We shall attempt to identify innovations resulting from the treatment of the Gueules cassées and contextualise Pont’s failure to renew his practices after the war. His case seems to illustrate a particular point: the excessive emphasis among some doctors upon dental culture was an obstacle to the development of the practice of maxillofacial surgery. It is therefore the surgical culture of the time that seems to have been decisive in the history of maxillofacial surgery despite the contributions of odontology-stomatology.
Julie Mazaleigue-Labaste is a postdoctoral researcher at the Centre d’Histoire des Sociétés, des Sciences et des Conflits and at the Institut Faire Face. Her work focuses on the philosophy and history of medicine, psychiatry and the humanities.

Ruth Neave

The Progress of Plastic Surgery; an insight into the archives of BAPRAS

The Archives of BAPRAS (British Association of Plastic, Reconstructive and Aesthetic Surgeons) were started in the 1980s by Antony Wallace, and are known as the Antony Wallace Archive. For the last ten years the archives have been overseen and expanded by Honorary Archivist, Brian Morgan.

Plastic surgery goes back to at least 500 BCE, but the modern discipline as we know it has its origins in the First World War, and BAPRAS holding begin there. The collection contains a significant number of photographs and instruments charting pioneering techniques used throughout the 20th Century.

Photographs
It holds a number of photographs, some of which depict staff and treatment procedures from the First World War, although the majority are of plastic surgery personalities from the 1930s and the Second World War. There are some clinical photographs, and a collection of photographs taken by Percy Hennell during the Second World War. The latter are of great interest due to the system of colour photography used by Hennell which helps to achieve minimal image fading. The archives are also home to a 16mm cine film from the 1930s onwards which contains footage of several operative procedures, which has now been digitised and is being assessed for access.

Instruments:
BAPRAS has a collection of plastic surgery instruments, including a variety of grafting knives. Some instruments carry famous surgeons’ initials, while others display various developmental designs. Notably, BAPRAS owns a set of instruments that once belonged to the German surgeon Professor Jacques Joseph, who was the pioneer of cosmetic Rhinoplasty.

This talk will outline the extent of the archives, highlighting some of the significant images of the faces captured and the instruments used in the WWI which are held in the collection, alongside the personalities that built plastic surgery as a speciality.

Ruth Neave has been a museum curator for over 20 years specialising in collections management. She has worked for the St Andrews Preservation Trust, University of Dundee, The McManus: Dundee’s Art Gallery and Museum and the National Trust before joining Royal College of Surgeons as Collections Officer for BAPRAS in November 2014.

David Houston Jones

Facial repair: from the Medical Archive to contemporary artistic practice

This paper considers the ‘return’ of a number of visual artists to the subject of the gueules cassées in the centenary years of the First World War. Such a return, I suggest, is symptomatic of the ways in which the medical gaze has come to inflect the artistic sphere and, equally, of the contemporary preoccupation with the archive. In particular, Paddy Hartley’s work interacts closely with the archival traces of Harold Gilles’s surgical practice, and this archival dynamic is strongly felt in work undertaken for Project Façade and 1914FACES2014. While part of this engagement concerns the life-stories of facially injured soldiers, and the ways in which their documentation may be extended,
complemented and challenged through art, another part is bound up with the wider, more insidious cultural presence of the archive. The nature of the intervention made by the artists in question is determined by the practices which they associate with their historical and practical enquiry: in Hartley’s case embroidery and uniform sculpture; in Eric Manigaud drawing; and in the case of Kader Attia, sculpture and juxtaposition of mixed media. Attia’s The Repair from Occident to Extra-Occidental Cultures (2012) and Continuum of Repair: the Light of Jacob’s Ladder (2013-14) are considered for their foregrounding of the gesture of repair in a context which both heightens and resists it. Attia provocatively juxtaposes documentation of facial repair (including archival photographs) with the idea of the continuum, and further contextualises this work through the creation of archival spaces within the installation, principally book-filled frameworks which recall the cabinet of curiosities. This ambivalent gesture towards the archive is contrasted with the embedding, in Hartley, of archival research within artistic practice, as part of a thorough assessment of contemporary art’s engagement with facial injury and reconstructive surgery.

David Houston Jones is Associate Professor of French Literature and Visual Culture at the University of Exeter. His publications include The Body Abject, 2000, a critical edition of François Tanazza’s La Suprême Abjection de la Passion du Christ. 2001, Jean Genet, Journal du voleur, 2004, and Samuel Beckett and Testimony, 2011. Since 2013 he has been principal investigator of the UK team on the EU INTERREG IV-funded research project 1914FACES2014 on the cultural legacy of the facially injured soldiers of the First World War. He is currently working on installation art, visual archives and the face.

Paddy Hartley

Patchwork narratives and the archive: a visual interpretation of the life of Walter Yeo

This paper reflects on the ways in which artistic practice can relate to the archive, and on the role of the artist as researcher. The origins of Project Façade lie in facial surgery both as a matter of archival record and as a practice, and in particular in the author’s collaboration with Dr Ian Thompson. The collaboration involved the artist as a witness to facial surgery at Guy’s hospital, and subsequently led to collaborative production of Bioglass imprints. The author’s consultation of the Gillies archives, meanwhile, led to a series of works on the facially injured soldiers of the First World War. Those archives, now housed at the Royal College of Surgeons of England, bring together the medical records of many of the men on whom Gillies operated, and constitute a vital resource in understanding the medical history of the period and so bring about a virtual dialogue between the medical records and the visual responses to the facial injuries of WWI. This paper considers the life-story of Walter Yeo as a vector of this practice, and examines the trajectory of the author’s work from Project Façade to 1914FACES2014.

