The Second World War began in 1939, when Britain declared war on Germany after German troops had invaded Poland. This followed a long period of inaction and optimistic policies with regard to Germany’s rearmament and territorial expansion. Australian Prime Minister Menzies promptly followed the lead of Britain and also declared war on Germany.

From then until the end of the war in 1945, nearly one million Australians enlisted, serving in North Africa, Greece and the Middle East, and also in Malaya, Borneo, Papua and New Guinea, and elsewhere in the Pacific.

Injuries and deaths
By the end of the war there had been 33,826 Australian deaths, 180,864 wounded and over 30,000 taken prisoner. (WW2 resulted in over 100 million deaths worldwide) The majority of battlefield injuries and deaths resulted from high velocity projectiles – bullets and shrapnel – causing damage to soft tissues and bones. The fighting took a terrible toll despite improved surgical and rehabilitation practices learned from WW1.

Infection also contributed to many deaths because of long evacuation times and conditions on the battlefield. The development of sulphonamides, and penicillin later in the war lessened this risk, saving thousands of lives.

The significant health impacts of tropical diseases, mental health issues, chemical warfare testing and the experience of prisoners of war, are dealt with separately, below.

Prisoners of War
Unprecedented numbers of Australians were held as prisoners during the war, both in Europe and in South-East Asia. Over 8000 Australians were interned in German POW camps, where they were treated relatively humanely.

Some 22,376 Australian soldiers were taken prisoner by the Japanese early in the war during their rapid advance through South East Asia, and many of these were treated with extreme inhumanity. Held for over four years, 8031 men – nearly half of Australian fatalities in the war against Japan – died in POW camps.

The death rate at Changi, where most were held, was around 5 per cent, but 34 percent of POWs taken from there to build the Burma-Thailand railway died. Many of these smaller camps were plagued with disease and malnutrition in addition to the inhumanity of the captors. There are some recorded instances of fair treatment by the Japanese, but most accounts describe injustice, cruelty and indifference.

The long-term effects on survivors included depression, hypertension, gastrointestinal disorders and sexual and marital problems. These impacted them long after the war had ended, frequently shortening their lives.

‘Combat Fatigue’
WW2 was no different from other wars in the intense psychological pressure that combat placed on soldiers, and the traumatic experiences they endured, often resulting in subsequent post-traumatic stress disorder (see box p2). Recent studies estimate that somewhere between 20 and 45 per cent of war veterans suffer symptoms of PTSD. The rate is much higher for former prisoners of war.

Officially, 2.6% of all enlisted Australians were considered psychiatric casualties during WW2. Evidence suggests that...
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this is an underestimate due to a loss of records for some periods, and as some psychiatric patients were treated on the frontline or hospitalised for other injuries.

After the war, it was believed that PTSD symptoms were temporary, whereas further studies show it can be a chronic disorder, and that new symptoms can develop as veterans get older. PTSD can have devastating effects at work and in relationships, with repercussions for generations. Some WW2 sufferers also had to fight for recognition and compensation against the false grounds that these conditions are hereditary.

Tropical diseases

In the Pacific war, troops were also exposed to tropical diseases, as well as the potentially harmful chemicals used to control them. This added to the enormous toll in those serving in this area. Diseases included malaria, dengue fever, typhus and cholera. In northern New Guinea, the military used DDT – now recognised as possibly carcinogenic and banned in many countries – to control malaria-carrying mosquitoes. Clothing was impregnated with dibutyl phthalate which repels the mites that spread typhus, and soldiers were required to rub this into their own clothes. It is now recognised that exposure to this chemical can have toxic consequences.

Sexually transmitted diseases

This was a problem mainly in the Middle East, but also in Queensland, where many Australian and US troops from were stationed. Venereal disease among Queensland women increased fivefold, from 220 cases in 1941–1942 to 1117 between 1942 and 1943. This trend was not seen in the rest of Australia.

Chemical warfare testing

The testing of chemical weapons on Australian army personnel at Innisfail exposed thousands to a number of highly dangerous chemical concoctions. Detailed information about chemical weapons tests on troops during WW2 by Australia, Britain, Canada and the US, and calls for compensation, have surfaced only relatively recently.

Australia deliberately exposed test subjects to mustard gas to evaluate its effectiveness for use in the Pacific. Most tests were to rate the efficacy of protective equipment, but some men were deliberately exposed without protection to evaluate the effectiveness of the gas in impairing the enemy’s fighting ability. There are suggestions (but a lack of written evidence) that other gases were tested, including hydrogen cyanide, phosgene and cyanogen chloride.

Nor are there reliable records of how many people were used, but it is thought that the Innisfail tests involved thousands of volunteers. Since 1981, several thousand Australians have come forward to claim pensions for the disabling effects participation in these tests have had on their bodies.

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