Military Links to Competitive Sport and Games as Part of the Rehabilitation and Recovery Process*

O esporte como parte do processo de reabilitação e recuperação de militares

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ABSTRACT

The Paralympic Games grew out of the use of sport in the rehabilitation and recovery process of spinally injured service personnel at Stoke Mandeville hospital, UK following World War II. In recent years there has been a resurgence in the use of sport in the rehabilitation and recovery process of wounded and ill military personnel in number of countries around the world. This brief paper examines some of the possible reasons for this resurgence, as well as the creation of close links between the military sporting rehabilitation practices and the National Paralympic committees in some countries, where an almost symbiotic link appears to be developing between the Paralympic movement and the military rehabilitation and recovery process from which the Paralympic movement originally sprang.

KEYWORDS: Paralympic Games, Military Sport, History of Sport

RESUMO

Os Jogos Paralímpicos cresceram a partir da utilização do desporto no processo de reabilitação e recuperação do pessoal de serviço lesionados em combate no hospital de Stoke Mandeville, no Reino Unido, após a Segunda Guerra Mundial. Nos últimos anos tem havido um ressurgimento na utilização do desporto no processo de reabilitação e recuperação de militares feridos e doentes em vários países ao redor do mundo. Este breve artigo analisa algumas das possíveis razões para esse ressurgimento, bem como a criação de ligações estreitas entre as práticas de reabilitação desportiva militar e os Comitês Paralímpicos Nacionais em alguns países, onde uma ligação guase simbiótica parece estar se desenvolvendo entre o movimento paralímpico e o processo de reabilitação e recuperação militar, a partir do qual o movimento paralímpico originalmente surgiu.

PALAVRAS-CHAVE: Jogos Paralímpicos, Desporto Militar, História do Esporte

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INTRODUCTION

Most articles discussing the history of the Paralympic Games describe how they grew out of the rehabilitation of spinally injured British veterans of World War II at Stoke Mandeville Hospital in the UK. However, any direct link between the Paralympic Games and disability sport and military and other types of conflict are rarely, if ever discussed. Yet today, nearly seventy years after the Stoke Mandeville Games began to use competitive sport in the rehabilitation of military veterans there has been a resurgence within the military of certain countries of the use of sport as a rehabilitative tool in the form of sport and adventure activity based rehabilitation programmes and national and international sporting competitions. Such programmes include the USA's Paralympic Military Program and 'Wounded Warriors', Canada's 'Soldiering On', the Australian Paralympic Committee – Australian Defence Force Paralympic Programme and the 'Battle Back' programme in Great Britain, Games include the Warrior Games in the USA and the recently established Invictus Games. The Stoke Mandeville Games, which became the Paralympic Games, quickly broadened their scope to include non-military participants, so it is interesting to note the rise over the last decade or so of military Games open only to veterans with disabilities. Also of interest, however, is the fact that many of the soldiers within these recent sports based military rehabilitation programmes are being fast-tracked into their country's Paralympic training programmes. This brief paper will, therefore, attempt to lay out some of the possible reasons for the reintroduction of these programmes, why the links with the Paralympic training programmes might exist and what the role of Games such as the Warrior Games and the Invictus Games might play in this process.

