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Murder and Madness: Gender and the Insanity Defense in Nineteenth-century Ireland

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The debate on the gendered nature of crime and its punishment is well established in feminist literature, and centers on gender differences in criminal behavior and in legal outcomes.¹ There is also a parallel debate on gender and mental health, focusing on gender differences in the experiences and manifestations of mental disorder and on differences in society's response to these experiences.² These two debates intersect when persons who have a mental disorder have committed a crime. Today, such persons are known as mentally disordered offenders, but in the nineteenth century they were classified as "criminal lunatics."

The second half of the nineteenth century was a time of great political unrest and social change in the aftermath of Famine, and the era was characterized by a high degree of official control from Westminster through Dublin.³ From the beginning of the century, the problems of vagrancy and lunacy were subjected to waves of legislation to ensure control of unruly elements in society. This was due in part to the enthusiasm for Irish prison reform by two Whig politicians, Thomas Spring-Rice and Sir John Newport, and in part to the ease with which the highly centralized colonial authority exerted control over local authorities and landowners.⁴ As the general population decreased—falling from approximately eight million in 1841 to 6.5 million after the Famine and to 4.5 million in 1900—both the prison system and the asylum system expanded steadily.⁵ The expansion of the prison system raises interesting questions, as scholars debate whether or not serious crime actually increased in the second half of the nineteenth century.⁶ As part of the planned expansion of the asylum system, and to solve the problem of holding lunatics in an already overcrowded prison system, a special facility with accommodation for approximately one hundred people was built at Dundrum, County Dublin, for the confinement and treatment of criminal lunatics in 1850. The Dundrum facility predated the establishment of a similar institution at Broadmoor, England, opened in 1863, but it mirrored the ideological approach to crime and mental disorder evident throughout Britain and its colonies at this time.⁷ It was known as the Central Criminal Lunatic Asylum for Ireland and remains open—though there are currently plans to relocate it away from Dundrum—as the Central Mental Hospital for offenders with mental disorders.

The plans for the proposed institution at Dundrum showed the influence of the largely benevolent and optimistic perspective of Dr. Francis White, the inspector of prisons for Ireland who had responsibility for lunacy. Because he saw the potential inmates as "lunatics" rather than "criminals," White argued for a building that would be more like an asylum than a prison. In his annual report of 1847 he wrote, "It is not designed that the building should partake of the character of a prison," noting that "it is proposed to have the structural arrangement as cheerful as circumstances will admit, so as to afford every possible facility for the recreation and occupation of the patients."⁸ In spite of this positive approach, Dundrum became a place to be feared. Individuals confined there were regarded by the public as both dangerous and disordered, and were isolated from society by the physical barriers of high periphery walls and by the legal measure of indefinite sentences.

Between 1850 and 1900, more than eight hundred people (646 men and 177 women) were sent to Dundrum, under laws designed to divert people with mental disorders from the prison system at different stages of judicial proceedings against them—at the time of trial, of sentencing, or of imprisonment.⁹ The “patients,” or “inmates,” as they were sometimes called, ranged in age from fourteen to eighty and had committed a wide range of crimes, including murder, manslaughter, assault, theft, and burglary.¹⁰ In cases of murder and manslaughter in which individuals successfully pleaded insanity, they were sent to Dundrum as criminal lunatics. In most cases of serious crime, the sentence was for an indefinite time period—officially designated as LLP, for “at the Lord Lieutenant’s Pleasure,” or HMP, for “at His/Her Majesty’s Pleasure.” Medical records from Dundrum¹¹; convict records, court records, and crime statistics¹²; and a range of related official documents¹³ provide the primary material by which to examine these cases from a gender perspective. The medical literature of the nineteenth century also serves to illuminate the gender dimensions of these criminal cases.

A number of striking patterns emerge from in the medical records of criminal lunatics sent to Dundrum for their involvement in murder or manslaughter during the period 1850 to 1900. Among women patients, the majority had killed children; a few had killed other women; and only one had killed a man. The pattern was quite different for men, among whom the majority had killed women; a substantial number had killed men; and a few had been involved in the killing of children.¹⁴ Among the most striking patterns are the high visibility of women who had killed children, and of men who had killed women. The discussion that follows considers the cases of Margaret Rainey, Hannah Sullivan, and Ellen Byrne, all young single women who killed their illegitimate babies; Sarah McAlister and Catherine Wynn, both married women who killed all of their children; Dr. Terence Brodie, James Dinneny, and Patrick Saunders, men who had killed their wives; and Allen Spiller, who killed his wife and children. Mary Rielly, the only woman sent to Dundrum as a criminal lunatic for the killing of a man, also warrants attention. Rielly’s case carries echoes of the superstitious rhetoric that surrounded the well-known murder of Bridget Cleary during the same period.¹⁵

