2.1 The Western Front, 1914-16: Trench Warfare, Wounds and the Chain of Evacuation: 30-minute Pack

EDEXCEL 1HI0 · about 30 minutes

Total Marks

Name: _____ Date: ____ / ____ / _____

Answer ALL questions. Questions 2 and 3 refer to Source A and Source B. Write in full sentences for Questions 2, 3 and 4. You are advised to spend about 30 minutes on this pack.

Source A and Source B: Wounds and Evacuation on the Western Front, 1915

Source A and Source B were written for Revision Library as original, representative teaching material. Source A is an account in the style of a Royal Army Medical Corps stretcher-bearer's diary, written to represent the kind of first-hand experience described in verified historical accounts of the Western Front in 1915; it is not the testimony of a real, named individual, and no genuine wartime document has been reproduced or quoted. Source B is an illustrative table styled on historical research into casualty patterns on the Western Front; its figures are representative estimates for teaching purposes, not an authentic official record.

SOURCE A: from a diary written in the style of a Royal Army Medical Corps stretcher-bearer, describing a night near Ypres, 1915.

Third night now in the support trench, and the mud is worse than the shelling. Two men from B Company came down the communication trench just after dark, one with a shrapnel wound to the shoulder, the other gassed and coughing badly. We got the shoulder wound dressed and morphine given inside ten minutes; the gas case took longer, his eyes were closed and swollen, and we had to guide him the whole way on a rope tied between us, since he could not see the duckboards. The ground was so churned that the stretcher-bearers ahead of us went down twice, and it took near two hours to reach the Advanced Dressing Station, a journey that should take forty minutes on a good night. We are told a proper road is being laid for the ambulances, but for now it is stretchers and mud, all the way back.

SOURCE B: an illustrative table showing the estimated share of wounded soldiers treated at each stage of the chain of evacuation on the Western Front, 1915, and the typical treatment given there.

Stage of evacuation	Approximate share of wounded treated there	Typical treatment given
Regimental Aid Post	about 100% (all wounded passed through)	first aid, basic dressings, morphine for pain
Advanced Dressing Station	about 60%	further dressing, assessment, some minor treatment
Casualty Clearing Station	about 30%	emergency surgery, blood transfusion (from 1915, limited), sorting for further evacuation
Base Hospital	about 20%	longer-term treatment, recovery, or return to Britain for the most seriously wounded

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Note: the percentages do not sum to 100 because many wounded soldiers were treated and then returned to duty at an earlier stage without needing to reach the next one.

1 Give two reasons why evacuating wounded soldiers from the front line was often slow and difficult in 1914-16.

(Total for Question 1 is 4 marks)

2 How useful is Source A for an enquiry into the dangers faced by medical personnel on the Western Front in 1915? Explain your answer, using Source A and your own knowledge of the historical context.

(Total for Question 2 is 8 marks)

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3 How could you use Source A and Source B to find out about the treatment of wounded soldiers on the Western Front, 1914-16? Explain your answer, using Source A, Source B and your own knowledge.

(Total for Question 3 is 8 marks)

4 Explain why the chain of evacuation was important to the survival of wounded soldiers on the Western Front, 1914-16.

(Total for Question 4 is 8 marks)

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Mark scheme · 2.1 The Western Front, 1914-16: Trench Warfare, Wounds and the Chain of Evacuation: 30-minute Pack

Question 1

any one valid reason explained, e.g. narrow, muddy and waterlogged communication trenches made it physically hard for stretcher-bearers to carry a casualty quickly and safely — **B2**

a second, different valid reason explained (e.g. long distances to the aid posts, too few stretcher-bearers, large numbers of casualties), or: the front line and support trenches were often under observation or fire, so casualties frequently had to be moved at night, which was slower and more dangerous than moving in daylight — **B2**

Answer: Narrow, muddy communication trenches, and the need to move casualties mainly at night to avoid enemy fire.

