

“I Thought This is a Bad Dream and Tried to Cry Out”:  
Sleep as Trauma in the Fiction of Ambrose Bierce

Contemporary scholarship on Ambrose Bierce attempts to make sense of his numerous social and literary quirks by addressing various traumas he experienced over the course of his life. Psychologists Herbert Hendin and Ann Pollinger Haas, and literary scholar Sharon Talley have suggested that Bierce suffered from severe Post-Traumatic Stress Disorder (PTSD) resulting from his Civil War Service. However, I argue that Bierce sustained a third, as of yet undiagnosed trauma: A Traumatic Brain Injury, or TBI, the result of a head wound by a rebel sharpshooter near Kennesaw Mountain. To that end, I identify the manifestations of a TBI in his life and suggest that it was the formative moment of his life. Further, through literary trauma theory, I show that the presence of the injury compelled him to revisit his TBI in his literature in an attempt to heal, specifically through the narrative devices of sleeping and waking. Moreover, I combine literary trauma theory with current scholarship on time in nineteenth-century American literature to show that Bierce’s link and return to the past in his literature via his TBI reflects what literary scholar Lloyd Pratt calls “an equally complex universe of time [that] defines any individual work of writing” (19). I argue that by viewing Bierce’s traumatic experience in this way, Bierce’s TBI is not only a link to his past, but an example of the “competing temporalities” at work in both history and literature (22). We are then able to consider an American time much different from the linear model of orderly progress “that has been imagined” throughout history following war in light of traumatic injuries to combat veterans (20).

I trace this trauma’s effect on Bierce’s writing chronologically through his short stories “Chickamauga” (1889), “The Horseman in the Sky” (1889), “An Occurrence at Owl Creek Bridge” (1890), and the revised “A Horseman in the Sky” (1891). In each of the selected tales, Bierce’s characters fall into a deep and often unexplained sleep, similar to what scholar Laura

Doyle has called a “swoon moment” in transatlantic slave narratives, wherein a character “faints or momentarily collapses” and “loses its old social identity ... only to reawaken ... ‘born again’ from its own ashes” (6, 7). Bierce’s characters awaken to a dramatically different world, just as Bierce did when he awoke from the defining event of his life: his TBI. This literary return to the “break in [Bierce’s] mind’s experience of time” following his wound, reflected in Bierce’s writing, also pulls Bierce’s readers back to their own past in the Civil War (Caruth, *Literature* 5). Bierce’s short fiction then, as Pratt has argued regarding the literature of modernity, “restructures its readers understanding of time,” by showing that not all Americans “‘belong’ to the present tense of [the literature’s] composition” (15). That is, Bierce is consistently caught between two temporalities: the present tense of his writing, and his past formative trauma. Thus, he is not located in a “uniform and empty present tense that the nation can share,” and his readers are reminded that not all of them have moved linearly through the Civil War, as some, specifically Bierce, are still connected to the war through their injuries and therefore their sense of the self (22). Approaching Bierce’s short stories through the lens of his TBI then allows a new view of both Bierce's fiction and the altered relationship between sleep, time, and the self in light of trauma.

### **Bierce’s Post Traumatic Stress Disorder Diagnosis:**

Traumatic events marked Bierce’s time in the Civil War. He witnessed dying men “taking in breath in convulsive, rattling snorts, and blowing it out in sputters of froth which crawled creamily down his cheeks ...” (Bierce, *Phantoms* 103). Yet, even this clearly traumatic event pales in comparison to the injury Bierce sustained, currently referred to as a “head wound.” Biographer Roy Morris Jr. explains that Bierce was shot at Kennesaw Mountain, and, “The bullet struck him in the left temple, fracturing the temporal bone, and burrowed around the side

of his skull to a point behind the left ear” (88). As Bierce biographer Christopher Coleman has noted, Bierce was then moved from medical tent to medical tent in the rear of the battle. Bierce would then remain either unconscious or in a daze for most of a two-day train ride to Chattanooga; from there, he was sent to Nashville to have the bullet removed, where he finally woke up fully (180-181).