Paddy Hartley is a graduate of the University of Wales Institute Cardiff with a BA Hons and Master’s Degree in Sculpture and Ceramics. Paddy’s work has been exhibited and published widely and displayed in the permanent collections of a number of museums in the UK and USA including the Wellcome Collection and the Museum of Arts and Design New York in addition to presenting at The Victoria & Albert Museum and Science Museum London, amongst others. ‘Of Faces and Facades’ was published by Black Dog publishing in February 2015. The book presents Paddy Hartley’s work as it is reflected in Project Façade, 1914FACES2014 and his Surgical Sculptures and Face Corsets with texts by David Houston Jones and Marjorie Gehrhardt.
James Partridge

Facial disfigurement and fairness: a journey... from Sidcup to today

James Partridge is Founder and chief Executive of Changing Faces, the leading UK charity supporting and representing people with disfigurements, which is now a £1.5m organisation with a 30-strong staff team. Before setting up Changing Faces in 1992, James worked as a health economist in public health in the NHS in the '70s, establishes a dairy farming business, and taught A level economics in Guernsey in the '80s. As well as directing changing Faces, James has served on many committees and panels bringing disability, human rights, user, consumer and lay perspectives to bear on a range of subjects. He is also founding partner of Dining with a Difference, which aims to challenge and change the way chief executives/directors of private and public organisations address disability as a strategic business issue. Dining has made a major impact on the thinking of organisations such as Royal mail, Barclays and Jobcentre Plus.

James was appointed an Honorary Fellow of the Royal College of Surgeons of Edinburgh in 2005 and has Honorary Doctorates from both of the Universities in Bristol, his birthplace. He was the winner of Britain's most admired Charity Chief Executive for 2010 and the Beacon Prize for Leadership, also in 2010.

Jason Bate

At the cusp of medical research: surgical societies, facial injuries, and the role of photography in exchanging, debating, and disseminating methods and ideas during the First World War

This paper examines how photography was used for scientific education within the dental and surgical communities treating facial injuries during the First World War. The analysis of this paper constitutes an ethnographic encounter with the archive in an attempt to understand what the photographs did within a historical dynamic. In an attempt to determine the specific role played by photographs in shaping networks of knowledge and inter-relationships between medical societies, the paper will examine how photographs were used by groups of surgeons at meetings, lectures and in medical journals to communicate facts about facial injuries to the wider surgical profession. Within the context of surgical lectures and meetings at the Royal Society of Medicine and Royal College of Surgeons held by the British Dental and Medical Associations between 1914 and 1918, and at Inter-Allied Conferences and Dental Congress meetings between 1916 and 1918, photographs increasingly played a part in framing interaction between groups of surgeons, including Franco-British exchanges. This paper argues that photographs enabled facial injuries to be identified and evaluated accurately by allowing the speakers to think about their practice and methods of treatment, and courses of action could then be critiqued within the group. I argue that photographs became integral in the shaping of medical thinking and the dissemination of information on facial surgery during the First World War. As a result of a shift in attitude towards photography as a reliable visual method of analysis, photographs facilitated exchanges between groups of surgeons and functioned as a conduit through which surgeons could come together and bridge their knowledge and skills.

Jason is a part-time lecturer in photography and an independent researcher. In April, he submitted his PhD thesis at Falmouth University under the rules and regulations of the University of the Arts, London, and recently passed his viva with minor amendments.
Beatriz Pichel

Portraying the Gueules Cassées: Photography and the Making of Disfigurement (1914-1932)

The photographic archive of the gueules cassées preserved at the Parisian hospital Val de Grâce is one of the most known visual archives of facial disfigurement provoked by the war in France. The series of frontal and profile photographs that documented the different stages of the facial injuries and reconstructive surgeries experienced by French soldiers have become iconic. However, these portraits were not only examined in the medical context, as some of these pictures became public in the interwar years with propagandistic or pacifist objectives. Likewise, these patients were not only portrayed by medical authorities. Their photographs can also be found in other private and domestic sources, such as the albums made by French sanitary workers who became amateur photographers during the war and the journal Sourire Quand Meme. This paper will examine all these different uses in order to determine the ways in which photography served to shape the social, cultural and medical meaning of disfigurement during and after the war. In particular, it will focus on how photographic portraits constructed disfigurement as the opposite of expression. The analysis of the dynamic between these two terms that belonged to both the medical and cultural discourses will show that photographs became an essential instrument in the understanding of disfigurement precisely because of its ability to travel between different fields.

Beatriz Pichel is Wellcome Trust Research Fellow at the PHRC, de Montfort University, Leicester. Pichel holds a PhD in History and Philosophy of Science awarded in 2012 at the Universidad Autonoma de Madrid, Spain. Her main research interests are the history of photography, the history of emotions and the medical humanities.

Ulrike Zitzlsperger

Losing Faces – Gaining Perspectives in 1920s Germany

In 1924 Ernst Friedrich published his pamphlet War against War, presenting, in way of conclusion, veterans with faces often destroyed beyond recognition. A nation that had lost face made those soldiers who had suffered this fate themselves an integral part of contemporary culture. At the same time photography was pre-occupied with the human body and its manipulation; and the onlookers’ gaze was trained to engage with the Republic’s carefully designed surface culture. This contribution argues that the loss of both, face and faces, formed part of a cultural shift that was obsessed with body-parts, montage and mechanics in an attempt to reassemble a cultural perspective. At the heart of this process are ‘Ways of Seeing’ – usually based on habit and convention (John Berger) the unheard of scale in particular of facial disfigurement in the course of World War One enforced a creative re-configuration that appears both, new and unique.

Ulrike Zitzlsperger’s is associate professor at the University of Exeter. Her main research interest concentrates on the culture and literature of twentieth-century Berlin with a particular focus on the 1920s and 1990s. Aspects explored include the role of city myths, literary and autobiographical perceptions of the city, film and photography reflecting public spaces in periods of transition, topographical shifts within the cityscape and the interface between architecture, town-planning and literature. An interdisciplinary conference co-organized in Exeter in 2004 - ‘Aufbrüche zur
Metropole: Berliner Kultur in den zwanziger Jahren und heute’ (Berlin Culture in the 1920s and Today) - built upon these interests and resulted in a co-edited volume with a wide range of international contributors from various fields of research.

Sophie Cremades

La naissance d’un visage, une identité en marche

Le patient demandeur d’une greffe de visage est un sujet défiguré. Il subit un handicap fonctionnel lourd et vit exclu d’une société qui au fil du temps a exigé des corps et surtout des visages qu’ils disent ce que nous sommes. Au-delà du beau et du laïd, ce que le sujet défiguré expérimente dans toute sa violence c’est de vivre en monstre dans une communauté qui ne le reconnaît pas comme semblable.

