What Things Make One Have Defensive Insanity?

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In 1843, Daniel M'Naghten attempted to shoot British Prime Minister Robert Peel but instead shot Peel's private secretary, Edward Drummond, who later died. Evidence indicated that M'Naghten experienced persecutory delusions and believed the government was acting against him. After a jury found him not guilty by reason of insanity, political controversy led the House of Lords to ask the judges of the Queen's Bench to explain the legal principles governing criminal responsibility. Their answers became known as the M'Naghten Rules and remain the starting point for many modern insanity standards. The original essay correctly identifies three connected requirements: a defect of reason, a disease of the mind, and an inability either to understand the nature and quality of the act or to know that it was wrong. These requirements describe a legal threshold, not a psychiatric diagnosis. Mental illness is a clinical concept used by healthcare professionals, while insanity is a conclusion defined by criminal law and applied to the defendant's mental functioning at the time of the alleged offense. (*M'Naghten's Case*, 1843; Steadman et al., 1993)

A defect of reason is not simply poor judgment, anger, carelessness, intoxication, or a decision to ignore ordinary thought. It refers to an impairment in the ability to reason that results from a qualifying mental condition. The distinction made in the original essay between inability and failure is important. A person who possesses the capacity to understand an act but chooses not to consider its consequences is not legally insane merely because the choice is irrational. A person whose severe psychosis prevents meaningful understanding may satisfy the rule if the other requirements are met. Courts examine symptoms, behavior, planning, statements, medical history, concealment, and expert evidence, but none of those facts decides the case automatically. A person can plan conduct within a delusional system, while another person may act impulsively without suffering the kind of mental impairment required by law. (*M'Naghten's Case*, 1843)

The M'Naghten Requirements

The first branch of the M'Naghten rule concerns the nature and quality of the act. It asks whether the defendant understood what physical conduct was occurring and what its likely consequences were. A person who believes that a human being is an inanimate object, for example, may not understand the nature of the act. This branch is relatively narrow because many people experiencing severe mental illness still know what action their bodies are performing. They may understand that they are using a weapon and that someone could be injured while holding a radically false belief about why the conduct is necessary. (*M'Naghten's Case*, 1843)

The second branch concerns wrongfulness. A defendant may understand the physical act but,

because of severe delusion, be unable to appreciate that it is legally or morally wrong. Jurisdictions differ in how they interpret wrongfulness. Some focus primarily on whether the defendant knew society or the law prohibited the act. Others allow a broader inquiry into whether the defendant could appreciate moral wrongfulness. Federal law uses the word *appreciate*, which can require more than the ability to repeat an abstract rule. A defendant might know that homicide is ordinarily illegal while being unable to apply that understanding to a perceived situation created by psychosis. (18 U.S.C. § 17, 2026; Steadman et al., 1993)

The phrase “disease of the mind” is also legal rather than medical. It does not correspond exactly with a particular diagnosis in psychiatric manuals. Courts have used it to distinguish internal mental conditions from some temporary states caused by external factors, although the boundary is controversial and varies. Modern forensic experts should therefore describe the symptoms, cognitive impairment, course of illness, and relationship to the offense rather than simply announcing that someone was or was not insane. The judge or jury applies the legal test. (*M’Naghten’s Case*, 1843; Steadman et al., 1993)

Andrea Yates

Andrea Yates, a Houston mother with a documented history of severe depression, psychosis, suicide attempts, hospitalization, and postpartum mental illness, drowned her five children in a bathtub in 2001. Her case is one of the best-known American examples of the insanity defense. She was initially convicted of capital murder in 2002. The prosecution’s expert witness, psychiatrist Park Dietz, testified that an episode of the television series *Law & Order* had portrayed a woman who drowned her children and was acquitted through an insanity claim. That episode did not exist. Because the false testimony could have influenced the jury, the conviction was overturned.

At Yates’s 2006 retrial, the jury found her not guilty by reason of insanity. The verdict did not mean that the deaths were acceptable or that she was immediately released. She was committed to a secure psychiatric facility for treatment and continued legal supervision. The central question was whether her severe psychosis made her unable to know that the killings were wrong under Texas law. Experts agreed that she was gravely ill but disagreed about the legal significance of her actions, statements, and awareness. The case demonstrates why diagnosis alone is insufficient. It also shows how inaccurate expert testimony can distort a trial. (Steadman et al., 1993)

Yates’s illness included delusional beliefs concerning sin, Satan, punishment, and the fate of her children. Her conduct was planned in a practical sense, but planning does not necessarily prove sanity. A person may organize behavior according to a false reality produced by psychosis. At the same time, evidence that a person waits until others leave, contacts authorities, or describes legal punishment may support an argument that wrongfulness was understood. The jury must evaluate the entire record under the exact legal rule rather than rely on the apparent horror or irrationality of the offense. (Steadman et al., 1993)

Lorena Bobbitt

Lorena Bobbitt and her husband, John Wayne Bobbitt, lived in Virginia in a marriage marked by allegations of domestic and sexual abuse. In 1993, after an incident she described as rape, Lorena went to the kitchen, took a knife, returned to the bedroom, and severed her husband's penis. She then left the home and later discarded it from her vehicle. The case became a worldwide media spectacle, and public discussion often treated it as a joke rather than examining the abuse allegations and legal questions.

