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*"Honor or Insanity?"  
An Examination of the Interplay Between the  
Civil War Society and the Soldiers' Mental Response to the War"*

Marla Kuhlman

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*“Honor or Insanity?  
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Civil War soldiers were not whiners. Their camps were not cushy, nor their clothes laundered. Unpampered and underfed, the troops survived. Yet despite their hardships--the grueling night marches, the spring rains, and the winter frosts--their memoirs rarely begrudged the army this service.<sup>1</sup> Typical, instead, of the soldiers’ letters was the sentiment that though they deplored the war’s miseries, they “would willingly undergo it again for the sake of...our country’s independence and [our children’s] liberty.”<sup>2</sup> Contrasted to the complaints by soldiers of recent wars, this acceptance seems foreign. Consequently, the Civil War soldiers’ idealistic view of their service is both admirable and suspicious. For in the post-Vietnam era, their sincerity is easily questioned.

The most obvious source of suspicion is the conflicting claims of happiness to the documented existence of conditions that seem obviously miserable. In writing to his wife, Surgeon John Perry explained that “for the last six weeks, I have not known the feeling of warmth...” He continued to document the army’s rancid food and inadequate supplies. Yet at the same time, he maintained that “rough as this life is, I never was better.”<sup>3</sup> Similarly, First Lieutenant Randolph McKim, a soldier in the Army of Northern Virginia, recalled the ever-present “jocularity” and “lightheartedness” of his troops. He continued to glorify the regiments, claiming that such gallantly

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<sup>1</sup>For information on Civil War life (especially on hardships) read personal accounts, such as *Letters from a Surgeon of the Civil War*, compiled by Martha Derby Perry (Boston: Little Brown, and Company, 1906), hereafter cited as *Letters from a Surgeon*, or later compilations such as J. Tracy Power’s *Lee’s Miserables: Life in the Army of Northern Virginia from the Wilderness to Appomattox*, (Chapel Hill: University of North Carolina Press, 1998).

<sup>2</sup>Edward W. Cade to Allie Cade, July 9, Nov. 19, 1863, *A Texas Surgeon in the C.S.A.*, in James M. McPherson, *For Cause and Comrades* (New York: Oxford UP, 1997), 13 hereafter cited as *Cause and Comrades*.

<sup>3</sup>*Letters from a Surgeon*, October 9, 1863 and December 7, 1863.

happy men had never before existed.<sup>4</sup> If only because of the nature of their occupation, both accounts seem a bit too glossy, and one must wonder if they are hiding something.

Other Civil War accounts, especially of battle, reveal this expected grotesque view of a soldier's life. In encounters with wounded, it was not uncommon to find a comrade with a shell-hole in his head as a "large opening...in which [one] might insert [his] hand."<sup>5</sup> Nor were encounters with death rare. Instead, the soldiers often "could find them [dead men] in every hollow, by every tree and stump--in open field and under copse--Union and Rebel, side by side--in life foes, in death, of one family."<sup>6</sup> Or worse, the dead bodies were more often than not badly mutilated. After the battle at Petersburg, the Union "wounded" were stacked onto flatcars--"piled like logs..with here and there a half-severed limb dangling from a mutilated body."<sup>7</sup>

In light of these and others' accounts--such as the Illinois soldier who declared that "a soldier's life is a dog's life at best,"<sup>8</sup> or the sergeant who explained that he spent his time "laying around in the dirt and mud, living on hardtack, facing death in bullets and shells, [and being] eat[en] up by woodticks and body-lice"<sup>9</sup>--the typical Civil War soldier's grandiose claims, as demonstrated

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<sup>4</sup>Randolph H. McKim, "Glimpses of the Confederate Army," *The Photographic History of the Civil War*, ed. F.T. Miller (New Jersey: A.S. Barnes & Company, 1957), 122-124, hereafter cited as "Glimpses of the Confederate Army."

<sup>5</sup>John E. Dooley, *John Dooley, Confederate Soldier, His War Journal*, in Gerald F. Linderman, *Embattled Courage* (New York: The Free Press, 1987), 128, hereafter cited as *Embattled Courage*.

<sup>6</sup>Jesse B. Connelly diary, in Eric T. Dean, *Shook over Hell: Post-Traumatic Stress, Vietnam, and the Civil War*, (Cambridge, Massachusetts: Harvard UP, 1997), 67, hereafter cited as *Shook over Hell*.

<sup>7</sup>Adelaide W. Smith, *Reminiscences of an Army Nurse During the Civil War*, in *Embattled Courage*, 128.

<sup>8</sup>Edwin Payne to Kim Hudson, Jan. 3, 1863 in *For Cause and Comrades*, 9.

<sup>9</sup>George M. Tillotson to Elizabeth Tillotson, May 24, 1864 in *For Cause and Comrades*, 9.

by Perry and McKim, seem superficial.

So with these rising doubts about whether Civil War soldiers were as insusceptible to the sufferings as they claimed, one must wonder if the hardships caused more problems than were admitted at the time. More specifically, in light of the 20<sup>th</sup> century recognition of the mental traumas caused by war—such as shell-shock, combat fatigue, and post-traumatic stress disorder—one must ask if Civil War soldiers could have been immune to such problems. Did the medical community ignore these mental disorders? Or did the stigma against cowardice in general lead to a vast under reporting of such problems?

#### *A SHORT HISTORY OF COMBAT TRAUMA*

Published in 1863, the *U.S. Army Medical Department: A Manual of Instructions for Enlisting and Discharging Soldiers's* discussion of mental disorders does not mention the possibility that killing, seeing friends die, and barely surviving might actually cause mental agony.<sup>10</sup> But such neglect should not be shocking. For as it soon will be demonstrated, the 20<sup>th</sup> century understanding of combat trauma took many years, struggles, and frustrations to develop. So the examination of how the Civil War medical community viewed mental illnesses must be conducted with their contemporary understanding, and not the current concepts of combat trauma, in mind.