Dès le réveil de l’intervention, les patients greffés ressentent un soulagement considérable. De nouveau, les regards (le leur compris) se posent sur eux. Ce visage est pourtant inerte, déformé par l’œdème, insensible. Le patient, par le geste du chirurgien, est réintégré dans la communauté.

Puis la sensibilité revient, il éprouve ce visage qui de ce fait devient le sien. Enfin, à force de travail, il retrouve la motricité et avec elle l’usage de son visage. Nous assistons à la naissance d’un visage. L’évolution de celui-ci est parfois jalonnée de complications somatiques qui ne sont pas sans liens avec l’expérience de la défiguration. Les conflits, les abandons, les rancunes trouvent parfois à s’exprimer de manière spectaculaire dans ce tissu qui devient alors l’écran sur lequel se trouve projetée la relation à l’Autre. Ce que nous savons aujourd’hui, c’est que malgré les apparences, le sujet ne se perd pas de vue. Il se reconnaît dans toutes les étapes de sa vie.

Notre identité n’est pas fixée aux limites visibles de notre corps, elle va bien au-delà, dans l’infiniment petit de nos cellules, qui gardent en mémoire notre identité biologique et notre histoire. Elle est aussi dans l’infini d’images de nous produites chez ceux que nous rencontrons. Loin d’être acquise, l’identité se négocie à chaque instant pour maintenir un équilibre entre ces deux mondes.

The effect of the birth of a new face on the patient’s identity

The patient who is waiting for a face transplant is a disfigured person. He – or she – suffers from severe functional disabilities and can be ostracised from a society that has grown to demand that bodies, and in particular faces, tell who we are. Beyond questions of beauty and ugliness, disfigured people go through the difficult, even violent, experience of living like ‘monsters’ amongst a society who does not recognise them as peers.

As soon as they wake up from the operation, the patients who have received a face transplant feel significantly relieved. The gazes of others, and their own, no longer avoid their face. This face is still inert, insensitive and deformed by post-op oedema, yet the patient, thanks to the surgeon, is reintegrated into the community.

Gradually, the face becomes more sensitive and the patient starts to ‘feel’ the face that is in effect becoming his or hers. Facial mobility is eventually regained through hard work and with this mobility comes the possibility for the patient to use his or her face again. This is the birth of a new face, whose evolution is sometimes made more complex by somatic issues caused by the experience of disfigurement. Conflicts, feelings of abandonment and rancour can find themselves displayed quite spectacularly in the facial tissue; the latter is like a screen on which one’s relationships to others are reflected. But what we know today is that the subject never loses sight of who he or she is. The patients recognise themselves throughout the various stages of their lives.
Our identity is not limited to the visible contours of our body, it goes a lot deeper, down to the infinitely small cells that remember our biological identity and our story. Our identity is also found in other people’s images of us. A person’s identity is thus far from set; rather it is the product of constant negotiations to keep a balance between these two worlds.

François Delaporte

De la face au masque : les questions de l’identité au sortir de la Grande guerre

Un premier problème concerne l’examen de la situation, tant du point de vue théorique que pratique, de la chirurgie réparatrice à l’époque de la Grande guerre. Il s’agit donc de mettre en lumière la portée, les significations et les limites de la chirurgie maxillo-faciale à ce moment-là. Ensuite, nous verrons dans le domaine des pratiques artistiques, notamment la sculpture, l’émergence d’une génération dont la formation comporte un un savoir du rendu des visages. A partir d’un indépassable seuil dans le domaine de la chirurgie et d’un savoir-faire acquis dans le cadre de l’enseignement dans les aux Ecoles des beaux-arts, il faudra décrire un infime embrayage événementiel : le sculpteur prend le relais du chirurgien. La confection de masques pour pallier l’irréparable peut alors apparaître comme une solution au problème du retour des blessés de la face à la vie civile. A partir et là, et pour finir, nous reprendrons les questions de l’identité au sortir de la grande guerre.

From the face to the mask: the question of identity at the end of the Great War

The first problem is to situate, both theoretically and practically, reconstructive surgery at the time of the Great War. This paper is thus concerned to highlight the scope, meaning and limits of maxillofacial surgery at that specific moment in time. We will then consider, in the field of artistic practice, including sculpture, the emergence of a generation specifically trained to render the face. This analysis, informed by the know-how acquired in teaching contexts at the Ecoles des beaux-arts, will describe a tiny but significant shift of engagement which represents a historical step-change: the sculptor takes over from the surgeon. The construction of masks to mitigate the irreparable can thus appear as a solution to the problem of the return of the wounded to civilian life. The final point, which builds on this, is a return to the question of identity at the end of the Great War.


Anne-Marie Martindale

When I look in the mirror, I see a mixture of the two [of us]” (Isobel Dinoire, BBC, 27.11.2012); Some thoughts on identity shift and facial transplantation

The relationship between faces and identity has a long socio-cultural history. Two thousand years ago Greeks were writing about facial appearance and character, and in some respects these ancient tropes are still with us today. How many James Bond films have used a facial ‘disfigurement’ or unusual appearance as an indicator of immorality? In recent years the advent of experimental facial transplantation surgery has thrown new light on the topic of faces,
‘disfigurement’ and identity. In both public and academic arenas, it has been suggested that identity is corporeally located within faces, so that when surgery occurs, identities are also transplanted.

‘Surgeons have been transplanting livers, kidneys and hearts for many years, but faces have always been different. They are seen as a sacred, untouchable parts of a person's identity (The Telegraph Online, Peter Allen, 2.11.2008).

Using anthropological theories of health I want to deconstruct and challenge this partial conceptualisation in favour of a more nuanced complex, embodied understanding of the relationship between faces and identity. Developing this premise, I will draw on the findings of my recent ethnographic facial ‘disfigurement’ research to explore issues of identity disruption, transition and reintegration in relation to facial transplantation.

Anne-Marie Martindale is an anthropologist and health researcher working at the University of Liverpool. She is particularly interested in: the relationship between faces and social reproduction; and identity, facial ‘disfigurement’ and transplantation related issues. Her recent PhD thesis explored identity shift in people with an acquired facial ‘disfigurement’ using an ethnographic, narrative methodology.