When women killed children, the insanity defense was used frequently to explain this crime. In 1855, the inspectors of lunacy reported, “We have no record of a female killing her husband, the most common mode of destruction among women being infanticide.”¹⁶ Some of these women were married and some were not. Those who were not married were treated neither more or less harshly than their married counterparts. Infanticide—though officially outlawed in Ireland, as in many other countries—was not unusual in the nineteenth century.¹⁷ But in Ireland, though the concealment of a child’s death was regarded as wrong, attitudes to infanticide itself were highly ambivalent—shown by the low rate of reporting of the crime to the authorities.¹⁸

Margaret Rainey, a nineteen-year-old single Episcopalian servant from Belfast, is typical of the younger women who found themselves in Dundrum as “criminal lunatics.” In 1891 Rainey was found “not of sound mind or capable of pleading” in relation to the murder of her illegitimate female child. She had delivered the baby safely, with a doctor present, in lodgings arranged by her sister. This sister, Jane, had also arranged for the baby to be sent to a nurse soon after birth to allow Margaret to take up a position “in service.” Rainey was not happy with this arrangement. She would have preferred to keep the baby at home, but her own mother refused to accept her. On the night of the crime, Rainey had been left alone with the baby for a short period. At around eleven o’clock that night, she alerted a neighbor, saying that her baby had been “stolen by a person or a dog.” Sadly, they found the baby dead in the yard next door. The medical opinion was that the child had died as a result of injuries sustained from a fall, probably from an upstairs window. Rainey denied having

thrown the baby through the window and insisted that her child had been stolen. She was sent to Dundrum, where her initial diagnosis was dementia. This diagnosis changed over time. Two years later she was assessed by a Dr. Revington as “weak-minded rather than insane.” Rainey was discharged in 1894 to her sister Jane, who had supported her throughout her ordeal.¹⁹

Another typical example of a single mother who was discharged home after a short time in Dundrum was Hannah Sullivan, a Catholic seventeen-year-old servant from Cork. She was indicted for the murder of her newborn in 1895. According to the official account of the crime, she killed the baby “by cutting off its head in a loft of her master’s premises at Tralee.” According to the medical records, Sullivan showed no signs of insanity while in Dundrum and was discharged to her mother one year later.²⁰ A less typical example of infanticide was that of Ellen Byrne, a Catholic twenty-eight-year-old single prostitute from Dublin. Byrne had drowned her baby in the canal; the case was covered in the press as “the Goldenbridge infanticide.” She said that she had been refused entry to the South Dublin Union hospital and that she had tried to give the baby away but, when she did not succeed, she left the baby at the side of the canal, in the hope that someone would find it and care for it. Byrne was sent to Dundrum in 1893 and diagnosed as having “puerperal insanity.” Medical notes describe her as “a bloodless emaciated girl, looks like a mere child, is the subject of advanced phthises.” Byrne died at Dundrum a year later, and it is clear from her records that she had no support network.²¹

These young women had given birth to illegitimate babies with obvious negative social consequences. However—though neither the illegitimate pregnancy nor the killing of infants were condoned by the authorities or by society as a whole—the legal system was not highly punitive toward them. The leniency of their treatment can be attributed to the prevailing view of women held by the medical and legal professions of the time, a view evident in the annual reports on Dundrum from the inspectors of lunacy:

Great commiseration is, no doubt, due to many who come within this category; for we can fully imagine how shame and anguish must weigh on an unfortunate and betrayed female, with enfeebled system, what strong temptations induce her to evade the censure of the world in the destruction of the evidence of her guilt, by a crime that outrages her most powerful instinct, maternal love of offspring. The thought of such a fearful exposure no doubt may lead to some sudden and impulsive act, for which, as generally happens, she is judged with the utmost leniency.²²

As Roger Smith argues, this view included notions of “passivity, emotion, and irresponsibility” in relation to women, and can be placed firmly within the context of an extensive nineteenth-century debate on the relationship between insanity and the female reproductive system.²³ One of the most influential Irish physicians writing on “mental disorders of pregnancy and childbed” at this time was Dr. Fleetwood Churchill, who wrote in the *Dublin Quarterly Journal of Medical Science* in 1850. Having made the general point about the delicacy of the inter-relationship between mind and body in men, Churchill went on to elaborate his theory with respect to women:

If this be the case with men, who are possessed naturally of a firm and vigorous constitution—if a very slight deviation from bodily health distorts or upturns their mental operations, how much more exposed must women be to such disturbances, who, in addition to the causes common to both, possess a more delicate organization, more refined sensibilities, more exquisite perceptions, and are, moreover, the subjects of repeated constitutional changes and developments of a magnitude and importance unknown to the other sex.²⁴

Women, therefore, are not only more “delicate” and more “sensitive” than men, but they also have more physical changes to contend with throughout the various stages of their lives. By labeling women more delicate than men, Churchill sets the scene for his next argument, which makes the connection between insanity and physical conditions related to reproduction.

