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Book Review of Michelle Oberman's and Cheryl L. Meyer's "When Mothers Kill: Interviews from Prison"

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Book section: ESSAYS AND REVIEWS

When Mothers Kill: Interviews from Prison, by Michelle Oberman & Cheryl L. Meyer (New York, NY: NYU Press, 2008), 208 pp., \$23.56.

REVIEWED BY
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As I was preparing to write this review, I came across an article in the *Washington Post* that was headlined, “Study Links Poverty to Depression Among Mothers.”¹ When I asked my assistant to print it out, he responded dryly, “Poverty is related to depression in mothers? Imagine my surprise!” He was being sarcastic, of course. He wasn’t surprised. Nor was I. Nor would any sentient person who takes seriously any of the social policy issues we face on a daily basis. But, I still thought this exchange was worth noting as a preface to my writing a review of Michelle Oberman and Cheryl Meyer’s magnificent and heart wrenching book, *When Mothers Kill*.²

I had read the authors’ earlier book, *Mothers Who Kill Their Children*, and thought it was the single best I had ever read on the subject. When I turned my own scholarly attention to one subset of this cohort—cases involving neonaticide³—I relied heavily on Oberman’s article, “Mothers Who Kill: Coming to Terms with Modern American Infanticide.”⁴ But the authors have outdone themselves in this effort. It is a remarkable work of legal ethnography that shows us—in the words of the interviewees, all prisoners in Ohio correctional facilities who pled guilty or were convicted of charges involving the deaths of their children—the total and abject and miserable failure of our social, legal, administrative, bureaucratic, and judicial systems. Oberman and Meyer conducted forty lengthy interviews with women in prison who had been convicted of killing their children, and then spoke to eight of those forty at much greater length. Their final product is staggering.

Certain themes resonate throughout this book—themes of violence, hopelessness, despair and isolation (physical, emotional and social)—that sketch the life stories of each and every one of the interviewees. After a while, the reader is almost numbed by the matter-of-fact-that’s-just-the-way-it-is recounting of the incessant and unremitting physical, sexual, and emotional brutalization that all of the interviewees suffered as children, and that they assume is standard operating procedure in all American households.⁵ The reader also quickly gets the sadder-than-sad fact that, had there been one single, positive, affirming factor anywhere in these women’s childhoods, the tragedies that form the core of this book might never have occurred.

As I started to underline examples in the text, that fact exploded in my mind. After four or so stories, I gave up. There were minor variations, but the themes were, by and large, the same. “Nancy”⁶ was verbally and physically abused by her parents, and sexually molested until she was 10 by a male relative. Laurie became pregnant as a freshman in high school, and was abused by the father of her child (later children). Nadine’s father began sexually abusing her when she entered puberty. Celia’s uncle sexually abused her starting from the time she was 8; her father beat her so badly (apparently when she was a teenager) that she was hospitalized for 2 months. And on and on.

The vulnerability of the women Oberman and Meyer have interviewed screams out at the reader (though that is usually not a word associated with persons convicted of homicide). The authors refer to the “interconnected sensibilities” of the women’s “undying desire to please their mothers *and* also a keen awareness of how vulnerable their mothers made them feel” (p. 24, emphasis added). That vulnerability is the underpinning, I believe, of the tragedies that played out in each of their lives.

Along with this, almost all of the women described themselves as pariahs in their own families (though, of course, they

were the victims of unspeakable abuses beginning at unspeakably early ages). They, the outcasts, are “blamed for disrupting the family” (p. 27), and it is this blame that helped trigger the feelings of worthlessness that led to the downward spirals that resulted in the deaths of their children. But interestingly, and perhaps remarkably, the women mostly speak fondly about their own mothers (even the ones who were persistently emotionally and physically abusive towards them): “I know it’s sick,” said one describing her feelings for her abusive mother, “but she’s the world to me” (p. 46).

The interviewees were not only abused by their parents and by surrogate parental figures, but by the fathers of their children. Sixteen of the 17 who discussed the men in their lives told Oberman and Meyer that they were hit, beaten and intimidated by their male partners (p. 51), though, in many cases, this abuse “was mentioned in passing, as scarcely worth noting” (p. 55). They were also isolated from family and friends, but experienced this isolation as “normal” (p. 59). Oberman and Meyer conclude, ruefully, “In the minds of these women, a loving abuse-free relationship was not a realistic dream” (p. 65).

