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Murderous Motherhood: Munchausen Syndrome by Proxy in 1990s Crime Fiction

In her 1994 novel *The Body Farm*, Patricia Cornwell presented her readers with a new kind of villain: a “murderous maternal creature” who poisoned her own daughter in a bid for sympathy and attention (354). Cornwell’s characterisation of this evil mother must be understood in the context of the 1990s, when public interest in a previously obscure form of child abuse was growing: “Munchausen Syndrome by Proxy” (MSbP), in which carers—usually mothers—fabricated or induced illness in children. John Money and June Werlwas coined the term in the *Journal of the American Academy of Psychiatry and the Law* in 1976, but it was British paediatrician Roy Meadow who more famously discussed and elaborated on MSbP as a syndrome in *The Lancet* in 1977 (Money and Werlwas; Meadow). Anglo-American medical circles discussed this new syndrome extensively in the 1980s, with a range of interest groups attempting to redefine MSbP as Munchausen by Proxy; Pediatric Condition Falsification; Munchausen by Proxy Syndrome; Factitious Disorder by Proxy; Fabricated or Induced Illness by Carers; and Polle’s Syndrome (Lasher and Sheridan xiii). The apparently unfathomable nature of the crime and a wave of high-profile court cases drove popular interest in the syndrome. The “murderous maternal creature” soon became a trope of Anglo-American media, popular literature, and television.

Written and televisual crime fiction of the early 1990s provide insights into a crucial moment in time when MSbP emerged in full force as a subject of popular anxiety and as a phenomenon within popular culture. Jonathan Kellerman’s *Devil’s Waltz* (1993) was the first high-profile crime book to use MSbP as a plot device, followed soon after by Cornwell’s *The Body Farm* (1994) and an episode of the US television show *Law & Order* entitled “Precious” (1994). MSbP storylines soon moved away from their origins in crime fiction, for

example in *The X-Files* (s2e21, 1995) and *The Sixth Sense* (1999), but this flurry of activity in 1993-94 provides an invaluable snapshot of MSbP's emergence as a trope of popular culture. Through their use of common conventions of crime fiction—clues, plot twists, and explanations of the crime—these three texts had an important role in reflecting and consolidating popular models of MSbP. Crime fiction echoed media reports of criminal trials and reinforced their particular model of MSbP, sharpening some of its features (such as its relationship to Sudden Infant Death Syndrome) while blurring others (for example allowing mothers to be simultaneously 'mad' and 'bad'). This model differed from the more complex discussions about MSbP found in medical and social services professions, where there was still debate about its features and whether it was a form of child abuse or a psychological condition.

Despite its importance – tying together popular culture studies and the historiographies of crime, child abuse and psychiatry – MSbP has received little academic attention. Publications on MSbP, in particular, are almost entirely absent from cultural history; indeed, they are largely absent from historical studies in general. Most scholarly works that address MSbP treat its recent history as context or as part of a longer story, with the focus often on current-day issues, rather than taking this history as worthy of attention in its own right.¹ Although extensive scholarship already exists on crime fiction as a genre, both literary and visual, MSbP merit further attention. The MSbP narratives produced by Cornwell, Kellerman and *Law & Order* illustrate the ways in which crime fiction has shaped public knowledge about an emerging controversial and complex contemporary issue. They also show how genre conventions can be unpicked in order better to understand the communicative, or interpretative, functions of popular fiction. These conclusions have much wider implications, in showing how popular culture can play an important role in reinforcing

certain cultural models of a complex issue (here, the courts and the media) and diminishing the significance of others (here, medicine).

Crime Fiction and the Courts: Culture

MSbP entered popular culture—and particularly crime fiction—more rapidly than Munchausen Syndrome (first described in 1951), in which people induced or fabricated their own symptoms. It may seem surprising that fabricated self-illness never had a reciprocal effect on crime fiction, or at least not to the degree of its “by proxy” equivalent. Simon Wessely notes a long tradition of linking other forms of fabricated illness to the detection of crime; when seeking to identify “malingerers,” he explains, First World War doctors “had a repertoire of clinical tricks, signs, and traps, listed in the texts of this period. The doctor had indeed become detective, and in their writings many made conscious analogies to the new literature of detective fiction” (Wessely 34; see also Bourke).