These functions are menstruation, conception and pregnancy, parturition and childbed, and lactation. That functions of such great consequence ... should exert an influence upon the mind of the female, cannot be a matter of surprise, and a little inquiry will show us that the mental condition does correspond to these changes by an increased sensitiveness and by a greater liability to disturbance; and further, that this disturbance may amount to incoherent action or insanity.²⁵

This argument provided the intellectual background for legal and medical decisions made in relation to women involved in crime in the second half of the century. Dr. Churchill goes on to discuss this theory with special reference to “puerperal mania,” drawing evidence from the writings of internationally renowned “alienists” of the time. This concept of puerperal mania was often put forward in infanticide cases, but the link was not made directly in the medical literature until the 1860s. Dr. Henry Maudsley, in an 1863 essay on homicidal insanity in the *Journal of Mental Science*, discussed the association between menstruation, pregnancy, and the homicidal tendency.

Irregularities of menstruation, as recognised causes of nervous disorder, may act on different parts of the nervous system in different persons, in one giving rise to hysterical convulsions or hysterical mania, in another to epilepsy, and in another to suicidal or homicidal impulse. A woman who was in the deepest despair because she was afflicted with the thought of murdering her children ... perfectly recovered on the return of her menses. ... Morbid impulses notably spring up during pregnancy.²⁶

Notably, the hysterical impulse to kill was not proposed in relation to everyone in the woman’s environment. The medical evidence of the time held that mental disorders related to pregnancy and menstruation led only to the destruction of the woman herself or her children. These arguments were not used in the medical literature—nor, indeed, in the courts—to justify the killing of a husband or any other adult male or female.

Not all of the Dundrum women who killed children were suffering from puerperal mania. Some were judged to have a “chronic mania” that simply manifested itself at the time of the crime, a theory expounded by Dr. C. Lockhart Robertson, of the Sussex Lunatic Asylum, in the *Journal of Mental Science*.²⁷ His arguments are reflected in the medical notes of some of the Dundrum women who killed one or more of their children. These women never recovered their sanity and continued to be incarcerated in Dundrum or in another asylum until they died. One of these women was Mary O’Flaherty, a thirty-four-year-old Catholic married woman who had given birth to six children. Five of her children died young from natural causes. When her sixth baby appeared to be delicate also, she drowned it. The baby was just eight months old. O’Flaherty also tried to drown herself, but did not succeed. She was acquitted of manslaughter on the grounds of insanity and was diagnosed as “melancholic” on admission to Dundrum in 1892. O’Flaherty remained there until her death and though her husband came to see her, “she took no pleasure in his visits.”²⁸

Two other women who had killed more than one child were regarded by medical opinion as suffering from chronic conditions. They were Sarah McAlister, a thirty-three-year-old Catholic married woman from Antrim, who poisoned the youngest two of her six children in 1892, and Catherine Wynn, a thirty-five-year-old Catholic married woman from Sligo, who drowned her three children in a bath of boiling water in 1893.²⁹ McAlister denied killing

her children, but admitted that she tried to kill herself because she had learned of her husband's unfaithfulness. According to her medical notes, she continued in her efforts to commit suicide: "we have great trouble getting her to eat food ... she wants to starve herself." Wynn had also tried to kill herself by putting her head into the same bath of boiling water that had been used to drown her children. Neither of these women recovered sufficiently to be discharged from Dundrum, where they eventually died. The lack of detailed evidence about their characters before the crimes leaves it unclear whether their mental illness was the cause or the effect of killing their children.

We know very little about women who were admitted directly to district asylums and did not appear in the convict records. For example, an English barrister, Michael J. F. McCarthy, writing in 1901 on "religious insanity," referred to a Mrs. Sadlier from County Tipperary, who killed her four daughters aged between five months and four-and-a-half years in 1896. She cut their throats with a razor. Mrs. Sadlier was certified as insane at the time and sent to Limerick asylum.³⁰ Like Mary O'Flaherty, Sarah McAlister, and Catherine Wynn, she never recovered mentally from this tragedy.

These women were deemed "mad" rather than "bad" and were, thus, excused of responsibility for this most terrible crime. Aine O'Connor, in her study of folklore surrounding child murder, suggests that for women who killed more than one child, repentance was the key to being accepted by society. If a woman knew that she had done wrong and was sorry for it she could be forgiven; otherwise she left herself open to being ostracized as evil.³¹ The accounts of women sent to Dundrum make clear that it was not quite as simple as that. Many women did not repent of their crimes, as they did not appear to understand the gravity of their actions. However, they were not treated as evil. In fact, many were excused of responsibility on the grounds of insanity and were cared for rather, than punished.

