SOMME ADDRESS to the Annual Ceremony of Remembrance and Wreathlaying at The Irish National War Memorial, Islandbridge 13th July 2024

Brigadier John Graham OBE DL Chair, Brooke House Health and Wellbeing Centre, Colebrooke Park, Co Fermanagh

My Lords, Ladies and Gentlemen,

The Somme was a momentous engagement which some had hoped might last just a single day but in the end it dragged on for five bloody months and cost a million lives. The first day of the Battle of the Somme, the 1st July 1916, was the British Army's most costly day in battle.

The 36th (Ulster) Division suffered heavy casualties and for many in the North of Ireland this sacrifice would have a profound effect on their definition of self and their community much as Gettysburg was for Americans or Gallipoli for ANZACs.

In 2018, on the centenary of the end of the Great War, I was asked to produce a booklet about the men from Ballinamallard who lost their lives in the war. There were six names on the war memorial. In the end we discovered that over 150 men had served, 58 of whom had lost their lives. On the first day of the Somme alone, six local men were killed. Can you imagine how that affected a small village with a population of about 500 as the telegrams announcing their deaths arrived?

Three Irish divisions served in the Great War. The 10th (Irish) Division was the first to deploy and served in the Dardanelles at Gallipoli and in Salonika and Palestine. The 16th (Irish) Division joined the 36th on the Somme and their casualty rate approached 50%. Not only did regiments such as the 7th Leinsters and the 6th Connaught Rangers lose large numbers of casualties, they also lost influential young men who would have become Ireland's future leaders, such as the Members of Parliament, Lieutenant Tom Kettle and Captain Willie Redmond. That lost generation included artists and engineers, poets and entrepreneurs; of my own profession, 48 medical officers and 340 medical other ranks were lost on the Somme alone. In all, 3,360 Irish medical officers and medical students, from all the medical schools on the island, served on land and sea, and 261 of them died.

The high casualty numbers in the Great War reflected the changed nature of warfare. Previous campaigns had been expeditionary whereas the First World War was attritional on an industrial scale. Unremitting artillery barrages not only caused complex blast injuries but also deep psychological trauma. The insanitary conditions in the trenches meant that, in an era before antibiotics, wounds became infected and amputation rates were high, and there were novel weapons, such as chemical agents, which often left debilitating long-term effects. As in all wars, there were medical advances; X-rays were developed, anaesthetic delivery was refined, the surgical management of chest, abdominal and head injuries was improved. There were major advances in reconstructive surgery which led to the development of plastic surgery as a separate specialty. Sadly, however, medical officers had little understanding of psychiatric disorders in the early years of the war. By 1917, the scale of the problem was being recognised and specialised hospitals were opened across Ireland. Tens of thousands of soldiers were suffering the effects of what would be called Post-Traumatic Stress Disorder today, and a decade later three-quarters of them were still suffering.

Also in 1917, a number of charities were formed to help veterans being demobilised or medically discharged. In 1921, they decided to combine their efforts and resources and the British Legion was formed. Since then the Legion has worked with other service charities to promote veterans' rights, pensions, welfare and health and social care. From my own experience, after the First Gulf War, the Royal British Legion played a leading role in investigating Gulf War Syndrome and lobbying for effective care. Currently the Legion is supporting a wide range of smaller charities including Brooke House Health and Wellbeing Centre, for which we are most grateful.

Thank you.