These incidents, in combination, led Hendin and Haas to describe Bierce’s difficult post-war life in terms of PTSD. They noted that Bierce seems to have exhibited, for example, hypervigilance, a telltale sign of PTSD, because he always carried a revolver, believing he could be attacked at any time (5-6). The revolver was also associated with the PTSD symptom of anger. According to Morris Jr. Bierce once barged into the house of a male acquaintance who had accused him of being a homosexual. Bierce only stopped, according to his friend Walter Neale, after he found out that the man was already crippled and confined to a bed (Neale 140 qtd. In Morris Jr. 130). Bierce was also preoccupied with death. He often wrote about suicide in his newspaper columns, even providing a suicide guide in an 1869 editorial as a set of directions for unhappy readers (Morris Jr. 122). Talley extended Hendin and Haas’s work, citing Bierce’s inability to sleep and his absenteeism as a father as characteristic of PTSD sufferers, and again quoted Walter Neale, who explained that while Bierce was not alcohol dependent, he did drink “copiously” (Neale 59 qtd. In Talley 119).

It is important to note, when discussing post-traumatic symptoms in veterans of early wars, that the concept of PTSD was not thought of in the same way that we do today. In fact, during this period the concept of mental and emotional trauma resulting from wartime service was referred to as “Nostalgia,” and when sufferers experienced what we would now call “Flashbacks,” they were “more likely to describe being visited by a host of spirits” including

“the ghosts of fallen comrades”<sup>1</sup> according to writer and veteran David J. Morris (61). Morris further notes that the term “flashback,” in relation to PTSD was not widely in practice until it was borrowed from film in the 1950’s-60’s, according to historian of medicine Edgar Jones and his peers (161-162). Thus, while Bierce would have been unaware of contemporary PTSD symptoms as described by the authors mentioned, the diagnosis does not mean that he did not experience and exhibit the symptoms of both PTSD and its precursor, “Nostalgia.”

### **Bierce’s Traumatic Brain Injury Diagnosis:**

These PTSD symptoms, however, fail to address the overlapping symptoms of TBI in Bierce’s life. When viewed through Bierce’s literature, these symptoms not only reflect the TBI’s overwhelming effect on Bierce, but also the altered relationship between sleep, time, and the self to which the trauma contributed. More specifically, contemporary neurological studies allow us to look at Bierce’s “head wound” more fully, as TBI. The current medical science presents a more complete picture of Bierce, his “head wound,” and its repercussions in his life and literature.

TBI is associated with primary brain damage with the “consequence of direct impact, rapid acceleration or deceleration, [or] a penetrating object (eg, gunshot)” (Maas et al. 729). Bierce was shot in the left temple, a direct impact of a penetrating object, causing his head to accelerate backward, and then forward, until he hit the ground. The impact would result in rapid acceleration of his head, followed by its abrupt its deceleration (Coleman 180). Furthermore, TBI is diagnosed by “any period of loss of consciousness; any loss of memory for events immediately before or after the accident; any alteration in mental state at the time of the accident (eg feeling dazed, disoriented or confused)” and “focal neurological deficits that may be transient”

---

<sup>1</sup> And it should be noted that many of Bierce’s characters are regularly visited by “the spirits of fallen comrades.”

(Arciniegas, et al 45). Bierce suffered each of these, the first two, as mentioned, after his wound; it is also quite possible the third symptom was present as well. Following the injury, Bierce began his three-day journey to Nashville and Chattanooga, during which he entered various states of unconsciousness and semi-consciousness (Coleman 180). As outlined, Bierce's wound fits the criteria for a TBI diagnosis after he exhibited symptoms consistent with TBI, and the fourth symptom, focal neurological deficits, seems to have continued in his post-war life.

Lingering symptoms of TBI, or "focal neurological deficits," generally mimic those of PTSD symptoms. Chief among the overlapping symptoms evident in Bierce's life are "binge drinking," "depression," "increased risk of suicide," "irritability," and "violent outbursts" (Langlois et al 376; Yang et al. 1101). In addition to the immediate TBI symptoms, Bierce later spoke to the changes in his post wounding life which, with hindsight, suggest TBI. He would explain that he was "subject to fits of fainting, sometimes without assignable immediate cause, but mostly when suffering from exposure, excitement or excessive fatigue" (*Phantoms* 260). These symptoms exemplify the lifelong characteristics, or focal neurological deficits that characterize TBI and are separate from those of PTSD. According to the Mayo Clinic, these deficits are "Headache ... Fatigue or drowsiness ... Fainting ... Dizziness or loss of balance." These "deficits" would not only exacerbate Bierce's PTSD symptoms but would also come to define his life and his literature.