However, while these cases show that some women succeeded in evading execution or penal servitude by being acquitted on the grounds of insanity, other women who killed children did not use this plea. Convict records of the period show that many women were found guilty of the murder of a child and sentenced to execution or penal servitude. Luckily for them, there was no tradition of executing women for child-killing during this period. The records indicate, too, that many were freed before their prison term expired. Some of these women went home to their families and some emigrated directly from prison to the United States or Canada.³² The time these women spent in confinement ranged between three and fifteen years. Roger Smith, in his study of nineteenth-century trials in England, found similar patterns of sentencing for child-killing. For example, between 1849 and 1864 there were thirty-nine convictions for child-murder by a mother, but few women were executed for the crime, the last hanging for infanticide in England being Rebecca Smith in 1849.³³ This was in spite of the fact that that infanticide was a widespread crime, as shown in research by Buglass, who suggests that 61 percent of all homicide victims in England in the mid-nineteenth century were under the age of one year.³⁴

Here, we look at three examples from Ireland. All three were found guilty of child-murder, were sentenced to death by hanging, had their sentences reduced to penal servitude for life, but did not have to complete their sentences. In 1871, Anne Aylward from Kilkenny, aged twenty-eight, was convicted of child murder. She served fifteen years in prison before being discharged directly to Liverpool dock—where she boarded a boat for New York, having been supplied with her ticket and some money by the prison officer who accompanied her to the ship. Later in that decade, in 1879, Mary Russell, aged thirty-four, from Cork, was convicted and sentenced in the same way. She served seven years in prison before being discharged home to her family. Finally, in 1889, Jane McDowell, aged twenty-eight, from

Downpatrick, received the same sentence, but served only two years of her life sentence (reduced from the death penalty) before being discharged home. The common characteristic of these three women seems to be their age; each was regarded as old enough and rational enough to know what they were doing and, therefore, to be fully responsible for their crimes.³⁵

When considering the women who came before the courts for child-killing, it is highly likely that they represented a small proportion of actual killings. Dymna McLoughlin argues that the child deaths that came to the attention of the police were likely to be the violent deaths. Those that occurred as a result of neglect or “overlying” were likely to be covered up by friends and reported as “accidental” by officials.³⁶ This makes it almost impossible to estimate the extent of child-killing during this period.

The majority of the patient population in Dundrum was male, a pattern that continues today in all special hospitals for mentally disordered offenders in the United Kingdom and the United States. A total of 646 men were confined at Dundrum as criminal lunatics between 1850 and 1900, of whom 206 had been convicted of murder, manslaughter, or matricide.³⁷ The experiences of men in Dundrum who successfully pleaded insanity to a charge of murder differ in a number of ways from the experiences of their female counterparts.

Today, men outnumber women in most crime statistics, and this pattern holds true when the crime is related to a mental disorder. A similar pattern operates in relation to homicide, with more men than women convicted for murder and manslaughter. Although male-on-male killing is statistically more common, the number of male-on-female killings is significant.³⁸ This pattern was well established in nineteenth-century Ireland, with most of the male-on-female killings taking place within the family network, with the victims being predominantly wives and daughters. Many of these men successfully pleaded insanity and, by doing so, avoided execution and were often released after relatively short periods of confinement in Dundrum. These cases of Terence Brodie, James Dinenny, and Patrick Saunders—who killed their wives—Allan Spiller, who killed his wife and two children, and Owen Lavelle, who killed his wife and daughter, illustrate the processes at work in the legal system.³⁹

As early as 1855, only five years after its opening, men who killed women were becoming highly visible in the patient population in Dundrum. According to the annual report by the inspectors of lunacy,

The most frequent kind of homicide among the men is wife murder.... This fact, at first sight, might seem to argue less constancy, fidelity and tenderness with the male sex; but there are strong causes to explain away, or, at least, reduce the force of the conclusion; for it is well known, that, occasionally, among the first and most marked symptoms of the disease with lunatics may be reckoned a mistrust and aversion to members of their own family, and to those particularly with whom they had been united by the strongest ties of affection.⁴⁰

This comment reflects the medical argument that the killing of a wife could be symptomatic of a chronic mental disorder. James Dinenny and Patrick Saunders fell into this category. Dinenny was a thirty-year-old Catholic farmer from Cavan who killed his wife in 1850. He had three children, but was never discharged home due to his continued chronic dementia. Patrick Saunders was a thirty-seven-year-old Catholic tinsmith from Limerick who had eight children. He also killed his wife in 1872, and was never discharged due to his recurrent mania. Both men died in Dundrum. The medical notes on these men are scant, making it difficult to build up a picture of their crime or their mental state. There is a little more information on another man whose crime was attributed to a chronic mental disorder. Owen

Lavelle, a forty-year-old Catholic publican from Achill Island, County Mayo, slit the throats of his wife and six-year-old daughter as they lay asleep. Newspaper clippings in his medical file, though unidentified by source, make clear that Lavelle was highly respected in his local area, having been prominent in public life as a member of the County Council of Achill and the Westport Board of Guardians. Though he appeared sane on admission and blamed the action on the fact that he was drunk, he began to “suffer recurrent bouts of mania or melancholia.” This deterioration in his mental state, along with the fact that his mother and aunt had spent time in asylums, confirmed the medical opinion that “he was insane at the time of the murder.” Lavelle was eventually transferred to Castlebar Asylum in 1910, where he probably died.⁴¹