During the first two years of the Civil War, 2.82 men per 1000 Union troops were diagnosed with a disabling psychiatric condition. Compared with the statistics from World War II, when

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<sup>10</sup>Roberts Bartholow, A.M. M.D., *U.S. Army Medical Department: A Manual of Instructions for Enlisting and Discharging Soldiers with special reference to the Medical Examination of Recruits, and the Detection of Disqualifying and Feigned Diseases*, (Philadelphia: J.B. Lippincott & Co., 1863), 231 and 238, hereafter cited as *Manual for Enlisting and Discharging Soldiers*.

hospital admissions numbered 42 psychoneurotic cases per 1000 admissions<sup>11</sup> and psychiatric casualties averaged between 20-30% of battle casualties,<sup>12</sup> these figures seem astonishingly low.<sup>13</sup> So in the fact that relatively few instances of soldiers succumbing to severe mental disorders--such as insanities or psychoses--were recorded,<sup>14</sup> one is immediately clued into the idea that in Civil War times, an appreciation for the severity of combat traumas had not yet emerged. However, in writing on what medical conditions might disqualify hopefuls from matriculating into the army, several mental illnesses are included. These sicknesses--idiocy, dementia, cretinism and imbecility--are all common in their obviously organic manifestation in disabilities. They are disorders that are inherited at birth, not brought on by outside circumstances. These problems, then, are fundamentally different, in origin, than combat trauma. So though they demonstrate that mental illnesses did concern the army doctors, they do not explain their view on how the war might affect the soldiers' mental health.

In this manual, however, Dr. Robert Bartholow does acknowledge one mental condition that could result from the war: nostalgia. In current terms, this condition is a combination of

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<sup>11</sup>John Ellis, *World War Two: A Statistical Survey*, (Great Britain; Facts on File, 1993), 257.

<sup>12</sup>John Keegan and Richard Holmes, *Soldiers*, (New York: Elisabeth Sifton Books, 1985), 155-156, hereafter cited as *Soldiers*.

<sup>13</sup>Interestingly, though the Vietnam War has had the most significant impact on the current understanding of combat trauma, it is only in its aftermath that it has been so noteworthy. Due in part to the rotation of troops, the Vietnam statistics show 2-3 psychiatric evaluations per 100 troops (*Soldiers*, 156-157). However, in the *National Vietnam Veterans Readjustment Study*, 35.8% of Vietnam veterans could be diagnosed with PTSD according to the American Psychiatric Association's diagnostic criteria (Jonathan Shay, *Achilles in Vietnam*, (New York: Scribner, 1995), 168, hereafter cited as *Achilles*).

<sup>14</sup>*The Medical and Surgical History of the War of the Rebellion*, Part 1, Medical Volume, 646.

melancholia and homesickness.<sup>15</sup> Bartholow does not treat this condition lightly. Instead, he describes it as “a mental disease” brought on by “the extreme mental depression and the unconquerable longing for home.” He continues to recognize that this acute home-sickness produces some physical symptoms—such as an inability to assimilate motor movements or a loss of appetite—that may harm an individual’s performance in battles. Consequently, Bartholow warns that because of physical problems that accompany it, nostalgia is “a ground for discharge if sufficiently decided and pronounced.” But because it is brought on by the war, nostalgia necessarily does not exist in enlistees and is therefore not grounds for exclusion from the army.<sup>16</sup> So what is interesting about this diagnosis is that it establishes the fact that the doctors did recognize that some mental disorders, apart from obviously handicapping disorders such as inherited retardation, can afflict soldiers.

Though the acknowledgment of nostalgia seems quite similar to today’s concept of combat traumas, it actually is not so promising of an interface as it seems. For while today, the disorders are thought especially damaging because of the consequences the feelings such as despair, guilt, isolation, and meaninglessness produce in the long run,<sup>17</sup> the Civil War consensus focused instead on what physical problems might interfere with the immediate war effort.<sup>18</sup> This was evidenced by the rule that only soldiers with “manifest” problems were granted discharges;<sup>19</sup> this, even, was only

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<sup>15</sup>Albert J. Glass, “Military Psychiatry,” *The Encyclopedia of Mental Health*, vol. 4, ed. Albert Deutsch (NY: Franklin Watts, 1963), 1213, hereafter cited as “Military Psychiatry.”

<sup>16</sup>*Manual for Enlisting and Discharging Soldiers*, 21-22.

<sup>17</sup>*Achilles*, xx.

<sup>18</sup>Eric T. Dean, Jr., “‘We Will All Be Lost And Destroyed’: Post-Traumatic Stress Disorder and the Civil War,” *Civil War History*, 37 (2) (June 1991), 140, hereafter cited as “We Will All Be Lost.”

<sup>19</sup>Keen, Mitchell, and Morehouse, “On Malingering, Especially in Regard to the Simulation of Diseases of the Nervous System,” *American Journal of Medical Sciences*, 48

permitted via internment at the Government Hospital for the Insane in Washington.<sup>20</sup> And once there, doctors were instructed to scrutinize the men to see if they were faking their disorders.<sup>21</sup>

These doctors' fears reveal two interesting attitudes. First, in discussing the possibility of feigned insanity, Dr. Chipley stated skepticism that "any sane person would sacrifice his social position"<sup>22</sup> by faking insanity. Doctors Keen, Mitchell, and Morehouse, Acting Assistant Surgeons of the U.S.A., concurred, believing the soldiers who would fake insanity any longer than the time they needed to excuse them from duties, might actually be mentally deranged.<sup>23</sup> In these statements, the doctors revealed their current stigma against mental disorders.

Before the mid-19<sup>th</sup> century, the treatment of mentally ill patients in North America generally consisted of en masse efforts to protect society from the lunatics. Taken care of by the community like widows, beggars, and the maimed--the "socially dependent groups"--the insane received no medical therapy.<sup>24</sup> And then even after special asylums were created especially for the insane, through the reform efforts of individuals such as Dorothea Dix, their treatment still was not focused on individual rehabilitation. Instead, since most people feared the disturbed as they did criminals, their treatment most often consisted of confinement in straight jackets, cribs, muffs,

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(July-Oct. 1864), 367-368, hereafter cited as "On Malingering."

<sup>20</sup>Lieutenant-Colonel George Patten, *Patten's Army Manual: Containing Instructions for Officers in the Preparation of Rolls, Returns and Accounts Required of Regimental and Company Commanders, and Pertaining to the Subsistence and Quartermasters' Departments, Etc.*, (New York: J.W. Fortune, 1862), 213-216.

<sup>21</sup>"On Malingering," 377, and W.S. Chipley, "Feigned Insanity--Motives--Special Tests," *American Journal of Insanity*, 22 (July 1865), 1-24, hereafter cited as "Feigned Insanity."

<sup>22</sup>"Feigned Insanity", 6.

<sup>23</sup>"On Malingering" 377.