Louisa Young

How history feeds fiction

My first book was a biography of my grandmother, Kathleen Scott, sculptor and widow of Scott of the Antarctic, who worked with Harold Gillies making casts of the faces of wounded soldiers - probably via her teacher Henry Tonks. When I first saw those unforgettable photographs, I kept them in my mind, and 20 years later, at the Wellcome in London, I saw one of the faces again. Nearby was displayed a field postcard, on which was printed: ‘My dear ----, I want to tell you before any telegram arrives that I have received a slight/severe wound in my ----.’ Putting together the wounded face and the card that wounded soldier was expected to fill in, both so strong, and both saying nothing, I started to see stories. The soldier would not tell his mother he had a severe injury to his face, he would say he had a slight injury to his stiff upper lip. He would lie, because her innocence of the horrors he lived through was the very thing he was fighting to protect. Then, in a nurse's memoir, I read of a soldier so distraught about his face that he broke off his engagement, in one move assuming that his fiancée would pity him and rejecting that pity. When a man lies to those he loves, to protect them, then a story begins. The cliche is that soldiers don't talk about the war - but this isn't always a choice, or even a psychological trait. What if you have no mouth?

I will talk about how history feeds fiction, about the responsibility authors have to the real people whose stories we appropriate, and about putting humanity back into the heart of history and science - one of fiction's most important jobs - in a field as tender as facial injury and reconstruction. I would also like to include a reading from one of the books.

Louisa Young graduated in modern history from Trinity College Cambridge. She is the author of thirteen books, including The Book of the Heart (a cultural history of the human heart); A Great Task of Happiness, the life of Kathleen Scott, and most recently the novels My Dear I Wanted to Tell You and The Heroes’ Welcome (HarperCollins, 2011 and 2014), set during and immediately after WW1. The third of this series is to be published in 2015. Her books have been selected for Cityread for London and the Richard & Judy Book Club 2012, nominated for the Impac Award, won the Galaxy Audiobook of the Year 2011, and been shortlisted for the Wellcome Prize, the Costa Novel of the Year, the Galaxy Book of the Year and the Orange Prize. Between them they are
published in 36 languages. She is also half of the children’s author Zizou Corder, whose Lionboy novels were co-written with her daughter Isabel Adomakoh Young.

Joe Kember

**Face Value: Robert Florey and the Representation of the Gueules Cassées in Hollywood.**

As an emigré French filmmaker working in Hollywood from the late 1920s, Robert Florey is most often remembered for the expressionist styles he brought to Hollywood horror and B movies from the late 1920s to the 1940s, as well as for his early avant-garde production, the influential Life and Death of 9413: A Hollywood Extra (1927). Drawing primarily upon other, neglected films from Florey’s extensive and diverse back catalogue, this paper will draw attention to a different aspect of his cultural and cinematic influences: his recurrent concern with the representation of non-expressive and mutilated faces. The first of these was Face Value (1927), a film unique in Hollywood at this time for its stark and unflinching representation of a facially disfigured veteran of World War I, whose struggles to adapt to his condition are shared, painfully, with his fiancé. By contrast with emergent American horror traditions, typified by the facial theatrics of Lon Chaney Sr. in films such as The Hunchback of Notre Dame (Wallace Worsely, 1923) and The Phantom of the Opera (Rupert Julian, 1925), Face Value creates a social drama notable for its sympathetic treatment of facial disfigurement, as well as for its sharp formal experimentation with the facial close-up. This type of stylistic self-consciousness concerning facial expression would remain a theme throughout much of Florey’s subsequent career. My paper will proceed to trace the motif through three other little -studied films: The Florentine Dagger (1935), The Preview Murder Mystery (1936), and The Face Behind the Mask (1941), each of which continued Florey’s interrogation, across a series of genres, of the significance of facial disfigurement within an industry where such features more frequently connoted monstrosity or deviance.

Joe Kember is a Senior Lecturer in Film at the University of Exeter since 2008. His research is in popular and visual culture throughout the nineteenth and early twentieth centuries and especially in early and silent cinema. He has released a number of notable publications, including Marketing Modernity: Victorian Popular Shows and Early Cinema (Exeter: University of Exeter Press, 2009). He is the reviews editor for Early Popular Visual Culture, and in 2009 he co-organised the major international conference 'Instruction, Amusement and Spectacle: Popular Shows 1800-1914'. In the same year he was Visiting Associate Professor at Vassar College.

Evelyne Jardonnet

**Défigurations dans le cinéma de la Grande Guerre : de l’infilmable à l’image-spectrale**

Dans un certain nombre de films consacrés à la Grande Guerre, la représentation de la mutilation faciale ou psychique engage de façon paroxystique le rapport à l’image. Ce sont les différentes modalités de ce rapport que la présente communication vise à explorer. Dans ce but deux axes de réflexion seront abordés. Le premier examinera les différentes stratégies élaborées par les cinéastes pour donner une forme à l’infilmable que la mutilation semble incarner. On verra avec les analyses de La Chambre des Officiers, de Johnny got his gun que le personnage du soldat défiguré se construit en cristallisant la tension entre les différents constituants du plan que sont le champ et le hors-champ. Inversement, absente dans J’Accuse d’Abel Gance, cette tension laisse place à une véritable image-monument, dont on évoquera le fonctionnement. Au-delà de cette dynamique entre occultation et monstration, le deuxième axe de réflexion mettra au jour un phénomène plus spécifique aux films du corpus : la revenance des images. Celle-ci prend
plusieurs aspects dont on proposera une typologie. La confrontation de J'Accuse avec La Chambre verte, celle de La Chambre des Officiers avec Johnny got his gun montrera qu'elle relève tout d'abord de l'intertextualité. On assiste en effet à la circulation de motifs scénaristiques et visuels qu'on répertoriera. La dimension mémorielle de l'image revêt également une autre tournure. Beaucoup de cinéastes du corpus ont pris acte de l'immense production visuelle documentaire que La Grande Guerre a suscitée au moment de son déroulement. C'est pourquoi on questionnera l'utilisation de ces archives visuelles aussi bien dans les fictions que dans le documentaire O Uomo. On constatera alors que l'insertion de ces archives conduit notre rapport à l'image aux limites du discursif.

