Aberration of Mind

Sommerville, Diane Miller

Published by The University of North Carolina Press

Sommerville, Diane Miller.
Aberration of Mind: Suicide and Suffering in the Civil War–Era South.

For additional information about this book
https://muse.jhu.edu/book/61411

For content related to this chapter
https://muse.jhu.edu/related_content?type=book&id=2183378
Chapter 7
All Is Dark before Me

Confederate Women and the Postwar Landscape of Suffering and Suicide

We are a conquered people. Henceforth, we must live subservient to Yankee domination. We have no country to be proud of; no flag to point to; the hated stars and stripes are floating insolently over us. . . . No wonder then that I feel like lying down to die.
—Elvira Bruce Seddon, April 11, 1865

Lost Cause acolytes obscured the lived experience of Confederate women after the Civil War as much as they did women during the war. A deluge of testimonials by ex-Confederates extolled white women’s tenacity, strength, and devotion to the cause after the war, claiming white women were critically indispensable to the postwar recovery of the South. The glorification of Southern white women, especially their resiliency, rests in tension, though, with another salient Reconstruction motif, that of the demoralized, long-suffering South. Contemporaries as well as the Lost Cause faithful described the gloom and despair that enveloped the postwar South. Confederate veteran George Cary Eggleston’s postbellum recollections capture the devastation and profound despair that descended on the South after the Confederate loss: “The country was exhausted, and nobody could foresee any future but one of abject wretchedness.” There is much truth in the claims of misery in the defeated South. Four years of war had cost the South considerable blood and treasure. Families that lost male relatives to battle or disease struggled to sustain themselves and stave off starvation. Fields, factories, churches, and homes lay in ruins. Bridges and railroads were destroyed, eviscerating the region’s infrastructure. Confederacy currency was worthless, cash scarce. Creditors stood almost no chance of collecting their debts, while debtors futilely attempted to stave off creditors, unleashing a torrent of bankruptcies, property seizures, and foreclosures, essentially ushering in the collapse of personal and commercial finance throughout the South. Land values plummeted, while tax debt mounted. Emancipation represented not only a devastating loss of wealth, but the loss of labor; the withdrawal of freedpeople created a labor shortage that left plantations and farms crippled. Livestock, tools, and produce had been seized or destroyed by one or both armies,
contributing to even greater shortages. Defeat left the region impoverished and its future in doubt. The destitution and misery recounted by white Southerners after the war had basis in fact.

Women, in the Lost Cause script, suffered the most. Eggleston explained, “The case of the women was a very sorry one indeed.” Ex-Confederate general Matthew C. Butler summed up, if verbosely, the sorry state of women in the defeated South: “Disappointed in the failure of a cause for which they had suffered so much, baffled in the fondest hopes of an earnest patriotism, impoverished by the iron hand of relentless war, desolated in their hearts by the cruel fate of unsuccessful battle, and bereft of the tenderest ties that bound them to earth, mourning over the most dismal prospect that ever converted the happiest, fairest land to waste and desolation, consumed by anxiety and the darkest forebodings for the future, they have never lowered the exalted crest of true Southern womanhood, nor pandered to a sentiment that would compromise with dishonor.” Simply put, Confederate women had been let down and were now holding the bag. Confederate acolytes saw no contradiction in hailing Southern white women as resilient heroines while claiming they had suffered greatly during Reconstruction. Lost Causers wanted their cake—the war was a horrific event that unleashed untold agony and despair, felt most acutely by vulnerable white women—but they wanted to eat it, too: white Southern women remained stalwart, brave, and resilient through all the suffering. White women faced immense adversity yet displayed heroic, noble strength as they held up a hurting nation. Eggleston again: “They kept their spirits up through it all . . . cheerfully borne.” Confederates celebrated white women’s ability to endure through suffering and to comfort and minister to the needs of demoralized men. Southern white women were at once victims and superheroes.

Lost Cause canonization of Southern white women after the war obfuscated the lived experiences of women in the postwar South and hid from view the legion of Confederate faithful who faltered emotionally and psychologically. While depicting the region as utterly devastated by war, to garner sympathy and divert attention from the responsibility the Southern states bore for starting the war, Lost Cause boosters asserted that Southern white women’s psyches emerged from the war tested but unscarred. While many white women did show considerable pluck and fortitude in the trying circumstances of defeat and devastation, many did not. This chapter examines the lives of Southern white women who found the burden of living in the turbulent postbellum South unbearable and who broke under the weighty material, financial, and emotional constraints of the postwar landscape. Most had suffered severe trauma and loss during the war—invasion, evacuation and displacement, the death of a loved one—and so entered the postbellum period
compromised emotionally, only to face additional hardships. Women’s continued suffering is documented in reports of widespread depression among women and their institutionalization for mental illness and in cases of suicidal ideation and activity.

The suffering of ex-Confederate women was highly gendered. White women in the antebellum South had been socialized to believe in their own inferiority and weakness; paternalistic promises falsely assured them they would be shielded from masculine tasks like providing for and protecting their families. Consequently, many women who bought into the paternalist claptrap became emotionally crippled when tasked with extraordinary and unfamiliar responsibilities and obligations during and after the Civil War. Some could barely cope; some refused to cope; many failed to cope. Widows, young mothers, and children, the most vulnerable of the region’s civilian population who should have been safeguarded by paternalistic commitments of protection, felt the pressure points of defeat and sacrifice most acutely. To be sure, many Southern women learned to stand on their own during the war. But as recovery loomed in the far-off distance and rebuilding took interminably long, continued upheaval and dislocations compounded women’s suffering after the war. The collective trauma and despair experienced by the South’s white women, on whom so much responsibility was placed during the war and then after, chipped away at the emotional reservoirs of the Confederacy’s women, already well tapped. As Stephanie McCurry has shown, women’s consent was neither solicited nor granted when the Confederate nation commenced, yet secessionists shamelessly invoked the trope of protecting women, a central tenet of the rebel narrative. Ironically, in launching a bid for independence, which it cloaked in the rhetoric of protecting white womanhood, the Confederacy did unfathomable, enduring harm to its professed chief beneficiaries, white women and children.

Confederate women after the war faced three significant challenges: first, the most rudimentary, mere survival (securing basic means to live, such as food and shelter), then the reconstitution of their families (redefining relationships with men or rebuilding families without male heads of household), and, later, rebuilding their communities (redefining their relationships with others in the community and the state). “Survival work,” a term used by Annette Kuhn to describe the situation in post–World War II Germany, was the first order of business for women of the South after the Civil War. Eventually women shifted their attention from survival work to rebuilding relationships. Often times the two tasks overlapped. The confluence of physical devastation,
economic collapse, and uncertainty about the future, however, significantly hampered efforts at rebuilding personal relationships, families, and community in the postwar South.

The first obstacle to survival was the psychological well-being of the region’s women in the face of continued hardship. Defeat brought Southerners face-to-face with despair; supporters of the Confederacy emerged from the war demoralized, disoriented, and unsettled about their future. A collective melancholy enveloped the defeated South as its inhabitants struggled to make sense of the pervasive death and destruction that surrounded them. The shock of Lee’s surrender, the reality of accepting Yankee domination, and financial ruin left white Southerners bewildered and hopeless for their communal and individual futures. Confederate women recorded their despondency in diaries and letters. Catherine Edmondston lamented war’s end: “Sorrow on sorrow! No one is well, no one is happy!” Kate Stone of Louisiana struggled to reconcile the incongruity of beautiful spring weather with the news of Confederate surrender, dubbing it “this grievous spring,” forever to be associated with the pangs of loss and defeat. Fall brought no relief; she opined: “No wonder Mamma is so discouraged. Since My Brother’s return, we have all had the blues.”

Confederate women reacted to news of the South’s defeat with fear, numbness, and hopelessness about their future in language that bespoke widespread depression. Edmondston confessed to her diary in June 1865: “The future stands before us dark, forbidding, and stern. . . . At present all is as gloomy as can well be, at home present domestic discomfort and dismal anticipations of still greater evils to come.” Dispirited Southerners like Catherine Barbara Broun saw signs of melancholy everywhere. “The trees look sad. The roses in full bloom, look sad. The house seems desolate.” Many like Sarah Wadley openly acknowledged being consumed by depression. “I am depressed almost to despair. Life seems to have lost its interest, earth its beauty.”

Like Confederate men, women loyal to the Confederacy struggled after the peace to accept defeat of their cause and subjugation under Yankee rule. Some, like Edmondston, spewed hatred and defiance. “The Vulgar Yankee nation exults over our misfortunes, places its foot upon our necks, and extols its own prowess in conquering us.” Others, like Stone, expressed resignation: “Conquered, Submission, Subjugation are words that burn into my heart, and yet I feel that we are doomed to know them in all their bitterness. . . . We will be slaves, yes slaves, of the Yankee Government. The degradation seems more than we can bear. How can we bend our necks to the tyrants’ yoke?” Submission was hard to swallow for a people steeped in honor culture. Women bristled at the idea of Yankee domination.
Some ex-Confederate women, enveloped by shame and despairing of conquest, could not imagine a future living under an occupier and turned to death wishes to imagine a way out from under defeat. Elvira Seddon, upon hearing the news out of Appomattox, cried: “We are a conquered people. Henceforth we must live subservient to Yankee domination. We have no country to be proud of; no flag to point to; the hated stars and stripes are floating insolently over us. . . . No wonder then that I feel like lying down to die.”

Hannah Rawlings’s thoughts turned to death, too, upon learning the South had lost the war. “I felt as if I could lay my head in the dust and die.”

Given the ubiquity of suffering in the Civil War years and after, it should come as no surprise that some white Southern women sought escape through death, either through fantasy and delusions or by effecting suicide. Octavia Otey fantasized about her own death as a way to escape the economic hardships and melancholy that engulfed her postwar existence. In death, she imagined, she would be “at peaze [sic], at rest, and never know trouble any more.” Death promised an end to worldly suffering, a reprieve from sorrow and agony. “Life seems very sorrowful and full of trouble to me. I would be glad to be gone from this weary world.”

Postwar fascination with death, historian Gaines M. Foster suggests, offered defeated Southerners a temporary reprieve, a “psychological escape,” from the grim circumstances that surrounded them and clouded their ability to see anything but a bleak future. Otey never acted on her death wishes. Nor did Cornelia Peake McDonald, who recalled how, just months after the war ended, she was so consumed by worry—rent was due with no money to pay it; the pantry was empty; winter was coming and the family lacked the means to stay warm—that death invaded her thoughts. “I did not think; nor did I dare to pray the impious prayer that God would destroy us, but I wished it; I desired at that moment to be done with life.” Her faith, though, pulled her through those dark thoughts when she feared the “attacks of the Tempter,” presumably the temptation to end her life.