Others, whose exclusion from society was temporary, were luckier. These were men whose crime was linked to a “transitory frenzy” usually caused by the consumption of alcohol. The medical literature often links the impulse to kill or to commit a violent act to alcohol consumption and related delusions. Dr. Yellowlees of Glasgow Royal Asylum wrote in relation to a murder in Scotland that “Hallucinations or delusions leading to dangerous violence are of course frequent in the insanity of intemperance. Transient delusions of a like kind may follow even a single carouse.”⁴² In the Dundrum records of some of the men who had killed their wives, the doctors were not always sure what these delusions represented: a chronic condition, a “transitory frenzy,” or a trick to convince the authorities of insanity? A good example of such a case is that of Dr. Terence Brodie, who was the dispensary doctor in Spiddal, County Galway. Dr Brodie shot his wealthy wife in July, 1886, without any obvious provocation. His explanation of his actions included descriptions of delusions in which he alleged that people were trying to kill him. His legal defense also produced some evidence that he had consumed a significant amount of alcohol in the days prior to the crime. Coleman Naughton, who worked for Brodie, witnessed the delusions and the alcoholic state:

I remember about six o'clock that morning seeing Dr. Brodie sitting on the kitchen table.... He told me to go out in the yard and call in Danny McIntyre and Dan Lydon. I told him they were not in the yard at all—I knew they were not in the yard. He told me to go out again—saying don't you see them coming in the kitchen.... He was drinking heavy up to Thursday night before this.⁴³

This evidence shows a medically trained man saying all the right things to ensure that he is seen as deluded. Other evidence presented in court pointed to a cold-blooded act. A domestic servant, Bridget McDonough, made a damning statement that suggested that the crime was a deliberate act:

I heard him on more than one occasion telling his wife that he would get rid of her. I recalled last Sunday fortnight—she had to hide herself from him on that day from his violence—I saw him chucking her about the yard on that day by the arms—I heard him say I would tramp on you. I saw him violent to her frequently before that, she had the leave the house in January or February last to escape from his violence and I accompanied her.⁴⁴

In cross-examination, the lawyer acting on behalf of Brodie encouraged Bridget to indicate that alcohol was the reason for his violent behavior, which she did: “I never saw any dispute or violence except when he was in liquor. He was very drunk on the Sunday fortnight I have mentioned.” The court accepted the link between delusions, alcohol consumption, and the shooting, as a result of which Brodie was acquitted of murder on the grounds of insanity and sent to Dundrum in 1886. While in Dundrum, he never showed any signs of insanity and was treated well. In a decision supported by his brothers and the medical staff but opposed by his dead wife's sisters, Brodie was released in 1892. He emigrated immediately to South Africa with full legal rights to his dead wife's large estate.⁴⁵

In such cases as this—where there was no evidence of a pre-existing mental disorder—it seemed relatively easy for a man to be exempted from responsibility for killing a woman on the grounds of temporary insanity due to alcohol consumption. Once on Dundrum, those who were educated, wealthy, and socially adept were most successful in achieving a short sentence. Another good example of a man who managed the system to his advantage, with the help of a good education and an air of respectability, was Allan Spiller. A Presbyterian salesman from Belfast, Spiller murdered his wife and two children by cutting their throats with a razor in 1892. According to his medical record.

the anxiety of trying to support his family ... family troubles between his wife's people and himself, want of sleep and sufficient nourishment, all these worries in a delicate constitution ... caused an attack of homicidal melancholia.⁴⁶

Spiller was deemed insane at the time of the crime and at the time of his trial. He improved dramatically after admission to Dundrum. In 1889, seven years after the murder of his entire family, Spiller was discharged to relatives. He was described in medical notes as “a pleasant, fairly well educated man, possessed with a certain amount of ability and far superior to the penal class of asylum patients.” Other men, already mentioned, continued to show signs of insanity and remained in Dundrum or other asylums until they died. As with the women who killed children, for whom the crime was seen to be a manifestation of a chronic mental disorder, it is difficult in retrospect to assess whether or not their mental disorder came before or after the crime.

The relative ease with which men who killed female relatives were acquitted of murder on the grounds of insanity is confirmed by Carolyn Conley, whose study of crimes reported to the Royal Irish Constabulary during the period 1866–1892 found that homicide involving a family member had the highest chance of a criminal lunacy conviction, when compared to other homicides. Of the 175 people convicted for killing a family member, 17 percent were declared insane.⁴⁷ However, this statistic includes child victims and it does not shed light on another significant group: women who killed men, for whom the legal arguments used to excuse child-killing and wife-killing were not successful. As Dundrum housed only a small proportion of criminals in Ireland, evidence of women who killed men in the second half of the nineteenth century must also be sought in convict records and police statistics. At least twenty women did so during the period 1850 to 1900. Some killed husbands, some brothers, and some neighbors. In the eleven cases examined for this study, women were sentenced to execution or to penal servitude for substantial periods of time. In only one case was the insanity defense used successfully, in the case of Mary Rielly, a nurse from Galway, who had killed a man in her care.