In a number of films about the Great War, the representation of facial or psychological injury models image relations in paroxysmal terms. This paper will explore the different modalities of these relations. To this end, two lines of enquiry will be followed. The first will examine the different strategies developed by filmmakers to give form to the unfilmable content that mutilation seems to embody. Via analysis of La Chambre des Officiers and Johnny Got His Gun we shall see that the character of the disfigured soldier is constructed through a crystallisation of the tension between on-screen and off-screen space. Conversely, this tension, which is absent from J'accuse by Abel Gance, gives way to an image-monument, a monumental image whose functioning we shall discuss.

Beyond this dynamic between concealment and demonstration, the second line of enquiry will uncover a phenomenon specific to the film corpus considered: that of revenance, or the spectral image. This comprises several specific aspects, from which we propose to form a typology. Comparison of J'accuse with La Chambre verte, and of La Chambre des officiers with Johnny Got His Gun shows that it is above all revealed by intertextuality, and here we bear witness to a recirculation of scenarios and of visual motifs which we shall list. The memorial dimension of the image, meanwhile, has a rather different bearing. Many filmmakers have taken note of the vast documentary corpus brought into being by The Great War at the time, and for this reason we shall analyse the use of these visual archives both in fiction and in the documentary O Uomo. As we shall note, the presence of these archives casts our relation to the image as a relation to the limits of discourse.

Karine Chevalier

The Disfigured Face or the Absent Signifier: Faces and Masks in French Cinema

The aim of this paper is to question the impact of the disfigured faces in French cinema as a hidden signifier. It will analyse the strategies employed by French filmmakers to articulate the disfigured face in relation to the masks which can be understood as a physical external object or an internal face.

I will analyse films in which the masks play a key role to reveal or to repress the visage (following Claude Levinas’ s binary relationship between the face and the visage), from Abel Gance’s J’accuse (1919) to Charles Vanel’s Dans la nuit (1929), Jean Cocteau’s La Belle et la Bête (1946), Georges Franju Les Yeux sans visage (1960), André Cayatte’s Le Miroir a deux faces (1958), François Dupeyron’s La Chambre des officiers (2001), Leos Carax’s Holly motors (2012). I will explore the way numerous cinematic devices (camera angle, subjective point of view, voice over and privileged cinematic genre among other) have been created to portrai the “in-between” spaces/ states of the face and the visage as a consequence of masked-unmasked characters produced by various historical contexts.
We will conclude that the screen is conceived primarily as a mask to hide/protect the audience from the disfigured faces and secondly as a visage that can be described using Roland Barthes’s term such as punctum which offers a wounding detail to deepen the relation between the image and the audience (to complement the studium which is socio-historically motivated).

From the experience of the gueules cassées to the innovations in the surgical field, the responses to disfigurement in French cinema reveal the limitation of the representation and the necessary participation of the audience to fulfil the role of the absent signifier.

Karine Chevalier is Senior Lecturer in French and Francophone studies at Roehampton University London. Her main research interests lie in the field of French cinema, Francophone Postcolonial studies, Anthropology and Visual studies. She has published two monographs on memory from both imaginative and cultural perspectives (La Mémoire et l'Absent. Nabile Farès et Juan Rulfo de la Trace au Palimpseste. Paris : L'Harmattan, 2008; La Mémoire et le Présent.Daniel Maximin et Salman Rushdie du Masque au Chaos. Paris : L'Harmattan, 2010) as well as numerous articles on French and Francophone literature and cinema. The main focus of her research is on the use and representation of masks, especially the mask as an object on the move. She is also a filmmaker.

Richard Woodall

“Circus of Horrors”: Disfiguring the Feminine in 1960s Cinema

Sidney Hayers’ 1960 B-movie Circus of Horrors tells the story of Dr. Rossiter, a megalomaniacal plastic surgeon who is forced to change his identity and flee England when an illegal operation goes awry. On the run in the south of France, he happens upon a derelict circus, inhabited solely by its alcoholic proprietor and his young daughter, whose face bears a scar left by a bomb which fell on her school during World War 2. Rossiter operates on the girl with miraculous results, before seizing control of the circus and transforming it into one of the most successful attractions in Western Europe, featuring a famous “Temple of Beauty”, in which models perform tableaux depicting great paragons of pulchritude from throughout human history – Adam and Eve, Sappho etc. The circus has a secret, however – all of its female performers are former patients of Dr. Rossiter, women with some form of facial wound or scar whom he has surgically transformed and put on display for his own pleasure and profit.

Circus of Horrors is unusual in that it examines the effect of military violence upon the feminine face, providing an interesting counterpoint to the case of Les Gueules cassées and other representations of male combatants injured in armed conflict. It also raises the issue of the relationship between violence and the feminine face more generally, portraying the latter as a plastic substance which is constantly disfigured and re-figured by a brutal masculine hand. In this, it is representative of a wave of 60s films which took the feminine face, disfigurement and plastic surgery as their central themes, such as Eyes Without a Face, Peeping Tom and The Face of Another. This talk will consider what these films can tell us about the way that cinema has shaped our notions of the relationship between the feminine face, destructive violence, and constructive surgical intervention.

Richard Woodall is a 2nd year PGR student in the Department of English Literature at the University of Sheffield. His research concerns the role of visual technologies in shaping the way we read and understand the human face.
Martin Hurcombe

The Return of the Brute: The Changing Face of the Warrior in Roger Vercel’s Capitaine Conan

Published in 1934, Roger Vercel’s novel Capitaine Conan sits uncomfortably within the canon of interwar pacifist literature. The horrors of the Western Front were a familiar trope to a French public that had largely reneged notions of martial heroism preferring a vision of the war which cast the French as unwilling participants in a primarily European conflict instigated by Germany. Set in the months following the Armistice on France’s Eastern Front, Capitaine Conan is concerned with the inability of men like Conan, its eponymous hero, whose elite unit has for four years used the most violent methods at its disposal in the name of the nation, to adapt to peace. Conan, then, is no reluctant soldier; he is a gung-ho warrior who takes an animalistic pleasure in the act of killing. This paper will examine how the face of the warrior, seen through the eyes of the novel’s first-person narrator, reflects this warrior’s failed transition to the new post-war order. In particular, it will examine images of bestiality associated with the warrior figure and reflected in his facial expressions, tracing in these a critique of the primal forces unleashed by the nation in its own defence. It will demonstrate how, through the changing face of Conan and his men, Vercel’s novel offers an original analysis of the war and its origins. While for Freud, war represented a temporary suspension of civilised behaviour, Vercel, this paper will argue, locates the origins of war in the hypocrisy of the civilised nation state itself. The changing face of the warrior reveals not so much the beast within man, but the beast forged through the social act of war itself.