Ubiquitous depression among former Confederate women emanated from grim circumstances after the war. The material and economic devastation of the region was calamitous and pervasive. According to James M. McPherson, “The South was not only invaded and conquered, it was utterly destroyed.” By war’s end, two-thirds of the assessed value of Southern wealth and two-fifths of the South’s livestock had been decimated. Industries and agriculture were demolished. The region and its people faced a monumental challenge to rebuild. Alabama alone estimated it had lost $500 million in property. Much of the region’s inhabitants had been reduced to destitution, making mere survival, the first order of business for the postwar South, a dubious prospect. Impediments to a family’s survival in the postwar South were...
Ex-Confederates faced indigence, malnutrition, scarcity, disease, loss of income and wealth, as well as the loss of a means to generate income.28 Dwellings and barns lay in ruins, so basic shelter eluded some Southerners. Seeking refuge with relatives could prove problematic; chances were good other family members were equally taxed beyond their means and unable to offer support. Wartime scarcity limited the availability of staples like meat, breads and grains, and corn and forced many Southerners to do without or to improvise. Octavia Otey complained bitterly about her family’s meager, monotonous diet. “I am so tired of corn bread and fried meat.”29

Common folk were not the only ones teetering on the brink of starvation.30 Southern elites also faced the challenge of surviving. Cornelia Peake McDonald, a widow whose husband died shortly after being released as a POW, recalled how, in the months after the war, she was so weak from hunger she could barely go up and down the stairs.31 The formerly affluent sold off family heirlooms and valuables to buy food, as depicted in the pages of Harper’s Weekly. (See figure 11.) The middling and poor who owned few treasures were less fortunate.32

Survival in the face of such monumental hurdles overwhelmed many white Southern women, quite a few of whom unwillingly had inherited, through death or disability, the job of head of household and thus became responsible for the welfare of their families under extraordinarily challenging circumstances. Emma Holmes bemoaned the elusiveness of basic provisions. “Day by day it becomes harder to get money . . . for the necessities of life.”33 Southern white women, even elite women, despaired over their destitution. Many failed to see a way out of the misery attendant to war’s end. This inability to see a brighter future had a hand in the suicide of forty-year-old Cornelia Davis, who hanged herself in a smokehouse in December 1873. The “reduced circumstances” of Davis and her husband, Jarret Davis, longtime residents of Americus, Georgia, were believed responsible for this and an earlier attempted suicide when Davis jumped into a well.34

Octavia Otey did not kill herself, but constant worry over indebtedness took a toll on her mental health and led her to believe she might “go crazy” over her inability to improve her finances. She wrote in 1871, “I feel like I will go crazy if I can’t get the money to pay my debts.” A few days later, more of the same: “Very low spirited indeed today.” Otey’s financial prospects had not improved even five years later. “I can’t make plans at all or look forward to doing anything as I have no money. I have not even got money to buy the necessities of life. . . . I have no way out of this and all is dark before me.”35

Declining property values further complicated Southerners’ ability to pay off debts. Selling off property became a common way to raise money, but plummeting land values contributed to dwindling family fortunes already
reeling from the loss of slaves to emancipation. Catherine Edmondston complained bitterly about declining property values after the war. “At one blow we have lost a large portion of our property. Father’s is diminished by $350,000 or $400,000 and what is sadder still, his liabilities remain the same, whilst his inability to meet them is lessened ten fold!”36 White Southerners were caught in a crushing financial vise: rising indebtedness hindered the ability to pay off one’s debts.
Southern women, many of them war widows, faced the unfamiliar task of renegotiating the terms of their debt, while jumpstarting business and farming enterprises. Indebtedness nearly overwhelmed widow Octavia Otey, a novice at negotiating terms of debt and credit. Pressured by her creditors, Otey, desperate and alone, sued her debtors to get out from under the rising weight of debt and financial duress. In 1876, she fretted, “No money to buy anything.”37 A few weeks later, Otey approached someone about a loan, but believed her chances were diminished by the fact she was a woman. “It is a hard case because I am a woman. I can get no help and that is what they say. No man wants to have business dealings with a woman.”38 Southern white women without men faced the double burden of taking on the new responsibility of managing debt, while facing discrimination with whom they had dealings.

Southern women also struggled to pay heavy tax bills that rose dramatically after the war.39 Octavia Otey despaired over how to raise the money to pay taxes. “The tax collector gave me notice that my taxes were due and gave me until next Saturday week to pay the $86.56 due. I have no idea where I will get the money.”40 Emma Holmes, a South Carolinian who lived with her widowed mother, complained about the U.S. government’s insistence that the family pay back taxes from 1861, since “the past separation.” The Holmeses faced a stiff penalty and even the sale of property if the tax bill went unpaid. The strain of additional taxes in the postwar economic crisis, and the possible forfeiture of property, represented just one of many new day-to-day worries that occupied Southern white women like Holmes and contributed to the depression that haunted her long after the war.41

Thousands of Southerners emerged from the Civil War homeless and penniless, which cost many Southern white women their psychological well-being. “Loss of property” was a general term commonly assigned as a cause of mental illness throughout the nineteenth century and usually implied financial and/or material loss. In the context of war and its exigencies, however, “loss of property” took on additional connotations. Because during the war Southern homes, structures, and all of their contents were targeted by Union (and sometimes Confederate) troops, especially late in the war, their destruction and loss naturally distressed inhabitants who were made homeless or destitute as a result. Georgia widow Ann Reese tried to kill herself on several occasions, once with a razor, once by a drowning attempt, and a few times by grinding up glass and kneading it into her bread. Her suicidal gestures were attributed to “loss of property.” Reese was the head of her household in 1860 and boasted personal property worth $12,000. There were six children living at home, ranging in age from four to fifteen. Over a decade of caring for a large family alone, coupled with wartime property loss, seems to have
broken Reese. In fact, she died a month into her admission to the Georgia asylum.\textsuperscript{42} Henrietta Passmore’s bout with insanity, like Reese’s, began during the Civil War, though she did not enter the Georgia asylum until 1867. Among the reasons given for her debilitation were loss of property and “the general state of the country.”\textsuperscript{43} Forty-year-old Winnie Gladden’s manifestations of insanity did not materialize until after the war, but caregivers pointed to “troubles connected with invasion of the country by the federals, [the] destruction of her house by them etc,” as the source of her psychological instability.\textsuperscript{44}

The devastation of the Gladden home and property also meant that the family, like so many other Southern families after the war, relocated and began a pattern of repeated moves in the aftermath of war. Before the war, the Gladdens had lived in Walker County in northwest Georgia. At the time Gladden was institutionalized, the family appears to have lived with A. P. Allgood in neighboring Chattooga County. By 1870, they had relocated to Arkansas. Geographic dislocation and relocation, brought on by push-pull factors including the physical destruction of homes, the desire to seek out extended family, and the search for shelter and jobs, inserted considerable uncertainty and disruption into the lives of postwar Southerners. For many Southern women the pattern of dislocation had begun during the war when families relocated to stay out of harm’s way and when, in the final stages of war, the Union army forced evacuations on the civilian populations. Unsettled by being uprooted from home and community, by the loss of personal property, and by temporary quartering in unfamiliar surroundings, Winnie Gladden’s emotional stamina may well have reached its limits in April 1866, when her family oversaw her admission to the asylum in Milledgeville.\textsuperscript{45}

Adding to white women’s stress was the loss of slave labor that diminished wealth as well as necessitated new arrangements for household labor. Slaves constituted the largest part of white Southern wealth before the war. With the end of slavery, many white Southerners, from middling folk to wealthy planters, were wiped out financially. The loss sent some white Southern women reeling. A single Georgia woman, Mary Bynum, became violent, threatening to burn down her brother’s house due to insanity that had been precipitated by the “loss of all her property which consisted of negros [sic].”\textsuperscript{46}

The loss of slave labor in the South meant that former slaveholders had to negotiate labor terms with freedmen and freedwomen, a new role for all white Southerners, but especially so for white women left husbandless. Considerable discord between whites and the formerly enslaved injected a new source of conflict into postwar households that stressed many white women, especially those serving as household heads. The inevitable rifts between the formerly enslaved and ex-masters or new employers at times embedded strain
into Southern households, black and white, as the principals negotiated new
terrain including contractual arrangements and entertained unprecedented
discussions about compensation and terms of employment. Altercations with
freedpeople—mainly over contracts and terms of employment—were en-
demic after the Civil War and contributed to postwar stress among white
Southerners, as did the perceived chaos and turmoil created by an unfamil-
 iar world without slaves.\textsuperscript{47} Betty Meriwether returned to her Memphis home
after the war to find it intact but occupied. The squatting family vacated im-
mEDIATELY, but the freedmen camped out on her front lawn—“abandoned
lands”—refused. Only multiple confrontations and the threat of legal action
finally convinced the freedmen to move on.\textsuperscript{48} Valeria Bass of Rome, Geor-
gia, entered the asylum in 1869, ostensibly due to “fright” attributed to “some
difficulty” between her new husband and “the negroes in his place.” Valeria
had married Nathan Henry Bass Jr., a veteran, shortly after the war. The tim-
ing of her illness, following the birth of two children, the youngest of whom
was eight months, suggests an obstetrical malady may have played a role in
her institutionalization. Someone close to her, likely her husband, though,
attributed Valeria’s “aberration of mind” to contention with freedpeople.
While postpartum complications probably explain her disposition to physi-
cal and psychological ailments—“raving and rapid incoherent talking,” gnash-
ing of teeth in her sleep, and nightmares—the Bass family believed the
unsettled relations with former slaves played some role in her demise.\textsuperscript{49}

Widows who inherited the responsibility of negotiating terms of free labor
were particularly vexed by the negotiation processes. Before the war, South-
ern white women largely deferred to menfolk regarding the supervision of
slave labor. Without husbands to guide them, some Southern women lamented
their own inadequacies and inexperience in procuring and overseeing freed
labor. Octavia Otey, newly widowed in June 1865, grew exasperated in her at-
tempts to negotiate the terms of free labor with the newly freed slaves. Otey,
who suffered from depression in the postwar years, identified her dealings
with freedmen and women as a major source of her depression. She recounted
numerous conflicts with the freedpeople with whom she contracted as labor-
ers on her farm. The “negroes” complained about the meager rations of corn
she dispersed to them. They demanded she supply them with firewood. Otey
complained about Berry Penny, a “great rascal,” whom she claimed could not
get the cotton crop to town promptly and whom she eventually sued over cot-
ton prices.\textsuperscript{50} As a woman, Otey’s authority was challenged regularly. She
groused that the “negroes . . . won’t work or do what I tell them to do.” Otey’s
own indecisiveness and inexperience apparently cost her respect among her
African American workers. Otey and women like her faced a postwar prob-
lem that most men did not: freedpeople directly questioned her authority,
openly displaying disdain for her as their employer. In fact, she feared losing “all influence with the negroes,” who clearly did not respect her. She desperately needed their help, but she wished them, and the problems of managing them, gone. Contentious matters with her black workers and tenants, to Otey’s mind, caused her debilitating bouts of anxiety and melancholy. “It is a hard life I lead,” she confessed after releasing one of her workers, but then second-guessed her decision. More than any inherited task, the management of freed labor proved the most troublesome to the widow Otey, one that contributed to her psychological distress.