There are two potential explanations for the particular cultural interest in MSbP. The first is the general perceived incomprehensibility of MSbP, as a form of physical and psychological harm that mothers and other women often inflicted upon children. The influence of this particular concern appears in the general focus of courts, media, and popular culture alike on the perpetrators—rather than on their victims—and on their motivations for such apparently unnatural behaviour. The rise of MSbP in popular culture also echoes the older focus of sensational fiction on the subject of infanticide; the apparent epidemic of killing infants in the Victorian period fuelled public interest for similar reasons, as a failure of maternal instinct (Ward). As Jennifer Rossi has recently shown in this journal, turn-of-the-century magazines also made mothers “targets of criticism” if children became sick or died in the home (772). Interest in MSbP can thus be viewed as an extension of anxieties about

motherhood and child health, albeit newly connected with concerns about child abuse, which had been inextricably woven in popular culture for centuries.

The second explanation is the roots of public interest in MSbP, which emerged from high-profile trials and which underpinned its early emergence in crime fiction. A number of criminal trials in the late 1980s and early 1990s fuelled the use of MSbP, more so than Munchausen Syndrome, as a plot device. The link between true crime and crime fiction meant that MSbP burst into public consciousness in a particular – and somewhat misleading – form. Crime fiction about MSbP often involved the death of a child as the initial crime that needs solving, but in 1987 a medical literature review indicated that ninety-one percent of MSbP cases did not result in death (Rosenberg 547). It seems no coincidence that the first representations of MSbP in popular crime fiction followed only slightly later than the first discussions of the syndrome in newspapers on both sides of the Atlantic, and that these high-profile (but unrepresentative) cases commonly involved the death of children.

Broadsheets and tabloids had begun to discuss the syndrome in the late 1980s and gave it increasing attention in the early 1990s, partly in consequence of the number of court cases in which mothers were accused of such abuse (Johnson 27; Lliman 29; Balleza). Cases such as those of Marybeth Tinning in the US (arrested in 1986 and convicted of murdering her children in 1987), Beverly Allitt in the UK (a nurse arrested and convicted of murdering her patients in 1993), and Waneta Hoyt in the US (arrested in 1994 and convicted of murdering her children in 1995) fuelled public interest in MSbP; all these cases received media coverage in their respective countries, and some internationally. At the time, the Tinning case received more coverage in the US but received some attention in the UK media in 1989 when Joyce Egginton published a true crime account of the case (Associated Press; Egginton “Cradle”; Egginton “Mother”). Although the Tinning trial never actually referenced MSbP, by 1994 the media included her in lists of MSbP cases; they often did so alongside

discussion of the Hoyt trial, in which prosecutors speculated on MSbP as the basis for her crimes (McCormick). The Allitt trial received particularly extensive attention in the UK and was the most clearly linked to MSbP, as Roy Meadow actually testified at her trial: in the *Guardian* and *Observer* alone there were over seventy reports on the case. Overall, such cases raised the profile of MSbP, linked it to cases of murder, and meant that MSbP was increasingly understood within a crime framework.