Martin Hurcombe is Reader in French Studies at the University of Bristol. He is the author of Novelists in Conflict: Ideology and the Absurd in the French Combat Novel of the Great War (Rodopi, 2004) and of France and the Spanish Civil War: Cultural Representations of the War next Door, 1936-45 Ashgate: 2011) and is one of the editors of its journal (Journal of War and Culture Studies).

Kate Macdonald

The facially impaired First World War soldier in British popular culture

- Literary representations of disfigurement
- First World War literature and the face

My project on the depictions of disability in British popular culture, is at present focused on the popular print culture of the First World War and the 1920s. I have looked at over 4000 issues of popular fiction magazines, and newspapers, collecting data on how the impaired body was presented in text and image during this period of dramatic demographic change, and how it did not become normalised in British society. Partly due to primitive prosthetic technology, and partly due to social construction, war-impaired ex-soldiers became ‘othered’ by their altered physical state. In this paper I would like to discuss how the impaired face was used in British wartime popular print culture, in magazine fiction and in printed ephemera, including newspapers, advertising, and postcards. My paper will discuss the different uses in fiction of the returned soldier with a scarred face, the woman scarred by munitions work, and the metaphorical doubling of facial scarring with blindness to produce the resolution of healing and unity. I discuss my data in the context of other categories of civil and military impairment, and show how the images in printed ephemera relate to the fiction, depicting facial scarring as a metaphorical and reversible wound that impacts on masculinity and economic productivity, but can yet be overcome. The political and propagandist implications of the popular cultural record will be considered as an aspect of how the public were
expected to see the impaired face. The forms of popular culture I study have the power to reflect and affect mainstream opinion by their very wide dissemination and their function in depicting recognisable, familiar situations; but discerning whether they reflect or affect is problematic.


Kamilla Pawlikowska

Imagination, the Face and Surgical Intervention

Disfigurement, in both literary texts and in the world, is often accompanied by a wish for surgical intervention. Imagining the consequences of a sudden change in appearance, authors of fiction examine how it alters the relationship between the body and interiority. More specifically, they ask to what extent this relationship can be complicated. The belief that one’s interiority shapes one’s external appearance is one of the world’s key epistemological paradigms. It was evoked, among others, by Emmanuel Swedenborg as ‘correspondence’, Johann Caspar Lavater as ‘the principle of life’ and by Charles le Brun as ‘a Law of Nature’. Nineteenth- and twenty-century authors frequently perceive surgery as intrusion into this relationship. In the fantastic tale ‘The Birthmark’ (1843) by Nathaniel Hawthorne, the protagonist develops a monomaniac obsession with the red mark on his wife’s otherwise perfect face. He, who is himself a scientist, removes the mark surgically. However, by this intervention he severs ‘the bond by which an angelic spirit kept itself in union with a mortal frame’ and his wife dies. In a short story by Akutagawa Ryunosuke entitled ‘The Nose’ (1916) a Buddhist monk, suffers because of his extremely long nose. After a series of harsh treatments the nose is successfully diminished but he bitterly regrets of having acted ‘against nature’. In the novel The Face of Another (1964) by Kobo Abe, a chemical explosion destroys the protagonist’s face. Following a successful procedure, he receives a new face. Although he resumes normal life, his character gradually changes to match the new face. In short, this paper will examine a variety of consequences which follow changes in facial appearance, as depicted in literary texts.

Kamilla Pawlikowska received a BA in English Culture and Language, an MA and a PhD in Comparative Literature from University of Kent (UK). In her PhD thesis she has examined representations of the human face in literary texts of the nineteenth and twentieth centuries. Currently, she is a British Academy/Japan Society for the Promotion of Science Postdoctoral Fellow at Seikei University, Tokyo.

Marjorie Gehrhardt

La Greffe Générale: the voice of French facially injured soldiers

This paper discusses the experience of facial injury from the point of view of the servicemen themselves. Like the combatants on the front, soldiers wounded during the First World War wrote and published newspapers. Amongst the many, sometimes short-lived, soldiers’ publications, La Greffe Générale, the journal of the wounded treated in the Ve Division de Blessés [5th unit of wounded combatants] at the Val-de-Grâce hospital in Paris, stands out. Les baveux [the dribblers],
as the facially wounded combatants were sometimes nicknamed, spent months, even years, undergoing treatment, the sometimes ground-breaking operations endeavoured by the surgeon Hippolyte Morestin and his colleagues interspersed with long phases of convalescence. Of key importance was finding occupations for the patients, whose families were not always able to visit them and whose frightening looks often deterred them from venturing outside the hospital. But as this paper shows, writing newspapers was more than a pastime and for the researcher these documents constitute a unique source. The voices of the wounded can be heard throughout the eight issues, released between December 1917 and July 1918. The challenges faced by facially injured combatants are reflected in their writings, as this paper demonstrates. At the same time, the journal itself is an attempt to respond to some of these issues. Ultimately, I argue that the hospital newspaper was an attempt to collectively cope with the challenges facing gueules cassées. The ethos reflected and developed in La Greffe Générale played, I suggest, a significant part in the later constitution of the facially disfigured men’s organisation, the Union des Blessés de la Face.

Marjorie Gehrhardt is Associate Research Fellow in the College of Humanities, University of Exeter, on the project 1914FACES2014. She works on the cultural history of the facially injured soldiers of the First World War in France and Great Britain in particular. Her publications include articles in the Journal of War and Culture Studies; in Gender, Agency and Violence, 2013; and in Twentieth Century Wars in European Memory, 2013. She is currently writing her book The Men with broken Faces: Gueules cassées of the First World War (Peter Lang).