Three of these women were executed. In County Clare in 1853, Honora Stackpoole, her husband's brother Richard, and his wife Bridget were hanged for the murder of Richard's brother James in a dispute over land. Likewise, Margaret Sheil and her brother Lawrence, from King's County, were hanged in 1870 for shooting Patrick Dunne, a neighbor with whom they were in dispute over a right of way to a bog.⁴⁸ Three other women were found guilty of murder—Elizabeth Buchanan, Mary Brophy and Catherine Delaney—all of whom were sentenced to execution, but had their sentences reduced to penal servitude for life. Two of the women, Buchanan and Delaney, had killed their husbands; Brophy had killed her brother. The crimes of Buchanan and of Brophy could be described as “impulse killings” similar to those in which men killed their wives and pleaded insanity. However, the insanity defense was not used.

In 1881, Elizabeth Buchanan from Londonderry, aged around forty, shot her eighty-two-year-old husband (who was an army pensioner) during a dispute. She had claimed that it was

a case of suicide but the evidence against her was convincing, and she was convicted of murder.

It was proved that death had been caused by blows from some sharp instrument. A lead pellet was found, which appeared to have been fired at the neck of the deceased after death.⁴⁹

The jury “recommended her to mercy” and Buchanan’s death sentence was commuted to penal servitude for life because of her “low level of intelligence.” After spending more than ten years in prison, she was discharged “on arrangements being made for her emigration.”⁵⁰ In 1886, Mary Brophy, a twenty-three-year-old single Catholic housekeeper from Cork, was convicted of the murder of her laborer brother, Timothy, with whom she was “constantly in the habit of quarrelling.” He “died from the effects of injuries to the neck and face inflicted apparently with a knife.” Mary also had her death sentence commuted to penal servitude for life and, after spending nine years in prison, she was discharged directly to a hospital in Dublin for the treatment of her consumption.⁵¹ The crime of the third woman was not an impulse killing. Catherine Delaney, a forty-six-year-old Catholic married woman from Tipperary who had four children, was convicted of poisoning her husband in 1884. A contemporary report noted that “Michael Delaney, farmer and builder, aged 53 years, died from the effects of arsenical poison administered to him by his wife, Catherine Delaney, who it is alleged wished to get rid of him, as she was anxious to marry some one else.”⁵² Delaney remained in Mountjoy female prison for fourteen years, in spite of numerous letters and memorials from her children in the United States requesting her release. She was finally discharged to County Tipperary, after being refused entry to Boston by the American immigration authorities.⁵³

In addition to the women sentenced to death, four others were sentenced to long periods of penal servitude for killing men, two of whom were husbands. In one case, that of Mary Lavelle, it was clear that the husband had been a perpetrator of domestic violence and that the killing had happened in the middle of a family fight. Lavelle was a forty-four-year-old Catholic housekeeper from Mayo, who, together with her son Thomas and her daughter Catherine, was found guilty of the manslaughter of her husband in 1881. According to the police report:

It is supposed the injuries were inflicted by a spade and stable fork. Lavelle and his wife had been on very bad terms. On 31st March previously, she complained to the police that her husband had been continually beating her, and that she was in dread of her life. She was then advised to swear an information against him, which she said she would do.⁵⁴

In the court, none of this information diminished her responsibility for the crime, probably because the family had tried to hide the nature of the death. Mary was sentenced to penal servitude for life, and her son Thomas and daughter Catherine to ten years each. Thomas and Catherine completed seven years and their mother eleven years in prison. On their release, all three emigrated from Ireland to the United States immediately. Mary Lavelle’s ticket was paid for by her son.⁵⁵

The circumstances surrounding the killing of these men by women were varied. In some cases, there had been an obvious dispute leading to a fight and in some there was known domestic violence. In most of these situations, the plea of temporary insanity or “transitory frenzy” leading to violence, could have been used. However, there is no evidence of the insanity defense being put forward in these cases. These women were considered rational and, therefore, responsible for their actions. It seems that it was easier for society to see them as “bad,” rather than “mad,” when they committed the ultimate crime of not only questioning the authority of the male—be he husband, brother, or neighbor—but of

destroying him. Clarice Feinman's feminist analysis of contemporary crime argues that patriarchal societies tend to categorize women as either good or bad. The good woman fits the traditional role and supports her husband and the other male members of the family. For this she is respected both within the household and in society at large. The bad woman, on the other hand "destroys man and brings pain and ruin"—and for this, she has to be controlled within the family and punished by society if she steps out of line.⁵⁶

An exception to the punitive approach to women who killed men in nineteenth-century Ireland appears to be the case of Mary Reilly, a widowed thirty-year-old nurse from County Galway, who was arrested in 1887 for the murder of a sick man in her care.⁵⁷ Though witness statements indicated that Reilly may have thought she was casting out a devil, the legal defense used the arguments on the link between alcohol consumption and "transitory frenzy." Reilly was accused of throwing her victim on the fire as he lay ill. There were different versions of the story, with Mary claiming later that it had been an accident. The Galway papers reported the killing under the headline "Roasting a man alive," and the *Tuam Herald* gave an interpretation of events influenced by local folklore:

In the case where a woman who was tending a man named Dillon, sick with typhus fever, and who burned him in the insane delusion that thereby she expelled the devil and restored his life, the jury found a verdict of manslaughter.⁵⁸