Loss of slave labor also meant that former slaveholding women, many for the first time, had to step up and do much of the housework themselves including washing clothes, ironing, cooking, and cleaning, exhausting new routines to which they were unaccustomed. Cornelia Peake McDonald described how she took over, rather ineptly, in the kitchen for a departed servant. She struggled merely with boiling water and carrying the hot kettle, which she dropped, scalding herself. Manual labor had important implications for elite Southern women’s status, which, before emancipation, had been built on the backs of slave women. Now former slaveholding women had to stoop to the perceived indignity and humiliation of doing manual labor themselves. Newspapers, cognizant of white women’s new situation and eager to offer encouragement, stressed the dignity of domestic labor, even asserting that the household would function more efficiently without slaves, about whom slaveholding women complained mightily. Regardless, many women viewed the reconfiguration of household labor as another source of demoralization and depression. To boot, the additional work came on top of even more work for women who lost husbands in the war, adding further to their stress.

Southern women occupied a milieu of defeat, devastation, and destitution that required their unprecedented engagement in alien financial matters and the redefinition of their roles within the household, which left many emotionally unsteady. Lacking a modern clinical vocabulary and scientific understanding, they instead described their feelings in the vernacular of their time: they were discouraged, sorrowful, crazy, low-spirited, gloomy. They were depressed and had the blues. These articulations of mental distress by women emerging from a war zone would sound familiar to contemporary social scientists who study the impact of war on female civilians. Investigations of postwar societies in the twentieth century show that widespread and long-term psychological problems are common in the aftermath of war. Symptoms of clinical depression, anxiety, and PTSD pervaded postwar

All Is Dark before Me 207
societies in Asia, the Middle East, and Eastern Europe, though the rates vary widely. Between 38.5 percent to 67.7 percent of those populations that emerged from war exhibited symptoms of depression; up to 87 percent experienced PTSD. Of course, no social scientists existed in the 1860s to conduct surveys about the mental health consequences of the Civil War on Southerners, but given the vast literature on later wars that identifies a correlation between the stress of war and declining mental health, it is a safe assumption that Southern women, like those in other societies at other times, suffered greatly after the Civil War and that much of their personal suffering directly correlated to the war and its aftermath.

War-induced or war-related mental illness manifested in Southern white women in myriad ways, from the benign—an inability to continue writing in one’s diary—to the more serious, aberrant behaviors including self-injury that might result in institutionalization or suicide. Southern women’s depression and anxiety took many forms. Despair left some, like Catherine Edmondston, bedridden. “I have no heart to be well! My bed is I believe the best place for me.” Other signs of clinical depression took hold. Edmondston lapsed into a “drowsy dream” and confessed to feeling “benumbed” for hours.

Not all women became suicidal or suffered clinical depression due to the war, even though most certainly all suffered emotionally to some degree. Why some women broke under the stressors of the war while others survived, even thrived, under devastating circumstances perhaps cannot be known. Equally perplexing are the reasons some Confederate women collapsed psychologically or became suicidal. In most cases, the historical record remains silent about causation. Even when nineteenth-century medical experts or family members weighed in on the matter of causation, their knowledge about the causes of mental illness was limited, so their conclusions may have been faulty or shaped by their own worldviews inflected by gender. Nor is it likely that just one event would have triggered a psychic breakdown of a Southern woman. Emotional breakdowns are rarely caused by a single factor. Yet the common thread in the cases of all the women discussed in this chapter is that they lived under very trying circumstances that were directly related to the war and its consequences.

Two stories of Southern white women—Nancy Dempsey and Louisa Matheny—who experienced psychological crises demonstrate how multiple war-related strands shaped their personal lives in ways that almost certainly contributed significantly to their breakdowns after the war. Both women became suicidal and were institutionalized within a year of war’s end. Nancy Dempsey was only twenty-seven in 1865, but the war had aged her. Husband Henry returned home safely after a three-year stint with the 18th Georgia Infantry and resumed farming in Conyers. When Henry had departed for the
front, he left behind a twenty-three-year-old wife and three very small children, ages one, three, and four. He probably took solace in the large extended family in Newton County to look out for Nancy; Nancy’s father, Joseph Hamilton “Ham” Almand, was one of fifteen children. But the Almands, too, were sending off their men to fight the Yankees. Nancy’s younger brother, James Thomas Almand, enlisted in the 35th Georgia Infantry, as did a gaggle of other Almands. Dempsey’s cousins and uncles signed up for the duration and of those, at least four of Nancy’s male Almand cousins died between 1862 and 1863. Consequently, Nancy had few male kin on whom she could rely during crises, like when her youngest child, a daughter, died of scarlet fever in February 1864. Six weeks later, the Dempsey-Almand clan rejoiced with the news of brother James’s homecoming. He had survived thirteen engagements and been wounded only once, but he had become ill and was hospitalized in Virginia. Ham Almand traveled to retrieve his ailing son, who had become infected with typhoid fever. He lived only two weeks before dying at home in north Georgia. Two other Almands, a cousin and an uncle, died in April 1865 from respiratory diseases contracted while in military service.

Reconstituting a household after the war under the shroud of death and grief proved challenging for Nancy and Henry Dempsey. Henry took the required oath of allegiance in June 1865 that permitted him to return home to Georgia and to Nancy, who conceived a child quickly, her fourth. She gave birth to Rebeca in April 1866 and experienced a recurrence of what were likely postpartum psychoses, which had first emerged in 1861 when her daughter Sophronia had been born. Symptoms following the birth of Rebeca, though, intensified. Nancy twice tried to cut Henry’s throat, and on another occasion she attempted to murder her sister. Nancy also tried to hang herself. Given the risk she posed to herself and others, admission to the state asylum seemed warranted. Meanwhile, the parade of death continued for the Dempsey family. Four-month-old Rebeca contracted scarlet fever, like her sister two years before, and died.

Modern-day readers recognize the obvious links between the psychological and biological stressors in Nancy Dempsey’s life and her emotional debility that manifested in homicidal and suicidal behaviors and resulted, ultimately, in her institutionalization. The deaths of a brother, myriad cousins and uncles, and two small children; anxiety about the welfare of her husband and other male kin; managing a young family alone; postpartum psychoses—all of these took their toll on young Nancy, who weathered the final year of martial conflict living in a war zone through which the federal army marched in the final months of the war. Physicians at the Georgia asylum, though, knew none of what Nancy had gone through the previous several
years. Or, if they had, they failed to connect Nancy’s personal suffering to her destructive, violent behavior. She remained a patient for a year before being discharged, after which she returned home to Conyers, Georgia, and resumed life as wife and mother. She gave birth to four more children, three of whom lived into adulthood, and lived until the age of sixty-six.

Nancy Dempsey’s story demonstrates how a variety of factors, some directly war-related, some not, converged to upend the life of one Southern woman in the years after the war and render her incapacitated. Her story, however common or uncommon it might have been, is far less familiar than that of the steel magnolia, the mythic creation of the Lost Cause that heralded ex-Confederate women as tenacious and indomitable. Thousands of Southern women like Nancy Dempsey collapsed in the wake of defeat.

Louisa Matheny, younger than Dempsey, was another who succumbed to war-related mental distress. Two physicians from Barnwell County examined the twenty-one-year-old in November 1865 and judged her insane. Her condition had worsened about six months prior, and although the physicians did not address the purported cause of her diminished state, their situating her deterioration in spring 1865 roughly corresponds to the end of the war, when she and her family would have been living in a war zone. Matheny was the oldest child living in the Graniteville, South Carolina, home headed by Daniel and Lucinda Matheny before the war. Evidence hints at the family’s relocation during the war. The physicians’ letters in 1865 identify Louisa as a resident of Windsor, then part of Barnwell County, two counties over in the up-country, probably where her some of her mother’s relatives resided. By 1870, Matheny had returned to Graniteville, suggesting the move to Windsor had been war-related and temporary, perhaps coinciding with her father’s departure to the front. Relocations during the war were usually precipitated by threat of an invading army or the need to seek refuge with extended family, both of which signaled a crisis. Adding to stress on the Matheny family was Daniel’s absence and his stint as a soldier. The former overseer became ill or injured shortly after he left home and ended up at Chimborazo Hospital, from which he was discharged for being “overaged.” Louisa’s aberrational behavior amidst the maelstrom of war was especially severe: she begged for weapons so she could destroy herself. The war in her backyard, her father in the army, relocation and disruption of daily life—any one of these might have triggered a crippling breakdown for a teen. Displacement in a war zone especially leaves many civilians in a distressed state. A modern study of a twentieth-century war found, for example, that two-thirds of displaced peoples suffered from some kind of mental disturbance or feelings of being upset. But Louisa also bore heavy responsibility as the oldest child in the family. About age seventeen when the war broke out, Louisa would have taken
on added duties helping her mother maintain the household of several younger siblings in her father’s absence.  

Louisa Matheny and Nancy Dempsey were at very different stages of life when war broke out. Matheny was an unmarried teenager; Dempsey, a young mother and wife. Both came from humble families. Both emerged after the war broken by personal hardships created or exacerbated by war. The little information we have about the two offers no definitive causation of their psychological declines. Yet the common thread in their lives, indeed, the common thread in the lives of many broken women in the postwar South, is the experience of war and its aftermath and the multiple strands of war-related factors that combined to break women after the war.