The state of Bierce's wound following the initial impact of the musket ball also suggests TBI. Currently, when a TBI is suspected, pre-hospital care looks to two factors to prevent secondary injury and death: brain swelling and transportation. Contemporary care for brain swelling involves breathing assistance and anti-inflammatory drugs (Ghajar 926). Civil War era care, however, was little more than "ice dressings," or towels wrapped in crushed ice (U.S. Army

388). Bierce was, at most, given an ice dressing, and his brain would have swollen and pressed against his skull over the course of his two-day train ride following his wounding.

Further, when a possible TBI victim is transported today, the number of transportation changes following initial wounding increases the chances of further injury greatly. One transportation leg alone during contemporary transport results in a 50% increase in the chances of hyperthermia, or extreme body temperature rise; this would result in increased brain swelling and therefore more damage (Dukes et al. 12). Civil War era transport of wounded patients, on the other hand, according to historian George Adams, was complicated by “the overall lightness of the ambulance. ... with the terrain being torn up by shells and explosions the ambulance at times would overturn further harming its passengers” (63). Bierce was moved to at least five different nursing tents before being loaded onto his train for three separate legs from Kennesaw Mountain, to Nashville, to Chattanooga, for a possible total of seven legs (Coleman 180). Both the transportation of Bierce and the care administered for brain swelling would increase the brain damage incurred by his initial wounding.

Significantly, both PTSD, or its precursors, and TBI are common in soldiers from all eras. Modern science shows that there is a strong correlation between “TBI and PTSD” in combat veterans (Schneiderman et al. 1447). In addition to stronger incidences of concomitant injuries, the overlapping symptoms regularly combine to exacerbate each other, as TBI in soldiers “is strongly associated with PTSD and physical health problems 3 to 4 months after the soldiers return home” (Hoge et al. 453). Examining Bierce’s personal life for clues to his PTSD diagnosis, then, requires looking for TBI symptoms and the overlap between the two.

Bierce continued to manifest symptoms of TBI/PTSD for the rest of his life, stating that his head was “broken like a walnut” (McWilliams 57). When he returned home to Indiana,

Bierce behaved in a markedly different manner. Bierce's brother Albert once explained that Bierce "was never the same after that. Some of the iron of that shell seemed to stick in his brain, and he became bitter and suspicious, especially of his close friends" (Sterling 11). Many biographers associate this behavior with his failed engagement to fiancé Fatima Wright. Be that as it may, Bierce's symptoms and the changed behavior noted by his brother are concurrent with symptoms of a severe TBI. Thus, "Bitter Bierce," while studied as a victim of PTSD, must also be viewed as a TBI victim to have a clearer picture of the author.

Understanding Bierce in association with PTSD and TBI also has consequences for understanding Bierce's writing. Using the TBI diagnosis in combination with literary trauma and temporal theories allows me to interpret Bierce's writing as one in which "more than one modality of time defines any geographic area, social enclave, or literary form" (Pratt 61). Much in this way, Bierce's writing and attempts to heal, according to Cathy Caruth, return Bierce and his readers to "the incomprehensible act of surviving—of waking into life—" which then "repeats and bears witness to what remains ungrasped within the encounter with death" (*Literature* 6). Through Bierce's literary discussion of his life-altering TBI, his waking from his wounding, and attempts to account for the missed time during his sleep, Bierce physically inhabits the post-Civil War time of his writing but also inhabits the period prior to his wounding. Therefore, through attempting to return to his past and account for the lost time linking his TBI to the moment of his writing, he and his readers return to a time they thought to be just that: passed.

