

Dead infants and unmarried women – from forensic pathology reports 1910–12

SUMMARY The lack of access to contraceptives and no control over their own pregnancies represented a major problem for women 100 years ago. An unwanted pregnancy could lead to social exclusion and loss of paid work, and clandestine births and infanticide thus posed a social problem. A review of the archives of the Norwegian Board of Forensic Medicine in the period 1910 to 1912 shows that one-fifth of all expert opinions were related to infants and pregnancies. Autopsies performed on children constituted over one-third of all forensic autopsies during this period. Although the reports provide a timely reminder of the value of hard-earned rights in Norway, the lack of control over their own sexuality and unwanted pregnancies are unfortunately still the reality for a large proportion of the world's women.

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A hundred years have passed since women in Norway were granted the right to vote. At that time the lives of women were not only characterised by the lack of political co-determination; the lack of access to contraceptives and lack of control over their own pregnancies represented a major problem. Giving birth to an «illegitimate» child usually led to social exclusion and loss of paid work for the unmarried woman, who therefore chose to conceal her pregnancy and give birth in secrecy. For this reason the extent of infanticide is uncertain. According to official statistics, the incidence of stillbirths was not significantly higher in unmarried women than in married women (the proportion of dead children regarded as «legitimate» and «illegitimate» in 1911 was 3.7% and 2.1% respectively), but there was a large number of unrecorded cases (1). The high proportion of deaths under the age of one (13% of all deaths in the years from 1910 to 1912) was primarily attributed to a high mortality rate among «illegitimate» children (2). Contemporary literature also took up the problem of the killing of newborns (3). The description of the infanticide of a legitimate child in Hamsun's *Markens grøde* (Growth of the Soil) was unusual. Sections 234 and 244 of the General Civil Penal Code, which prescribe the minimum and maximum sentences for mothers who kill or harm their child during the birth or within twenty-four hours thereof, applied at that time also specifically to «Murder by mother of illegitimate child» (4).

Finds of dead fetuses and infants, or the suspicion that a woman had terminated a pregnancy or given birth to a child clandestinely, required investigation. The 1887 criminal procedure act or 'jury act' contained the same elements of investigation as today (5). An expert post-mortem examination of the child, a clinical forensic examination of the woman suspected, and ques-

tioning of witnesses were steps taken to decide whether a criminal offence had been committed. This process was administrated by a so-called *underdommer* (stipendiary magistrate) in the equivalent of today's district court (5, 6). All forensic reports in criminal cases at that time also had to be submitted to the Norwegian Board of Forensic Medicine, which from its establishment in 1900 has had the task of checking the reports (7). The expert opinions filed in the Board's archives could thus provide insight into such factors as the extent of infanticide 100 years ago.

Material and method

The archives of the Norwegian Board of Forensic Medicine are located in the National Archives of Norway in Oslo. «Sakarkiv Daa: General forensic questions, including autopsies» contains consecutively numbered case files from the work of the Board between 1910 and 1912: RA/S-4249/D/Da/Daa/L0026 – L0029. We also examined the Board's annual reports: (RA/S-4249/A/Ab/L0001) and the preparatory works on the annual reports (RA/S-4249/A/Ab/L0003). Since the material is over 100 years old, it is freely accessible and it is not necessary to sign a declaration of confidentiality.

We classified the cases into four main groups: forensic psychiatric reports, clinical forensic examinations (with the exception of cases related to pregnancies), forensic autopsies performed on adults, and all cases involving mother and/or child, i.e. both autopsies and clinical examinations. In the mother and child cases we recorded the name of the person carrying out the autopsy and the place of examination, in addition to the relevant circumstances, mother's age and occupation, information about the child's father, the child's sex, length and weight, as well as the most important findings and the conclusion reached.

BOX 1

Norwegian Board of Forensic Medicine

Established by Royal Decree on 30 June 1900.

Members 1910–12:

Professor of Surgery at the National Hospital (Rikshospitalet) Dr.med. Hagbart Strøm (1854–1912) (Chair)

Professor of Pathological Anatomy at the National Hospital (Rikshospitalet) Dr.med. Francis Gottfred Harbitz (1867–1950)

Police and prison doctor Dr.med. Paul Winge (1857–1920)

Director of Dikemark Mental Asylum Dr.med. Harald Holm (1852–1926)

Professor and senior consultant at Fødselsstiftelsen Dr.med. Kristian Brandt (1859–1932)

Results

Type of expert opinions

According to the Board's own annual reports, a total of 791 so-called «businesses» were dealt with in the period from 1910 to 1912. The archives for this period contained

altogether 738 numbered case files. The 53 missing case files appeared to be randomly distributed. All the cases bore the signatures of the Board's members (Box 1).