Crime narratives drew on international coverage of these high-profile criminal cases. Although crime narratives featuring MSbP mostly originated in the US, in part because of the success of the genre in this region, they must also be considered as part of broad Anglo-American culture. Jonathan Kellerman's *Devil's Waltz* (1993) and Cornwell's *The Body Farm* (1994) were both part of internationally successful series, with *Devil's Waltz* the seventh "Alex Delaware novel" and *The Body Farm* the fifth "Kay Scarpetta" novel. They were both sold in the UK and US as mass-market paperbacks and were reviewed in *The New York Times*, which described books in Cornwell's series as "wildly popular" (Kent). US television show, *Law & Order* was on its fifth series by the time of its MSbP episode in 1994. All of these pieces of popular culture were part of series with existing international audiences rather than necessarily drawing in readers because of this plot. The writers therefore were writing for their usual or general audience, rather than those with a particular interest in—or knowledge of—MSbP. One reviewer for *The New York Times* did highlight the "fascinating case study of Munchausen syndrome by proxy, a rare and bizarre personality disorder" as a "hook" and selling point of Kellerman's book, indicating public interest in MSbP at the time (Stasio).

Devil's Waltz, *The Body Farm*, and *Law & Order* picked up and consolidated trends in public thought, often blurring the lines between fact and fiction in so doing. *Law & Order* has long been famed for using stories ripped from the headlines, an approach that Clare Wardle

and Rachel Gans-Boriskin argue is important “as a format that encourages conversation” about controversial issues such as mental health and criminal responsibility (28). Kellerman and Cornwell also both presented their books as more empirically grounded than the average mystery novel. Such a stance stemmed in part from their respective backgrounds in child psychology and forensic pathology. The “real” scientific detail in the books was made possible by the authors’ use of protagonists who share these professions. Joy Palmer notes that:

Cornwell prefers that her work be perceived as an empirical record of reality rather than acknowledge inheritance of the carefully contrived conventions of the more “frivolous” mystery novel, an attitude exacerbated by the marketing and popular dialogue surrounding the writer, which frequently conflate the author with her protagonist. (58)

In practice Cornwell’s depictions of MSbP drew primarily from media and true crime models of MSbP, rather than its medical models, but were still embedded in “reality”.

The work of Kellerman, Cornwell and *Law & Order* fall into slightly different sub-genres under the umbrella of crime fiction. While *Law & Order* is based around a fairly conventional police investigation, Kellerman’s protagonist is a child psychologist who stumbles upon cases of crime, and Cornwell’s protagonist is a professional forensic pathologist. The sub-genre of forensic mystery is most strongly associated with Cornwell, who published the first such text in 1990 (*Postmortem*). According to Geoff Hamilton and Brian Jones, this novel was part of a crime fiction genealogy including the work of P. D. James and Susan Dunlap, but was significant in opening “the floodgates on ‘forensic mystery’” (81). They explain the key features of this sub-genre, which focuses “on science’s role in solving crimes: pathology, anthropology, toxicology, and behavioural profiling, among a host of interrelated specialties” (81). Robert J. Sternberg notes that

Jonathan Kellerman's psychological thrillers take the genre a step further by having as their hero Alex Delaware, a clinical psychologist. Patricia Cornwell's suspense novels have Kay Scarpetta, a medical examiner, as the protagonist. Using these nonstandard professions instead of the usual cops and detectives adds an extra layer of authenticity to the stories and allows for much more technical detail to be realistically added to the plots These advances certainly move the field forward, but in an expected nonstartling way. Kellerman and Cornwell still work within the pre-established conventions of the field. (107)

Law & Order is also an important extension of the traditional crime or detective genre, following similar conventions to written works—albeit in a more condensed form. As the “pre-established conventions” often played with audience expectations, these genre conventions can provide new insights into anticipated audience knowledge about a given issue: in this instance, MSbP in the early 1990s.

Readers and Red Herrings: Representation

Within crime fiction, three key genre conventions can shed light on the anticipated knowledge of an audience: firstly, the clues that are dropped in early stages; secondly, the plot twist, and why it would be expected to come as a surprise; thirdly, how – and to what extent – the narrative explains its denouement. These plot devices reveal that MSbP was expected to be broadly recognizable to a popular Anglo-American readership in the early 1990s, but in a very specific form. Crime fiction represented MSbP as a crime committed primarily by mothers, who suffocated infants or made children sick through salt overdose and then passed off their crimes as Sudden Infant Death Syndrome (SIDS). This simplified and selective model of MSbP may originally have reflected the anticipated knowledge of readers,

from high-profile court cases and media reports, but also likely served to embed a particular model of MSbP into culture.