### **Bierce's TBI Reflected in His Short Fiction:**

In this section, I consider Bierce's post War short stories in terms of Trauma and Temporal theory. Bierce chronologically wrote about his head trauma; thus, he works through

this trauma over the course of three years and four short stories: “Chickamauga,” “The Horseman in the Sky,” “An Occurrence at Owl Creek Bridge,” and the revised “A Horseman in the Sky.” In doing so, he attempts to account, consciously or otherwise, for his time lost following his TBI.

This traumatic moment, as Cathy Caruth explains, served not “as a threat to the life of the organism [Bierce] but that occurs, rather, as a break in the mind’s experience of time” as “the surprise of waking ... repeats the unexpectedness of the trauma” (*Literature* 5,6). That is, he is revisiting and returning to the most traumatic and formative event in his life: waking to a dramatically different world following his TBI. I argue that Bierce works through his trauma and seeks to change his characters’ relation to time by references to sleep. His characters fall into a deep, often unexplained sleep, breaking the character’s relation to time, followed by them waking to a major event or shift. The world around them changes immediately and drastically, much like when Bierce woke from his wound, and the world around him was markedly different. I have chosen to borrow Laura Doyle’s term: “swoon moment” to describe these shifts, which she characterizes as moments when a character “faints or momentarily collapses” and “loses its old social identity ... only to reawaken ... ‘born again’ from its own ashes” (6, 7). Bierce’s writing, I argue, mirrors his attempt to be “‘born again’ from [his] own ashes” through his characters’ “swoon moments.”

Further, his characters’ “swoon moments” point to Bierce and his literature inhabiting two separate temporalities: the period of his TBI, and his new, unknown world which he woke to following his wounding. Therefore, Bierce’s return to the past following wartime violence upsets an accepted view of linear and shared time. As Pratt has stated, authors of nineteenth-century historical romances “often appear to wish that they could simply represent American history as a



story of uninterrupted progress” (61). Bierce’s inhabitation of two distinctly separate modes of time through his remembrance and ties to his traumatic experience, I argue, show that this view of uninterrupted American progress is incorrect, especially in terms of traumatic wartime experiences.

Moreover, Bierce’s characters’ attempts to come to terms with their new worlds mirror the process of Bierce’s own attempts to heal and create a linear path from his wounding to the moment of his writing, to make sense of his lost time following his wounding. In 1889’s “Chickamauga,” Bierce’s main character, a child, cannot express his trauma’s impact. Bierce uses this character to first return to his traumatic moment, although much like the child, he is unable to come to terms with the world that he wakes to find. Also, in 1889, in “The Horseman in the Sky,” he uses Carter Druse, who loses his mind, to repeat his own trauma. Druse attempts to articulate his trauma, which is a step further than the child in “Chickamauga.” In 1890’s “An Occurrence at Owl Creek Bridge” Bierce begins to work through his traumatic experience by attempting to change the outcome, to work through his trauma to create “in its repetition, something new,” while also account for the changed world he encounters (Caruth, *Literature* 8). However, he struggles to allow that story’s character, Peyton Farquhar, to escape his ultimate fate, death, just as Bierce could not escape the new world thrust upon him upon waking. He continues to return to, and inhabit, the world and time he knew to make sense of his lost time leading to the present. Although, with his revision of “The Horseman in the Sky,” “A Horseman in the Sky” in 1891, Bierce attempts to accept the new world he is thrust into, albeit still remaining attached to the traumatic event. Ultimately, while he does not find “something new” in his traumatic experience, he endeavors to verbalize his encounter with the new world he has begun to inhabit following his lost time (Caruth, *Literature* 8).

Bierce's "Chickamauga," (1889), as indicated, follows a young child exploring the woods surrounding his home. The boy eventually finds himself lost. Scared, the child "sobbed himself to sleep" in the middle of the forest (*Phantoms* 190). Upon waking, he leaves the woods to discover that a house is on fire, and realizes the building is his own home. The boy can then only "utter ... a series of inarticulate and indescribable cries" because he is "a deaf mute" (194).

Morris Jr. and others have connected the child's inability to describe his pain with the plight of Bierce and other veterans who cannot describe the horrors of war. Morris describes it as a detailing of "the blind forces of violence" and "warfare" (61). Stuart Woodruff has explained that it is a "moral fable," and Donald T. Blume suggests that Bierce sought to show that civilian status was not enough to protect citizens from "the ravages of a looming war" (38; 127).