While the stingy historical record may yield a hint or two about a possible cause of severe mental illness or suicide in the postbellum world, causation, as in the cases of Dempsey and Matheny, was most likely prompted by more than a single event or trigger. Take the case of Eliza Newton of South Carolina. At age forty, she entered the asylum in Columbia after at least five years of living in a “state of imbecility.” She and Joel Berry Newton had married, probably in the mid-1850s, and had at least eight children. Asylum records show that when she was admitted in 1878, Newton was melancholic and exhibited suicidal behavior. She had begged her doctor to provide her with medicines to kill herself. Heredity, some believed, played a role in her declined state. Severe depression ran in her family. One brother had killed himself; another was expected to follow suit. But was it heredity, as patient records hint? Or might it have been the result of personal shocks, including the war-related deaths of relatives? At least four of Eliza’s brothers served in the Civil War. An older brother, James Asbury Gable, died in Tennessee in 1864. Records do not show cause of death, so it is possible he is the brother who took his life. Another brother, George, was released as a POW from Camp Chase and died in 1863, apparently from asthma. In addition to her brothers serving in the Confederate army, so did Eliza’s husband, Joel, adding to Eliza’s emotional strain. Joel suffered gunshot wounds at least twice and was captured and held by the enemy late in the war. Other factors, not directly tied to the war, also contributed to Eliza’s hospitalization. Records establish the onset of “imbecility” five years before her admission to the asylum, a time that would have roughly corresponded with the birth of her youngest child, suggesting her psychological affliction may have been linked, to some degree, to a postpartum disorder. Eliza was not institutionalized until long after the war but, given the tendency for families to delay institutionalization, often for years, it is likely she had been symptomatic long before her admission in 1878. Something, however, triggered a collapse about that time, causing her family to seek her admission in an asylum. One possibility was that her
husband had been charged with raping their daughter in the fall of 1877. For reasons unknown, the shocking charges were dropped in February 1878, just months before Eliza was admitted to the asylum. The timing of the accusation and her decline intimate a causal connection. If so, then, what role did the war and postwar conditions play in Eliza’s demise? The extraordinary demands of the war and living in a war zone with the sole responsibility for caring for a young family may have served as an underlying cause of her mental break, with the direct trigger being the allegation that her husband had raped their daughter. In other words, Eliza survived the war-related suffering only to have been broken years later by an unrelated incident. Had her reservoir of emotional strength been taxed by wartime losses and despair, leaving her incapable of weathering later traumas? The answer is unknowable. But the story of Eliza Newton hints at the long-lasting effects of war-related emotional suffering on Southern white women well after surrender.

Beyond mere survival, which proved stubbornly elusive to many Southerners, women in a society emerging from warfare are tasked with the reconstitution of families. Quite a few Confederate women became war widows, necessitating the transformation of temporary wartime household structures and roles into permanent ones. For women whose husbands returned, the transition to peacetime households proved challenging as well. Wives embraced their returning husbands, some of whom were physically disabled, some psychologically damaged. Many husbands returning from the war front were unable to work, or were unemployable in their previous positions, and so the burden fell on women to support the household. Non-combatant ex-Confederate men likewise were susceptible to the same economic and social pressures endemic in the postwar South and their families struggled to reconstitute themselves. Consequently, household problems manifested in myriad social pathologies: domestic discord, a rise in violence in and outside the home, and increased stress and depression. Marriages after the Civil War sustained enormous strains, and women bore the brunt of the sometimes dysfunctional relations within the reconfigured families.

While probably over 300,000 Confederate soldiers died of disease or injury during the war, nearly 200,000 Confederates were wounded in action, many of whom came home with serious physical wounds. Large numbers of men returned missing a limb, disfigured, chronically ill, or crippled. Even those considered in good health returned malnourished, feeble, or debilitated. As outlined previously, veterans also returned home with emotional scars incurred from war trauma. Wives initially rejoiced at the homecomings of loved ones, but quickly realized the war had changed their husbands in
ways that profoundly affected their relationships. Most ex-soldiers were eager to resume their work at their previous places of business or occupations. Husbands, though, returned to a decimated economy that would take years to rebuild, so most struggled to find employment. Not all veterans were physically or psychologically fit to hold a job, so consequently white women were, most for the first time, forced to seek paying positions. Ella Gertrude Clanton Thomas became a teacher when her husband lost everything. Mary Chesnut launched a successful butter and eggs business that helped sustain her family. While most Southern white women eventually adjusted to the new requirements, the inability or unwillingness of some men to work, requiring women to do double duty in and outside the home, created tension in marriages. Moreover, women, by necessity, during and since the war, had acquired unprecedented autonomy and independence during the war. Husbands returned home to find their wives changed. Historian Elizabeth D. Heineman, who studied postwar conditions in Germany in the 1940s, argues that because separation and war caused married couples to grow apart, men’s “return would not mean a smooth return to the peaceful conjugal life of memory. Instead, it would reveal a deep crisis in the family.” Although Southern marriages largely remained intact during Reconstruction, most suffered some degree of ill effects from the postwar crisis. The worst cases of marital discord resulted in women experiencing severe psychological disabilities including suicide. Quite a few wives of Confederate veterans ended up in Southern asylums. Rarely if ever, though, did asylum officials remark on a patient’s husband’s service record, an omission that suggests they did not see a connection between a patient’s condition and her husband’s military experience. Seen from a modern perspective, and based on recent studies on the impact of war stress on families, it seems inevitable that at least some of the problems attendant to postwar marital reunions, on some level, contributed to white women’s psychological ailments.

Some Southern white women who suffered from psychological disorders after the war were married to men who had been wounded while serving in the Confederate army. The death of a male head of household or adult male children obviously put Southern women in highly vulnerable financial positions that compromised their future. Less obvious is the impact that ill or injured veterans had on their families’ viability. Jeffrey W. McClurken found that families of wounded or ill veterans in Pittsylvania County, Virginia, those he termed “alive, not healthy,” suffered nearly as much as those who lost male family members due to death. One imagines that physical incapacity of adult males in a household necessitated extra labor of women, placing considerable physical and emotional strain on wives and mothers of these ailing soldiers. Wives or mothers likely became distraught, first by the news of a male
relative’s injury, then by the stark realization of the consequences of living with a wounded husband or son. The emotional fallout of living with an incapacitated husband or son who struggled to come to terms with temporary or permanent disability added to the financial drain on the household and the additional labor required of adult women in the family to compensate for the loss of male labor. This may have been the case with the suicide of Priscilla Eberhart, who hanged herself in the smokehouse in 1875 while her family was at church. While the news account offered no motive for the suicide of the forty-three-year-old Georgia woman, military service records reveal that her husband, James, had suffered multiple serious medical issues while a soldier, earning him a disability discharge from service due to acute medical issues. The Eberharts saw their combined wealth plummet by two-thirds from 1860 to 1870, jeopardizing their family farm.

Young families faced special challenges in the postwar years. Robert Sanders Anderson Jr. enlisted in the Georgia infantry in 1862 at age nineteen as a private, but was promoted to captain. He was wounded twice, in June 1862 and again in May 1864. While on furlough recuperating from this latter injury, he married Charity Brown, about seventeen years old. After the war, the Andersons grew their family. Following the birth of her fifth child in five years, Charity Anderson was committed to the insane asylum as a “lunatic.” Her mental disorder appeared less than a week after the birth of her last child, so attendants believed her condition was linked to her recent childbirth. She was discharged about six weeks later and does not appear to have had any relapses despite having an additional six children, or at least she does not appear to have returned to the asylum. Perhaps Charity’s “lunacy” was childbirth-related. With five children under age five, she could have easily felt overwhelmed by the responsibility of caring for the large, young brood. We know little of her husband and his health; we know nothing of what scars he might have brought home after surrendering at Appomattox. He was well-off compared to others, with his total real estate and personal wealth in 1870 topping $10,000. After the war, he served as county sheriff, though failing health necessitated an early retirement. So while the couple escaped severe financial stress in the tumultuous postwar years, their young age at marriage may have rendered them vulnerable to emotional strain. McClurken found that war-generated separation hit young married couples especially hard. Once reunited, they would have had to start from square one to figure out what it meant to be married, no small task coming as it did on the heels of “life-changing events and experiences” like a husband living with war wounds and living “in the midst of a stressful postwar, post-slavery economic world.”

Rarely after the war did anyone connect combat experience and domestic abuse or marital turmoil, though given modern knowledge about the social
pathologies exhibited by traumatized soldiers when they return home, there was certainly a link whether Southerners recognized it or not. Veterans and non-veteran Southern men alike faced challenging times after the Civil War, and it would not have been uncommon for family members to bear the brunt of men’s frustrations through emotional or physical abuse. The account of a suicide of an anonymous Southern elite woman in 1871 stands out precisely because it does draw a line from a Confederate officer’s fall from grace in the army to alcoholism and to the physical and emotional abuse of his wife, though to be clear, the husband’s deficient character, not the war, was believed the cause of his fall. An Atlanta newspaper printed the tragic story of a Southern belle—from a “Southern city famed for its beautiful daughters”—who married a gentleman lawyer known “for his fine looks and skill in all manly attainments.” She was twenty-three; he, thirty-six. By all accounts, the newlyweds were “one of those rare unions in which both parties are of such mental and physical perfection as to promise a life of more than common happiness.” Shortly after the wedding, though, war broke out and the fairy tale unraveled. The husband enlisted “of course” and was made a colonel. In 1864, “E. K. Harrington,” the pseudonym attached to the bride, made her way past the lines to New York, where her husband had been taken as a prisoner and permitted to live in the city “on parole.” Rumors that “Colonel Harrington” had been accused of being a coward had made their way to the couple’s home state of Georgia and were seemingly confirmed, in the eyes of some, by his aversion to taking part in a prisoner exchange. Reluctantly, his wife broached the subject during her visit, imploring him to rejoin the Confederate army. Incensed, he struck her, inaugurating a life of abuse worsened by his intemperance. His wife, though, steadfastly loyal, refused to leave him. The “hard drinking” continued; “the brutality increased, her misery rose daily.” Sometime in 1868, after a “stormy scene” with her drunk husband, she fled their home intending to drown herself, but a fateful intervention by a friend in whom she confided her purpose dissuaded the distraught wife from the attempt. Thereafter, the abused woman spoke of suicide often with her friends and defended the morality of self-murder, saying that “there were some wrongs, some miseries, which only a self-inflicted death could end.” Her eventual suicide precipitated great empathy and prompted the admonition that readers should “judge not, that ye be not judged.”