Clues need to be sufficiently recognizable to allow the audience an opportunity to solve the crime themselves, but not so obvious that the plot twist fails. *Devil's Waltz* is fairly unusual in this respect, because MSbP is a subject of explicit discussion from the start of the book. The protagonist—child psychologist Alex Delaware—becomes aware of a young girl's unexplained illness and repeated hospitalization while on other business at a hospital. This is the only narrative of the three in which the victim is found before dying and in which MSbP is suspected at the outset. Indeed, a mere twenty pages pass before investigators raise the suspicion of MSbP committed by the mother. In consequence, most clues about MSbP are located in the novel's opening section, but are still revealing. The protagonist Alex Delaware is briefed on the case in which, according to the doctor providing background information, “just before this child was born, a male sib[ling] died of sudden infant death syndrome at age one year” (Kellerman 10). The following exchange takes place between Delaware and the doctor:

“[The mother] has a medical background. Studied to be a respiratory tech.”

“And both her kids stop breathing. Interesting.”

“Yes.” Hard smile. “At the time I didn't realize how interesting. I was still caught up in the puzzle.” (Kellerman 16)

Kellerman implicitly invites the audience to solve the “puzzle,” as the doctor slowly builds towards explaining her own verdict to Delaware. The reader is encouraged to join Delaware in piecing together the following clues: a child with recurrent illness but no diagnosis, a family history of (apparent) SIDS, and cases of (apparent) apnoea.

Cornwell plants fewer clues than Kellerman, likely in order to ensure that the reader does not deduce its outcome too soon. The book focuses on the forensic investigation and on

a serial killer suspected of murdering an eleven-year-old girl. Despite such broad differences between plots, the occasional clues that Cornwell drops into the story for the reader are similar to those found in Kellerman's work. The protagonist, Dr. Kay Scarpetta, discovers that the girl's mother claimed to have lost another child to SIDS:

“Is Mary Jo the child you lost to SIDS?”

Interest sparked beneath her dark pain, as if she were impressed or curious that I would know this detail. “She died in my bed. I woke up and she was next to Chuck, dead”. (Cornwell 144)

Earlier in the book Scarpetta had also noted that a post-mortem examination of the murdered child revealed inexplicably high sodium levels, a commonly-cited feature of MSbP cases involving death from long-term salt poisoning (Cornwell 22).

In *Law & Order*, the clues are similar again. In the episode “Precious”, a baby girl is allegedly kidnapped and soon discovered to have been smothered by her mother. “Precious” is quick-paced, in line with the conventions of *Law & Order*, and only the first half of the program actually involves crime detection. Even so, the program drops early clues for the viewer. Within minutes of the opening credits, the child's mother makes reference to having been at the doctors. The infant's hospital records then reveal eight admissions with fever and breathing problems, attributed to an “overanxious parent” because no health problems were ever discovered. At this point, it is revealed that the mother's paediatrician looked after her “other children” and that two of her other infants died of “crib death.”

All of these clues seemingly drew upon a popular knowledge of perceived links between MSbP and mislabelled cases of SIDS, likely from the extensive media reporting of this connection. A *Newsweek* article from 1994 illustrates the extent of such links in the media and is indicative of a wider popular tendency to blur SIDs and MSbP:

One telltale sign [of MSbP] is when more than one child in a family dies for unexplained reasons. A classic case is that of Marybeth Tinning of Schenectady, N.Y. All nine of her children died mysteriously between 1972 and 1985 Waneta Hoyt, also of upstate New York, is now awaiting trial for the suspected murders of her five children between 1965 and 1971. A local prosecutor read about the case in a medical journal theorizing that sudden infant death syndrome might run in families; he suspected homicide instead. (McCormick)