<sup>24</sup>"We Will All Be Lost," 139.



restraining sheets, iron collar, or balls and chains.<sup>25</sup> Called “lunatic asylums,” the facilities were more like jails than hospitals, and the staffs consisted of wardens, rather than psychiatric nurses.<sup>26</sup> However, by the time of the Civil War, the attitude towards the mentally ill had begun to change. As medical professionals became more interested in these patients--believing their psychoses to be actual diseases rather than inherent weaknesses<sup>27</sup>--their treatment finally consisted of medical attention and efforts at individual rehabilitation.<sup>28</sup> Unfortunately, problems still existed. The asylums were not equipped to handle long-term cases, and those with chronic problems were usually sent to poor houses.<sup>29</sup> Also, those in either place were still a visible disgrace to their family and an outcast of society.<sup>30</sup>

Second, the emphasis the doctors placed on *insanity* revealed the contemporary level of thought about psychiatric disorders. Though nervous diseases such as nostalgia, homesickness, and sunstroke were also recognized,<sup>31</sup> the debilitating effects of insanity were generally the only symptom they sought to treat in the asylums.<sup>32</sup> No emphasis was placed on the after-effects of war

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<sup>25</sup>Helen E. Marshall, *Dorothea Dix: Forgotten Samaritan* (Chapel Hill, NC: University of North Carolina Press, 1937), 66, hereafter cited as *Dorothea Dix*.

<sup>26</sup>*Ibid*, 69-70.

<sup>27</sup>*Ibid*, 67.

<sup>28</sup>“Feigned Insanity,” 14-15.

<sup>29</sup>*Shook Over Hell*, 3.

<sup>30</sup>*Dorothea Dix*, 71.

<sup>31</sup>Report of John H. Brinton with the Army of the Tennessee from February to June of 1862, *Medical and Surgical History*, pt. 1, Medical Volume, Appendix, 33.

<sup>32</sup>*Shook over Hell*, 134.

such as what today is termed post-traumatic stress disorder.<sup>33</sup> In fact, the current understanding of war-induced traumas only effectively evolved during this century.

Civil War officials should not be castigated for neglecting to diagnose nightmares and flashbacks for what they were: symptoms of what has subsequently been called shell shock, combat exhaustion, battle fatigue, or post-traumatic stress disorder.<sup>34</sup> Even today, psychiatrists continue to debate the relationship of trauma to mental disorders. The debate has centered over many questions: whether trauma induces actual physiological changes within the victim's brain or if it somehow changes his emotions; whether the event actually causes the disorder or if it just triggers some preexisting condition; or whether the event really traumatizes the victim or if the individual just interprets it that way.<sup>35</sup> Such questions have so plagued the understanding of trauma that even after World War I,<sup>36</sup> and the recognition of a relationship between war and clinical mental syndromes, the psychiatrists faulted actual physical damage from the shells or artillery barrages, not the combat itself.<sup>37</sup> Freud's understanding of these war neuroses is also no longer accepted, for he believed that the soldiers with these problems were seeking escape and that their symptoms would

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<sup>33</sup> John Talbott, "Combat Trauma in the American Civil War," *History Today* (March 1996), 45.

<sup>34</sup> *Cause and Comrades*, 43-44.

<sup>35</sup> B. A. van der Kolk, L. Weisaeth, and O. van der Hart, "History of Trauma in Psychiatry," *Traumatic Stress*, eds. B.A. van der Kolk, A. C. McFarlane, and L. Weisaeth, (New York: Guilford Press, 1996), 47, hereafter cited as "History of Trauma."

<sup>36</sup> "Military Psychiatry," 1214. True examination of military psychiatry began in World War I with the origination of shell shock. However, it was not until World War II that psychiatry was included as a branch of military medicine.

<sup>37</sup> Jim Goodwin, "The Etiology of Combat-Related Post-Traumatic Stress Disorders," *Post Traumatic Stress Disorders: a handbook for Clinicians*, ed. Tom Williams, (Cincinnati, Ohio: Disabled American Veterans, 1987), 2, hereafter cited as "The Etiology of Stress Disorders."

disappear at the war's end.<sup>38</sup> His concepts fit with the consensus that those subject to "shell shock" somehow lacked the will, strength, or courage to survive battle.<sup>39</sup>

Though the understanding of war-induced mental disorders still focused negatively on those afflicted with them, it eventually convinced the military to finally incorporate psychiatry into its medical divisions.<sup>40</sup> Since this initial step, the relationship between combat trauma and soldiers' mental health has gradually evolved. From World War II, the Korean War, to Vietnam, the emphasis has changed from the soldiers' temperaments to the wars' stresses.<sup>41</sup> And though the psychiatric community now recognizes post-combat problems as a manifestation of the genuine mental illness termed post-traumatic stress disorder in its *Diagnostic and Statistical Manual of Mental Disorders*,<sup>42</sup> its inclusion came only with great difficulty.<sup>43</sup> In light of the tedious development of this systematic understanding of combat's devastating effects on mental health, it is hardly surprising that Civil War officials lacked the foreknowledge to recognize the symptoms that would later characterize a serious mental disorder.

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<sup>38</sup>K.R. Eissler, *Freud as an expert witness: The discussion of war neuroses between Freud and Wagner-Jauregg*, in "History of Trauma," 48.

<sup>39</sup>"History of Trauma," 55.

<sup>40</sup>Albert J. Glass, "Military Psychiatry," *The Encyclopedia of Mental Health*, vol. 4, ed. Albert Deutsch (NY: Franklin Watts, 1963), 1213.

<sup>41</sup>"The Etiology Stress Disorders," 2.

<sup>42</sup>American Psychiatric Association, *DSM-III-R: Diagnostic and Statistical Manual of Mental Disorders*, 3d ed. revised (Washington, D.C.: American Psychiatric Association Press, 1987), 250.

<sup>43</sup>"History of Trauma," 61. PTSD is also associated especially with the after-effects of sexual exploitations. Sarah Haley, one of the most influential individuals in the recognition of PTSD, focused on both sexual abuse and combat neuroses in her campaign for its acceptance as a mental disorder.