Figures 1 and 2 show the distribution of the types of cases. Cases relating to children, newborns or mothers constituted 22 % of the material (159 out of 738) and came from the whole of Norway. The clinical forensic examinations of the women were generally carried out by a professional doctor at the abode of the woman, while the clinical autopsies were all conducted by two experts, often at the office of the district doctor or at a large hospital. The autopsies were carried out from time to time at the offices of the local police authority, on the premises of a savings bank or in prison. A fifth of the reports (34 out of 159) were handwritten by the doctors in the National Hospital's (Rikshospitalet) pathology department. Usually Board member Professor Francis Harbitz was one of the two experts in these cases.

The Board raised few objections to the experts' conclusions. Often these were comments that the conclusion was over-certain or that the symphysis-fundus measurement had not been carried out. Only in two cases of presumed «strangulation of the infant» did the Board alter the conclusion to in all probability a natural cause of death.

Foetuses and infants

The number of autopsies of newborns and children totalled 36 % of all forensic autopsies in the period (125 out of a total of 347). A total of 95 cases concerned newborns where there was doubt as to whether it was a stillbirth or infanticide. There was an even distribution of male and female infants, and the majority were assessed as being fully developed and viable (Table 1).

Most of the newborns examined were found concealed (Table 2) and at varying degrees of decomposition. The most usual hiding-place was under a bed, in a chest of drawers or in a suitcase in the mother's room. Outdoors the most common way of getting rid of the child was by throwing it into a lake or a river.

The accused herself said that the dead bodies first lay in a paper bag under the bed in the room where the birth had taken place from the afternoon of 18 March until approximately 7am in the morning of 19 March when she put them in a sack and placed them under a bed in the passage of the summer dwelling house that was uninhabited at the time. The corpses lay here until the afternoon of Thursday 21 March when she took the sack containing the dead bodies and threw them into the Linningen.The local rural magistrate found the corpses here on 28 April 1912 under 8 fathoms of water (8).

Finds of both the foetus and the placenta in outdoor lavatories were also common. Photo documentation of the finds was rare and only existed in two cases (Figure 3a-b).

The woman giving birth

The mother's age was stated in 33 of the newborn cases. The average age was 27.5 years with the youngest woman 16 and the oldest 46. In most cases the woman was either a «maid» or a «maidservant», but professions such as a seamstress, nurse or female cook were also noted. Four women are described as a «widow» and one as the «daughter of a farmer». Only two women are described as being married. In one case the husband was reported to have «run away from her». In the other the woman was separated and had no fixed abode, but lived in the forest.

Investigation of the suspected woman

Forensic investigations of the women were to some extent characterised by the questioning of both the woman and other parties present. The woman was questioned in detail about the time of her last menstruation, but never about the circumstances related to the actual conception. Therefore we do not know whether the pregnancy was due to voluntary intercourse, rape, incest or prostitution. The father of the child was