The year that Waneta Hoyt was convicted of murder, having been previously a subject of medical interest because of the multiple SIDS cases in her family, *New York Magazine* even ran a multiple page spread with the blown-up quote: “it turns out that the epidemiology of child abuse and of SIDS is the same” (Johnson 59). In the late 1980s, *The Guardian* (UK) also noted that accusations of MSbP were being levelled against parents who had lost multiple children, particularly under the influence of paediatrician Roy Meadow (Morris 2). Meadow had “discovered” MSbP and in 1989 established the infamous “Meadow”s Law” that “one sudden infant death is a tragedy, two is suspicious and three is murder, unless proven otherwise” (29). Seemingly drawing directly on this famous rhetoric, in *Law & Order* a detective states that “three kids sounds a little more like crib homicide” than crib death.

Links between MSbP and SIDS became increasingly disputed after the year 2000, in part due to a successful appeal against Meadow’s use of misleading statistics on SIDS in the high-profile Sally Clark trial, but they were prevalent in the early 1990s (Esparza). It is unclear whether the writers of these narratives believed the link between MSbP and SIDS themselves or were responding to the widespread popular confusion between the two, requiring recognizable clues in line with genre conventions. Either way, the prevalence of this MSbP/SIDS link further explains crime fiction’s focus on death, rather than illness, and on very young children. The symptom of apnoea, or breathing difficulties, cited in two of the

three texts, also relates to the apparent confusion—or perceived overlap—between SIDS and MSbP; many SIDS cases involved infants who stopped breathing for unexplained reasons, while MSbP cases often involved ostensibly unexplained breathing problems that transpired to be induced. In reality relatively few instances of MSbP cited in medical literature involved infants and even fewer involved children who died. Despite their relative infrequency, cases involving infant deaths were often the highest-profile criminal cases and captured media attention. Popular crime fiction seemingly picked up the same stories and operated to reinforce the supposed connection between MSbP and SIDS.

Once such clues are laid out for the reader or viewer, there are a series of red herrings—particularly in the novels—before a second convention of the crime fiction genre: the plot twist. The twist needs to be simultaneously surprising and recognizable; as with initial clues, the nature of the plot twist sheds light on what the reader is expected to know at a given time. Cornwell focuses her novel around an ostensibly violent murder and a devastated mother, and *Law & Order* similarly begins with an apparent kidnapping and a sweet, kind, upset mother figure. In this formulation, it is possible to present MSbP itself as the twist, in which the mother is the unexpected villain. In Kellerman's novel, the mother is suspected of MSbP almost from the start, and the novel's plot twist instead relates to his protagonist discovering that the child's father is the perpetrator of MSbP. Early in *Devil's Waltz* a doctor asks "once I started to think of it as a possible Munchausen by proxy, she seemed especially important to focus on, because aren't mothers always the ones?" Alex Delaware replies, "yes ... but in some cases the father turns out to be a passive accomplice" (Kellerman 27). Kellerman thus uses a double bluff in order to keep the novel's outcome unexpected, by acknowledging and dismissing the possibility of a father's involvement in MSbP. Despite these differences, all three crime narratives build their plot twists around their readership's anticipated conception of MSbP as a gendered form of child abuse and as

primarily perpetrated by mothers. Despite using a father as the perpetrator, Kellerman keeps the gendered expectations of his readers intact because the case is not “real” MSbP. The father uses MSbP to frame his wife for murder in the knowledge that healthcare workers (like the reader) will only suspect the child’s mother of such a crime.

These three crime narratives use different plots, but similar plot devices, to reflect and reinforce popular conceptions of MSbP. However, they differ in the degree to which they explain MSbP. It may be significant that *Devil’s Waltz*, the first book of its kind, dedicates a large amount of space to explaining MSbP and its “textbook” symptoms to the reader before subverting them (Kellerman 21). While Kellerman’s use of clues in the earliest pages of the book indicates that he expected his readership to have some familiarity with the syndrome, he evidently also found value in elaborating on its nature and history. His main character Alex Delaware even visits the library and conducts a handy literature review, stemming back as far as Meadow’s article from 1977 (Kellerman 83). Only a year later, such detailed exposition was seemingly less necessary. Cornwell provides only a one-paragraph summary of the syndrome towards the end of *The Body Farm*, which is much less technical and scientific in tone than Kellerman’s explanation:

“What are you getting at?”