### TRAUMATIC INCIDENTS IN THE CIVIL WAR

Though the mechanism of combat trauma is still debated today,<sup>44</sup> this does not mean that combat neuroses did not exist during the Civil War. Indeed, such incidents are recorded in the *Medical and Surgical History*. In June of 1861 and June of 1865, the rate of psychological casualties was reported as 2.32 and 1.18 per 1000 troops.<sup>45</sup> Furthermore, many sources confirm the existence of conditions that are today seen as causes of combat trauma. Lieutenant Colonel Dave Grossman, a former professor of psychology at West Point, pinpoints a few key factors in the emergence of soldiers' psychiatric problems. Amongst these, he lists "fear, exhaustion, guilt and horror, hate, fortitude, and killing."<sup>46</sup>

Few Civil War histories deny the existence of fear amongst the soldiers. Though fright in itself does not constitute a mental disorder, most psychiatrists accept Freud's conclusion that many mental illnesses develop from such anxieties.<sup>47</sup> So amongst soldiers, where enemies and artillery provide ample opportunity for consternation, a high occurrence of fright-induced disorders must be expected.

In describing a compatriot, Surgeon Perry reported his "absolute terror" to stand duty since he imagined that "the enemy lurks behind every bush." Recognizing such anxieties, Perry lamented that the new conscripts would fail in a confrontation with the enemy and worried that his army was

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<sup>44</sup>John E. Talbott, "Soldiers, Psychiatrists, and Combat Trauma," *Journal of Interdisciplinary History*, 27 (3) (Winter 1997): 452-453, hereafter cited as "Soldiers, Psychiatrists, and Combat Trauma."

<sup>45</sup>Calculated from *The Medical and Surgical History*, Part 1, Medical Volume, 646 and from calculations made in "We Will All Be Lost," 146.

<sup>46</sup>Dave Grossman, *On Killing*, (New York: Little, Brown and Company, 1995), 51.

<sup>47</sup>John B. McDevitt, "Fear," *The Encyclopedia of Mental Health*, vol. 2, ed. Albert Deutsch (NY: Franklin Watts, 1963), 631.

demoralized by such cowardly individuals.<sup>48</sup> To this end, the practice of coercion evolved. A Union lieutenant described the practice of forcibly compelling a soldier to fight against his will: “when we first went into action, our men...seemed inclined to back out, but we stationed ourselves behind them and threatened to shoot the first man that turned.”<sup>49</sup> Such tactics were not isolated incidents. On the Banks of the Bull Run River, Colonel Morgan was credited with saving the day for General Hill’s troops. He accomplished this by showing no mercy to the frightened and screaming soldiers. Instead, “the older troops and officers drove them on [into the gunfire] at the point of sword and bayonet.”<sup>50</sup> In light of today’s understanding of how such incidents can scar individuals, such dismissal of fear seems inhumane.

The harsh conditions also admittedly weakened the troops. “Last night [was] very cold,” one soldier recounted, “[I] did not sleep well...[I] woke from a dream crying...day [was] rainy and gloomy....[I] have the blues.”<sup>51</sup> But perhaps worse than the weather were the unsanitary conditions. Leading to staggering illnesses and death from cholera, typhoid, malaria, smallpox, measles, mumps, scurvy, tuberculosis, dysentery and chronic diarrhea, the men battled disease as well as their human adversaries.<sup>52</sup> Referring to this situation, a soldier deplored that “this slow perishing in

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<sup>48</sup>*Letters from a Surgeon*, 25-26, 100, and 111.

<sup>49</sup>Robert Carter to father, July 1861, *Four Brothers in Blue: Or, Sunshine and Shadows of the War of the Rebellion* (Austin, TX, 1978), 9.

<sup>50</sup>*Letters from a Surgeon*, Oct 22, 1863, 108-109.

<sup>51</sup>*Andrew Jackson Smith Diary*, entries for January 2, December 19, and December 25, 1864, in *Shook over Hell*, 49.

<sup>52</sup>Paul E. Steiner, *Disease in the Civil War: Natural Biological Warfare in 1861-1865* (Springfield, Ill.: Charles C. Thomas, 1968), and *Medical and Surgical History*. Medical History, pt. I, vol I (Washington, D.C.: U.S. Government Printing Office, 1870) records 6,454,834 cases of disease, with 195,627 resulting in death for Union soldiers.

blank inaction day after day--this long drawn out agony, is more than men can endure."<sup>53</sup> Consequently, the newspaper reports of Perry's army as "demoralized" and "fit only for observation"<sup>54</sup> are not shocking. Instead, confessions such as this captain's that the war "has broken me down completely....[I am] in a state of exhaustion....I never saw the Brigade so completely down and unfitted for service"<sup>55</sup> were more common as the war progressed. And sometimes in battle, entire brigades appeared to have had "a sort of panic take hold of them...."<sup>56</sup>

Adverse reactions to the horrific effects of killing and death are also abundant. A witness to the Second Manassas recalled that his comrades who were "scattered throughout the woods and over the fields presented a shocking spectacle. Some with their brains oozing out; some with the face shot off; others with their bowels protruding; others with shattered limbs." And at Chancellorsville, this same narrator reported that it was "perhaps...the most revolting scene I had ever witnessed."

Our line of battle extended over some eight miles and for that distance you see the dead bodies of the enemy lying in every direction, some with their heads shot off, some with their brains oozing out, some pierced through the head with musket balls, some with their noses shot away, some with their mouths smashed, some wounded in the neck, some with broken arms or legs, some shot through the breast and some cut in two with shells."<sup>57</sup>

Naturally, for those involved in the war, these massacres must have affected them. The stoic Perry worried that the killings would irreversibly alter him: "...if these horrible scenes do not stop,

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<sup>53</sup>Alexander Hunter, *Johnny Reb and Billy Yank in Embattled Courage*, 119.

<sup>54</sup>*Letters from a Surgeon*, Dec 6, 1863, 148.

<sup>55</sup>James K. Edmondson, *War Letters of Col. James K. Edmondson 1861-1865*, in *For Cause and Comrades*, 164.

<sup>56</sup>Francis E. Pierce to Edward Chapin, July 27, 1863, "Civil War Letters of Pierce," in *For Cause and Comrades*, 43.

<sup>57</sup>James B. Sheeran, *Confederate Chaplain: A War Journal*, ed. Joseph T. Durkin, (Milwaukee: Bruce Publishing Company, 1960), 19, and 43-44.

my whole nature will change.” He furthered this idea to include all deaths: “It seems to me I am quite callous to death now, and that I could see my dearest friend die without much feeling....During the last three weeks I have seen probably no less than two thousand deaths, and among them those of many dear friends. I have witnessed hundreds of men shot dead.”<sup>58</sup> Clearly, even Perry, a doctor prepared for the grotesque, was altered by the carnage.