THE HISTORICAL RELATIONSHIP BETWEEN THE MILITARY AND THE PARALYMPIC GAMES/DISABILITY SPORT

According to Legg et al (2002) prior to World War II most people who received spinal cord injuries were dead within about three years. Dr Ludwig Guttmann, who went on to found the Paralympic Games had, according to Craven (2006), as a doctor in Germany during the 1930s been shocked to learn from his mentor when encountering a coal miner with a broken back that such cases were a waste of time as they would likely soon die due a combination of blood poisoning and kidney failure. However, Brandmeyer and McBee (1986) claim that things began to change after the war when the introduction of sulfa drugs made survival from such injuries a possibility. Unfortunately, survival bought with it a new set of problems as highly negative societal attitudes towards people with disabilities led to many survivors suffering from depression. Guttmann was a German-Jewish Neuro Surgeon who has escaped Nazi Germany in 1939. Following a brief period of work at Oxford University he was commissioned by the British Government in September 1943 to be Director of the National Spinal Injuries Unit at the Ministry of Pensions Hospital, Stoke Mandeville, Aylesbury (Lomi et al., 2004). According to Goodman (1986) his main role was to care for the large volume of military personnel who had incurred spinal injuries during the war, a role he accepted only on condition that he had total autonomy in deciding what treatment the patients received.

Prior to the war there is minimal evidence of organised attempts to use or promote sport within the disabled population and especially those with spinal injuries, who were considered to have little chance of survival. After the war, however, Steadward (1992) claims that medical authorities were forced to rethink their rehabilitative techniques, which were failing to meet the medical and psychological needs of soldiers who had been injured in combat. McCann (1996) claims Guttmann recognised the possibilities for sport to meet these needs amongst his spinally injured patients and so began to introduce sport as part of their rehabilitative regime. Anderson (2003) claims that Guttmann's aim was not only instil a sense of hope and self-esteem within the patients, but also to try and change the negative attitudes within the non-disabled population

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towards people with disabilities by showing that they could still be active and productive members of society.

Guttmann (1976; pp. 12-13), highlighted three main areas in which participation in sport could benefit people with disabilities; i. Sport as a Curative Factor whereby Guttamann claims that sport is a natural form of remedial exercise that is highly complementary to other forms of remedial exercise; *ii.* The Recreational and Psychological Value of Sport which Guttmann claims restores 'that passion for playful activity and the desire to experience joy and pleasure in life, so deeply inherent in any human being' (1976; p. 12). However, Guttmann states that if the participants do not derive enjoyment from the activity then its restorative powers are lost; iii. Sport as a means of Social Re-integration whereby it certain sports allow disabled and non-disabled competitors to compete side by side, Such sport, depending upon the disability might include archery, bowls, table tennis, Guttmann claims this helps create a better understanding between disabled people and their non-disabled peers and aids in their social re-integration through the medium of sport.

MODERN DAY MULTI-SPORT COMPETITIONS FOR MILITARY PERSONNEL

Although initially the Stoke Mandeville Games were meant to be for spinally injured service personnel, it didn't take long for them to be joined by spinally injured civilians attracted to the success of the new treatment regimes for people with spinal injuries introduced by Dr Guttmann at Stoke Mandeville Hospital. It was not until the reintroduction of multi-sport Games for wounded, injured and ill service personnel in the form of the Warrior Games in the USA in 2010 that military only Games for disabled service personnel were really re-established. However, these were primarily for American service personnel, although small groups of competitors from countries such as Great Britain did begin to take part. Then in 2013, whilst serving as a Captain and helicopter pilot in the British Army, Prince Harry was invited to

open the Warrior Games (BBC, 2013). This apparently inspired him to launch a new international competition for wounded and ill servicemen in order to "demonstrate the power of sport to inspire recovery, support rehabilitation and demonstrate life beyond disability" (Telegraph, 2014). The first Invictus Games was held in London in September 2014, using many of the same facilities as had been used for the London 2012 Olympic and Paralympic Games, with around 400 competitors from 13 nations taking part in 9 different sport (Invictus Games Foundation. n.d.a). The Games were so successful that in early 2015 that they led to the founding of the Invictus Games Foundation, based in London whose job it is to develop the legacy of the Games, manage the process of selecting the hosts of future games and oversee their delivery, in much the same way as the International Paralympic Committee do for the Paralympic Games. The next Games are about to take place at the ESPN Wide World of Sports Complex in Orlando, USA from 8 to 12 May 2016 with 500 competitors in 10 sports and it has recently been announced that the 2017 Games will be held in Toronto where they expect 600 competitors to take part in 12 different sports. Bids have also been accepted for a 2018 version of the Games (Invictus Games Foundation, n.d.b). It is clear, therefore, that the importance of competitive sport and Games are playing an increasingly important role within the military rehabilitation and recovery process. Events for wounded military personnel have also recently been added to the programme for the International Military Sports Council (CISM) World Games programme (CISM, 2012). In the remainder of this short paper I will look at some of the possible reasons why competitive sport and Games may have taken on such renewed importance within the military rehabilitation and recovery process.