“Munchausen’s by proxy.”

“Kay, no one will want to believe that. I don’t think I want to believe that.”

It is an almost unbelievable syndrome in which primary care givers – usually mothers – secretly and cleverly abuse their children to get attention. They cut their flesh and break their bones, poison and smother them almost to death. Then these women rush to doctors’ offices and emergency rooms and tell teary tales of how their little one got sick ... (Cornwell 313).

Instead of providing knowledge to a reader presumed to have only limited acquaintance with MSbP, as in *Devil's Waltz*, *The Body Farm* addresses the reader's anticipated feelings about MSbP; the exposition is more emotive than factual, and only limited detail is given about the characteristics of MSbP. *Law & Order* similarly explains MSbP in a throwaway scene of a mere couple of minutes, implying that the audience already knows of it. Such limited explanation of the denouement may seem surprising in the light of the centrality of MSbP to the plots of these two stories. "Precious" and *The Body Farm* also appeared only the year after Kellerman's book, with its apparent need to provide a detailed explanation of MSbP's features. This shift in tone is potentially explained by the growing number of "real world" cases, and media coverage thereof, which filled some of these perceived gaps in audience knowledge. The trial of Beverly Allitt and arrest of Waneta Hoyt occurred in 1993 and 1994 respectively, and television in particular was able to respond in almost "real time" to such contemporary events. The news media had also begun also to attach the label of MSbP retrospectively to cases from the 1980s at this time. By 1994, readers and audiences were expected to be familiar with the syndrome and its nature.

Motives and Madness: Mothers

In addition to explaining the features of MSbP, crime fiction of the early 1990s reflected public interest in a key question: what would motivate a mother to behave in such a way? This interest was seemingly driven in part by disbelief at the failure of maternal instinct represented by MSbP as, to repeat *The Body Farm* quote above, an "almost unbelievable syndrome". At this time there were two key models of MSbP, which were delineated but still contested in professional literatures: MSbP as a form of child abuse, a model often found in paediatric and social services literature, and MSbP as a form of mental illness, a model often found in psychiatry. In 1995, professional publications were still referring to "the confusion

between MbP [sic] as a mental health condition and as a pattern of abusive behaviour” (Horwath and Lawson 3). Crime narratives such as those of Cornwell and *Law & Order* rarely acknowledged such confusion, and certainly did not help to resolve it.

The question of a perpetrator’s motives is, broadly, part of the denouement and associated explanation of the crime after it is revealed. It is also worthy here of attention in its own right, due to the particularly fraught nature of this issue in contemporary medicine, courts and culture. These tensions allow us to see, even more clearly than in the above examples, how crime fiction reflected – and reinforced – criminal trials and media reports, over the model of MSbP found in medical literatures. Cornwell and *Law & Order* – the two texts in which mothers were guilty – represented mothers as both “mad” and “bad”. This approach allowed two different models of MSbP to co-exist, without acknowledging a widespread belief that they were incompatible. It consolidated a picture of failed motherhood in the popular sphere, which explained abusive (and ultimately murderous) behaviours without justifying such actions or presenting them as rational, and which generally ignored the more complex picture put forward by professionals in psychiatry, paediatrics and social care.

In crime fiction, other characters often function to explain or interpret the behaviour of mothers once MSbP is suspected or revealed. These characters show glimmers of sympathy for women “suffering from” MSbP, but without excusing their “murderous maternal” actions. The protagonist in *The Body Farm* explains her theory that

Mrs. Steiner may have punished Emily by heavily salting her food. Salt ingestion is a form of child abuse that, horrifically, is not uncommon ... I could only imagine that a woman suffering from Munchausen’s syndrome by proxy ... would have imagined the attention a mother would get if she lost a child in such a ghastly fashion [of murder] (Cornwell 371).