But perhaps more grievous were the problems encountered by those who killed. As one soldier wrote: “I never shall forget how awfully I felt on seeing for the first time a man killed in battle....I stared at his body, perfectly horrified! Only a few seconds ago that man was alive and well, and now he was lying on the ground, done for, forever!”<sup>59</sup> Recalling the Gettysburg campaign, another officer commented that “after the fight is over, then one realizes what has been going on. Then he sees the wounded, hears their groans... Such scenes completely unman me. I can stand up and fight, but cannot endure the sight of suffering.”<sup>60</sup>

Clearly, both the scenes and the soldiers’ testimonies suggest that many Civil War soldiers were mentally scarred by the war. Furthermore, actual symptoms of post-traumatic stress disorder--such as nightmares, flashbacks, and breakdowns<sup>61</sup>--were recorded in various sources. Describing his emotions, an officer grieved to his wife that “the groans and gasping and more horrors...[and the] poor fallen bodies...haunts me like a nightmare.”<sup>62</sup> Another warrior experienced similar dreams:

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<sup>58</sup>*Letters from a Surgeon*, 9 Oct 1863, 100-101; 24 May 1864, 185.

<sup>59</sup>Leander Stillwell, *The Story of a Common Soldier of Army Life in the Civil War, 1861-1865*, (Kan.: Franklin Hudson Publishing Company, 1920), 56.

<sup>60</sup>Francis E. Pierce to Edward Chapin, July 27, 1863, “Civil War Letters of Pierce,” in *For Cause and Comrades*, 43.

<sup>61</sup>*Achilles*, 166-167.

<sup>62</sup>James Connolly, *Three Years in the Army of the Cumberland: The Letters and Diary of Major James A. Connolly*, in *For Cause and Comrades*, 43.



“Even when I sleep...I hear the whistling of the shells and the shouts and groans, and to sum it up in two words it is *horrible*.”<sup>63</sup> In a Rebel account on the aftermath of the Battle of Seven Pines the Union wounded are described as languishing in ditches of water; horrified, the soldier, nonetheless did not help them escape their drowning death. Consequently, he confessed that “the cries of the wounded Yankees sound in my ears yet.”<sup>64</sup>

As these reminiscences suggest, battlefield horrors disturbed many. While the war may have simply matured many or given nightmares to others, some lost their sanity because of it. The first indications of this often appeared after a battle. As one soldier explained, following a skirmish, his comrade suddenly “lost the entire use of his hands and legs and is almost as helpless as poor little Johnnie [a child]. No one knows what is the matter with him.”<sup>65</sup> Others found deranged survivors amongst the dead. Inspect the remainders of the rebel line at Spotsylvania, a Union officer found that those still alive in the trenches were not well: “one Rebel sat up praying at the top of his voice and others were gibbering in insanity.”<sup>66</sup>

But Eric Dean, in his book examining the war’s traumatic disorders, records perhaps the most pitiful account of a soldier made helpless by the fighting. Trenched in for a skirmish, Albert Frank, a typical soldier, pauses to share a drink of water with his buddy. But in the midst of their break, a shell came into their furrow and decapitated Frank’s companion, shooting blood and guts onto Frank. Frank remained physically unharmed; however mentally, he was mortally wounded.

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<sup>63</sup> Charles Brewster, *When This Cruel War Is Over: The Civil War Letters of Charles Harvey Brewster*, hereafter cited as *When This Cruel War is Over*, in *For Cause and Comrades*, 43.

<sup>64</sup> Samuel Elias Mays, *Genealogical Notes on the Family Mays and Reminiscences of the War between the States*, in *Shook Over Hell*, 67.

<sup>65</sup> Tally Simpson, July 27, 1862, “*Far, Far from Home*”: *The Wartime Letters of Dick and Tally Simpson, Third South Carolina Volunteers*, in *Cause and Comrades*, 164.

<sup>66</sup> *When This Cruel War is Over*, 298, in *For Cause and Comrades*, 166.



Towards the evening, his comrades worried that he was acting oddly, so they sent him to safety. But this precaution was not enough—once in the bomb shelter, Frank went berserk, screaming and running towards the enemy. So again, his comrades went after him. However, though they were able to save him from the enemy, they soon saw that this was not his greatest danger. Instead, they soon realized that he had lost his sanity for he repeatedly chanted that he had been killed. Because of this, the soldiers locked him up for the night. The next morning, a doctor examined him and sent him, like most other neurotic soldiers, to the Government Hospital for the Insane in Washington, D.C.<sup>67</sup>

These accounts make it abundantly clear that the Civil War affected many of its soldiers' mental health. However, what is unclear is exactly how the military dealt with such inconveniences. Though, as documented earlier, cases of insanity were processed through the central D.C. asylum, there is no evidence that minor traumas—such as nightmares, flashbacks, or other emotional baggage—were treated or even thought of as potentially harmful. This attitude is best understood in the context of both why the soldiers fought and how they believed the ideal soldier should act.

#### *MOTIVATION*

When Lincoln called for soldiers, many young men eagerly enlisted. Some for glory, others for God, and many for nation, the enlistees willingly risked their lives. In the soldiers' initial motivations to fight, one finds insights into how they would later deal with the war's horrors. As one officer reflected: "When we enlisted in this war, we did no idle thing, *we were in earnest*. One year has passed away, and all the fancied romance of campaign life has proved itself to be stern reality to

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<sup>67</sup>Declaration of Albert Frank, June 7, 1884, and affidavit of Henry Moody, October 15, 1884, federal pension file of Albert Frank, National Archives, in *Shook Over Hell*, 65-66.

us, yet we are still *in* earnest, ready for another year of harder, bloodier work, if such is necessary to crush this wicked rebellion.”<sup>68</sup> From such a sentiment, one sees that initial motivations helped soldiers endure the long-haul. And since *The Encyclopedia of Mental Health* claims that the impact of warfare upon a soldier’s mental health partially correlates to his approval of the war effort,<sup>69</sup> an effort to study this relationship is indispensable to understanding what it takes to maintain the soldier’s mental well-being.

