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Interview

CWBR AUTHOR INTERVIEW: NATURE'S CIVIL WAR: COMMON SOLDIERS AND THE ENVIRONMENT IN 1862 VIRGINIA

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Interview with Kathryn Shively Meier, Assistant Professor of History at Virginia Commonwealth University

Interviewed by Michael Frawley

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Civil War Book Review (CWBR): Today the Civil War Book Review is proud to speak with Kathryn Shively Meier, an Assistant professor of History at Virginia Commonwealth University, and discuss her recent book *Nature's Civil War: Common Soldiers and the Environment in 1862 Virginia*. Thank you for joining us today.

Kathryn Shively Meier (KM): Thank you for having me.

CWBR: What first brought you to this topic?

KM: In reading Civil War common soldier accounts, their letters, diaries, memoirs, I quickly noticed that soldiers discussed nature all the time giving, what seemed like, daily accounts of weather, climate, flora, and fauna. But scholars have never really analyzed why, and I began to wonder if there was more to it than simply bored farmers just sitting around looking at their environment. So when I started investigating it a little more closely, I realized that soldiers believed that environment was responsible for some of the deadly diseases that they were facing. For instance, they believed miasma, bad water, seasonal shifts, the southern climate were causing things like diarrhea and dysentery, and those two were the top killers of the war, as well as some others like malaria and typhoid. And further, a variety of mental unfortunates, like melancholy, home sickness, loneliness. The ending of the Civil War, of all of the

mortalities, 2/3 of them would be from disease and yet most scholarly medical histories have been focusing on battle wounds. Also, they had mainly been focused on the top down, like medical personnel, rather than the soldiers themselves. So ultimately, I decided I wanted to focus on mental and physical health through the eyes of the soldiers in this war.

CWBR: What were the challenges you faced in doing your research?

KM: Actually one of the problems was a good problem, which was an overabundance of sources, because as anyone who has read Civil War soldiers' accounts knows nearly every soldier in this environment and health. So it was the opposite of the needle-in-a-haystack type of research. Which is why it ultimately shows to do a case study. But sort of a problem that I had, and this was one of bigger problems, was in charting mental health because official records really only recorded the most severe mental illness. So things like insanity, suicide, and what was contemporarily called nostalgia, which was a potential deadly case of home sickness. So in order to gain a nuance understanding of soldier's mental landscapes and how they were influenced by the environment, I had to take a more in-depth approach rather than a broad approach. My core study ended up being just a couple hundred individual soldiers because I had to literally map out their daily moves over a course of a year, which I did in an Excel spreadsheet, and I charted each time a man mentioned being melancholy or happy or even when he did not mention it but you could discern the mood shifts in his writing, and I had to figure out why that was happening. Was it linked to weather? Or health? To losing his friends to disease? etc. Ultimately I knew that morale shifts had serious consequences for Army operations because you could see that a soldier who had very low morale starts to unravel, deserts, disobeys orders, drink, and just performs poorly in his job. So I did the same technique then for physical illnesses as well. Even though there are official records, which are much better on the U.S. side than the Confederate side, for physical health, those records are really spotty because the way soldiers reported to sick call in the morning. Looking at their daily physical landscapes as well, I saw how sick they really were. It was very rare to find a soldier that wasn't suffering from diarrhea nearly every day. The picture that emerged for me was an army that was really struggling to stay well enough to just be minimally adequate to the grueling task of soldiering every day.

CWBR: So, what was the state of medical care and knowledge before the war and did this play an important role in how soldiers dealt with their

environment during the war?