Extending this work, I suggest that the story reflects the effects of Bierce's TBI, and his return to the time of his wounding to make sense of the new world he has been thrust into following his own waking. The child's waking to a drastically changed world, about which he can only cry, is the beginning of Bierce remembering the sleep that followed his TBI. Bierce is attempting to revisit the defining traumatic event in his life, to remember his former life, make up for lost time, and make sense of his new world.

Significantly, the child must first sleep before he arrives at a changed world and awakes to his "swoon moment." Similarly, Bierce, after sleeping, begins to remember his period of unconsciousness after Kennesaw Mountain. M.E. Grenander has called the drastic change, or surprise, that follows the child's sleep an example of a "Biercean mimetic tale" (99). However, the surprise is more than a warning about the dangers of war. It can also be read as indicative of how Bierce felt upon waking from his TBI. The child then, like Bierce, returns to the safety of his home, and finds it markedly different from when he left it and fell asleep; he therefore is

unable to articulate his pain and confusion as it is directly related to his world on fire, or Bierce's changed world following his TBI. He has yet to be "born again from [his] own ashes," as the traumatic experience and changed world is too much for him to even articulate at this moment (Doyle 7).

Bierce then uses his own experience of remembering his trauma to structure "The Horseman in the Sky" (1889). It depicts a Union sentinel, Carter Druse, lying in the grass at his post, where he falls asleep. He dreams of his father who disowned him when he joined the Union Army. He then wakes, only to see the impossible, a "man and horse in the sky." He fires at the horse, and sends it tumbling out of the sky. When his superior hears the shot, he asks whom Druse shot. Druse responds, "I am a great marksman; you know I once shot a match with the Devil in hell and beat him." The Sergeant then notices that Druse's "face was white; his eyes glittered with a strange, uncanny light" and again asks "'Was there anybody ... except the horse?'" Druse responds again, "Do you mean the horse which had wings? ... My father." The Sergeant returns down the road he arrived on, understanding Druse to then be insane, and his story untrue ("The Horseman ..." 9).

The story's surprise ending again illustrates what Grenander described as Bierce's mimesis. Traditionally, the ending is understood as a sympathetic understanding of Druse, who must commit to the murder of his father so that he will not be tried for his crime of falling asleep on duty; Lawrence Berkove explains in his 2002 book, *A Prescription for Adversity: The Moral Art of Ambrose Bierce* that Druse is "a tragic victim of an impossible choice" (106). Blume also argues that Druse is sympathetic, as he not only has to kill his father to cover up his crime but was driven insane by the act (146). However, in addition to having to cover his crimes, Druse has also awakened from sleep to an impossibly different world than the one he left when he entered

his slumber. He cannot account for his lost time or his new world, just like Bierce after his wounding.

Druse, much like the boy, falls asleep and wakes to a terribly different world than the one he remembers. The actions that follow his waking leave him visibly affected, to the point of his eyes glowing with a “strange and uncanny light” (“The Horseman ... 9). To shock his readers with that change, and prompt them to sympathize with Druse, Bierce’s character must first sleep, much like the child in “Chickamauga” and Bierce himself after his TBI. Druse, through his swoon moment, is linked to the child and Bierce.

In “The Horseman in the Sky” Bierce continues to work through and make sense of the post-Civil War world he has encountered and account for time lost during his own sleep. In studying Bierce’s personal life and character following his brain injury, it is clear the trauma manifested itself in his actions through his TBI symptoms. The child in “Chickamauga” was unable to explain the traumatic experience of losing his mother, and Druse is unable to keep his sanity after shooting his father, although he *tries* to explain what has happened. The child in “Chickamauga” can only cry; however, much like Bierce was unable to explain his traumatic experience immediately following his wounding. Bierce, through the child and Druse, is attempting to “master what was never fully grasped in the first place,” waking to a new world following lost time stemming from a traumatic event, with no linear mode of progress having created it. (Caruth, *Literature* 6). Bierce is continually returned to this moment in his life to make sense of his new world. Time has passed him by, and he must constantly inhabit two periods—the one he remembers and can make sense of, and the one that he and his readers physically inhabit.