Scholars believe that some compelling reason prompted the initial enlistees to join the war effort. For the “American aristocrats,” the war wonderfully combined idealism with practicality.<sup>70</sup> In joining the army, the soldiers believed they had found a cause more important than their personal cares. As one doctor explained: though “my absence from home is, of course a source of grief to Lida [my wife] and the children...an all-absorbing, all-engrossing sense of duty, alike to country and family, impelled me [to join the army].”<sup>71</sup>

Many others shared this sense of duty. Abolitionists saw the war as a holy crusade. Consequently, they actually believed God sanctioned their role in the war and that their sacrifices merited the benefits of martyrdom.<sup>72</sup> Furthering the idea of religious motivations, Charles Eliot Norton, a member of a group of historic New England families dedicated to providing moral guidance, wrote to soldiers that because this was “a religious war...a man must carry with him the

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<sup>68</sup>Jacob Heffelfinger, diary, entry of April 27, 1862, in *For Cause and Comrades*, 29.

<sup>69</sup>Harold Lasswell, “War and Mental Health,” *The Encyclopedia of Mental Health*, vol. 6, ed. Albert Deutsch (NY: Franklin Watts, 1963), 2007.

<sup>70</sup>George M. Frederickson, *The Inner Civil War: Northern Intellectuals and the Crisis of the Union* (Chicago: University of Illinois Press, 1993), 72, hereafter cited as *The Inner Civil War*.

<sup>71</sup>Benjamin F. Stevenson, *Letters from the Army*, in *For Cause and Comrades*, 23.

<sup>72</sup>*The Inner Civil War*, 82.

assurance that he is acting in the immediate presence and as the commissioned soldier of God.”<sup>73</sup>

Ralph Waldo Emerson also served as an eloquent spokesman for the cause. As a tribute to Robert Gould Shaw, his poem “Voluntaries” epitomizes the abolitionist view of fighting in the war as a sacrifice for a worthy cause:

So nigh is grandeur to our dust  
So near to God is man  
When Duty whispers low *Thou Must*  
The youth replies *I can.*

(Emerson, “Voluntaries”)

Also, when consoling the parents of a killed soldier, Emerson wrote: “there are crises which demand nations, as well as those which claim the sacrifice of single lives. Ours perhaps is one—and that one whole generation might well consent to perish, if by their fall, political liberty & clean & just life could be made sure to the generations to follow.”<sup>74</sup> Such a concept of serving humanity may have helped many soldiers cope with the horrors. As Perry explained, the soldiers who believed that they were fighting for God could “feel that whatever happens, in the end it will somehow be for the best.”<sup>75</sup> Such a peace of mind may in part account for the seemingly limited incidence of psychiatric casualties in comparison to this century’s wars.<sup>76</sup> Affirming the soldier’s life and acknowledging the horrors of his duties, the Civil War society may have helped soldiers reconcile the killing and absurdity. And claiming the moral issue of slavery, the northerners esteemed their role as crusaders against evil. This mission, then, may have helped them to deal

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<sup>73</sup>Charles E. Norton, *The Soldier of the Good Cause*, in *The Inner Civil War*, 29 and 69.

<sup>74</sup>Letter of Emerson to Benjamin & Susan Rodman, June 17, 1863, *The Letters of Ralph Waldo Emerson*, in *The Inner Civil War*, 81.

<sup>75</sup>*Letters from a Surgeon*, June 29, 1864, 209.

<sup>76</sup>*Soldiers*, 155-156.

with the war's unpleasanties.<sup>77</sup>

Though southerners could not find comfort in preserving the Union or crusading against the evils of slavery, they nevertheless shared a common cause: they fought for their land—the Confederacy.<sup>78</sup> Defending their way of life, their states' rights, and their Southern pride, most rebel soldiers also fought because they believed in the war. Furthermore, recent studies of what led to the confederacy's defeat, have focused their attention on the southerners' inability to retain this initial zeal. For example, in *Why the South Lost the Civil War*, the authors claim a significant deficiency in the Confederate effort was a lack of *continuing* loyalty and will.<sup>79</sup>

Both sides, then, knew exactly why they were fighting. In contrast to Vietnam, the war most notorious for mental trauma, the Civil War soldiers' sense of conviction is remarkable. Most soldiers in Vietnam could not pinpoint a reason why they were there; many wondered exactly why they were fighting.<sup>80</sup> As one Vietnam veteran explained, "the soldier fought for his own survival, not a cause. The prevailing attitude was: do your time... keep your head down, stay out of trouble, get out alive."<sup>81</sup> In this respect then, the Civil War soldiers could claim something those in Vietnam could not: a clear sense of purpose. In that it gave them motivation to stay with the army, a sense of honor, and a penchant for courage, it seems probable that the "cause" helped many of the soldiers, especially the initial enlistees, cope with the trauma the war later produced. For by

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<sup>77</sup>Jim Cullen, *The Civil War in Popular Culture* (Washington: Smithsonian Institution Press, 1995), 159, hereafter cited as *Civil War in Pop Culture*.

<sup>78</sup>Gary Gallagher, *The Confederate War* (Cambridge, Massachusetts: Harvard UP, 1997), 63.

<sup>79</sup>Richard E. Beringer, Herman Hattaway, Archer Jones, and William N. Still, Jr., *Why the South Lost the Civil War*, (Athens: University of Georgia Press, 1986), 64.

<sup>80</sup>*The Civil War in Pop Culture*, 150, and 157-159.

<sup>81</sup>Roger Durham quoted in James Reston Jr., *Sherman's March and Vietnam* (New York, 1984), 97-100.

believing that the bloodshed was not in vain, its horror was perhaps easier to accept.

### *COURAGE AND HONOR*

The Civil War soldiers' concept of honor also sheds light on blindness to mental casualties. Perry captured the concept of this honor: "Deeds of heroism known and unknown, man's greater nature stirred to its depths by the intense conditioning burst forth to the cry of every need."<sup>82</sup> His statement reveals two striking thoughts of the Civil War soldier's mind: first, the notion that the suffering is somewhat necessary for heroism; second, the belief in man's courage.

In this time when Homeric notions of honor still prevailed, a soldier linked his reputation with that of the army.<sup>83</sup> Consequently, honorable soldiers did not seek discharges. Instead, they realized that they were expected to fight as long as they still could walk. It was not uncommon for a veteran to have dozens of gunshot wounds or to have helped the effort even as an amputee.<sup>84</sup>

In words, officers often expressed this sentiment that they must persevere for the sake of their reputations. A Tennessee officer wrote to his wife: "You know me too well to ever mention that to me; to desert my country at this time would be awful. I had better die, by that I would not disgrace myself nor the woman I have sworn to love, cherish, & honor. . . . I want to be among the list who can return free from disgrace."<sup>85</sup> In essence, "the filing of a resignation would cover me

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<sup>82</sup>*Letters from a Surgeon*, 223.