KM: The state of medical care before the war is best described as chaotic. The Civil War occurred a decade before the discovery of germ theory and about two decades before the discovery of insect-borne illness. Medical profession was not very much influx before the war, as traditional surgeons were still clinging to humoral theory, the idea that the body was made up of fluids in need of balancing and they do so by what we call heroic interventions, these dramatic interventions to balance these fluids. Bleeding, purging, high doses of often mercury based medicine. Some of this was beginning to fall out of favor, but this was still the mainstream of medicine. But for people who become soldiers, they have fairly little experience with professional doctors before the war, and very little experience with hospitals. The preferred being treated at home by family members, usually women. They tended to believe that disease was caused by observable things they could see and feel, so environmental factors. For instance, there was a widely held fear that the South was a more harmful disease environment, and if you lived there you would have to undergo a process of seasoning in order to adjust. So the soldiers who went to war in 1861 and 1862 were products of an antebellum culture that was on one hand suspicious of professional medical care, and on the other hand emphasized self-reliance and environmental explanations of disease. One of the interesting things, at the beginning of the war there were a whole lot of Confederate posturing at how maybe the Yankees would come down South and all die in the southern swamps. Under the circumstances of Army life where you have 50,000 to over 100,000 men living together in mobile cities without infrastructures. Well the truth was they all got sick. Virginia was changed by war to become hospital disease environment for everyone. There were dead bodies everywhere, polluted water sources, landscapes ripped up from combat and mobilization. A lot of their pre-held beliefs were tested. Many had assumed that hearty country boys would spare them in the harsh environment of war. Early on, it was city men who spared best because they had already been exposed to crowd diseases when they were young like scarlet fever. So, a lot of conceptions were tested when they went to war.

CWBR: The campaigns you cover in your work are very different, how did each area present environmental challenges to soldiers and how did they deal with these challenges?

KM: So I chose the 1862 Virginia Peninsula and Shenandoah Valley Campaign because they were concurrent and overlapped. Also, because contemporaries viewed these two locations as very different environments. They viewed the peninsula as deadly because of its swamps, and they viewed the valley as hostile because it was mountainous and famous for its beautiful hot springs. The areas were challenging to soldiers in slightly different ways. The valley had more extreme weather shifts, particularly in the spring season. The campaign there required a very quick and grueling case of marching, particularly for the Confederates under Stonewall Jackson. The peninsula alternately took place in swampy areas. It was really bad water, and the pace of the campaign was much slower. Soldiers on both sides were stagnant. The peninsula was more taxing to health in the summer because of the swarms of mosquitoes that spread malaria. The soldiers thought that malaria was being caused by swamp miasma. Even though the campaigns were different and the areas were different, the soldiers protected their mental and physical health in virtually identical ways and diverse locations. Using what I term in the book as self-care. These are techniques to combat environmental causes of disease and mental illness. So things like boiling water, bathing frequently, foraging for fruits and vegetables, eradicating insects, constructing protective shelters, etc. These techniques helped them stay physically healthier but also boosted their morale. The main variation of locations when it came to self-care actually had to do with the pace of the campaign rather than the environment itself. For instance, if you are camping in one area for a while, a soldier could rig a better tent construction to keep it dry and drain his camp of moisture by laying down sand, and that would keep away mosquitoes. However, if you were in an area for a long time that would mean your water source would get fouled from having thousands of soldiers defecating, washing, and touching all in one place. So that is an advantage to a fast pace campaign, so that you avoid the buildup of filth, if you will.

CWBR: How good was the medical care apparatus of each army and how did soldiers react to the care officialdom tried to impose on them?

KM: The state of medical care in 1862 was not so good. However, on both sides it was starting to improve. When the war broke out, soldiers were forced into this official system that was really different from what they had known in the antebellum era. For instance, army surgeons often labeled them lingerers because the men were so sick so often that it seems implausible essentially to surgeons. When soldiers were treated, they despised the medicine they received, these heroic interventions, because they felt these medicines actually made them

sicker. Then they were terrified to go to the hospitals because they were unfamiliar with hospitals in general and didn't want to be treated by strangers. The least of what they had seen in the ranks were the majority of the regiments commanding them to come back home because of how the volunteers in the civil war were raised. So the consequence of this was that soldiers often avoided the official care offered by the medical department, or they supplemented it on their own by addressing what they believed to be the cause of these diseases, environment. They developed their own unofficial networks of care with comrades, civilians around the war front, and the ones back home to provide nursing, comfortable beds to recover in, and also to receive supplies and advice about how to care for their health.