In his most famous story, “An Occurrence at Owl Creek Bridge” (1890), Bierce seemingly attempts to change the outcome of his traumatic experience to account for his lost time. Once again, Bierce’s protagonist, Peyton Farquhar, wakes from his own period of unconsciousness to a completely changed world. In this case, Farquhar wakes following a dream that he had escaped a hanging, only to have his neck broken during the hanging. Again, Bierce’s mimesis is evident, as neither the reader nor Farquhar himself are sure if he has escaped or is indeed dreaming, and the story ends abruptly with Farquhar’s death.

Traditionally, scholars have focused on the story’s abrupt ending. Clifford Ames has stated this is the most important part of the story, as it is when the reader, alongside Farquhar, realizes the escape has been a dream (53). In reading Bierce’s story as the author’s swoon moment in relation to his traumatic experience forcing him to inhabit two temporalities within a process moving from “Chickamauga” and “Horseman,” the ending here is an extremely important part of the tale: It is when the world surrounding Farquhar changes. Farquhar, like Bierce, is thrust into the present. Blume references Bierce stories which preceded and may have laid the framework for “Occurrence,” and does mention Bierce’s “head wound” as giving Bierce useful experience in writing about the moments leading up to and before death (212).

However, while Blume states that Bierce refers to his head wound as inspiration for “Occurrence,” Bierce’s wound also forces him to inhabit the past and the present time of his writing. Bierce thereby remembers and repeats his period of unconsciousness after Kennesaw Mountain as a remembrance of the trauma in an effort to make up for lost time and make sense of the present that he inhabits at the time of his writing. Bierce attempts once again to make sense of what Cathy Caruth has called that which “is *not* precisely grasped” in the traumatic experience. Bierce continues to try to make sense of a “violence” that “has not yet been fully

known” (*Unclaimed* 6). A literary violence that, according to Pratt, “collapses the divisions separating past, present, and future” (61). Bierce’s violence in “Owl Creek” is just that: a return to his past trauma and an attempt to change it in some way, to create a linear path to his present, to complete his swoon moment and be “born again” (Doyle 7). However, as Farquhar dies upon waking, Bierce is again reminded that he cannot change the outcome of his traumatic experience, as “It is the surprise of waking that repeats the unexpectedness of the trauma” (Caruth, *Literature* 6). Upon waking both Bierce and Farquhar are reminded of their trauma, and of how it forces them into the new world of the present while also linking them to the past.

Bierce’s attempt to fully escape his traumatic experience and create a linear path to his present time does not end at “Occurrence at Owl Creek Bridge,” though. He revised “The Horseman in the Sky” for *Tales of Soldiers and Civilians* and titled it “A Horseman in the Sky” (1891). This version changes Bierce’s reaction to his unexpected traumatic event in an attempt to accept his lost time and his new temporality. In a word, he explains it by recasting Carter Druse’s response to his own trauma. In the new ending, Druse falls asleep again and dreams of his father. This time, however, he is awakened by a man perched atop a cliff on a large horse. If Druse does not fire on the man, the soldier will attack Druse’s comrades. Meanwhile, Druse’s commanding officer watches the cliff and sees a man and a horse flying through the sky, while Druse fires on the horse and sends it tumbling from the cliff. When Druse’s superior asks Druse whether or not he fired a shot, Druse responds that he did fire his weapon at a horse perched on a cliff. The commanding officer then asks who was riding on the horse, and when Druse responds, “My father,” his superior can only respond this time with, “Good God!” (“A Horseman ...” 18, 20).

In this retelling, both Grenander and Berkove continue to identify Druse as a “sympathetic” character, much as he was read in “The Horseman in the Sky” (130; 106).

Meanwhile, Blume explains that this version shows how Druse manages to live with himself after his father's death. He did not kill his father outright; he only sent the horse tumbling from the cliff. However, Blume notes that it is difficult to understand how the sane Druse is fine with sending his father flying off a cliff as opposed to experiencing the "quick death" that comes with a "well-aimed bullet" (158).

