Invisible Wounds: Mental Illness and Civil War Soldiers, by Dillon J. Carrol. Baton Rouge: Louisiana State University Press, 2021. Index, bibliography, notes. 368 pp. \$45.00 hardcover.

Reviewer Brian Craig Miller is Dean of Humanities, Social Sciences, and Fine Arts at Mission College. He is the author of numerous books and articles, including *Empty Sleeves: Amputation in the Civil War South* (2015) and *A Punishment on a Nation: An Iowa Soldier Endures the Civil War* (2012).

After Maris A. Vinovskis called on social and cultural historians to explore the Civil War, many over the last few decades have responded. The "dark turn" in Civil War scholarship has produced a host of books and articles that tackled death, guerilla warfare, suicides, physical damage to the body and landscape, rampant health issues in contraband camps, and the drug and alcohol abuse that plagued a generation of veterans. Although it is difficult to take the modern diagnosis of Post-Traumatic Stress Disorder (PTSD) and apply it to a previous generation, the historical record provides evidence that Civil War soldiers experienced emotional and psychological trauma. In this carefully written and deeply researched book, Dillon Carroll explores how mental illness affected some soldiers, communities, and the medical community. Rather than attempt to diagnose white and Black soldiers with PTSD, Carroll only utilizes examples of psychological distress tied to the war when a doctor, veteran, or family member mentions it. Through the usage of numerous case studies, Carroll organizes this important exploration of mental illness around the individuals who clearly suffered as well as those who attempted to understand the very nature of that traumatic experience.

Carroll is careful not to make sweeping assertions about the prominence of mental illness amongst the Civil War generation. Rather, he diligently focuses on the evidence that is available to him, which offers some tantalizing morsels of knowledge about white and Black soldiers, mental health professionals, and various families, North and South, who had unique experiences. Many soldiers had health responses to their trauma and should not be viewed as victims. Rather, they utilized humor, their faith, writing, straggling, the prospect of home, and their care for each other to navigate any dark waters that the war put in front of them. African American soldiers, according to Carroll, did not suffer at the same rate as their white counterparts, but this could be because they did not have access to mental health care or were reluctant to seek out white caretakers. In some cases, African American men used their wartime experiences to destroy the physical dimensions of the plantation system while using their military service to deal with the trauma of slavery.

A substantial portion of the book tackles how the medical community approached the topic of mental illness, which they were only just beginning to understand. The increase in mental health patients that sprung up during the Civil War had not convinced many medical practitioners that the war was behind their suffering. Hospitals, such as St. Elizabeth, which Carroll uses due to the available records, started to use alcohol abuse as the standard diagnosis for insanity among veterans. Medical officials wrongly cited alcoholism as a cause of mental illness, rather than a symptom of it. Although head injuries without any viewable damage were not tied as a cause of mental illness, doctors did see a correlation between visible head trauma and bouts of mania and dementia. The field of neurology also took off in the aftermath of the Civil War, as scientists argued that mental illness could be an emotional condition. Silas Weir Mitchell, the father of neurology, studied Civil War soldiers and veterans and paved the way for understanding mental illness as caused by damage and stress to the nervous system rather than simply rooted in those who behaved immorally. These insights paved the way for modern psychology.

Carroll's exploration of mental illness during and after the Civil War raises numerous potential avenues for future research and exploration. Beyond those who served in the war, how did the institution of slavery and those who participated in, viewed, or were subjected to its violence affect mental health? How did soldiers and civilians utilize the pageantry and ritual of commemoration to reframe their memory of the war, which may be tied to traumatic experiences? Did the thousands of soldiers and civilians who avoided combat or traumatic experiences also face mental illness? Are Northern and Southern experiences radically different because in the postwar era one side could always carry the thrill of victory while the other the agony of defeat?

In many ways, Carroll has provided a clear pathway for researchers and writers in Iowa who are interested in exploring the theme of mental illness and how it affected Iowans during the Civil War. Hospital and asylum records in Iowa could offer nuggets of information that ascertain how soldiers and civilians living throughout the Midwest adjusted to postwar life. Community studies, or those rooted in case studies that explore people throughout Iowa, provide chances for future exploration of the social and cultural ramifications of war.