Mothers Who Kill Their Kids

by John Cobin, Ph.D. for The Times Examiner
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Many folks in the upcountry of South Carolina remember the dreadful tale of Susan Smith who, in 1994, drowned her kids (strapped in child car restraint seats) by driving her car into Lake Long in Union County. That tragedy made national headlines. And the legacy of mentally ill mothers who hurt or kill their children has not ended in South Carolina. On Sunday, July 29, 2007, Sametta Heyward of Hanahan (near North Charleston) slow-cooked her children in a car, bathed them, and then neatly wrapped them up in trash bags. She had left them in her Chevrolet Cavalier for eight hours, from 3 p.m. to 11:45 p.m., while she worked at a residential care facility named Dana House. The children were likely already dead before she bagged them.

But South Carolina is not alone in hosting this maternal calamity. There is a nationwide crisis of mentally ill women deliberately hurting or killing their children.

Consider some of the sad tales from across the nation: (3) bipolar Hawaiian teen Julia Lewis decapitated her infant in 2006; (4) Kansas City physician Debora Green, MD burned her children in their home (and poisoned her husband) in 1995; (5) Los Angeles resident Ophilia Yip drove her children off a pier in 1991; (6) Boston’s Angela Vasquez stabbed her kids in 2007; (7) Houston’s Andrea Yates drowned her children in a bathtub in 2001; (8) Hudson Oak’s (Fort Worth area) Dee Etta Perez shot her children in 2002, later followed by (9) Gilberta Estrada, also from Hudson Oaks, hanging hers in 2007; (8) Tyler, Texas’ Deanna Laney stoned her kids in 2003; (11) Oakland’s Lashuan Harris fed her children to sharks in San Francisco Bay in 2005; (12) McKinney, Texas’ Dena Schlosser amputated the arms of her child and offered him to God in 2004; (13) Dayton, Ohio’s China Arnold microwaved her infant in 2005; (14) Rachel Summers of Murfreesboro, Tennessee poisoned her kids in 2007; and (15) Ocean City, Maryland’s Christy Freeman recently (2007) was found to have killed and bagged-up her last four infants. By all accounts these fifteen women seemed “normal” up to the point that they “snapped” and killed their children.

Perhaps the scariest thing is what Family Courts are doing about the problem. On account of HIPAA regulations which protect patient’s mental illness records and shrewd and clever lawyers who are able to protect their clients’ psychiatric histories from being disclosed to judges, many mothers with mental problems are gaining custody of their children. Imagine if you were a judge and Dr. Debora Green, prior to her crime, showed up in your court. You would be tempted to think that awarding custody to a medical doctor with a fine reputation in your community would be a good idea. Why would you doubt such a woman without any psychiatric history to dissuade you? Yet if you only knew about the good doctor’s psychiatric problems, the probability of harm coming to the child (witness the aforementioned examples) might give you more than just a little pause before you awarded her full custody.

Economists have recognized for years that judges, whether elected or appointed, face the same economic incentives that other people do. They want to minimize their expected costs from any action they take and simultaneously maximize their expected benefits. When it comes to the Family Court, where judge’s dockets are terribly overloaded and full and accurate justice is therefore hard to come by, it is unlikely that a Judge in any given divorce case will care less about either the husband or the wife. He is mostly interested in playing it “safe” with the children involved so that they are put in the best possible situation. Of course there might be the isolated case where the judge favors one spouse over the other because her lawyer just happens to be the judge’s best golf buddy, but such bias must be rare (we hope!).

Accordingly, Family Court judges do not want to become responsible for making the mistake of granting custody to a seemingly “normal” woman that might become the next Debora Green, Andrea Yates or Julia Lewis of South Carolina. That means that Family Court judges do not want to be in the news. They want to advance their career as the public appreciates them and their superiors recognize their extraordinary abilities. Hence, the last thing they need to be is the notorious judge who inanely gave custody of the children to a Susan Smith or a Sametta Heyward.
Consequently, when medical records are presented in court that indicate a mother’s impressively scary driving (speeding) record, problems with bipolar disease, depression, and suicidal ideation, and perhaps a history of violence (like once attempting to stab her husband), a judge is going to think long and hard before he awards custody of the children to the mother. Even professional standing will not matter. Like Debora Green, the fact that a mother is a physician does not make her immune to the possibility of her mental problems turning into tragedy in the lives of her children. Indeed, high professional status only dramatizes the gap that can exist between appearance and reality in this matter.

Ann Rule, author of *Bitter Harvest: A Woman’s Fury, A Mother’s Sacrifice* (1999), remarks about Dr. Debora Green’s demeanor: “[I]nside her family home she had temper tantrums, turned her children against her husband, and seemed determined to destroy her marriage. Most of these people [like Green] present a fairly sound mask to the world. They don’t snap, they just get worse.” And do any of us know wives and mothers who exhibit this sort of “bitchy” behavior? If we do, perhaps we should take notice of it and heed the warnings signs before disaster happens.

Perusing news stories on the internet regarding mothers with mental problems who harm their children provides more alarming information. Friends and onlookers of the murderous mothers commonly state that they thought the women were “great moms” and that they had no idea that they would be capable of barbarous acts against their kids.

Another alarming fact: the leading cause of death in children under age four is homicide by a parent—as pointed out by Kelly Sons in her internet article, “Why Some Mothers Kill Their Children” (2007)—usually the mother acting alone or in cahoots with her boyfriend. There are hundreds of such cases every year in America, most of which are reported only locally. In *Why Mothers Kill: A Forensic Psychologist’s Casebook* (2006), Geoffrey McKee notes that 85% of all slain children for the past four decades were under age 6. Of the average 256 child slayings each year (1976-2000), 61% were murdered by their parents, about one-half by their mothers, and another 23% were murdered by a male acquaintance of the mother, or 53% of total child murders (pp. 9-10). And the situation is worsening: 390 children were killed by their mothers in 2001 (p. 253). That’s over one child murdered per day.

Depression and related mental illnesses like bipolar disorder are key warning signals for impending trouble. In *Mothers Who Kill Their Children: Understanding the Acts of Moms from Susan Smith to the “Prom Mom”* (2001), Cheryl Meyer and Michelle Oberman state: “In general, depressed mothers have more thoughts of harming their child than do nondepressed mothers” (p. 127), particularly when the father does not reside with the mother (p. 130).

Maybe it’s time that all of us paid closer attention to this problem. Susan Smith was really not an anomaly. Neither was Sametta Heyward. And we should not be surprised if tragedy happens again in South Carolina so long as people (and maybe even some Family Court judges or child care workers) tend to overlook the severity and significance of mental illness in the lives of many American mothers.