Question 2

Level 1 Makes a simple comment on the content of Source A, with little or no reference to its nature, origin or purpose, or to own knowledge. — **1-2**

Level 2 Describes the content of Source A and begins to comment on its value, with limited reference to its nature, origin, purpose or own knowledge. — **3-4**

Level 3 Analyses the content and the nature/origin/purpose of Source A, using own knowledge to support a developing judgement about how useful it is for the given enquiry. — **5-6**

Level 4 Analyses the content and the nature/origin/purpose of Source A in a well-supported and convincing way, using precise own knowledge to reach a sustained judgement about how useful it is for the given enquiry, considering its limitations. — **7-8**

Indicative content:

- Content: Source A shows RAMC personnel exposed to danger while moving through mud and darkness to evacuate wounded, including a slow, exhausting journey to the Advanced Dressing Station.
- Content: it shows the specific danger of treating and guiding a gassed casualty, reflecting the introduction of chemical weapons on the Western Front from April 1915.
- Nature/origin/purpose: as an account written to represent an RAMC stretcher-bearer's experience, it reflects the kind of first-hand testimony historians use, but because it is written for this pack rather than a genuine wartime diary, it cannot be used as direct primary evidence for a specific date, unit or individual.
- Own knowledge: contextual knowledge of the chain of evacuation, poor trench conditions, and the use of chlorine gas from April 1915 can be used to assess whether the account is consistent with what is known from verified historical accounts of the period.
- A full answer weighs the source's plausible, typical content, consistent with verified historical knowledge of trench conditions and evacuation difficulties, against its limitations as illustrative rather than archival material, before reaching a judgement on its usefulness for the stated enquiry.

Question 3

Level 1 Makes a simple comment on the content of one source, with little or no reference to using the sources together or to own knowledge. — **1-2**

Level 2 Describes the content of both sources and suggests, in general terms, what each could be used to find out. — **3-4**

Level 3 Explains what Source A and Source B could each be used to find out, and begins to explain how they could be used together, supported by own knowledge. — **5-6**

Level 4 Explains clearly and convincingly what Source A and Source B could be used to find out both separately and together, supported throughout by precise own knowledge of the historical context. — **7-8**

Indicative content:

- Source A shows what happened to individual casualties at the start of the chain of evacuation (first aid and morphine near the front line, then a difficult journey to the Advanced Dressing Station), which could be used to investigate the practical difficulties of evacuation.
- Source B shows the overall pattern of where wounded soldiers were treated across the whole chain of evacuation, which could be used to investigate how casualties were distributed between the different stages.
- Used together, Source A's individual case and Source B's overall statistics could be used to investigate how far one soldier's experience of a slow, difficult evacuation was typical of the wider pattern described in Source B.
- Own knowledge could be used to check both sources against what is known about the RAMC's organisation of the chain of evacuation (Regimental Aid Post, Advanced Dressing Station, Casualty Clearing Station, Base Hospital) and about specific problems such as difficult terrain and the use of poison gas from 1915.
- A full answer explains what each source could be used to investigate, and how using them together allows a more complete enquiry than either source alone, while noting that both are illustrative rather than genuine archival material.

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Question 4

Level 1 Identifies one or two general reasons why the chain of evacuation mattered, with little or no supporting detail or explanation. **1-2**

Level 2 Identifies and begins to explain one reason, supported by accurate detail. **3-4**

Level 3 Explains two reasons why the chain of evacuation was important, each supported by accurate and relevant detail. **5-6**

Level 4 Explains two or more reasons in a well-developed, logically structured way, supported throughout by precise and accurate detail, showing how the reasons connect. **7-8**

Indicative content:

- The Regimental Aid Post gave rapid first aid close to the front line, which could stop life-threatening bleeding or shock in the crucial first minutes after a soldier was wounded.
- Moving a casualty stage by stage (Regimental Aid Post to Advanced Dressing Station to Casualty Clearing Station to Base Hospital) meant only the most seriously wounded had to make the longer, more dangerous journeys further back, saving time and resources.
- Casualty Clearing Stations, positioned close enough to the front for urgent surgery but further back than the trenches, allowed life-saving operations, and from 1915 limited blood transfusion, to be carried out before infection could set in.
- Without an organised chain, wounded soldiers would have had to be carried much further, over dangerous and difficult ground, before receiving any treatment, greatly increasing the risk of death from blood loss, shock or infection.
- The system allowed medical resources such as surgeons, blood and equipment to be concentrated at the Casualty Clearing Station and Base Hospital stages, rather than being spread thinly across the front line, making treatment more effective overall.

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