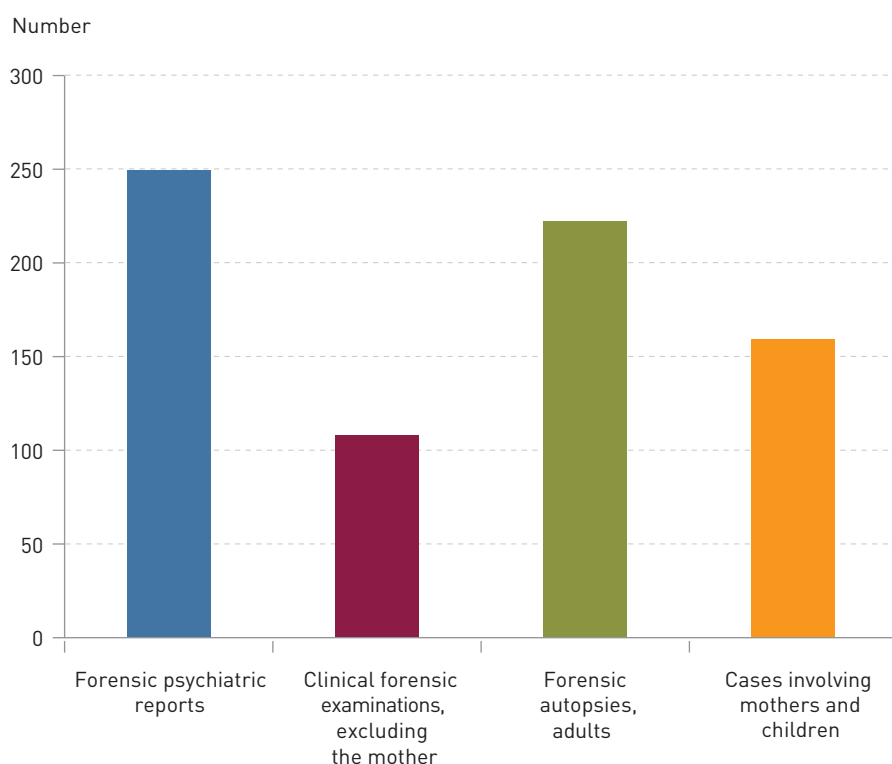


Figure 1 The archives of the Norwegian Board of Forensic Medicine 1910 to 1912, distribution by type of case (N = 738)

only mentioned six times, and only twice by name. A stoker, a sailor, a manservant, a travelling salesman, the recently emigrated son from the neighbouring farm and a young Finnish boy were given as fathers, but all the others remained anonymous.

The birth circumstances were described in detail and often included testimony from female neighbours, midwives or the master and mistress. Frequently mention was made of whether the woman admitted the circumstances or not, and whether she had changed her statement during the investigation. The clinical examination itself included examinations of the breasts, the abdomen, and the outer and inner genitalia.

On investigation the breasts were found to be fairly large, not particularly tight. Strongly pigmented areolae. Milk can be easily expressed. The pubic region is somewhat slack with clear linea fusca and vitiligo. The examination of the genitalia shows that the pudendal lips and the opening of the vagina appear to be hyperaemic. Slight prolapse in anterior vaginal wall. Carunculae myrtiformes. Mucous-like vaginal discharge mixed with an insignificant amount of blood. The uterus is somewhat enlarged. The vaginal area is short, soft with an inner tear on either side, probably due to previous births. The internal cervical os is open, and two joints of the index finger can be inserted (9).

Clandestine births

Information on the actual birth was available in 44 cases. In 39 of these, the mother had given birth alone and in secrecy.

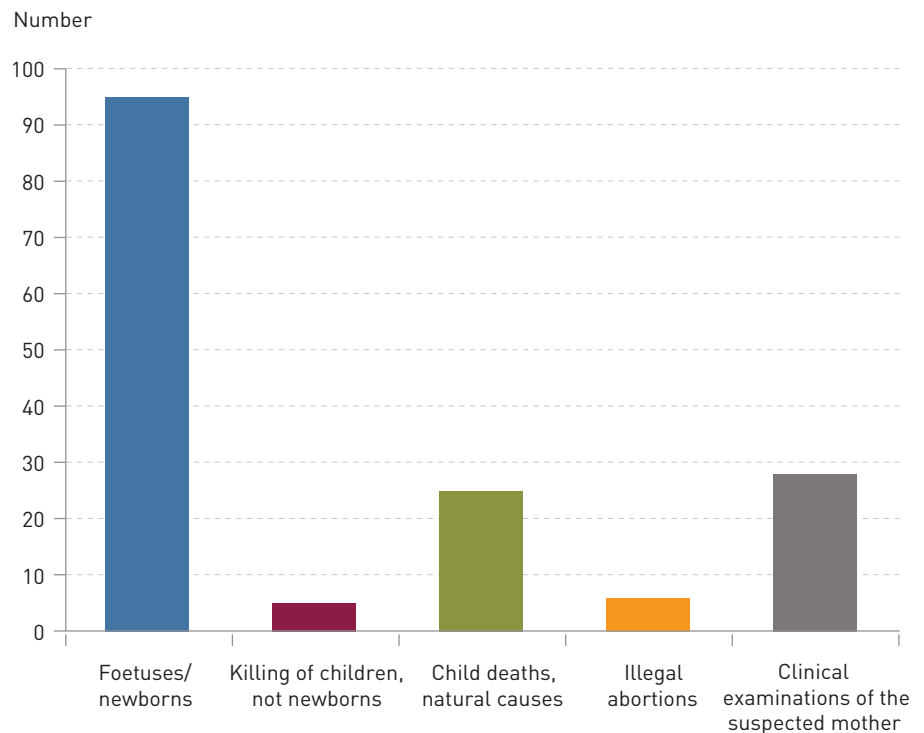


Figure 2 The archives of the Norwegian Board of Forensic Medicine 1910 to 1912, distribution by type of case (N = 159)