Suzannah Biernoff

85 Portraits of War

One of the most poignant innovations of the First World War was the production of portrait masks for severely disfigured servicemen: the surgical ‘failures’. In London and Paris, professional sculptors were responsible for the provision of these delicate masks: their results are recorded in the photographs of British home front photographer Horace Nicholls and in a silent film of Anna Coleman Ladd at work in her American Red Cross studio in Paris. Both sources document the artistry of prosthetic repair, and Nicholls’ images dramatize the psychological impact of facial mutilation – regarded by many to be the most dehumanizing of injuries. Paradoxically, though, the juxtaposition of human face and portrait mask disturbs the equation of identity and appearance on which traditional portraiture depends. Given the professed ‘death of the portrait,’ one might expect a different treatment of disfigurement today; a loosening of the conviction that appearance and identity are relatively fixed; a more dispersed conception of personhood. Images from recent conflicts do not bear this out, however, and the representation of disfigured veterans (indeed, disfigurement of any sort) in the press and popular culture remains convention-bound. An exception is the work of American photographer Nina Berman, whose portraits of veterans challenge the usual narratives of sacrifice, courage and redemption – including the fantasy of repair.

Suzannah Biernoff teaches in the Department of History of Art at Birkbeck. Her research has spanned medieval and modern periods: she is the author of Sight and Embodiment in the Middle Ages (2002), while her recent work pursues the themes of corporeal history and visual anxiety in the context of First World War Britain. In 2007 she was awarded a Wellcome Trust Research Leave Award for a project on the cultural history of disfigurement. Open Access articles from this project have been published in the journals Visual Culture in Britain, Social History of Medicine and Photographies, and an essay on Nina Berman’s Marine Wedding appeared in the edited volume
Experience of Portraiture in Clinical Settings is a qualitative study that used arts-based research and narrative inquiry methods to explore the lived experiences attributed to participating in the portraiture process in a cancer clinic. This study aimed to gain an understanding of human experiences of participating in the portraiture process in a clinical setting. The Institutional Review Board approved all aspects of the study. Five adult subjects, ages 19 and over, undergoing treatment at the Head and Neck Cancer Clinic at the University of Nebraska Medical Center, Omaha, NE, participated in the study collaborating with a portrait artist on a one-to-one basis to co-create artistic images which attempted to represent authentically each participant. Over the course of four months, the author interacted with and actively listened to each patient's lived experience of illness, suffering and recovery to create, with subjects, 24 images aimed to act as a fulcrum around which the author and each participant co-constructed a shared narrative of the process. The author worked with an interdisciplinary analysis team to evaluate study data, including transcripts of dialogue between artist/researcher and sitters/patients, semi-structured interviews, and portraits. Through triangulation and systematic qualitative analysis investigators found the following emergent themes: participants embraced uncertainties, developed trusting relationships, engaged in reflective practices, told a story and felt empowered. The study discovered that the visual art medium of portraiture is a suitable vehicle for medical interactions, interpretation, inference, imagination and intuition and analysis. The process and inherent dualities of portraiture apply to both artist/sitter and physician/patient relationships. The study has ongoing implications in the field of medicine as not only a research and teaching model but also a therapeutic intervention.

Scottish artist, Mark Gilbert earned a BA in Fine Art from Glasgow School of Art in 1991. After ten years of studio practice, The Royal London Hospital, England offered him a post as artist in resident. There he worked in collaboration with maxilla facial surgeon, Professor Iain Hutchison and his patients. The resulting exhibition ‘Saving Faces’ and international tour led to his next project: a two-year research project and exhibition entitled, ‘Here I am and Nowhere Else: Portraits of Care’. His studies continue to be focused in the interdisciplinary field of Art and Medicine and in 2014 he completed his PhD in the Medical Sciences Interdepartmental Area (MSIA) program at the University of Nebraska Medical Center with his dissertation The Experience of Portraiture in a Clinical Setting (EPICS). Through EPICS, both artist/researcher and sitters/participants were able to embrace what was threatening with what was reassuring, what was painful with what was pleasant, what was isolating with what was social, what was destructive with what was constructive, what was damaging with what was healing. Past, present and future, silence and dialogue, listening and questioning, reflecting and experiencing, analyzing and imagining all converged into the resultant narratives of EPICS.

(See also Mark Gilbert’s Portrait exhibition: Saving Faces meets 1914FACES2014 in the University of Exeter Forum, Central Campus)
Luke Shepherd

If your surgeon can’t draw, would you trust him with a scalpel?

An article in the BMA News states that ‘Doctors who work in the field of reconstructive surgery tend to have an excellent grasp of anatomy, but when it comes to aesthetics, the shape of and spatial relationship between, individual features, they can be less confident’. While possibly an over exaggeration, it is true to say that the training received by plastic surgeons favours surgical protocol over the development of spatial awareness.

For the past 30 years I have been working as a portrait sculptor and educator, developing a scientific approach and protocol to train the eye to accurately understand the complexity of 3-D form. The methods developed aim to unravel the visual complexity of the human head and to close the gap between the forms that are seen and that which the hand can re-create.

Following on from this, when teaching visual aesthetics and perception to plastic and maxillofacial surgeons, it is apparent that an intricate knowledge of anatomy, while being of paramount importance to the surgeon, plays little significance in visual awareness of form. Arnheim in Tolleth states ‘We see not only with our eyes but with our brain. Our knowledge of a subject, past experience and preconceived notions may seriously alter perception.’

Beyond an appreciation of aesthetics and anatomy arises the question what visual training is appropriate and relevant for the plastic and maxillofacial surgeon?

Luke works as a portrait sculptor with bronzes throughout museums and public buildings in the UK and overseas. For the past 15 years he has been teaching plastic and maxillo-facial surgeons how to understand 3-D form through a 4-day intensive "Heads Course".  www.luke-shepherd.com

Eleanor Crook

Eleanor’s sculpture ‘The Band Played On’ constitutes an essential element in the Faces of Conflict exhibition in the Royal Albert Memorial Museum (RAMM), Exeter.

The sculpture presents a military band of wounded soldiers, subjects of reconstructive plastic surgery, dating from 1855 to the present day. They represent survivors of the Crimean War, the First World War, the Second World War and the War in Afghanistan. The individuals depicted are fictional but the wounds and surgical procedures are documentary and real, researched from medical archival sources.