A Virginia jury acquitted Lorena Bobbitt by reason of temporary insanity. The defense argued that prolonged abuse and acute psychological disturbance produced an irresistible impulse at the time of the act. She was placed in a psychiatric institution for evaluation and was released after the required examination concluded that she did not present the level of continuing danger that would justify confinement. The phrase "temporary insanity" does not mean that an ordinary burst of anger excuses violence. It means that the jurisdiction found a qualifying legal incapacity during a limited period, even though the person's mental functioning was different before and afterward. (American Law Institute, 1985; Steadman et al., 1993)

The case also illustrates the distinction between explanation and automatic justification. A history of abuse may be highly relevant to trauma, perception, fear, self-defense, diminished capacity, or insanity, but it does not produce one universal legal result. The available defense depends on the timing of danger, the defendant's belief, the jurisdiction's rules, and the evidence concerning mental state. The jury accepted the insanity theory in Lorena Bobbitt's trial; another jury under different law or facts might not. (Steadman et al., 1993)

Insanity Defense

The insanity defense is based on the principle that criminal punishment ordinarily requires both a prohibited act and a legally blameworthy mental state. A defendant may intentionally perform a physical action yet lack the minimum capacity for criminal responsibility because severe mental illness destroys understanding of the act or its wrongfulness. The defense is therefore different from claiming that the act never occurred. It accepts that the defendant committed the conduct while arguing that ordinary punishment is inappropriate because the legally required capacity was absent. (Steadman et al., 1993)

Federal law currently provides a narrow standard. Under 18 U.S.C. § 17, insanity is an affirmative defense when, at the time of the conduct, a severe mental disease or defect made the defendant unable to appreciate the nature and quality or wrongfulness of the acts. The defendant must prove the defense by clear and convincing evidence. Mental disease or defect does not otherwise constitute a defense under that section. State law varies substantially. Some states use versions of M'Naghten, some apply modified standards, some include a form of volitional incapacity, and a few have

abolished the traditional insanity verdict while allowing mental-state evidence in other ways. (18 U.S.C. § 17, 2026; Steadman et al., 1993)

The original essay states that mental illness applies when the defendant did not know what was being done, did not know it was wrong, or was compelled by an irresistible force. These correspond to several historical tests rather than one national rule. The irresistible-impulse test addresses control rather than knowledge. It asks whether severe mental disease destroyed the capacity to resist the conduct or conform behavior to law. The Model Penal Code later combined cognitive and volitional elements by asking whether the defendant lacked substantial capacity to appreciate criminality or conform conduct. Federal reform after the John Hinckley Jr. verdict removed the volitional branch and adopted the narrower rule now contained in § 17. (American Law Institute, 1985; 18 U.S.C. § 17, 2026)

The Jenny Jones Case and Jonathan Schmitz

In 1995, the television program *The Jenny Jones Show* prepared an episode concerning secret same-sex attractions. Scott Amedure publicly disclosed that he was attracted to Jonathan Schmitz. Several days later, Schmitz purchased a firearm and killed Amedure. The original essay describes this as temporary insanity, but the legal outcome must be stated precisely. Schmitz presented evidence of mental illness and argued diminished capacity, yet the jury rejected a complete insanity defense and convicted him of second-degree murder. His first conviction was later reversed because of jury-selection errors, but a second trial produced another second-degree murder conviction.

Surprise, humiliation, depression, or anger does not automatically create legal insanity. The case should also not be framed as though an unwanted same-sex disclosure naturally produces violence. The responsibility for the killing remained with Schmitz. The program's methods and whether the producers negligently created foreseeable risk became separate issues in civil litigation. Criminal liability focused on Schmitz's conduct, planning, and mental state. His conviction demonstrates that a defendant can experience psychiatric symptoms and emotional disturbance without meeting the jurisdiction's legal threshold for insanity. (Steadman et al., 1993)

Mental Illness and Legal Insanity

Most people with mental illness are not violent, and most defendants with psychiatric diagnoses are legally responsible for their actions. Schizophrenia, bipolar disorder, severe depression, post-traumatic stress disorder, personality disorder, or intellectual disability does not by itself establish insanity. The court must determine how the condition affected the particular capacities named in the governing rule at the exact time of the offense. A person can have a serious diagnosis while understanding conduct and wrongfulness. Another person may experience an acute psychotic episode that profoundly alters those capacities. (Steadman et al., 1993)

The distinction is necessary because medicine and law ask different questions. A clinician diagnoses

and treats illness, evaluates symptoms, and supports functioning. Criminal law decides responsibility, blame, public safety, and legal disposition. Psychiatric evidence informs the legal decision but does not replace it. The expert explains whether symptoms are consistent with impaired perception, reasoning, or control, while the jury decides whether the statutory threshold has been proved. (Steadman et al., 1993)