This revision, though, supports the argument that Bierce was working through his trauma by means of his writing and his characters' swoon moments, to create a linear path between his past and present and be "born again." He repeats his traumatic vision of waking from unconsciousness; however, while the main character's life is forever changed in this story, he manages to survive with his mind intact, only eliciting a "Good God!" from those who have heard his tale. The traumatic experience and its aftermath shock those surrounding Druse and Bierce much more than they shock the character and author who have endured the traumatic event. Therefore, it seems as if the author and character have at least come to terms with their trauma, lost time, and the present world enough to discuss them. It is, at this point, that Bierce has apparently managed to become conversant with and about his new world, despite being unable to account for his lost time.

By writing about and discussing his trauma Bierce is, in some small respect, able to make sense of his new world. By returning to his traumatic event and the past through his literature, Bierce revises not only the outcome for "A Horseman in the Sky," but also the outcome and effects of his trauma as well. Although in this last version the events are not particularly positive, they have changed. He is beginning the process of being, as Doyle would say, "born again" out of his traumatic experience through his writing and his characters' swoon moments. While Bierce has not created a linear path from his traumatic experience to the time of his

writing, by not attempting to escape his trauma and make sense of his new world altogether as he planned to in “An Occurrence at Owl Creek Bridge,” he has seemingly begun to come to terms with it by allowing Druse to escape alive and with his mental faculties intact.

### **Bierce Born Again:**

Bierce approached his trauma more directly in his story about Carter Druse; but his actions following the publication of Druse’s story speak to Bierce’s inability to be completely grounded in his contemporary moment and be “‘born again’ from his own ashes” (Doyle 7). Bierce disappeared following Pancho Villa’s army in 1913-1914, and Coleman and Talley suggest that Bierce sought further solace in battle because of his lingering PTSD symptoms. As such, existing scholarship on Bierce has focused on the psychological effects Bierce’s Civil War service and resultant PTSD diagnosis had on his life and his writing. However, this scholarship has viewed his injury at Kennesaw Mountain as only a “head wound,” without asking if the wound had implications for his life and writing. My study concentrated on Bierce’s “head wound,” diagnosing it as a TBI, showing that it was the defining moment of his life which grounded him in separate modes of temporality. In so doing, I offer a reconstruction of Bierce’s work, and a new lens with which to interpret it. In addition, this new understanding of Bierce’s trauma and its effects on his view of the self and his relation to time and society has several consequences for scholarship regarding temporality in the literature of the nineteenth century and war trauma in general. Despite living and writing in the period following the Civil War, Bierce also inhabited and was linked to the war through his life’s most critical moment. Considering Bierce and his literature in this way further complicates the idea of a linear concept of time in light of traumatic injuries. If Bierce did indeed inhabit two periods of time through his trauma



and his attempts to heal, more work must be done on the writing of combat veterans and their view of the self, society, and the time they inhabit following traumatic wounding.

## WORKS CITED

- Adams, George Worthington. *Doctors in Blue: The Medical History of the Union Army in the Civil War*. Louisiana State University Press, 1996.
- Ames, Clifford R. "Do I Wake or Sleep? Technique as Content in Ambrose Bierce's Short Story, 'An Occurrence at Owl Creek Bridge.'" *American Literary Realism, 1870-1910*, vol. 19, no. 3, 1987, pp. 52–67.
- Arciniegas, David B., et al. *Management of Adults with Traumatic Brain Injury*. American Psychiatric Pub, 2013.
- Berkove, Lawrence I. *A Prescription for Adversity: The Moral Art of Ambrose Bierce*. Ohio State University Press, 2002.
- Bierce, Ambrose. "A Horseman in the Sky." *Tales of Soldiers and Civilians*. E.L.G. Steele, 1891, pp. 9-20.
- . *Phantoms of a Blood-Stained Period: The Complete Civil War Writings of Ambrose Bierce*, edited by Russell Duncan and David J. Klooster, University of Massachusetts Press, 2002.
- . "The Horseman in the Sky." *The Examiner*, 14 Apr. 1889, pp. 9–10.
- Blume, Donald T. *Ambrose Bierce's Civilians and Soldiers in Context: A Critical Study*. Kent State University Press, 2004.
- Caruth, Cathy. *Literature in the Ashes of History*. JHU Press, 2013.
- . *Unclaimed Experience: Trauma, Narrative and History*. JHU Press, 2010.
- Coleman, Christopher Kiernan. *Ambrose Bierce and the Period of Honorable Strife: The Civil War and the Emergence of an American Writer*. The University of Tennessee Press, 2016.