Eleanor Crook is a British artist who trained in sculpture at Central St Martins and the Royal Academy and makes figures and effigies in wax, carved wood and lifelike media. She has also made a special study of anatomy and has sculpted anatomical and pathological waxworks for the Gordon Museum of Pathology at Guy’s Hospital, London's Science Museum, and the Royal College of Surgeons of England. She exhibits internationally in both fine art and science museum contexts. She learned the technique of forensic facial reconstruction modelling from Richard Neave and has demonstrated and taught this to artists, forensic anthropology students, law enforcement officers and plastic surgeons as well as incorporating this practice in her own sculpted people. Following a lifelong interest in Northern Renaissance woodcarving, and influenced by the experience of dissecting in order to learn anatomy, she studied limewood carving at the Giesler-Moroder wood carving school in the Austrian Tyrol. In the interest of making figures more lifelike than the living, using a generous grant from the Wellcome Trust she developed the incorporation of electronic animatronics systems into the sculptures so that her moribund and macabre creations now can twitch and mutter. Eleanor is artist in residence at the Gordon Museum of Pathology, a
Sophie Delaporte

L'atteinte XIXe-XXIe

This paper aims to demonstrate the variety of types of damage sustained by the face in war and conflict from the middle of the nineteenth century to the present by means of a "visual" perspective, relying on the very large body of visual documentation which has been generated from the American Civil War to operations in Iraq and Afghanistan (OIF / OEF) at the beginning of this century. How were these faces photographed? What was the relationship between the injured, the camera and the caregiver? What dissemination, for whom and to what end? Here we have to study the forms of injuries because the nature of facial injury has evolved through the conflicts of the nineteenth, twentieth and twenty-first centuries, and also consider the impact of combat conditions on the types of injury sustained.

Thus we can study the main factors that determine the different wounds, in terms of exposure and vulnerability of the body. My work is focused on the American context but does not exclude comparative perspectives. Indeed, the history of the United States offers a set of chronological milestones authorizing a comprehensive study. The sources are particularly rich, particularly in terms of images, in the Civil War, both World Wars, the Korean War, the Vietnam War and, more recently, the operations carried out in Iraq and Afghanistan (OIF / OEF).

Marie Le Clainche-Piel

Committing to Face Transplantation: From the Challenge of Singularity to the Return to the Community

This paper is about how patients involved in a process of face transplantation in France invest in this experiment.1 How do they describe the disorders affecting themselves and how do they connect them with this therapeutic opportunity? How do they negotiate with the aims and
expectations of the surgical team or their loved ones? To answer these questions, we follow four patients in reconstructive surgery services who accepted to get involved in a process face transplantation, and one patient who refused. Through the ways facially injured people describe their life trajectory and argue about their decision, we demonstrate how they mobilise different registers of commitment in the therapeutic experimentation: between vital and socialising. Also, considering the process of facial repair in a long temporality that exceeds the time of the surgery, we observe how the persons deal with the defence of the uniqueness of their personal history and their appearance, as well as the pursuit of a goal of reintegration into a normal social life and community. To better understand this dynamic, we invoke sociological and anthropological literature on the emergence of medical technologies\(^1\), on the borders of normality\(^2\) and body standards, as well as organ transplants\(^3\).

Marie Le Clainche - Piel, PhD candidate in sociology at the EHESS (Paris, France) and academic visitor at the School of Anthropology & Museum Ethnography (Oxford, United-Kingdom). Since 2010, my research aims at understanding the process of emergence of face transplantation in France and the United Kingdom, from the actions and points of view of the surgical teams, patients, ethics committees and charities defending facially injured people.

Emmylou Rahtz

**The complex course of psychological distress following facial injury**

People who suffer injury, whether from accidents or interpersonal violence, face a range of psychosocial issues. Major trauma patients are known to be at risk of high levels of post-traumatic stress disorder (PTSD) as well as depression and anxiety. Less is known about facial trauma patients, and research has seldom compared their experiences with those of other trauma patients. Though standards of oral and maxillofacial surgery (OMFS) continually improve, psychological problems may be overlooked in busy clinics. People with facial injuries may be hypothesised to face additional barriers to recovery such as appearance concern and problems with social reintegration. Furthermore, violent injuries are disproportionately likely to affect the face. This prospective study recruited patients being treated at the Royal London Hospital by the trauma team, OMFS team or both. Participants completed standardised self-completion questionnaires in hospital (baseline) and at three and six month follow-up: these assessed symptoms of PTSD, depression, anxiety and appearance concern, as well as wellbeing and social support.

Data from 225 injury patients show that a high proportion experienced clinically significant symptoms of distress. Six months after injury, 26% of patients experienced symptoms indicative of PTSD; 31% of depression and 38% of anxiety. Perhaps counterintuitively though, those with facial injuries experienced significantly lower levels of distress and appearance concern at six months, although at baseline their levels had been slightly higher. There are high levels of psychological distress and unmet needs after injury, and rehabilitation involves a return to normal psychosocial functioning as well as physical function. However, the path to recovery appears to differ between facial trauma patients and other trauma patients, and there is a need for a simple way of assessing differential distress so that appropriate interventions can be offered.

Emmylou Rahtz is a PhD student interested in the effects of physical health on mental health and wellbeing. Her doctoral research investigates the psychosocial impact of traumatic injuries, in particular facial injuries in the Centre for Psychiatry, QMUL, London. She previously worked in social research, and holds degrees in English Literature and Psychology.
This book presents the work of the artist Paddy Hartley, in particular as it is reflected in Project Façade, 1914FACES2014 and Hartley’s Surgical Sculptures and Face Corsets. These projects are all concerned with the face, and with the ways in which it can be repaired, manipulated and recontextualised. Hartley’s striking work incorporates surgical and pharmaceutical equipment as well as steel, scrap metal, digital embroidery and textiles in order to set out a critique of how we think about the face today. That critique is rooted in history, particularly the history of the facially injured servicemen of the First World War and the pioneering treatment they underwent.

*Paddy Hartley: of Faces and Facades* brings together this work in book form for the first time, presenting previously unpublished texts, drawings and photographs which document a remarkable creative process and a history that is still insufficiently explored.