Only a couple of paragraphs apart, MSbP is connected to the “child abuse” of salt overdose and described as a condition from which Mrs Steiner was “suffering.” Characters in *Law & Order* similarly refer to a “condition” that “compels” the mother to kill her children, implying that she lacks control over her actions; they even raise the question of sterilisation as a course of action to prevent reoccurrences. The “mad” and “bad” is blurred again as the DA in the program comments that “[t]his lady’s on a different planet—she’s more concerned about what’s happening to her than what’s happened to her baby.” Within the trial part of the program, *Law & Order* also confuses MSbP with Munchausen syndrome. The conflation of, or confusion between, the two helps to understand further why the focus of crime fiction was on perpetrators rather than victims. When conflated with Munchausen Syndrome or understood as an extension thereof, a mother—rather than a child—embodied MSbP.

Crime fiction drew heavily upon legal contexts that reinforced models of the perpetrator as simultaneously, to use a crude binary of popular villainy, “bad” and “mad.” Monica Shaw observes that the Beverly Allitt trial (1993), for example, provided a “media frame” – and by extension a cultural frame – for MSbP (156). In May 1993, *The Guardian* described Allitt as “suffering” from MSbP, and conceptualised it as an extension of Munchausen Syndrome, but did not argue that MSbP removed criminal responsibility (“Munchausen Syndrome by Proxy”). Others, such as the tabloid *Daily Express*, went so far as still to call Allitt “evil” alongside such a diagnosis (Jewkes 145). In itself this approach seemed to echo public sentiment, as the public gallery at the trial—despite the court’s apparent acceptance of an MSbP diagnosis—had shouted “You ought to hang”; this fact was also reported in US local newspapers such as the *Albuquerque Journal* (“English Baby-Killer Nurse”). Although Allitt was actually committed to hospital upon sentencing, this hospitalization was the result of Roy Meadow’s testimony that linked MSbP with a range of other sadistic personality disorders, rather than a recognition of diminished criminal

responsibility (“Minimum Terms”). A later review of the Allitt case declared that these personality disorders were distinct from MSbP and that only the former, not MSbP, justified the continued hospitalization of Allitt. Referring to the case in 2007, Mr. Justice Stanley Burton declared that “[t]o give a pattern of criminal behaviour a name, and I refer to Munchausen’s by Proxy Syndrome, does not of itself lessen the responsibility of the offender” (“Minimum Terms”). Such clarification came only gradually, but there was always a sense in criminal trials—and particularly the reporting thereof—that MSbP explained actions without fully justifying them.

Confusion about the implications of an MSbP label was also evident in the US. By 1992 case accounts of MSbP had expanded beyond medical literature to the *FBI Law Enforcement Bulletin* and the syndrome was beginning to be recognised in the courts (Boros and Brubaker). At this time, as in the UK, the implications of an MSbP diagnosis were not fully clear. In 1992-93 *The New York Times* described MSbP as a “psychological disorder” and a “psychological condition” (Mcquiston; Balleza). However, a woman “suffering” from MSbP was still guilty in the eyes of the law. Although prosecutors speculated about MSbP in the Hoyt case, for example, she received no reduced sentence or hospitalization. MSbP failed to echo the history of infanticide, in which puerperal insanity became an effective defense against the crime (Marland). The family courts, which did not need to pass judgment in the same way, leaned slightly more towards a psychiatric model in which perpetrators could be cured. *The New York Times* reported that the case of Ellen Storck in 1992, for example, “had drawn national attention in the legal and medical professions” because Storck was permitted to reunite with her son after counselling (“Woman May Regain Custody”). Cases of this kind received less media coverage than trials for alleged multiple murders, however, and the embodiment of MSbP in popular crime fiction seemingly drew more from the criminal courts.