- Doyle, Laura. *Freedom's Empire: Race and the Rise of the Novel in Atlantic Modernity, 1640–1940*. Duke University Press, 2008.
- Dukes, Susan F., et al. “Occurrence of Secondary Insults of Traumatic Brain Injury in Patients Transported by Critical Care Air Transport Teams From Iraq/Afghanistan: 2003-2006.” *Military Medicine*, vol. 178, no. 1, 2013, pp. 11–17.
- Ghajar, Jamshid. “Traumatic Brain Injury.” *The Lancet*, vol. 356, no. 9233, 2000, pp. 923–929.
- Grenander, Mary Elizabeth. *Ambrose Bierce*. Twayne, 1971.
- Hendin, Herbert, and Anne Pollinger Haas. “Posttraumatic Stress Disorders in Veterans of Early American Wars.” *The Psychohistory Review*, vol. 12, no. 25, 1984, pp. 1–10.
- Hoge, Charles W., et al. “Mild Traumatic Brain Injury in U.S. Soldiers Returning from Iraq.” *New England Journal of Medicine*, vol. 358, no. 5, 2008, pp. 453–463.
- Jones, Edgar, et al. “Flashbacks and Post-Traumatic Stress Disorder: The Genesis of a 20th-Century Diagnosis.” *The British Journal of Psychiatry: The Journal of Mental Science*, vol. 182, Feb. 2003, pp. 158–63. PubMed, doi:10.1192/bjp.182.2.158.
- Langlois, Jean A. et al. “The Epidemiology and Impact of Traumatic Brain Injury.” *Journal of Head Trauma Rehabilitation*, vol. 21, no. 5, 2006, pp. 375–378.
- Maas, Andrew et al. “Moderate and Severe Traumatic Brain Injury in Adults.” *The Lancet Neurology*, vol. 7, no. 8, 2008, pp. 728–741.
- Mayo Clinic Staff. “Traumatic Brain Injury.” Traumatic Brain Injury Symptoms - Mayo Clinic.
- McWilliams, Carey. *Ambrose Bierce: A Biography*. Delphi Classics, 2017.
- Morris, David J. *The Evil Hours: A Biography of Post-Traumatic Stress Disorder*. HMH, 2015.
- Morris Jr., Roy. *Ambrose Bierce: Alone in Bad Company*. Oxford University Press, 1999.
- Neale, Walter. *Life of Ambrose Bierce*. Reprint Services Corp, 1929.

Pratt, Lloyd. *Archives of American Time: Literature and Modernity in the Nineteenth Century*.

University of Pennsylvania Press, 2011.

Talley, Sharon. *Ambrose Bierce and the Dance of Death*. University of Tennessee Press, 2009.

Schneiderman, A. I. et al. "Understanding Sequelae of Injury Mechanisms and Mild

Traumatic Brain Injury Incurred during the Conflicts in Iraq and Afghanistan: Persistent

Postconcussive Symptoms and Posttraumatic Stress Disorder." *American Journal of*

*Epidemiology*, vol. 167, no. 12, 2008, pp. 1446–1452.

Sterling, George. "The Shadow Maker." *The American Mercury*, Sept. 1925, pp. 10–19.

U.S. Army Surgeon General's Office. *The Medical and Surgical History of the War of the*

*Rebellion. (1861-1865.) Part I, Volume II*. Otis Historical Archives, National Museum of

Health and Medicine, 1870. Internet Archive.

Yang, Chi-Cheng et al. "Divergent Manifestations of Irritability in Patients with Mild and

Moderate-to-Severe Traumatic Brain Injury: Perspectives of Awareness and

Neurocognitive Correlates." *Brain Injury*, vol. 27, no. 9, Oct. 2013, pp. 1008–1015.

Woodruff, Stuart C. *The Short Stories of Ambrose Bierce: A Study in Polarity*. University of

Pittsburgh Press, 1964.