There is an extended (and fascinating) discussion of how these women experienced pregnancy and the early months of motherhood. Again, their isolation is underscored (many losing their homes in the immediate aftermath of giving birth), along with “the emotional chaos of feeling unsafe” (p. 73). Perhaps in part because Child Protective Services was always symbolically hovering as a potential enemy to take away their children, the mothers often regarded their children as their “property”; that they “owned their children” (p. 79), an attitude that led to antisocial ways of demonstrating their love (Vanessa: “I wanted to make sure [my daughters] were the prettiest ones around. So I sold dope because I wanted them to have extra. So that everyone wanted to be their friends” [p. 80]. Is there any other word other than heartbreaking to describe all this?

Should it be a surprise that for many of these mothers incarceration was a positive experience, often leading them on a “personal spiritual journey” (p. 85)? Many found their relationship with the prison psychiatrist or psychologist liberating (because they were, probably for the first time in their lives, given “the safety of space” [p. 92]), and others “found” religion as “a mechanism for permitting one to conceive of oneself as being worthy of love” (p. 94). The positiveness of this experience is especially noteworthy in light of the fact that, since childhood, this cohort had seen “the State” as serving primarily a custodial function, viewing it as “menacing, rather than protective” (p. 104). Their relationship with the health care system—in virtually all cases, the public health care system—revealed a “sense of powerlessness at the hands of others” (p. 111).⁷ Often this led to another destructive cycle: Fear of the health care system led the mothers to avoid getting needed health care for their children, which led to the filing of child neglect charges (p. 114). So the cycles continued unabated.

Their relationships with the law were no better. “The law” was viewed as a “singular, uniform, and typically corrupt entity” (p. 124). In their trials, they felt (perhaps totally accurately) that their “stories did not get told” (p. 127), a situation that did nothing but emphasize their feelings of “profound isolation and hopelessness.”

In their final chapter, the authors concluded that the abject lack of social support sapped any resilience the mothers might have otherwise had, that—at the core—these mothers were not so different from the authors (who had the opportunity, of course, to live very different lives), and speculated, interestingly, that perhaps we choose to incarcerate these women “because they remind us of the flaws we possess, both as individuals and as a whole” (pp. 130-36). The mothers’ lack of access to “nonjudgmental resources” the authors conclude, was the most significant “roadblock to preventing filicide” (p. 139).

When I wrote about this topic some seven years ago, I offered some suggestions made by other scholars. Jennie Lusk, for example, made these recommendations: to “further investigate the medical origins of neonaticide,” to “encourage neonaticidal mothers to share their birth, dating, and labor experiences in sex education programs,” to “use social science studies to aid in identifying a population at risk for committing neonaticide,” to “consider the societal implications of our impulse to shun neonaticidal mother[s],” and to “reform crime policy for neonaticidal mothers.”⁸ Although I think these are all excellent suggestions, would these reforms have saved the lives of the children at question? I don’t think so.

Lita Schwartz and Nancy Isser have considered neonaticide from the perspective of therapeutic jurisprudence (TJ).⁹ They conclude that TJ should lead trial courts to consider “alternatives to imprisonment,” and legislators “to enact laws that would encourage the judiciary to examine mitigating circumstances and to exercise thoughtful judgment.”¹⁰ Again, these proposals are sound ones, but again, would likely not have avoided the tragedies on which this book is focused.