<sup>83</sup>*For Cause and Comrades*, 131.

<sup>84</sup>"Glimpses of the Confederate Army," 125-126.

<sup>85</sup>Urgan G. Owen to Laura Owen, March 1, April 8, 1864, "Letters of a Confederate Surgeon in the Army of Tennessee to His Wife," *Tennessee Historical Quarterly* 4 (1945), in *For Cause and Comrades*, 137.

with disgrace," another colonel explained, "no officer can resign in the face of the enemy."<sup>86</sup> So along with this determination to fight at all costs, it is understandable that these same officers castigated those who sought any type of discharge as cowards.<sup>87</sup> Instead, the expected response to any stressor was as follows: a private in the 37<sup>th</sup> Virginia got hit by a rifle ball that went into his head and came out through the back leaving a hole big enough for "a good sized marble" to go through. Even with this massive wound in his head, the soldier did not consider quitting. Instead, he stuck with his regiment.<sup>88</sup>

Perry too, grappled with the choice between loyalties to home or to war. He wrote in his diary that he was "sorely needed" at home to take care of his wife's "extreme ill health." Concerned that his wife was on her death bed, Perry felt that he could not serve the army effectively. Consequently after much consideration, he finally made the difficult decision to take leave of his regiment. But even for him, permission was not easy to come by. Only after friends sent "influential letters" to the Secretary of War could Perry leave the army. Furthermore, neither the army's blessing of his mission nor the recognition that he left for a worthy cause eased his conscience. Perry still worried that by leaving, he was shirking his duties. But finally, though he terrible abandoning his regiment just when they needed him most to help finish up their job, Perry returned to his dying wife.<sup>89</sup>

As these stories suggest, the impression prevailed that real men would never succumb to the exhausting war: physically or mentally. As Perry explained, only the "conscripts" were fearful in

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<sup>86</sup>Thomas Kilby Smith to Eliza Smith, June 17, 1863, Smith Papers, in *For Cause and Comrades*, 87.

<sup>87</sup>*Shook over Hell*, 119.

<sup>88</sup>"Glimpses of the Confederate Army," 126.

<sup>89</sup>*Letters from a Surgeon*, July 1864, 211-213, and 221.

battle.<sup>90</sup> And in regards to nostalgia, many officers attached this homesickness to those recreants from the country districts.<sup>91</sup> So with the idea in mind that even handicapped men felt ashamed to leave the army, it is no surprise that the men who sought compensation for their mental incapacities—especially through discharges—were viewed as shirkers or cowards.<sup>92</sup>

According to the concept of an ideal soldier, real men do not have problems with cowardly reactions to the fighting. Instead, he is courageous and brave. The officers concurred that courage would grant the soldiers the composure they needed. One soldier recounted how bravery had helped him, and should help others too, survive the trials. “In a thousand ways [the soldier] is tried...every quality is put to the test. If he shows the least cowardice he is undone. His courage must never fail. He must be manly and independent.”<sup>93</sup>

Soldiers’ writings overflow with this fixation on manly fortitude, bravery, and courage. In Surgeon Perry’s letters, he rarely praises his comrades without mentioning their “fortitude.” In one instance, Perry described recently released prisoners. He graphically related their horrific conditions—detailing their wounds, starvation, and stench—but could not let by the chance to reaffirm how brave these uncomplaining victims were.<sup>94</sup> Had he, perhaps, thought about his own report that they were overwhelmingly reluctant to discuss their experiences,<sup>95</sup> Perry may have been horrified to discover that their courage may not have helped them as much as he thought it had.

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<sup>90</sup>Ibid, Oct 22, 1863, 111.

<sup>91</sup>“*Glimpses of the Confederate Army*,” 120.

<sup>92</sup>*Shook Over Hell*, 119.

<sup>93</sup>Carlton McCarthy, *Detailed Minutiae of Soldier Life in the Army of Northern Virginia, 1861-1865*, (Richmond: J.W. Randolph & English, 1888), 208.

<sup>94</sup>*Letters from a Surgeon*, 17-18.

<sup>95</sup>Ibid, 14-15.



Yet such admissions of cowardice were not an option. As one corporal worried: "I do hope I may be brave and true for of all names most terrible and to be dreaded *is coward*."<sup>96</sup>

So accompanying this stigma against cowards came a complete disapproval of fear. Consequently, the soldiers did not converse about their fears—rather, fear was something to be ashamed of. Fright was to be hidden at all costs. Two post-war novels demonstrate the soldiers' dread of fear. Though born after the war, Stephen Crane's ability to accurately describe the experiences of a Civil War soldier has been widely acclaimed.<sup>97</sup> Delving into a new recruit's thoughts, Crane uncannily reveals the true source of the soldier's distress. Waiting for a battle to begin, the soldier worries if he will run from the battle. Excited about the fighting, his true fear is not the battle's danger, but fear itself. And though he wishes to "make an open declaration of his concern," he is afraid to do so for fear of being jeered for his cowardice.<sup>98</sup> Another post-war novel seconds this attitude. In it, a soldier creates for the women an explanation of the soldiers' bravery: "We are as much afraid as you are, only we are more afraid to show it."<sup>99</sup> So precise, these explanations seem to define how the soldiers felt about fear. But since they are after-the-fact recreations, alone, they cannot stand as a definitive consensus. Instead, accounts written during the war are needed to further reveal the soldiers' attitudes on fear.

In a somewhat renegade account, a private disclosed the true dynamics between the soldiers' boasts of bravery and their actual behavior on the battlefield:

[I]f you could only be with us around our camp fires after a fight and listen to the accounts

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<sup>96</sup>John Gillis, Diary, entry of March 24, 1864, in *For Cause and Comrades*, 82.

<sup>97</sup>John Berryman, "Stephen Crane: The Red Bad of Courage," essay accompanying *The Red Badge of Courage*, (Philadelphia: Running Press, 1992), 115.

<sup>98</sup>Stephen Crane, *The Red Badge of Courage*, (Philadelphia: Running Press, 1992), 14 and 17.