Like the “Harringtons,” the Doyles of Richmond struggled after the war, though they were definitely not elites and John Doyle was not a veteran. Their marriage, by all accounts, was a contentious one. Margaret Doyle, possibly in her sixties, maybe younger, complained to a neighbor that her husband, John, “was a great bother to her.” One time he threw her out of the house.
Another time, after her husband had spent the night at an “improper place,” she took a bottle full of laudanum. Both drank excessively. Margaret confessed to two neighbors that she no longer wished to live. On the night of December 11, 1872, she got her wish. Margaret Doyle jumped off a Richmond wharf into the James River to her death.\footnote{77}

In the most bizarre suicide attempt by the wife of an abusive Civil War veteran, a Missouri woman commandeered the cannonball her husband brought back from Vicksburg as a souvenir and jerry-rigged an explosive device by pouring gunpowder on a plate on top of which she placed the cannonball. She then sat on top of the plate and lit the powder, expecting to be blown to smithereens. While the explosion predictably did considerable damage to her lower extremities, the ball never moved, and hence her demise was not effected. The cartoonish effort at suicide should not mask the powerful symbolism of the wife’s method of choice: a relic of the war, a prized possession, in which her husband had fought. The Missouri woman was not content merely to end her life. She surely could have chosen any number of easier or more accessible options. Instead, she creatively devised a mode of self-inflicted death that had meaning for her husband, strongly implying a connection between the war and the “ill-treatment” she received at the hands of her husband.\footnote{78}

Women in poor mental health because of abusive husbands sometimes ended up institutionalized. Caregivers at the asylum in Columbia, South Carolina, had little doubt that the cause of Mahuldah Dill’s suicidal behavior was abusive treatment by her husband. “Hulda” Pruitt married Abraham Dill, a poor farmer, in 1875, following the death of his first wife. Dill had lived next door to the Pruitts, almost certainly relations of Hulda’s. Following the death of his wife and one daughter, a twin, Dill brought the remaining twin into his marriage with Hulda. In short order, the marriage turned tumultuous. Hulda became melancholic and tried to commit suicide with a knife. Hulda’s father, Elisha Pruitt, initiated the commitment process, so his accounting of her ill health, citing “ill treatment” by her husband, was conveyed to caregivers. Hulda’s husband is not listed in her medical records, but he almost certainly was “A. J. Dill,” who served in the 16th South Carolina Regiment and who had several medical furloughs. Dill appears to have overstayed one sick furlough following hospitalization in Columbia and is listed in May 1863 as a “prisoner.” A more serious injury later in the year landed him in an Atlanta hospital and then home on a forty-day furlough, after which he did not return to his unit immediately and was considered AWOL through much of 1864. In November of that year, Dill was arrested, presumably for being away without proper leave. All of this is to say his service record reveals several significant health and injury issues as well as a reluctance to return to duty.
There is no record of any discord in his first marriage, so we cannot know his mental or physical conditions upon his return home. Over a decade later, however, he saw his second wife institutionalized just three years after they wed. Four years later, upon discharge, Hulda refused to return to Abraham’s home. Instead, she lived with a number of relatives, and Abraham took up with another woman, with whom he had children, though Hulda and Abraham appear not to have divorced.  

Abandonment constituted another form of abuse that Southern white women suffered after the Civil War that might well be attributed, in part, to the difficult adjustment former soldiers were expected to make when they returned to their families. Cornelia Smith entered the Georgia insane asylum in July 1868. The mother of one, considered “weak minded” by some, had become suicidal, threatening to cut her throat, and had once attempted to hang herself. Though asylum officials believed Smith had a hereditary predisposition to insanity, they conceded her condition had been greatly aggravated by her husband deserting her after he returned from the army.  

Francis Cobb’s husband, Wesley, who served in the war, appears not to have been in her life when she was admitted to the asylum in 1867. The cause of her insanity was determined to be “desertion by her husband,” though it is not clear whether he deserted her or the army or both. Either one, though, might have triggered mental distress. An Atlanta woman, “in a fit of despair and misery,” unsuccessfully tried to hang herself in 1871 but was thwarted by her vigilant mother and neighbors, who rescued her from her noose. When asked why she had made the attempt on her life, she replied that her husband had abandoned her to “worship other idols.”

The deaths of hundreds of thousands of Southern white men during the Civil War and the financial straits many Southerners found themselves in required entire households to reconfigure in order to pool resources and tap extended kin and social networks. Inevitably, friction emanated from the melding of households. In one case of attempted suicide, an unidentified Atlanta woman, a widow who had remarried a widower with children, tried to kill herself by taking an overdose of laudanum. The news account attributed her suicide attempt to the “unhappiness” between husband and wife generated by the difficulties of blended families. Jane Sims sacrificed her husband to the Confederate cause, forcing her to move in with a brother. The loss devastated Sims, who five years later was denoted by the census taker as “insane.” Two years after that, she entered the asylum in Milledgeville, where attendants chalked up her insanity to her husband’s death. Yet her demise likely was also linked to the set of events triggered by that death, including her inability to...
remain in the household she had set up with her husband and moving into a home that included five small children. By 1872, her condition required institutionalization. War widows like Sims, unable to maintain a household alone after the war, were forced to move in with another family member, which, under the best circumstances, could be trying or unpleasant.

Disruption or breakup of the family household and relocation during war-time would have been very unsettling to all involved, but especially to children, and almost certainly compounded feelings of anxiety and alienation during the war and long after. The suicide of an eighteen-year-old Virginia woman in 1872 took place against the backdrop of such a relocation. Lucy Farley was a seven-year-old child living with her parents, William and Julia Farley, on the south side of Virginia when war broke out. William died sometime before 1866, though his age—he was fifty-four when the war started—probably precluded him from having served in the military. Two older stepbrothers enlisted; both appear to have survived. At some point, maybe during or shortly after the war, Lucy’s mother, now a widow, relocated to Richmond with her young daughter. Julia had worked as a seamstress alongside her tailor husband while he was alive, but by 1870 she was a schoolteacher boarding with two older unmarried women, sisters, who rented rooms in Richmond. If the Farley women made their way to Richmond seeking opportunities, they would not have been alone. Relocation to an urban area in the postwar era was a rational choice for widowed women seeking to support dependents. Seen from the perspective of a young teen who had lived through several traumatic events in her formative years—a tumultuous war, residing in a war zone, the death of her father, two stepbrothers away in the military—the relocation to a new home, in a new city, and boarding in a household with two other (non-relative) adults would have been disruptive and unsettling. There is nothing else in the historical record that might explain why, in 1872, Lucy took an overdose of laudanum to end her life. The coroner’s jury did not offer an explanation or rule on intent; there are no other accounts of the circumstances of her death. If she left a note, it did not survive. But one must consider the personal tumult this young girl experienced early in her life—the death of her father, sending off two older siblings to war, a forced relocation, a household of diminished standing after the war—and whether any of this traumatized her or affected her psychological well-being as a teen. At minimum, the disruptive context of her family life in a war setting provided a shaky foundation for a young girl trying to maneuver through difficult emotional and financial circumstances.

Like Lucy Farley, Martha “Mattie” Dunlop was a child living in a hot war zone that forced her relocation from her family’s home in Petersburg to that of relatives in North Carolina. Mattie was twelve or thirteen when Yankee
gunboats sailed up the James River, forcing the Dunlop women to flee. A refugee, Mattie spent the waning months of the war living with the Edmondston family, separated at times from some or all of her siblings and, at times, her parents, while suffering from bouts of homesickness. Catherine Edmondston pitied the girl: “Poor homesick little child, from my heart I am sorry for you!” It was at the Edmondstons’ where the “angel of Death” brought the sad news that Mattie’s older brother Colin had been killed by a “Yankee bullet.” Another brother, John, appears to have survived despite being wounded at the second battle of Manassas. As a child, Mattie was less equipped than adults to manage and weather the traumatic life-changing events like the loss of a brother and forced relocation. Gauging the psychological impact of the wartime dislocation on Mattie’s psyche, given the paucity of sources, is an impossible task. Yet, one has to wonder how the unsettling and traumatic events between 1861 and 1865 shaped her emotional well-being in the years following the war and whether those experiences contributed in any way to the twenty-two-year old’s intentional overdose in 1873.

Modern studies of the impact of war have shown them to have very harmful and long-lasting results on children. In one study, a majority of child survivors of war displayed signs of PTSD. Emotionally injured children added stress to postwar families in the South, hindering the healthy reconstitution of families. Moreover, manifestations of war trauma continued decades after the end of war, so the impact of war trauma on children was long lasting. A sustained and focused study of the psychological impact of the Civil War on children needs to be done, but several instances of suicidal activity by Southern girls after the war may be instructive. The suicide of twenty-one-year-old Mattie Davie, over a decade after the Civil War, raises questions about its long-term effect on her psyche. While staying with her married sister in Columbus, Georgia, in 1877, Mattie became depressed and suicidal, telling friends and family she wished to die and prompting them to remove ammunition from all guns and pistols on the premises. Mattie, though, located some cartridges for a Colt’s pistol, which she used to shoot herself through the heart. Those closest to Mattie blamed her suicide on ill health. It is conceivable, however, that the fallout of war and loss, even years later, contributed to her self-inflicted death. Mattie was born around 1856, so she would have been a child during the war. The Davie family had been hit hard by the war and its aftereffects. Mattie’s father, Wellborn G. Davie, had been a well-off Georgia planter who, in 1860, held real estate valued at over $7,000 and personal property, including slaves, worth $20,000. By contrast, in 1865, the only income or property Davie claimed was a single carriage, an indication the war had wiped out the Davies financially. Five years later, the census taker attached no wealth, in real or personal property, to Davie. The war likely
ushered the Davie family into financial ruin. Mattie, although a child, would have been well aware of the family’s stressful situation. Mattie had also lived in a household in which four older brothers left home to go off to war. Concern about the absence and welfare of four older brothers was surely embedded in Mattie’s consciousness and had an impact on her as she grew into adulthood.92

Like Mattie Davie, Rachel Devers of Virginia, just seven when the Civil War erupted, experienced life-altering events during and after the war, including a fractured household that may have created conditions that contributed to her suicide. In 1860, Rachel lived with her parents, James and Elizabeth, and two older sisters in Wythe County. James enlisted in the army in 1862 at the age of thirty-six, but spent much of his time ill, recuperating in a hospital or at home. James’s death, probably during the war, initiated significant changes, including the breakup of the household. Elizabeth relocated to adjacent Bland County, probably to be closer to James’s older brother Henry. It is possible that Rachel moved in with her uncle, because when reporting the news of Rachel’s suicide, the Staunton (Va.) Spectator misidentified Henry Devers as her father. War widows who could not adequately care for all their children often farmed some out to family members, so Rachel may have been placed, even temporarily, in her uncle’s home. Broken households, such as the Devers, necessitated by the loss of a father also meant the loss of protection, especially for female children. Sixteen-year-old Rachel gave birth in March 1870 to a male child, who died the following month, right before or after she took her own life, begging the question of paternity. Was the father a family member in whose care she had been entrusted? Her uncle? Or the farm laborer who lived with him? Was Rachel the victim of a non-consensual sexual relationship, or did she take advantage of the absence of a male protector to engage in intimate consensual relations? Would she have been shielded from sexual abuse or more closely supervised had her father lived? Seen in this light, one might consider Rachel Devers a casualty of the Civil War just like her father.93