Competency to Stand Trial

Competency is often confused with insanity. Competency concerns the defendant's present ability to understand court proceedings and assist counsel. Insanity concerns the person's mental state at the earlier time of the alleged crime. A person may have been legally insane during the offense and later become competent after treatment. Another person may have been legally responsible at the time of the act but become incompetent before trial because of illness or injury. (Steadman et al., 1993)

This distinction changes the legal consequence. An incompetent defendant ordinarily cannot proceed to trial until competency is restored. A defendant found not guilty by reason of insanity has completed the responsibility phase and is usually committed according to procedures governing treatment and dangerousness. Neither determination is simply a medical certificate; each applies a separate legal standard. (Steadman et al., 1993)

Expert Evidence and the Jury

Forensic psychiatrists and psychologists review medical records, treatment history, police reports, witness statements, communications, behavior before and after the offense, and the defendant's account. They may use psychological testing and instruments designed to assess response validity or possible malingering. Their task is to connect clinical evidence with the legal capacities at issue. A useful expert does not merely describe a diagnosis but explains how particular symptoms affected understanding or control. (Steadman et al., 1993)

Experts can disagree honestly because reconstructing a past mental state is difficult. Evidence may be incomplete, the defendant's statements may change, symptoms may have improved with medication, and legal language can be interpreted differently. The Yates case additionally demonstrates that expert accuracy and transparency are essential. A confident but false factual statement can unfairly shape a verdict. Cross-examination, independent experts, records, and clear judicial instructions help the jury evaluate the evidence. (Steadman et al., 1993)

Burden of Proof and Legal Consequences

The prosecution must prove the elements of the offense beyond a reasonable doubt, including the mental state required by the criminal statute. The insanity defense is a separate affirmative claim in

federal court, and the defendant bears the burden of proving it by clear and convincing evidence. State allocations differ. Evidence of mental condition may also be relevant to whether the prosecution has proved specific intent, even when the defendant cannot establish insanity, depending on the jurisdiction. (18 U.S.C. § 17, 2026)

An insanity acquittal does not normally result in immediate freedom. The defendant may be committed to a secure psychiatric facility and remain confined until legal and clinical standards for release are satisfied. In some cases, this confinement can last as long as or longer than an ordinary prison term. The system seeks to provide treatment and protect the public while avoiding punishment based on blameworthiness the defendant did not possess. Periodic review should examine current condition and risk rather than assume permanent danger from the original verdict. (Steadman et al., 1993)

Irresistible Impulse and the Difficulty of Control

The original essay refers to conduct compelled by an irresistible force. Some insanity standards historically recognized an inability to control behavior even when the person understood that the act was wrong. This test responds to cases in which severe mental disease allegedly destroys volitional capacity. Its difficulty is distinguishing an impulse that truly could not be resisted from an impulse the defendant did not resist. Human behavior exists on a continuum, and no brain scan or psychological test can directly measure legal control at a past moment. (American Law Institute, 1985; Steadman et al., 1993)

Supporters of a volitional test argue that responsibility requires meaningful behavioral control as well as knowledge. Critics argue that the concept is too uncertain and gives experts or juries insufficient guidance. The disagreement explains why some jurisdictions retain a control component while federal law does not. A responsible essay must identify the jurisdiction before saying that irresistible impulse is part of the insanity defense. (American Law Institute, 1985; 18 U.S.C. § 17, 2026)

Public Misunderstanding

Popular media frequently depicts insanity as an easy loophole used by dangerous defendants. In reality, the plea is raised in a small proportion of criminal cases and succeeds in only a fraction of those. It requires extensive evidence, exposes the defendant to psychiatric evaluation, and may lead to indefinite secure treatment. The highly publicized cases of M’Naghten, Hinckley, Yates, and Bobbitt are memorable precisely because they are unusual. (Steadman et al., 1993)

Public misunderstanding can create pressure for rules based on outrage rather than consistent principles. The defense should neither be abolished because one verdict is unpopular nor expanded because a crime appears incomprehensible. Legal responsibility must depend on evidence concerning the defined capacities, not on whether ordinary observers can imagine committing the act.

(Steadman et al., 1993)

Conclusion

The factors that create a successful insanity defense are determined by law, not by the existence of any mental-health diagnosis. The M'Naghten tradition requires a defect of reason arising from disease of the mind that prevents understanding of the nature and quality of the act or its wrongfulness. Other historical approaches have considered irresistible impulse or substantial capacity, while current federal law uses a narrow cognitive test and requires clear and convincing proof. (*M'Naghten's Case*, 1843; American Law Institute, 1985; 18 U.S.C. § 17, 2026)

The cases discussed in the original essay demonstrate different outcomes. Andrea Yates and Lorena Bobbitt received insanity verdicts under the laws and evidence governing their trials. Jonathan Schmitz presented mental-health evidence but was convicted. Daniel M'Naghten's case produced the rule that continues to shape these decisions. The insanity defense does not deny that serious harm occurred. It asks whether severe mental impairment removed the minimum capacity necessary for ordinary criminal blame. When that threshold is met, secure treatment and legal supervision can protect society without imposing punishment on a person who could not meaningfully understand the conduct or its wrongfulness. (Steadman et al., 1993)

References

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