She started to get labour pains on Thursday 14 of this month, but carried out heavy work all day, did not sleep at night. Her waters broke later that night and she gave birth to a child in bed at 4 o'clock on Friday morning. She says that immediately after the birth she felt weak movements from the newborn (moved a little) that might have

lasted from five to ten minutes, she says she did not hear any sounds. She immediately cut the umbilical cord with her nails. The child lay untouched between her legs by the knees until she got up at 7 o'clock in the morning, when she went out to the cowshed to do her usual work. She made no attempt to summon help, although



a



b

Figure 3 a) Drawing of a child's corpse found in a suitcase in the accused's room in winter. The corpse was frozen and had to be thawed beside the stove before the autopsy could take place (Case no. 124/1911). b) Photograph of a child's corpse and placenta found in a «barn» in the spring, «wrapped in two white cloths, with a white piece of linen innermost and a white pillowcase outermost» (Case no. 126/1911)

Table 1 Expert autopsy of newborns, 1910 to 1912 (n = 95)

Sex	Girl: 39
	Boy: 42
	Not stated: 14
Viability	Fully developed and viable: 74
	Fully developed, dead intra-uterine: 1
	Premature: 10
	Not stated: 10

Table 2 Place where dead foetus/infant was found or was stated to have been placed (n = 104; the number is higher than the number of autopsies because not all the corpses were found)

	Number
No mention of place where corpse found	31
In or beside a lake	23
Other, outdoors	21
Concealed inside at the place of residence	13
Childbirth bed	8
Burned	3
Buried	5

the master and mistress slept in the adjoining room, and the connecting door to her room was open... She had not admitted to being pregnant in answer to her mistress' repeated questions. The day she gave birth was the last day of her service, and she was about to take up a new post in a different rural district. She had not hitherto thought about clothing for the child (10).

Criminal abortion

Six cases dealt with the question of criminal abortion. In two of the cases the women had died. One was a 33-year-old woman who was a widow and «rag-sorter», who had given birth six times previously. She was hospitalised when dying, with sepsis and icterus. In the questioning of witnesses, it emerged that she had talked about an advertisement in the newspaper *Svæta* (*Morgenposten*) and a «medicine for bringing back menstruation». She is thought to have taken large quantities of «haarlem oil, quinine, turpentine and mercury» and to have been helped by a witness with a tube. The

autopsy revealed multiple holes in the posterior vaginal wall and portio, and also peritonitis. The other woman was a 28-year-old servant girl from Tromsø who according to her landlady in Klingenbergsgaten had arrived from Notodden a few days earlier and had aborted alone during the night. Four days later she was hospitalised with the diagnosis «febris puerperalis post abortum» and died within twenty-four hours. The pathologists notified the police about a possible criminal abortion because of the inflammation of the uterus.

Agents promoting the expulsion of the foetus are described in two other cases: arsenic tablets: «2 portions the same day, altogether 20–25 tablets. Each tablet contains 1 m.gr arsenic»; turpentine: «together with naphtha, 10–15 drops every evening. At least 40 grams over a period of approximately 2 months»; vinegar: «mixed with approximately 1/2 litre warm water to be pumped in with a bulb syringe with a tube»; and white camphorated oil.

Midwives were mentioned as participants in several cases, but only in one case was a doctor charged. At the request of one of his patients whom he had treated for syphilis, together with the midwife he had helped a 22-year-old woman with whom his patient had had «intimate relations». The girl had first tried «20 øre's worth of quinine». The doctor was later described in a forensic report as being devoted to alcohol, deep thoughts and cocaine, but continued to practise as a doctor in his home town for several more years (11, 12).

Murder of older children

The father was the killer in one of the five infanticides in the material. After many years of severe physical abuse, his wife intended to leave him, whereupon he cut the throats of his two sons. In the other cases unmarried mothers were charged with the homicides.