As a child, Bettie Cox suffered considerable war-related trauma growing up in Marshall County, Mississippi. The youngest of twelve children by William and Rhoda Cox, “Elizabeth” was seven when the war broke out. She had three older brothers—John, George, and Benjamin—all of whom served in the Confederate army and appear to have died in the service of their country. (Common surnames and family names make identification in the historical record difficult, but it seems she might have lost all three, though the sources contains contradictory evidence.) John Calvin, the eldest of the Coxes’ children, who lived in Arkansas with his wife and young family when the war broke out, joined up with the 7th Arkansas Infantry. Many family histories
show him as having been killed at Vicksburg in 1863, though there is no official evidence to substantiate that claim. An oral history account makes clear why descendants linked his death to Vicksburg. According to testimony purportedly given by his daughter, Amanda, aged six or seven at the time, John Calvin Cox was on furlough about the time of the siege of Vicksburg, visiting his parents’ home in Mississippi, when he was seized by federal soldiers in a sweep through the area, never to be seen again. Brother Benjamin Cox enlisted in the 11th Mississippi Infantry, but died of measles in July 1861 at the age of twenty-five. Service records show that George W. Cox, also in the 11th Mississippi Infantry, died in Richmond in April 1862 at age twenty-nine. Bettie Cox’s father, William, likewise perished during the war years, but his advanced age of fifty-six when the war broke out suggests he was not engaged in the military. Bettie’s mother was widowed and left with the responsibility of seven children, but was denied the support that might have come from three adult sons. As a child, then, Bettie lived in a household that had sacrificed four male relatives to, or at least during, the war. If Amanda Cox’s recollection of her father’s abduction is accurate, Bettie was likely present for the federal’s raid on her family’s farm and witnessed, or at least heard about, her older brother’s seizure. The personal trauma and loss endured by a young child just might have scarred her psyche in a way that makes her gruesome, later death understandable, at least as an underlying cause of her suicide.6 Six years after the war, Bettie Cox hanged herself from a tree, mystifying a community. Why would a young girl, with no previous history of insanity, nip her young life “in the heyday of its bud”? Perhaps she had been under the influence of quinine, as the newspaper article reporting her death suggested. Such an explanation, however, ignores a series of life-altering, traumatic events unleashed by the American Civil War and inscribed onto Bettie Cox’s childhood.65

Women in the postbellum South afflicted with emotional stress, anxiety, or depression often resorted to self-care for relief through the use of opium and its derivatives, morphine and laudanum. After the Civil War, opiates were used extensively by medical professionals to treat a variety of ailments, from diabetes and syphilis to mania and consumption. They were believed to provide emotional relief and equalized blood circulation to the brain.66 Asylum superintendents, too, relied heavily on opium or morphine, its alkaloid derivative, to treat conditions like mania and melancholy. Use of opiates increased after the 1830s as they became more accessible and less expensive. Opiates were readily available at most apothecaries and grocers and were even marketed as sedatives for children.67 (See figure 12.) The pervasiveness of
opiates and opiates-based products offered a relatively easy way to commit suicide. Apothecaries would not be suspicious if a woman intent on ending her life requested laudanum, as its use by women was common. Moreover, because so many women possessed laudanum, any woman flirting with the notion of killing herself probably had the vehicle to do it right in her cupboard.

Southern women like Catherine Edmondston’s sister, Sophia Turner, turned to opiate products for all manner of ailments, including depression and anxiety, from which she suffered during and after the Civil War. Just as the war had gotten underway, Sophia suffered the loss of a small child, which greatly depressed her. Weeks after she buried her baby, Sophia’s husband, Josiah Turner, received an appointment as captain in a North Carolina cavalry unit that was stationed in the eastern part of that state. Worry gripped Sophia, who was bedridden with anxiety and fear in January 1862 over rumors about an impending federal invasion at New Bern, where her husband was stationed. Catherine remarked that her sister had “fretted herself almost sick,” explaining that “Sophia is much afflicted at the death of her little girl and her husband being absent she broods over her greif [sic] too much.” Sophia’s worries were not unfounded. Union forces attacked rebel troops in and around
New Bern in April 1862, and her husband was struck in the head by a minie ball, which fractured his skull, rendering him unfit for duty. Josiah returned home to Sophia, where, six months later, he continued to suffer “terribly” from his wound. By April 1864, Sophia was in feeble health.98

Anxiety about her husband’s fate as a soldier; the death of at least one child, the birth of another; a husband who returned from war with a serious head injury in need of significant care and nursing: life-altering events such as these in the context of a civil war plunged Sophia into a debilitating state of depression. The end of the war brought little relief. Josiah became embroiled in the political wars of early Reconstruction in North Carolina in what was known as the Kirk-Holden War of 1870, even being imprisoned for a short period of time.99 Sophia turned to morphine to ease her pain and, in time, she became addicted. Josiah grew irritated with his wife’s demeanor and behavior, telling her once that her addiction caused him “deep felt mortification.” She had turned their home, he complained, into a place of “torture and torment.” Eventually he committed his wife to the asylum in Raleigh, at which point he appears to have abandoned her. She died there in 1880. But she left behind testimony to her personal agony in the form of a small booklet of autobiographical poetry. One poem, dated March 1878 and titled “Insanity,” speaks to the intense feelings of loneliness and fear that disabled her:

Oh say! is there grief any greater
Than to feel that your mind’s giving way,
Or can there be Cross any heavier
Than for Reason to yield up her Sway?

To feel that your thoughts are all floating
Away from your grasp one-by-one
Never stopping a Prayer to mutter
Not even “Thy will be done.”

To feel that your friends are all thinking
T’were better for you to have died
Before this dark cloud came upon you
And Reason resigned Her Pride.100

Sophia Turner was not alone in turning to drugs or alcohol to salve psychological wounds. Octavia Otey, for example, calmed her nerves with morphine when she became agitated that the hogs were eating chickens that had wandered into the pigpen.101 By all accounts, many women under stress or depressed resorted to opiates to self-medicate. Many of these succumbed to death by overdosing. What remains obscure is the intention of women who
died by overdose. Did they intend to kill themselves? Or did they miscalculate dosage and die accidentally, the result of self-medication gone awry? Fannie Beattie Dunn, aged twenty-five, died of a morphine overdose in November 1872, her intention unclear. The Virginia woman had been married six years and had no children. Newspapers make no mention of the motive or reason for her taking the morphine, so it is uncertain whether her death was planned. Fannie had been a single teen during the war years. At least one brother served in the Confederate army and survived. At nineteen, Fannie married Dr. William Logan Dunn in 1866, a soldier and surgeon in the war. There is no way to know if the two had a prewar relationship, but if they had, Dunn’s service in the army would have weighed on her. Dunn enlisted as a soldier in the Washington (Virginia) Mounted Rifles, but was reassigned to the medical staff. He was captured outside Loudon County in October 1863, but exchanged a month later. Apparently he preferred fighting to doctoring and so resumed duties as a soldier. After the war, he returned to Washington County, where he continued his practice of medicine, published articles in medical journals, was a member of the American Medical Association, and married Fannie Beattie. With a physician for a husband, Fannie would have had easier access to drugs than most. How she obtained morphine, however, is less of a mystery than why.  

When women died from the effects of overdosing on opium or some other narcotic, it is likely they were taking it as a sedative for anxiety or depression, making it even more difficult to discern intent in overdose deaths. For example, Lucy Farley, a Richmond resident for fifteen of her eighteen years, died of opium poisoning in 1872, though the coroner made no finding regarding intent. Carrie Edwards, a married twenty-six-year-old Richmond woman died of an overdose of laudanum in 1871, intention unknown. The increase in reports of overdose deaths by women suggests at minimum heightened emotional problems, whether or not victims deliberately ended their own lives. Southern women relied on narcotics to nurse themselves through painful times, whether to sedate themselves or to effect death purposefully. Because alcohol use was more associated with men and masculine culture, more women turned to opiates to self-medicate than alcohol. Alcohol and alcoholism, though, factored into women’s poor mental health in the postbellum South in two ways. One, reports that identified alcohol abuse—“intemperance”—in women revealed that some women had taken up drinking as a coping mechanism for their personal problems. Women like Bridget Gannon, a thirty-year-old widow from the Atlanta area, entered asylums as “demented inebriate[s].” Her case history indicates she had been “almost incessantly under the influence of liquor.” Two, alcohol use preceding a suicide might indicate an attempt to imbibe “liquid courage,” an effort to
summon the nerve to end one’s life. Such may have been the case with the suicide of a New Orleans woman in 1866, which was attributed to her addiction to drinking. She had twice attempted suicide before, but failed.\textsuperscript{106}

Southern white women turned to substance abuse to nurse a wide array of emotional problems in the postwar years. As burdensome as a depleted economy was to white Southerners, as troublesome as freedmen and freedwomen could be, as humiliated as Southerners felt by the loss of the war, nothing contributed more to the personal and collective malaise of the region than the horrific loss of life linked to the Civil War. More than any other ostensible “cause” of white women’s psychological ailments, death or deaths of loved ones figured prominently as a trigger for white women’s emotional collapse.