WHY IS DISABILITY AN ISSUE?

Sudden traumatic disability may have a huge psychological and social impact upon any individual, including military personnel, as their newly defined role as a person with a disability brings with it a variety of possi-

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ble impacts including; i. Social Exclusion and Discrimination whereby Devine (1997) claims that society has a prescribed set of standards by which we are all measured and when someone's biological make-up or function fails to meet these standards they are 'assumed to be inferior and are subject to a decrease in inclusion in society' (p. 4); ii. The Economic and Social Position of People with Disabilities whereby people with disabilities are far less likely to be in employment than their non-disabled counterparts leading to claims by authors such as Oliver (1996; p.115) that 60% of people with disabilities in both Britain and the USA currently live below the poverty line; iii. Accessibility of the Built Environment whereby because the built environment in which we all have to live our lives is, on the whole, designed, built, paid for and operated by those within the non-disabled majority it is, more often than not built only with their needs in mind. This often leads to a great deal of accessibility issues for people with a wide variety of impairments and iv. Self-Confidence and Self-Image whereby many people with disabilities suffer from low self-esteem brought about by the reactions and comments of others within non-disabled society to their impairments. Seymour (1989) sums this up when she states:

> The body in which I live is visible to others. It is the object of social attention. I learn about my body from the impressions I see my body make on other people. These interactions with others provide critical visual data for my self-knowledge

> (Seymour, 1989 cited in Hargreaves, 2000; p. 185)

Such reactions can have very strong and long-term negative effects on people with disabilities and the way they view themselves.

I have highlighted just a small number of examples of the way sudden traumatic disability might impact upon the lives of people with disabilities, including military personnel. Without the necessary finances and isolated by an inaccessible built environment and negative perceptions of their abilities from non-disabled society it is easy to see why inclusion within the wider society becomes extremely difficult for many people with disabilities. Military personnel may be hit even harder by this situation given they were previously highly trained physically very fit individuals who had been able to carry out the majority of physical tasks and activities relatively easily.

WHY THE NEED FOR MILITARY – PARALYMPIC PROGRAMMES?

Over the last decade there has been a marked increase in the overt use of sport in the rehabilitation of soldiers injured in combat. The recent rise of these programmes appears to have come about due to a number of factors. These include: (i) a rise in the number of military personnel surviving combat injuries, but who wounds prevent them from returning to active duty (Chivers, 2009); (ii) the media and political visibility of these conflicts and their impacts meaning that governments and the military need to be seen to be doing something to care properly for these individuals and (iii) the global rise in popularity and importance of disability sport in general, and the Paralympic Games in particular (cf Brittain, 2016). Table I (below) provides a list of the five known programmes that connect military rehabilitation programmes directly to sport and physical activity and when they were introduced.

Programme	Country	Launch
Wounded Warriors	United States	2003
Soldier On	Canada	2006
Paralympic Military	United States	2008
Program		
Battle Back	Great Britain	2008
Australian Defence	Australia	2010
Force Paralympic		
Sport Program		

Part of the reason for the increased need for these programmes has been driven by increased survival rates in the field. According to Brittain and Green (2012; p.250) there are a number of possible reasons for this: • Overall improvements in general medical knowledge.

• Specific improvements in military medical responses in the field.

• Improvements to military equipment providing protection to the torso and head e.g. Kevlar vests (Gerber, 2003).