The legal team for Reilly ignored the superstitious overtones of the case and concentrated on "transitory frenzy." The plea was successful; Mary was found "guilty of manslaughter at a time when insane." She recovered her sanity quickly and was discharged after four years of confinement. Like others before her, Mary emigrated directly from Dundrum to the United States, to be with her children. Throughout her trial and detention, she was regarded as a "good" and "intelligent" woman who was not responsible for her actions. The case was tragic but the verdict was not controversial—unlike the celebrated case of Bridget Cleary seven years later, which was characterized by similar rhetoric of using the fire to get rid of a devil or changeling. In the Cleary case, the insanity plea was not used, leading to a different outcome: Bridget's husband and other members of the family were held responsible for their actions and sentenced to prison.⁵⁹ It is not clear why Mary Reilly's legal team used the "transitory frenzy" argument, common in trials of men, as the basis of the insanity defense, but perhaps it was because the case of Dr. Terence Brodie had been heard in the same court, Galway Assizes, just one year earlier. Whatever the reason, it provided a lucky break for Reilly, who might otherwise have been sentenced to death or penal servitude.

Many issues are raised by a gender analysis of official records of criminal lunatics involved in murder in the second half of the nineteenth century in Ireland. The main conclusion to be drawn is that the use of the insanity defense was highly gendered. For women, this defense was most successfully used in cases where they had killed their own children. For men, the insanity defense was most successfully used in cases where they had killed female family members. Women who killed men were likely to be convicted of murder or manslaughter and to be sentenced to execution or penal servitude for life. They were unlikely to be excused of responsibility on the grounds of insanity. In only one case, that of Mary Reilly, was a woman sent to Dundrum as a criminal lunatic.

Some individuals were accepted back into Irish society after being confined in a prison or a criminal lunatic asylum. It is also clear that many made their way, assisted by the state, to America, the land of opportunity. The need for further research is clear. Many unanswered questions remain about the criminal justice system in Ireland that supported this highly gendered approach to the insanity defense. Many questions also remain about the lives of those men and women who left Ireland after spending time as criminal lunatics. Did they go on to live normal lives, or did they resurface in the prison or asylum statistics in their

country of adoption? Having been isolated by Irish society, did they reject this identity and become absorbed quickly into the new culture? These questions can only be answered by future research on the Irish in America—particularly research into the lives of those who sought to forget their past, a past marred by crime and mental disorder.

References

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2. See: Joan Busfield, *Men, Women and Madness: Understanding Gender and Mental Disorder* (London: Macmillan, 1996); Elaine Showalter, *The Female Malady: Women, Madness and English Culture 1830–1980* (London: Virago Press, 1987).
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4. See: Mark Finnane, *Insanity and the Insane in Post-Famine Ireland* (London: Croom Helm, 1981); Arthur Williamson, “The Beginnings of State Care for the Mentally Ill in Ireland,” in *Economic and Social Review*, 10, 1 (January 1970), 280–91.
5. Report of the Commissioners of Inquiry into the state of Lunatic Asylums ... in Ireland, H.C. 1857–58 (2436), xxvii, 1; W. E. Vaughan and A. J. Fitzpatrick, *Irish Historical Statistics: Population, 1821–1971* (Dublin: Royal Irish Academy, 1978), p. 3.
6. See Carolyn Conley, *Melancholy Accidents* (Lanham MD: Lexington Books, 1999); Elizabeth Malcolm, “Investigating the ‘Machinery of Murder’: Irish Detectives and Agrarian outrages, 1847–70,” *New Hibernia Review*, 6, 3 (Autumn 2002), 73–91; Vaughan, p. 764.
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8. Pauline M. Prior, “Prisoner or Patient? The Official Debate on the Criminal Lunatic in Nineteenth-century Ireland,” *History of Psychiatry*. 2004; 15:177–92. [PubMed: 15272476]
9. For a full account of relevant laws, see 2nd Report of the Inspectors of Lunacy on the District, Criminal and Private Asylums in Ireland, p. 362, H.C. 1847 (820), pp. xvii, 355.
10. For the history of Dundrum, see Pauline M. Prior, “Mad, Not Bad: Crime, Mental Disorder and Gender in Nineteenth-century Ireland,” pp. 66–82 in *Criminal Justice History: Themes and Controversies from Pre-independence Ireland*, ed. I. O’Donnell and F. McAuley (Dublin: Four Courts Press, 2003), pp. 66–82.
11. Documents held at the Central Mental Hospital for Ireland, Dundrum, Dublin consulted included: Register of Inmates 1850–1900; Register of Admissions, Discharges and Deaths 1850–93 and 1893–1920s; Male and Female Casebooks 1893–1920s; Physician’s Book 1872–1920.
12. National Archives of Ireland, Dublin (NAI): Convict Record Files (CRF); Chief Secretary’s Office Registered Papers (CSORP); Penal Servitude Files (PEN); Assizes records (IC).
13. These are mainly reports of the inspectors of lunacy in Ireland, published as British Parliamentary Papers. All of the papers referred to here are House of Commons papers and are designated as H.C.
14. Dundrum records of 1850 to 1900 indicate that 55 women had been convicted of murder or manslaughter, of whom 47 had killed children (seven under the age of one), seven had killed women, and one had killed a man. The records are less clear in relation to men. A total of 206 men were convicted of murder or manslaughter, including 3 for matricide, with a suggestion from the annual reports that the majority of victims were women. These statistics remain to be verified from other sources.