Widows felt the impact of the deaths of their husbands acutely in the postwar years. Wives of course grieved for the emotional loss their husbands’ deaths created, but grief was compounded by the realization that a husband’s death meant the loss of income and the likely breakup and reconfiguration of a household. Dire postwar economic conditions fell hardest on widows, especially those with small children. Without husbands, widows faced unprecedented financial woes without the means, namely resources and skills, to procure income.\textsuperscript{107} Women who may have taken on jobs as temporary heads of household during the war, now, with the deaths of their husbands, had to maneuver the added exigencies of the postbellum Southern society as permanent family heads. Loss of a husband obviously represented heartache, but it also precipitated concerns about survival. Just one year after war’s end, twenty-nine-year-old Sarah Jane Deloach, an Alabama widow, entered the Georgia insane asylum. She had threatened suicide several times, once by drowning, before being institutionalized. Her husband, Thomas Clement Deloach, a physician, died about the time of the Civil War, though it is not clear if his death was war-related. Sarah likely maneuvered through at least part of the war without him by her side. The two had wed in 1855 and had two children, but Thomas brought five children into the marriage, following the death of his first wife. Consequently, Sarah Jane would have had the responsibility for managing the large, young Deloach household. With her physician-husband’s death, Sarah’s ability to support her family also evaporated. Further taxing Deloach’s capacity to care for her family under trying circumstances was her past history of mental illness. Records disclose that she had battled “insanity” for about fifteen years.\textsuperscript{108}

It is often impossible to isolate grief as the sole or primary cause of a widow’s psychological distress when so many other stressors in the postwar years were in play. For example, a seventy-four-year-old Georgia widow was
institutionalized in late 1868, ostensibly because of loss of property. But other factors, some related to the war, likely played a role in her mental decline. Mary Kimbell’s seventy-five-year-old husband Christopher, a farmer, had been quite comfortable financially before the war, when his combined real estate and personal property totaled over $25,000. Neither appears to have been alive by the 1870 census, so there is no way to assess their wealth after the war, but insanity triggered by the loss of a small fortune is a possibility. Another underlying trigger for Mary Kimbell’s mental collapse may have been the wartime deaths of at least two of her sons. Four sons appear to have served in the Confederate army, with Christopher Jr. dying in a Richmond hospital in 1864, the result of a wound, and George succumbing to illness in 1862 while on furlough. So while asylum officials were told the cause of Mary’s breakdown was loss of property and her husband’s death a few years earlier, wartime losses of two sons likely played a role, too, leaving her distraught and debilitated and not in good stead to face the dire conditions of the postwar South.

The emotional impact of losing a life partner was cause enough to trigger mental instability. For white women living in the postwar South, mourning a husband translated into practical financial problems, like how to feed a family without his income. Mary Mann Page Newton of Virginia was committed to the Western State Asylum in Staunton in 1873, necessitating her children moving in with their grandfather. Newton’s friend, Maria Fleet, recorded the cause of her diminished mental state as “the care of her large estate, debt, and other troubles.” Newton’s husband, William Brockenborough Newton, had been killed during the war in September 1863. In addition, the family home, Summer Hill, located on the road to Richmond, had been “devastated” by multiple enemy raids. Wartime deaths of soldier-husbands and the onus that placed on their wives rendered some widows no longer able to function. Rachael Holden was a war widow who ended up in the asylum in Milledgeville in January 1869. The alleged cause of “insanity” was a uterine disorder, but records indicate her husband died of measles during the war, leaving her to care for their three young children. The death of John Crawford, a Tennessee veteran and former POW, in 1870, left his widow and four children without a male head of household. Mary Crawford, his widow, later hanged herself.

Carrie Cobb’s suicidal behavior in the late 1870s was attributed to grief over the death of her husband, sixty-five-year-old James H. Cobb, but there were other aggravating factors that contributed to her debilitated state. While the death of a long-term partner would understandably plummet a woman into depression, two considerations directly linked to the context of Cobb’s situation also go a long way in explaining her mental collapse. The first of these
is the postwar economic climate in which Cobb’s death occurred. Carrie Cobb inherited a precarious financial outlook for herself and for her children upon her husband’s death. James H. Cobb’s obituary lamented the demise of a man held in high esteem in the community, as evidenced by his election as sheriff years before. He had been a “substantial merchant” at one time, too, but had fallen on hard times since the war and never fully recovered. In 1860, Cobb’s net worth stood at nearly $50,000. In 1870, a few years before the Panic of 1873 hit, his worth stood at just $1,400. Cobb’s customers, also the victims of hardship, had pressed him for loans and credit, to which Cobb was unable to say no. The results of his generosity were “disastrous.” He had been forced out of business and become unfit to “earn a sustenance for himself and family.” The “loss of husband and property” had caused Carrie to become greatly unsettled in the months after James’s death. She had two young boys in her household to care for with her husband gone and their welfare weighed heavily on her.

Carrie Cobb’s emotional distress, observers noted, was very much linked to the poor financial standing of her husband, whose business never recovered after the war. Yet her medical records point to an earlier lapse into “insanity” at the time of the Civil War that medical caregivers considered relevant to her current episode. There is no attempt by caregivers to identify specific wartime triggers, though a suspected “cause” of her decline was that she was “troubled about children.” Quite possibly her “troubles” emanated from her sons’ involvement in the war. Two sons served in the army; one died, the other became ill and was court-martialed. Her eldest, James E. Cobb, a corporal in a South Carolina cavalry unit, died of dysentery at home on leave in September 1863. Her second son, A. B. “Augustus” Cobb, served in the same unit as his brother, and although he survived, he spent some time recuperating in a Richmond hospital and in the brig. He was court-martialed for unstated reasons and spent some time “in arrest.” These matters contributed to Carrie Cobb’s wartime mental collapse though she apparently recovered. The death of her beloved husband years later, and the financial straits he left her in upon his death, catapulted her back into depression and at risk for suicide.

Widowhood for many Southern women meant added labor, which physically crippled and exhausted them. Although the clinical use of the term “fatigue” to describe the state of the truly exhausted did not emerge until later in the century, white women in the postbellum South, especially the husbandless, clearly suffered from fatigue. Added work and responsibilities compounded feelings of grief, worry, and desperation among Southern widows and pushed many to their limits. To be driven to one’s physical limits in the nineteenth century was saying a lot. Exhausting, intensive work, from sunup to sundown, was the norm for many white women; chronic lethargy among
most working-class people was common in the nineteenth century. So for medical caregivers to speak of a woman as being “overworked,” as Georgia asylum officials did when admitting forty-two-year-old Mary Ann Price, her added workload must have been extraordinary. The widow worked as a seamstress in Augusta and presumably found it impossible in the postwar years to work hard enough to support herself and her family. Price was institutionalized in May 1866, although she was released just eight months later. She was readmitted in 1869 and remained there until she died in 1911.116

Heavier workloads for women was merely one consequence of the large number of male deaths from the Civil War. The disappearance of male heads of household left women like Octavia Otey grumbling and moaning incessantly about the struggles she faced after the war without her husband and older brother to lean on, disclosing the broken promises of the paternalist bargain she implicitly had struck with them. “Every day I see how incapable I am of making a living. I do not know how to take care of anything out of the house.” She agonized over her own helplessness, which had been cultivated by an ethos that assured her that dependence on her husband would sustain her. “I do not know how I am to help myself.” Otey did not know how to put in the crop. She had no idea what to charge for the sale of beef.119 Handicapped by the rigid gender roles in place well before the war, Otey struggled to survive after the war. Moreover, postwar Southern social structures failed to bend to accommodate the growing number of women now active in the public sphere. Otey protested mightily that as a woman she was disadvantaged in trying to navigate through the traditionally male public sphere. She dreaded having to bid on the purchase of property, for which she hired a lawyer. “It was a novel position for me and I dreaded it. I ascended the steps with a feeling of friendlessness. . . . I was a woman in a crowd of men.” She succeeded in winning the bid even though two men bid against her. She perceived similar gender slights when seeking a loan. “Saw Mr. Rison again about borrowing that money. It is a hard case because I am a woman. I can get no help and that is what they say. No man wants to have business dealing with a woman. God only can or will help me.” Southern women who had been indoctrinated to believe in their own feebleness and incapacity, faced life after the war crippled by insecurity, leaving many on unsteady psychological ground.

Otey attributed the sources of her personal stress to the new conditions emerging during Reconstruction, at the center of which was her role as manager of household and farm. A widow, she would have leaned on an older brother for guidance. But he, too died, leaving her to manage home and farm largely unassisted. Studies of modern women who, during and after wars, were forced to take on added responsibilities show that these women became
Scholarship on post–World War II Germany confirms that women who assumed additional burdens in the absence of husbands in the backdrop of a defeated and ruined homefront contributed to a severe “crisis in the family.” That most certainly was the case with Octavia Otey. Yet historians have not much discussed the emotional costs of war and its aftermath on white women who emerged from the Civil War as the sole parent and provider. The stakes, as laid out by the scholarship, frame the debate largely around two questions: whether or not changes in wartime and postwar gender roles had positive or negative effects, and whether any such effects had long-lasting implications. Underexplored is the emotional and psychological impact of the new expectations for white women after the war. Literate women, like Octavia Otey, expressed their frustrations with unprecedented new roles and challenges, which they believed contributed to their personal suffering. Less well known is the psychological impact on middling and poor white women who left no diaries or letters behind to explain their moods and what they thought lay behind the melancholy.

Despite protracted and debilitating bouts of depression after the war, Otey was never institutionalized. Nor did she act on her death wishes. Hundreds of white Southern women who suffered psychological breakdowns were not so fortunate. Some, disconsolate and overwhelmed, not unlike Otey, considered death to be the only escape and so sought to end their lives. The records of these broken women—short blurbs in local newspapers, brief patient histories—are frustratingly pithy. Occasionally, a purported cause is attached to an insanity or suicide case; but usually not. Even when family members or caregivers shared what they believed to have triggered a psychological lapse, the root causes are almost certainly much more complex, largely hidden, and frequently misunderstood. Elusive as causation of severe mental illness was to nineteenth-century Southerners, trying to understand connections between aberrant behavior and the historical setting of postwar conditions proves nearly impossible. Still, the words of white Southerners—most of whom did not kill themselves or end up in an asylum—reveal the depths of pain and suffering experienced by most. It is not unreasonable, then, to consider that some white women after the war found themselves incapable of weathering the chaotic storm that engulfed the region. The emotional suffering they experienced was manifest by the bulging asylum walls and the “suicide mania” purportedly sweeping the region.

Otey attributed much of her despair to the loss of male figures on whom she could lean during trying times. Mothers who lost sons to the war also suffered greatly in the years following the conflict. In fact, it is in the cases of mothers losing sons that we see the most tortured expressions of grief. The grief attendant to a son who was killed or died while in service to his country...
exacted a high, long-lasting cost from Southern mothers. Catherine Edmondston recounted how news of a son’s wartime death devastated his mother, who proved inconsolable at his funeral. The woman had been led to believe her ailing soldier-son was recovering, and so she was blindsided when she received news of his death. The mother became unhinged. Friends “fear for her reason.” She paced repeatedly while reading the last letter he had written her. Edmondston went on to describe poignantly the dramatic personality change of another friend, Sarah Spratt Polk Rayner, following the death of her eldest son. Before the war, Rayner was blessed with prosperity, a bright future, status. After, the grief—“that of a Christian”—was palpable. “What it is one cannot define, but there is a shadow there.” The death of a son left an indelible emotional scar, from which some mothers never recovered.