But I do think that other TJ perspectives might be valuable. One of the central principles of therapeutic jurisprudence is a commitment to dignity.¹¹ Prof. Amy Ronner describes the “three Vs”: voice, validation and voluntariness,¹² arguing:

What “the three Vs” commend is pretty basic: litigants must have a sense of voice or a chance to tell their story to a decision maker. If that litigant feels that the tribunal has genuinely listened to, heard, and taken seriously the litigant’s story, the litigant feels a sense of validation. When litigants emerge from a legal proceeding with a sense of voice and validation, they are more at peace with the outcome. Voice and validation create a sense of voluntary participation, one in which the litigant experiences the proceeding as less coercive. Specifically, the feeling on the part of litigants that they voluntarily partook in the very process that engendered the end result or the very judicial pronouncement that affects their own lives can initiate healing and bring about improved behavior in the future. In general, human beings prosper when they feel that they

are making, or at least participating in, their own decisions. (2002, pp. 94-95; see generally, Ronner, 2010).¹³

The women about whom Oberman and Meyer write have never had a voice. They have rarely acted voluntarily. They have never been validated. If those with whom they had come into contact in the justice system and the health care system had given them that sense of voice and voluntariness and validation, then, perhaps, the tragedy that befell them and their children might have been avoided.

We are all in debt to Oberman and Meyer for their work on this most difficult of projects.

Notes

1. Washington Post, Aug. 26, 2010 (online version).
2. New York University Press, 2008.
3. “*She Breaks Just Like a Little Girl*”: *Neonaticide, the Insanity Defense, and the Irrelevance of “Ordinary Common Sense,”* 10 WM. & MARY J. WOMEN & L. 1, 25 (2003)
4. 34 AM. CRIM. L. REV. 1, 42 (1996).
5. Reading this reminded me of one of those life-changing events that sometimes happen to litigators. When I was a rookie Public Defender, I was representing a juvenile charged with manslaughter, the killing having taken place on a football field. I asked my client what happened, and the ensuing dialogue went something like this (it was 40 years ago, but I have recounted it many times since):

ME: So what happened?

HIM: Well, we were playing football, and I was the running back, and was trying to turn upfield, when the other guy pushed me out of bounds and then gave me an extra lick after the play was called by the ref. So I shot him.

ME: Wait . . . You brought a *handgun* to a football game?

HIM: Sure. Doesn’t everyone?

Compare to this story Nadine’s comments to the interviewer, “I thought it was normal to get my ass kicked by my father.” (p. 57).
6. The authors carefully chose bland, non-ethnic names for the cohort of interviewees.

7. One of the women became pregnant when a friend of the family raped her. She neither sought medical treatment nor notified the police because she was “terrified” of the likely ensuing consequences. She feared (and perhaps this was an entirely reasonable fear) that, if she revealed what had happened, the health care system would have notified her parents and they would have kicked her out of her home (p. 112).
8. Perlin, *supra* note 3, at 29-30, quoting Jennie Lusk, *Modern New Mexican Neonaticide: Tranquilizing with this Jewel/The Torments of Confusion*, 11 TEX. J. WOMEN & L. 93, 126-28 (2002).
9. Therapeutic jurisprudence presents a new model by which we can assess the ultimate impact of case law and legislation that affects mentally disabled individuals, studying the role of the law as a therapeutic agent, recognizing that substantive rules, legal procedures and lawyers’ roles may have either therapeutic or anti-therapeutic consequences, and questioning whether such rules, procedures, and roles can or should be reshaped so as to enhance their therapeutic potential, while not subordinating due process principles. See, e.g., Michael L. Perlin, “*For the Misdemeanor Outlaw*”: *The Impact of the ADA on the Institutionalization of Criminal Defendants with Mental Disabilities*, 52 ALA. L. REV. 193, 228 (2000)
10. Perlin, *supra* note 3, at 30, quoting LITA LINZER SCHWARTZ & NATALIE K. ISSER, *ENDANGERED CHILDREN: NEONATICIDE, INFANTICIDE, AND FILICIDE* (2000).
11. Bruce Winick Foreword: *Therapeutic Jurisprudence Perspectives On Dealing With Victims Of Crime*, 33 NOVA L. REV. 535 (2009).
12. Amy Ronner, *The Learned-Helpless Lawyer: Clinical Legal Education and Therapeutic Jurisprudence As Antidotes To Bartleby Syndrome*, 24 TOURO L. REV. 601, 627 (2008).
13. Amy Ronner, *Songs of Validation, Voice, and Voluntary Participation: Therapeutic Jurisprudence, Miranda And Juveniles*. 71 U. CIN. L. REV. 89, 94-95 (2002); see also, AMY RONNER, *LAW, LITERATURE AND THERAPEUTIC JURISPRUDENCE* (2010).

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