15. See Angela Bourke, *The Burning of Bridget Cleary* (London: Pimlico Press, 1999; New York: Penguin, 1999).
16. Seventh Report of the Inspectors of Lunacy on the District, Criminal and Private Asylums in Ireland, p. 155, H.C. 1854–55 (1981), xvi, 137.
17. Robert Buglass, “Infanticide and Filicide,” in *Principles and Practice of Forensic Psychiatry*, ed. R. Buglass and P. Bowden (Edinburgh: Churchill Livingstone, 1990).
18. See: Dympna McLoughlin, “Infanticide in Nineteenth-Century Ireland,” in *Field Day Anthology of Irish Writing*, Vol. 4: *Irish Women’s Writing and Traditions*, ed. Angela Bourke et al. (Cork: Cork University Press, 2002), pp 915–22; Aine O’Connor, *Child Murderess and Dead Child Traditions: A Comparative Study* (Helsinki, Academia Scientiarum Fennica, 1991).
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26. See Maudsley, Henry. “Homicidal Insanity,” *Journal of Mental Science*, ix. Oct.1863 47:327–43.
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28. Dundrum, Female Casebook, M. O’Flaherty, 1892, no. F853, p. 77. (No place of origin given).
29. Dundrum, Female Casebook, S. McAlister, 1892, no. F861, p. 81; C. Wynn, 1893, no. F868, p. 85.
30. Michael J. F. McCarthy, *Five Years in Ireland 1895–1900* (Dublin: Hodges, Figgis and Company, 1903), pp. 189–94.
31. O’Connor, p. 103.
32. Like other ex-prisoners during this period, they were delivered directly to the docks, usually Liverpool, and given a sailing ticket (which had been bought by the prison authorities) for a specific boat, as well as the money they had earned during their time in prison. For example, see: NAI, PEN, 1886/105 (Aylward) and NAI, PEN, 1886/239 (Pritchard).
33. Smith, p. 147.
34. Buglass, p. 524.
35. NAI, PEN, 1886/105 (Aylward); NAI, PEN, 1886/145 (Russell); NAI, PEN, 1891/20 (McDowell).
36. McLoughlin, pp. 917–19.
37. Prior, “Mad, Not Bad,” pp. 69, 75.
38. See Merlo and Pollock, chapter 11.
39. Dundrum, Male Casebook, J. Dinneny, 1850, no. M62, p. 1; P. Saunders, 1872, no. M427, p. 45; A. Spiller, 1892, no. M851, p. 25; O. Lavelle, 1901, no. M1180, p. 81; NAI, CRF, 1897/Misc. 1420 (Brodie).
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47. Conley, p. 4.
48. NAI, CSORP, 1853/2421 (Stackpoole); NAI, CRF, 1870/S.7 (Sheil).
49. NAI, CRF, 1881/B.41 (Buchanan).
50. Extra information contained in documents summarizing cases in which women had been sentenced to death, in the file on Mary Daly, NAI, CRF, 1902/D.76 (Daly).
51. Return of Outrages Reported to the Constabulary Office in Ireland during the year 1886, p.11, in NAI, CSO, ICR 2; see also NAI, PEN, 1895/76 (Brophy).
52. Return of Outrages ... during the year 1884, p. 11, in NAI, CSO, ICR 2.
53. NAI, PEN, 1898/121 (Delaney). All of her children had postal addresses in Providence, Rhode Island. This was the only case that I came across in which entry to the United States was refused.
54. Return of Outrages ... during the year 1881, p. 10, in NAI, CSORP, ICR2.
55. Lavelle's discharge plan was typical of many other convicts. She was discharged on 1 November 14, 1892, to Liverpool Docks, and sailed two days later to the United States, having been given an advance of her gratuity of £2.5.7 to buy clothing. The money was released by the Prisons Board to a "Mr Doody, that he may forward it to the agent in Liverpool to be handed to prisoner on her arrival in America." This information was in a letter from the superintendent of Grange Gorman to the General Prisons Board dated 14.11.1892, in NAI, PEN, 1892/118 (Lavelle).
56. Feinman, p. 4.
57. NAI, CRF, 1891/R.7 (Rielly). The case was discussed by Pauline M. Prior in "Roasting a Man Alive: The Case of Mary Rielly, Criminal Lunatic," paper presented at 42d annual meeting of the American Conference for Irish Studies, Liverpool, June 2004.
58. Tuam Herald, 23 July 1887, p. 3.
59. See Bourke, chapter 10.