

Special issue introduction: war casualties and the production of knowledge

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Over the past two centuries, the treatment of the war dead has undergone significant changes, encompassing funerary practices as well as techniques for identification, determining causes of death, pre-mortem care and tallying of casualties. This evolution stems from two overarching trends: first, an increased medical presence closer to the battlefield, and second, a heightened focus on bodies and their individuality, which both emerged from the funerary transition initiated in the late eighteenth century.¹ While military doctors, in particular, who are closest to the wounded and therefore to the potentially dead, are also those responsible for reorganising the handling of the dead, different tensions are becoming increasingly prevalent. Hygienic recommendations may, for example, conflict with the funeral treatment expected by families and surviving soldiers. Not only have bodies of the deceased indeed gradually attained a singular status warranting dignified treatment, but they have also been instrumental in conveying a spectrum of political messages.² This is the result of a combination of the standards promoted by the humanitarian movement from the second half of the nineteenth century onwards,³ and a moral economy of war that relies in part on the gradual organisation of specific funerary spaces to honour the memory of fallen soldiers.⁴ Thus, as the four articles gathered in this special issue aim to show, the bodies of soldiers themselves gradually came to serve as sites of scientific production, just as their numbers do.⁵ The production of knowledge can be a new source of tension.

Since the mid-nineteenth century and the Crimean War and the American Civil War, practices have emerged aimed at individualising graves in military cemeteries.⁶ After the Franco-Prussian War (1870–71), the handling of corpses of fighters was the subject of codification, as Article 16 of the Treaty of Frankfurt stipulated that: 'The French and German governments undertake to maintain the graves of servicemen buried on their respective territories.' Nearly thirty years later, the Hague Conventions reaffirmed this principle. The First World War

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undoubtedly marked a turning point, in terms both of military medicine and of treatment of the corpses of fighters. The presence of increasingly large medical units and the development of knowledge on hygiene and its implementation in soldiers' body management practices were all elements that transformed funeral and mortuary practices. However, the guidelines devised in peacetime were difficult to implement during battle because of the nature of conflict, which made it difficult to bury bodies. Additionally, because of changing sensitivities,⁷ soldiers were reluctant to see their comrades buried - often anonymously - in mass graves, and families demanded the return of the corpses.⁸ This prompted several states to introduce measures such as the detachable double identity disc, which allowed one element to be left on the body while the other was transmitted to the registry office - thereby reducing the number of bodies of fighters buried without any possibility of identification. This period also saw the gradual involvement of non-state actors in cadaver management for both soldiers and civilian corpses. The National Red Cross Societies, the International Committee of the Red Cross and, in some cases, private companies were brought in to complement or even replace the work of the state.

If these specific bodies and the attention they attracted were a cause of tension, it was also because they were gradually becoming an object of knowledge. But while the treatment of the bodies of deceased soldiers has progressively been codified, leading to precise guidelines on funeral practices being adopted in international law, medical operations carried out on the battlefield still often fell short of standards, with few constraints limiting the actions of medical personnel. Furthermore, adherence to these international guidelines remains at the discretion of states, which may not necessarily have a direct interest in counting and locating war graves.

This special issue brings together four articles focusing on the treatment of cadavers and the use of dead bodies of war in the production of knowledge from the First World War to the 1970s. These examples show how bodies served both medical and social sciences, as well as the applications that result from this research in Western Europe and the United States. From these human remains, a series of innovations are tested and/or implemented – not only scientific and medical ones, but also political and social ones. In other words, beyond death, the corpse produced by war retains an agency, which itself is part of the broader logics of technopolitics, defined by Gabrielle Hecht as the 'strategic practice of designing or using technology to achieve political objectives'.⁹

The history of medicine has a long record of experimentation with cadavers.¹⁰ It is hardly surprising, then, that in times of conflict, when corpses are present in large numbers, they are used for military, operational, medical and administrative purposes, even though these practices could sometimes be in conflict with international agreements. However, the context of the war probably facilitated uses that were not necessarily incompatible with later post-mortem funerary treatment. Thus, the four contributions gathered here illustrate the complicated history of soldiers' bodies after death and the multiple purposes they can serve.

In the first article, focusing on corpses of gas warfare, Taline Garibian shows that the extensive use of chemical warfare during the First World War prompted authorities to establish forensic medical units. This led to an intensification of autopsy

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practices for both defensive and medical purposes. However, Garibian demonstrates that these autopsies were far from widely accepted by soldiers, even though this expertise did not necessarily prevent dignified funeral arrangements from being carried out afterwards. The second article illustrates how the idea of transfusing blood from deceased soldiers to war casualties on or near the battlefield developed sporadically, without its widespread adoption. By tracing back the origin of the idea in the USSR and exploring its resurgence in the US in the 1960s, Roderick Bailey explores how discussions about this technique revolved much more around its practicability than around ethical issues such as consent, beneficence, donation, compensation and ownership. These issues could well resurface if technological progress is made in this field. In the third article, Benoît Pouget analyses the postmortem examinations carried out on a large scale - mostly in military hospitals - by the French army during the Indochina War (1946-54). This contribution demonstrates the extent to which bodies were mobilised to provide medical research equipment. While the protocols for this work were well defined - unlike the autopsies carried out during the First World War - the legal and ethical framework in which the medical profession operated was not very restrictive. The last contribution takes a side step and looks at the social sciences, and more specifically at statistics and quantification tools. The registration of war burials in the German Democratic Republic, analysed by Laura Tradii, provides indeed a compelling example of the political dimension of statistical work. It shows how, in the 1970s, the socialist state developed scientific capacities focused on existing war graves in order to meet international standards rather than address the issue of unmarked burials. This latest work opens up numerous avenues for reflection, as it ably demonstrates the political dimension of knowledge production regarding bodies of war. All four articles show that, viewed through the prism of science, bodies convey much more than a culture of mourning. They serve scientific and political agendas from the very beginning of conflicts, and over a long period of time, which only historical study can fully grasp.

Notes

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