CWBR: Seasoning is something that almost all military histories talk of, but, in your view, what is seasoning and how did the environment play a role?

KM: The traditional military view of seasoning is that citizen soldiers have to undergo a shift being a civilian to learning how to endure combat. Scholars like Earl Hess are fantastic on that type of seasoning. Then there is also another type of seasoning that is recognized by scholars like Joseph Blatter, which is a phase when newer recruits first join an army and somewhere around 50% of them become sick with crowd diseases. That is important because America was so rural at the time. Joining the Army was like moving to the city, but with closer quarters and no infrastructures. In addition to those two phases, I see another, and that is after the initial influx of crowd diseases taxes, soldiers succumb to a phase of environmental seasoning, which would tax physical and mental health during the daily grind of soldiering. This is the phase where they learn to endure days, weeks, months outside with very little shelter, very little food, marching 10-20 miles a day before you found pass and these are little guys, like 135 pounds on average. This was an active process of becoming seasoned to the hardships. Some soldiers practiced self-care and became mentally and physically tough, while others really floundered becoming despondent and often very ill and dying.

CWBR: Again, straggling is something important to commanders and military historians, could you explain though why it was important to soldiers' self-care?

KM: Commonly in the Civil War, straggling is conflated with desertion, which preserves a command bias from the time of the war. I think it is very important to draw distinction between temporary abandonment to one unit with

the intent to return versus a permanent abandonment. There were many reasons to straggle, but I looked at a reason for the practice that wasn't covered by the literature before and that is the men often straggled to practice self-care. When they became ill or despondent or the environmental burden of soldiering was too much to bare, they would often slip out of the ranks to seek shelter and recover maybe for just a night or two or sometimes for a little bit longer. In some cases they would actually seek out civilians to care for them; give them a bed to sleep in, give them food. Other cases of straggling for self-care was when rations were really poor. For instance, they were not being issued fruits and vegetables. Sometimes soldiers would straggle for forage. This helped to prevent scabies. In other cases, if they were not being ordered to bathe frequently enough, which happened on Stonewall Jackson's Valley Campaign, they straggled to find clean water to bathe and keep clean and to drink. From the soldier perspective, straggling could be just the key to staying healthy enough to continue on. But, of course, from the command perspective, generals didn't really consider that there were benefits to straggling. To them it meant an absence of available men to his campaign. It meant that the discipline in their army was poor. There is this kind of divide between the soldiers and generals here when it came to viewing straggling. Straggling became so pervasive over the course of 1862 that the medical departments were still so weak that command on both sides became to really crack down on the practice as the year went on, and impose torturous penalties. To give a few examples: Stonewall Jackson had four men court marshaled and executed as deserters, who claim they had only been straggling to serve the example because straggling was so bad in his army. Then, I say the most effective punishment in serving straggling was probably just restricting pay. By the end of the years, straggling had somewhat evaded.

CWBR: How did what soldiers and the army learned during these two campaigns effect medical care and reactions to the environment in the rest of the war?

KM: Soldiers continue to practice self-care throughout the war. Discipline did improve straggling and it was evaded. Both sides learned that their medical systems were inadequate to the task of caring for these massive armies, and went about improving hospitals, supplies, rations, etc. The U.S. really had an advantage with the intervention with the U.S. Sanitary Commission who had been investigating soldier camps and making recommendations for improved sanitation and environmental management. As well as providing supplies and nurses since the beginning of the war. In the Army of Potomac, the Union Army

looked at a new medical director, Jonathan Letterman, who came in and addressed problems like ambulance evacuation to considerable affects starting in July of 1962. In the end, the Civil War had a much better track record than the Mexican-American War in terms of mortality due to disease. In the Mexican-American War, 80% of mortalities had been from disease and in this war, only 66% by war's end. However, I would argue that it remains very much due to credit of the soldiers themselves and the individual decisions they made caring for one another, and adapt o the environment of war. They were able to mentally and physically preserve here.

CWBR: Professor Meier, I appreciate you taking the time to sit and discuss your most recent work, *Nature's Civil War: Common Soldiers and the Environment in 1862 Virginia*.