Although these factors have led to a drop in the number of soldiers dying from their injuries, they have also led to significant increases the number of soldiers being left with severe disabling injuries. Improvements in protective equipment and civilian and military medicine mean that many individuals who would have previously died from their injuries are now surviving, although they may be left with severe and lifelong disabling conditions.

WHAT'S IN IT FOR THE MILITARY?

According to Gross (2008: 3) military personnel seriously injured in the 19th century received 'little or no medical care'. Since then, however, a combination of interlinked factors have come together, over time, to ensure that military personnel injured in battle receive a greatly improved quality of care. As well as the above mentioned improvements in medical knowledge, issues such as the human rights agenda, disability activism, the close relationship between the military and the state they represent combined with the almost saturated and immediate media coverage of conflicts all around the world have forced both the military and the governments they represent to ensure that individuals who are seen to have made sacrifices for their nation are well treated and looked after. As part of this process, which has run alongside the recent rise to prominence of the Paralympic Games, the military in certain countries such as those outlined above have begun to collaborate with their respective National Paralympic Committees. Possible reasons for this outlined by Brittain & Green (2012; p.251-252) include:

• To provide a positive public relations discourse which might

arise from demonstrating that positive steps are being taken to do all that is possible for the care and welfare of injured military veterans.

• To provide a rehabilitation and recovery process that has well-documented impacts upon the psychological and physical well-being of people with disabilities.

• To provide an engaging rehabilitation method and route for injured veterans, presenting a challenging environment, with the potential to once more represent their nation on the world stage, albeit in the arena of sports rather than combat.

• To maintain morale amongst the military by demonstrating that disability is not a barrier to leading a full and active life.

WHAT'S IN IT FOR THE NATIONAL PARALYMPIC COMMITTEES?

It would appear from the literature (cf Brittain, 2016) that for some of the countries that have engaged in these new military -Paralympic programmes there is an issue of an ageing Paralympic population combined with problems in identifying the next generation of Paralympians to replace them, at a time when the importance of being seen to compete at the Paralympic Games and be successful in Paralympic sport is at all-time high. This has led to a need to find new ways to increase the number of new athletes coming into the system. Therefore, as a result of this Brittain and Green (2012; p.252) cite the following possible reasons for the advent of these programmes:

> • Injured military personnel are a potential source of new athletes who, other than their newly acquired injuries have strong, physically fit bodies that are already used to enduring hours of hard training. They are also well disciplined, used to taking orders and work well in team situations which often means that they can adapt quickly to the rigours of

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training necessary to reach the heights of Paralympic sport.

• As with Olympic Sports in most countries, government funding for Paralympic sport in future years is often dependent upon medal success. Every NPC in this situation is, therefore, always on the lookout for the next Paralympic star, or at least a new method of finding them in order to secure the future funding upon which everyone's livelihood depends.

• Media interest in the military is usually quite high and so programmes such as these provide an excellent opportunity to promote and raise awareness of disability and Paralympic sport within a particular country.

CONCLUSION

Current literature regarding the use of competitive sport and Games within the military – disability – rehabilitation and recover nexus remains quite sparse a number of authors have commented upon the apparent benefits of such an approach (cf Messinger, 2010; Weaver et al., 2009; Sakic et al., 2007) and many of their claims directly support those originally made by Guttmann outlined earlier in this paper when setting up the Stoke Mandeville Games as part of the rehabilitation and recovery process of those spinally injured military personnel from World War II. It is possibly somewhat ironic, therefore, that the Paralympic movement and its athlete pool is being partly refreshed from the ranks of the military to whom it owes its very existence. Interestingly, however, this time around current Paralympians are visiting recently injured soldiers in order to help them come to terms with their newly acquired disability and to discuss with them the kinds of problems and issues they will face in their rehabilitation and recovery. An almost symbiotic link appears to be developing in some countries between the Paralympic movement and the military rehabilitation and recovery process from which the Paralympic movement originally sprang.

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