The death of children at any age, of course, was nothing new to the postbellum South, but several key developments rooted in the postwar experience affected both increased mortality (thus increasing the number of child deaths mothers endured) and how mothers responded to the passing of their children. First, war and the hardships it generated in the South contributed to severe food shortages that continued after the war and that exacerbated malnutrition, illness, and early death. Wartime agricultural shortfalls could not be quickly and easily remedied, so Southern children became quite vulnerable to disease. Consequently, child loss in the postwar South was widespread. Second, with so much destruction and despair enveloping the defeated South, and with such a dismal future, Southern whites began to invest more in their children as they, more than ever, became the repositories of hope. Parents pinned their expectations for a revitalized South on their children. Third, given the financial and emotional failings of husbands after the war and, in some cases, the inability of fathers to provide for and protect their children, many women shifted their focus and affections to their children, imbuing the mother-child relationship with greater meaning and intensity. Ella Gertrude Clanton Thomas, for example, whose relationship with her husband after the war deteriorated precipitously, confessed to a heightened love for her children. “I love all my children more than I ever did before,” she wrote in 1870. The death of a child, a common occurrence before the war, became, after the war, infused with far greater meaning. Mourning the loss of a son or daughter in the context of the Civil War exacerbated feelings of loss and personal grief.

For these reasons, the death of a child after the war sometimes served as a tipping point in Southern women’s mental health: women had sacrificed and extended considerable emotional capital and expended physical labor throughout the entire war in order to ensure their families’ survival. The blow
dealt by a child’s death in the years after war pushed some women beyond their capacity to recover, exposing the limits to their resiliency. Mary Wor- thy, aged twenty-four, had kept the family together under trying circum-
stances while her husband served in the war. The deaths of three of four children proved more than her psychological constitution could bear, how-
ever, and she entered the Georgia asylum at the end of 1865.\footnote{132}

Some Southern white women had steeled themselves for the news that a husband had died on the front and, despite the devastating personal loss, showed fortitude and resiliency by persevering through the war, perhaps because mothers recognized how much their children would now rely on them. The death of a child, though, often sparked a mother’s emotional col-
lapse. Eliza Hattaway had suffered personal wartime trauma that included her husband’s gruesome death in battle and a brother who killed himself. Elisha Hattaway had been struck in the mouth by a minie ball at the Battle of Deep Bottom and died in a Richmond hospital in October 1864. Eliza’s older brother had lapsed into insanity and taken his own life. Eliza, though, weathered each one of these startling deaths. It was the death of a daughter, though, one of four children, on the heels of those of her husband and brother, that brought on Eliza’s breakdown. She became suicidal and was admitted to the Georgia asylum in May 1871.\footnote{133} Like Eliza Hattaway, Charlotte Jordan sustained herself upon hearing that her husband had died fighting for the Confederacy. It took the death of her only child, however, to push her into despair. The Ma-
con woman committed suicide in May 1868 by overdosing on morphine.\footnote{134}

Weathering the death of a beloved child was never easy. But mourning children after the war became more arduous given the emotional fragility of many Confederate women who had greatly suffered during the war and who emerged with diminished capacity to sustain future emotional shocks. A number of Southern mothers completely collapsed in response to the post-
war deaths of their children. The self-inflicted death of Pemina Fuller of Georgia in 1874, nine years after war’s end, indicates both underlying and di-
rect triggers, the former being very much connected to her experiences with war-related suffering and dislocation. Pemina’s first husband was Matthew Miles Dukes. They married in February 1861 and had a child the following year. Martial duty called and Matthew enlisted in the Georgia infantry in 1862. Tragedy struck when he was wounded near Knoxville in November 1863 and perished shortly after that. Pemina, aged twenty-one, now a widow with a small child, quickly remarried. In 1864, she married Hiram Fuller, a soldier with whom she conceived her second child, giving birth the following year. Hiram, like many soldiers, suffered multiple serious bouts of illness and in-
jury requiring repeated hospitalization. He bore the scar of a flesh wound on his hip the rest of his life. He had also been captured twice. Although Pemina
left no written record of her concerns, based on the letters and diaries of other soldiers’ wives, she must have relived the fear and worry of losing yet a second husband to the war effort. Hiram survived, though, and returned home. Perhaps seeking improved circumstances, Hiram uprooted his family sometime after the war and moved to Arkansas, surely another jolt to Pemina. Pemina, though, endured personal loss and tragedy as well as separation from her family and friends—until the loss of an infant child. While her husband lay sleeping one evening in December 1874, over a decade after the war had started, Pemina placed the muzzle of his loaded rifle underneath her chin and pulled the trigger. Her mind had been affected for some time, readers of the suicide story were told, because of the loss of a child. The newspaper account, however, did not recount the wartime suffering Pemina had experienced before her baby’s death that no doubt compounded her personal agony and that left her bereft. The larger context of fallout from war, then, provides much-needed context to Pemina’s decision to end her life after a decade of suffering.135

Some female patients admitted to Southern asylums after the Civil War betrayed, through hallucinations and obsessions, the deep psychological impact that death could have on a survivor of a war. Given how pervasive death was in the Civil War South, and the ubiquity of experiencing firsthand war-related death, the manifestation of death-themed hallucinations hint at how profoundly troubled Southern women were by their losses, or perhaps their own fear of dying. Some female asylum patients insisted they could talk with the dead. Sarah Padgett, a suicidal patient at the South Carolina insane asylum, tried to convince those around her that she saw dead people lying in their coffins and heard “dead men” speaking to her.136 Shady Ann Cawley, too, claimed she saw the spirits of her deceased friends and tried to show the apparitions to others. Asylum officials attributed the twenty-two-year-old’s derangement to the death of relatives. Cawley went one step further and insisted she was dead, explaining that it was her ghost that friends saw and conversed with, not her.137 Catherine Talcote, suffering from monomania, was admitted to the asylum in Columbia just months after the end of the war, and she claimed to see and converse with the spirits of her departed friends, all occupants of “difficult planets.”138

More commonly, female psychotic patients presented with fears of dying or with premonitions that they were about to die. Josephine Belsen, a married Alabama woman, entered the Georgia insane asylum in early 1866. The onset of her “insanity” was situated in the last months of the war, and although she did not attempt suicide, she spoke of intending to set herself on fire. She
also presented with a delusion that she was going to die within a few days, which caused her “great mental agony” and left her “often crying and screaming in a most distressing manner.” Rebecca Goodwin tried to drown herself several times before she was admitted to the insane asylum in 1879. Despite being thirty-six and relatively healthy, she was convinced she was “destined to die soon.”

Paradoxically, some patients either expressed a death wish or tried to kill themselves while presenting with paranoid thoughts of someone trying to murder them. Martha Morris, a forty-year-old housewife from South Carolina, entered the asylum in 1879 diagnosed with mania. Her patient history indicates that she “wishes for death.” Yet she refused to eat because she was convinced someone was trying to poison her. Thirty-four-year-old Catharine Martin was deemed insane and delivered to the South Carolina asylum in 1878. She had tried to kill herself on more than one occasion, by cutting her throat and by choking herself. Yet she expressed a fear of being murdered. Little is known about her personal history but she was one of at least thirteen siblings, including five brothers of military age. In fact, it is likely that at least one brother, William, died while serving the Confederacy and may explain why her mental illness crystallized around thoughts of death.

The long-suffering Alabama widow Octavia Otey—overwhelmed, depressed, fearful, hopeless—ruminated over a lecture she had read and shared with her cousin, Meck, after the war that compared man to the “lordly oak” and woman to the “shoot” growing at its base. Meck remarked that there were few lordly oaks these days, an apparent reference to the diminished pool of healthy men after the war. True, Otey acknowledged, but the oak symbolizes what man “ought to be.” And the “clinging vine whose existence is upheld by the tree, an emblem of woman’s faith and trust.” Carrying the metaphor further, Otey observed that when a storm lays a tree low, the vine falls, too, “and is trodden under foot by every passerby.” Otey deeply resented the hardships and privations she endured without her menfolk in the post-war South, whom she blamed for her sorry state. The lordly oaks on whom she, a mere vine, depended and without whom she felt helpless, had let her down. Their demise was her demise.

The Civil War cost the white South dearly in lives, treasure, and psychological and physical well-being. The ubiquitous and multifaceted suffering of Southern white women, borne out of defeat, economic ruin, despair, death, and political uncertainty, exposed the limits of paternalism. Fathers and husbands, the “lordly oaks” on whom Southern white women leaned and depended, failed to shield their charges from the ravages of war or insulate them
from the vast suffering that permeated their beloved, if short-lived, country. Thousands of Southern “vines” were now deprived of their sturdy trees, without which many did not know how to survive.

Self-inflicted death was one response to the vast postwar suffering, a coping strategy, and a reasonable response to the social, political, emotional, and economic dislocations of the postbellum South. Suicide was a tool used by some of the region’s women to cope with the world they inherited, for which they felt ill-equipped and inadequate to manage; by exiting, they escaped the gloom and misery that enveloped them. Fed the subtle and not-so-subtle cues that women were not up to the (male) attributes of independence and strength, quite a few women fulfilled that prophesy and collapsed under the weight of new expectations and conditions. For some of those, suicide allowed them to escape what they came to believe were hopeless demands.

Stripping the “Confederate angel” of her mythic veneer unmasks a more realistic array of female responses to the seismic fallout of war that goes beyond mere heroism and resilience and includes the faltering, the frail, the fractured, and the fearful. Unearthing the stories of white women who suffered after the war offers a more granular look at the impact of the war while edging us closer to a more accurate appraisal of the human costs. The legion of Southern white women who suffered psychologically as a result of war taxed the region in multiple ways. Thousands of children were orphaned by widows who were institutionalized or died by their own hands; wives of wounded veterans turned their children over to men of ill temper and little patience to parent them. The emotional cost of the war and its legacy—ruptured, dysfunctional families—on children has yet to be fully examined, but anecdotal sources suggest they, too, suffered greatly. Scores of children became homeless and filled the streets and jails of Southern cities.144 Shifting the burden of raising children to extended kin or friends, either temporarily or permanently, when mothers were no longer in the picture, further taxed households already struggling to survive.145 The family had long served as the bedrock of a thriving, vigorous Southern society economically, culturally, and politically. But with war’s devastating human toll, including widespread psychological harm, the family unit was severely weakened, jeopardizing the reconstitution and revitalization of Southern society and prolonging the need for healing long after the guns had been silenced at Appomattox.