Several of these cases also contain forensic psychiatric assessments. A servant girl fell in love with the widower at the place where she was in service. Over the course of time she gave birth to three children at *Fødselsstiftelsen* (a maternity institution for unmarried mothers), each time giving a fictitious name for the father. To save the relationship she killed the children shortly after their birth, before returning to service. Immediately prior to the last birth she was dismissed because of her pregnancy, as the widower was afraid of rumours. She killed the child the night following her discharge from the maternity institution, when having nowhere to live she was forced to wander up and down the streets in the rain. The forensic report,

which incidentally was penned by one of the members of the Norwegian Board of Forensic Medicine, Dr. med. Paul Winge (1857–1920), describes her as being conscientious and hard-working, but after meeting the widower she became «highly erotically charged by nature» and «This passion quite dominated her character and governed her behaviour» (13). The conclusion was that she suffered from «hysteria».

Natural death

Children who were found to have died of natural causes were under one year of age with only three exceptions. The most usual description was of a poorly nourished infant who was found dead in the mother's bed in the morning. Many of the infants were not breastfed, but were fed watered-down cow's milk and died of «rickets» and «gastritis». The interviews of the mothers in these cases were detailed regarding watering down the milk and hygiene. A single mother with «defective» nipples lost several of her children on such a diet of cow's milk. *From the autopsy findings it is clear that the child suffered gastroenteritis of such severity that it resulted in death. The child must be presumed to have died a natural death. The same must in all likelihood be presumed to be the case for the other children concerned. Unwise and unsuitable nutrition and apparently unhygienic provision of milk and feeding bottles have made them susceptible to gastro-intestinal infections (14).*

Three of the dead children had been placed in a children's home. Mortality in such homes, commonly referred to as «angel factories» was between 18 and 38 % in the first year of life (5). In one of these cases the forensic autopsy was initiated by the mother of the child, a seamstress, who reacted to the failure to notify her of the child's illness and to the fact that no doctor was summoned.

One of the mothers was described as addicted to drinking. A neighbour gave the alarm when the child was still lying without moving at the breast of its sleeping mother at six o'clock in the afternoon. The autopsy described a child of 5 270 grams in weight and 59.5 cm in length with enlarged lymph nodes on the neck, an enlarged spleen (20 g), hypertrophy of the lymphoid tissue in the intestine, thickening of the bony parts of the ribs and a paper-thin, soft cranium. The conclusion was «rickets» and «gastritis».

Discussion

Cases related to women and children constituted around one-fifth of all cases in the archives of the Norwegian Board of Forensic Medicine 100 years ago. A total of

36 % of all forensic autopsies were carried out on children. In comparison, in 2011 one hundred years later, children's deaths constituted 2.2 % of all forensic autopsies (15).

These cases provide a horrifying insight into the consequences of the difficult life situation of unmarried mothers and their children. There was no information about contraception, and contraceptives were difficult to acquire, especially for unmarried women (2). Abortion was forbidden unless carried out by a doctor to save the life of the mother (16). The financial situation of unmarried mothers was also desperate. Even if the woman could claim child maintenance from the father, it was often difficult for the mother to prove the paternity of the child. The father's name was stated for less than one-fifth of the children described as «illegitimate» (17). Work to improve women's control of reproduction was therefore at least as important as the fight for woman's suffrage. The pioneer Katti Anker Møller (1868–1945) established the first home for unmarried mothers in Kristiania (Oslo) in 1902, and together with her brother-in-law Johan Castberg (1862–1926) and others, she worked to improve the situation for women and children (18). Despite the improvement in women's financial situation and the protection of the law for the child by means of new statutes and welfare benefit schemes, the poor relief fund was often still the only solution when unmarried mothers lost their paid work after the pregnancy was revealed (2, 16). We can also understand from reading the lectures of Paul Winge, a prison doctor and member of the Board, that unmarried women were a pariah caste when he describes them as «immoral», «promiscuous», «irresponsible», «naive», «syphilitic», «addicted to alcohol», «more or less weak-minded, not seldom imbecile» and «from the working class» (17, 19).

All the cases in the Board's archives were part of investigations of possible offences, and many of the women were sentenced to prison or jail for murder or manslaughter. The results of the trials were only given in the archives as an exception, and because the charged person's name and age were often incomplete, we have not attempted to investigate further the outcome of these cases and the fate of the women.

The reports provide a timely reminder of the value of women's hard-earned rights in Norway. However, women over large parts of the globe are still denied access to contraception, and pregnancy and childbirth are responsible for the deaths of approximately 800 women every day (20). Every year around 50 000 young women die due to illegal abortions (21). Uneven gender distribution in countries such as India, China and Saudi-Arabia give some indication of sex-selective abortion (22, 23). These stories from Norway a hundred years ago are unfortunately still the reality for a large proportion of the world's women.

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