<sup>99</sup>Joseph Kirkland, *The Captain of Company K* in *For Cause and Comrades*, 77.



of the hairbreadth escapes that are told of and hear the loud laughs that greet each one's experience and see the gay reckless careless way in which they are told, you would be very apt to think that we were the happiest set of men you ever saw. But if you should go with us to the battle field and see those that [were] so gay, their faces [now] pale and their nerves trembling, and see anxiety on every countenance almost bordering on fear, you would be very apt to think we were all a set of cowardly poltroons--this picture to be taken just before the fight begins, and the enemy is in sight and the dull ominous silence that generally takes place before the battle begins.<sup>100</sup>

This account fits nicely with current impressions of war, for it seems quite likely that despite their obsession with bravery, most soldiers actually were a bit frightened in the face of battle.

Furthermore, many other soldiers admitted to similar feelings in their diaries.<sup>101</sup> Nevertheless, as other soldiers' accounts declare, the possibility remains that some brave souls actually lived up to their high standards. For these soldiers, their claims typically denied ever feeling fear. "Strange as it may appear to you who know me," a private wrote home, "I never once felt the sensation of fear."<sup>102</sup> Though such a claim seems laughable today, it was accepted at the time.

#### CONCLUSION

From Civil War records, it is obvious that the soldiers were by no means immune to psychiatric casualties. However, the records do imply that they suffered mental disorders at lower rates than the soldiers of recent wars. This phenomenon must be explained. First, the history of psychiatry suggests that because the psychiatric profession did not yet exist (Freud and psychoanalysis came in the early 20<sup>th</sup> century),<sup>103</sup> Civil War doctors cannot be expected to have

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<sup>100</sup>James T. Miller to William J. Miller, Miller Papers, in *Embattled Courage*, 24.

<sup>101</sup>For studies on the incidence of fear, read *For Cause and Comrades*, 37-45, or *Embattled Courage*, 20-26.

<sup>102</sup>Harvey Reid to sisters, Feb. 27, 1863, *The View from Headquarters: Civil War Letters of Harvey Reid*, in *For Cause and Comrades*, 36.

<sup>103</sup>"Soldiers, Psychiatrists, and Combat Trauma," 444.

concerned themselves with combat trauma—a complicated mental disorder that has taken years to develop into its current tenuous understanding.<sup>104</sup> Consequently, it is not surprising that they did not diagnose combat neuroses as current physicians would. With their different criterion, the rates of mental disorders are hard to evaluate according to current standards.

If one, though, does compare the rates and needs to answer these discrepancies, he may find it useful to note that many Civil War soldiers' memoirs do suggest that their acceptance of the war did help them to cope with the trials. Perhaps their firm concepts of moral obligation, religious conviction, or patriotic fervor provided the soldiers with a way to justify the war's horrors. And though such a conclusion is tentative at best, it seems reasonable to surmise that their acceptance of the war helped them from falling prey to the mental trauma that has plagued more recent wars.

Finally, the soldiers' views on honor and courage provide further clarification on why the rates of psychological casualties were lower than those of recent wars. From soldiers' accounts on these subjects, it is evident that a discrepancy existed between the soldiers' desire for fearlessness and their actual emotions. This conflict in itself implies inner trauma. However, more significant is its revelation that most soldiers disdained their own natural responses to danger. And because the ideal demanded courage, they attempted bravery. So it seems natural that they tried to limit the scope of their supposedly cowardly emotions. Consequently, the probability that far fewer cases of mental trauma were admitted than occurred is quite high. Furthermore, the whole concept of emotional trauma does not fit well into their noble ideal: if physical handicaps were treated so lightly, why should mere psychological problems be of any account? So according to their accepted standards, it seems likely that the soldiers did not give too much thought to how the war affected their psyches. Instead, it seems perfectly understandable that the concern with mental disorders focused only on ones that completely deprived the soldier of his ability to fight.

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<sup>104</sup>Refer back to *The Brief History of Combat* for the development of PTSD. Also, read the diagnostic criterion for PTSD in *DSM-III-R: Diagnostic and Statistical Manual of Mental Disorders*, 250. The symptoms are broad, numerous, and somewhat subjective.

### *Bibliographic Essay*

As an initial reference, Eric Dean's *Shook Over Hell* (published in 1997), a book focusing on Post-Traumatic Stress Disorder (PTSD), proved invaluable. In it, he reexamines the assumption that PTSD is unique to Vietnam veterans. This he accomplishes by examining the evidence for its existence in the Civil War. Though his findings gave me much evidence for mental casualties during the war, I did not agree with the conclusions he drew from them. While he decided that many soldiers, regardless of their acceptance of the war, will succumb to PTSD, I concluded that this is probably not the case.

Two other secondary sources also provided me with numerous first-hand accounts. James McPherson's *For Cause and Comrades* and Gerald Linderman's *Embattled Courage* were books packed with the anecdotes I needed to support my points. Without their hard-to-find first-hand sources, my research would have been much harder. Furthermore, both the books pointed towards the conclusion that the Civil War society--with its notions of honor, duty, and patriotism--could help explain the relationship between mental casualties and the war.

As primary sources, two inter-library loan books came into play. I enjoyed using Surgeon John Perry's diary since it was written by a medical professional. I felt this gave his thoughts more weight on a medical subject. Also, when I compared his writings with other journals, it seemed quite typical of the soldiers' journals. The other book I borrowed was the official Civil War *Manual of Instructions for Enlisting and Discharging Soldiers*. Though much of the information was extraneous, what information that did pertain to my topic was vital to uncovering the attitudes of the time.

Finally, I must explain what I regret most in my use of sources. First, I never realized there were so many good books written on this subject. From accounts on war, such as John Keegan's *The Face of Battle*, to Jonathan Shay's *Achilles in Vietnam*, a contemporary book on Vietnam and honor, I found many interesting sources at the last moment. Furthermore, I regret not using journals as much as I should have. Though I did find some articles from mining the footnotes, I shunned actually seeking articles out on my own; this was because I find the search methods very tedious. Next, I wish that I had better known how to find statistics for the wars. Though detailed statistics were available for World War II, I could not find information on World War I or detailed information on the Vietnam conflict in our library. Also, I found the Civil War records very confusing to use. So in conclusion, I must say that this paper represents only a small fraction of the research that could be conducted on this topic. Had I more time, the perfect library, and better library skills, a definitive paper could eventually be completed.