It was not until slightly later trials that the “child abuse” model of MSbP gained more popular attention. This model also became more central in the media, in part in response to legal trends and what Elaine Showalter refers to as “epidemics” of panic about child abuse in a wide range of forms (144–88). Reporting on the case of Kathleen Bush from 1996, for example, *The Washington Post* stated that “the police charge that Bush is guilty of a severe strain of child abuse called Munchausen Syndrome by Proxy” (Booth). Only from the late 1990s onwards did the child become the person who “suffered,” while the woman was in many media contexts presented as more clearly “guilty” of abuse. At around this time the crime genre lost its central place as the cultural articulation of popular sentiment on MSbP, but its echoes can be found in other genres connected more clearly with the “child abuse” model of the syndrome. The “misery memoir” genre, in particular, often drew upon the plot devices of crime fiction, with traumatic flashbacks (or clues) gradually pieced together to reveal the twist. Only in such texts was possible for the child to embody MSbP, but MSbP stories have proven less popular in such contexts. MSbP has only been the subject of one mass-market “misery memoir”: Julie Gregory’s *Sickened: The True Story of a Lost Childhood* (2003). Such texts engage more with the long-term effects on a child as they grow into adulthood, and shift the focus from perpetrator to victim. However, their relative lack of popularity, in the light of the incredible success of “misery memoirs” of child abuse as a genre more generally, indicates that public interest remains firmly focused on the perpetrator and their motivations.

Conclusions

The recent history of MSbP and its rapid emergence as a trope of written and visual culture, despite its apparent infrequency, offers new opportunities for medical humanities and popular culture studies. Medical humanities scholars can use popular culture to understand

how ideas about health and illness have historically—and continue to be—(re)produced. The methods of popular culture studies can additionally help to understand wider social trends. Unpicking genre conventions can help clarify the relationship between fictional text, professional literatures, and audiences' understanding of an issue. Crime fiction in this period used clues, plot twists, and denouements that depended upon—and likely reinforced—audiences' ideas about MSbP. This points to a potential way in which popular culture, and particular sub-genres thereof, can offer insights into so-called “general publics”, in terms of audiences or readers, and their anticipated knowledge of a given issue at any given time.

This brief snapshot of US crime fiction in 1993-94 highlights the importance of popular culture in communicating new ideas, in translating short-term news into embedded cultural tropes, and in consolidating ways of thinking about issues of social, legal, and medical importance. MSbP provides a case study of the ways in which popular culture can include and exclude certain ways of framing health and illness, particularly at key moments in time when they are not yet clearly defined. These findings are not limited to MSbP, to crime fiction or to the early 1990s. There is potential value in looking more closely at other interrelationships between different cultural forms over a short period: in this example, there was a production network of knowledge exchange between medical models of MSbP, the courts, the media, crime fiction and its audiences.

MSbP alone could have offered a very different snapshot, or cultural moment, for understanding such issues. Under the influence of the high-profile covert video surveillance carried out by David Southall in UK hospitals in the late 1990s, the focus of popular culture shifted away from death and towards catching parents in the act of inducing child illness. MSbP became a firm feature of medical television programs such as *ER* in the US in 2000 (s6e12) and *Casualty* (1996, 2006) or *Holby City* (2008) in the UK. These shifts indicate the importance of MSbP as a plot device, and the ways in which it echoed contemporary events.

Early 1990s crime fiction responded to legal cases and focused on death and culpability, while later medical fiction turned to the high-profile and controversial question of covert surveillance. Each offers a particular insight into the role of popular culture in the production – and translation – of knowledge about health, psychiatry and child abuse. Scholars from a range of fields would benefit from further analysis of how professional, criminal, media and cultural forms interact at specific moments in time, when issues are controversial and contested.

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¹ For examples see Allison; Barnett; Horwath and Lawson; McGill; Schreier and Libow.