Itineraries and Languages of Madness

Family Experience, Legal Practice and Medical Knowledge in Eighteenth-Century Tuscany.

Mariana Labarca

Thesis submitted for assessment with a view to obtaining the degree of Doctor of History and Civilization of the European University Institute

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Abstract

Scholarship on the history of early modern madness agrees on the fact that madness was largely a family matter during the period. Not only confinement was used as a last resort, but the range of public provisions to respond to mental afflictions were eminently temporary. Furthermore, although medical practitioners developed increasingly relevant contributions in the field of diagnosis and treatment of mental afflictions, during the eighteenth century madness was still primarily identified, experienced and managed by the families. Building on these arguments, this dissertation is concerned with how early modern understandings of and responses to madness were negotiated between families, medical and legal professionals, authorities and the communities.

Intersecting the history of madness and medicine with legal history, the history of the family and gender and the history of emotions, the dissertation examines the spaces in which madness made an appearance in eighteenth-century Tuscany, paying particular attention to the circulation of languages, both across legal and institutional spaces, and between lay society, medical practitioners and magistrates. Through its study of the itineraries of madness, the dissertation suggests that litigants and witnesses adapted their notions of mental affliction and changed their language according to each space of appearance. The core of the discussion is based on interdiction procedures, the civil law inquiries into mental capacity handled by the Magistrato dei Pupilli et Adulti, which are examined against criminal procedures, hospital records, medical consultations, and records of the police.

The dissertation argues that the Tuscan legal framework provided open and deliberately vague categories of madness and mental incapacity derived from a long legal tradition which remained mostly unchanged. However, while in terms of legal vocabulary long-term continuities seem to predominate, eighteenth-century records show a shift in the meanings of madness, opening to new social concerns and to new codifications of familial conflict. Initially bound primarily to patrimony and financial mismanagement, the understandings of madness became increasingly open to the emotional and relational dimensions of insanity, suggesting an interesting interplay between lay and medical notions of deviance.
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INTRODUCTION

The eighteenth century has been identified as a turning point in the history of madness, as a period that gave madness unprecedented visibility. From initial studies mainly centred on the rise of the asylum and the birth of psychiatry, research into the history of madness has by now come to encompass a wide variety of aspects related to the understanding, responses to and experiences of madness. Studies that initially focused exclusively on the development of medical knowledge of madness, or on the institutionalization of the insane progressively gave space to studies that illuminated the wide spectrum of public provisions available for families to cope with the problems posed by madness. It has now been established that during the eighteenth century, asylums were used only as a last resort, calling into serious question the so-called “rise of the asylum.” Besides, mental disturbances were not an exclusive medical prerogative and, although medical practitioners developed important contributions in the field of diagnosis and treatment of insanity during the century, mentally disturbed people were not necessarily treated by medical practitioners. Furthermore, medical practitioners were not necessarily involved in the labelling of mental afflictions. As the specialized scholarship has been suggesting for over thirty years now, madness was primarily identified, experienced and managed by the families themselves.

Mental disturbances were first displayed and discovered in the bosom of family life. To identify mental disturbances, families had first to shape an understanding of what it meant to be mentally disturbed, then to decide how they would handle it, and eventually where they would turn to in case they decided to seek external help. As Michael MacDonald rightly framed it, “ever since antiquity, insanity has been defined by experts but discovered by laymen. Physicians and lawyers have devised more or less rigorous definitions of mental disorders, but they have been obliged to rely upon laymen’s loose conceptions of insanity to enforce them.”

However, the fact that madness was largely kept at home did not result in it being conceived as a private problem. On the contrary, early modern responses to madness, from legal mechanisms to control financial mismanagement, institutionalization, imprisonment or

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other forms of confinement, to police admonishments, religious predicaments and any private solution were conceived as a collective response to a shared responsibility. Intrinsic to mental afflictions is that they constitute an individual affliction the experience and resulting configuration of which are inseparable from its social and relational consequences. Particularly in early modern Europe, madness was conceived as a social problem not only affecting the entire family group, but society as a whole. In this sense, understanding and responding to madness was a socially embedded process, involving family members and sufferers, the community with its particular cultural values, medical practitioners, judges and governmental policies. Understandings of madness circulated between different cultural communities and professional traditions, in a model of mutual adaptation and negotiation that produced what we could call the eighteenth-century knowledge of madness. The interactions between families, public provisions, the law and medical practitioners in this way provide a more nuanced model for understanding the experience and management of madness in the eighteenth century.

These crucial questions, however, have been mainly applied to the early modern British context and, to some extent, to early modern France but they remain largely unexplored for the early modern Italian peninsula. This thesis intends to chart the spaces in which madness made an appearance in early modern Tuscany in order to examine how notions of mental affliction adapted and changed according to each institutional space of appearance. It explores the understandings and experiences of madness primarily by drawing from civil law inquiries into mental capacity, but also by encompassing other institutional spaces where madness was disclosed, such as hospital records, criminal records, and special requests to the central administration of the Grand Duchy.

The thesis examines the language of madness found in each procedural space, paying particular attention to its lexicon, meanings and mutual influences. It builds upon the contention that definitions of mental incapacity should be approached as a collective and even consensual category constructed upon different narratives and interests. Family members, witnesses, medical practitioners, magistrates and government officials shaped and adapted their language according to each procedural space. The meanings of madness were carefully negotiated according to each context, taking into account where and why families turned to the authorities, the sufferer’s biography, the circumstances surrounding the identification and disclosure of the given mental disturbance, the characteristics of each household and family group and the existence of networks of support. The thesis places the family at the centre of
its enquiry, approaching it as the connecting piece between the private and the public response to madness, and as a decisive authority in the shaping of agreed understandings of madness. Mental afflictions appeared in the relational and emotional space of the household, where it was first recognized, understood and experienced. So long as madness was entrenched in the emotional system of the early modern family, public, medical or legal understandings should not be separated from the conflicts and vicissitudes suffered by the families.

**Historiography of Early Modern Madness: From Mental Institutions to the Family**

Following the publication of Michel Foucault’s *Folie et Dérision. Histoire de la folie à l’âge classique* in 1961, historiography remained strongly attracted to his teleological approach to the history of madness, defined as a process towards the birth of psychiatry and mental asylums. According to Foucault, from the mid-seventeenth century onwards, madness started to be condemned, excluded, and confined throughout Europe. So significant was this change in the attitude towards unreason, that “locking up the insane is the structure most clearly visible in the classical experience of madness.”

This new “practice of confinement” targeted not only the mad, but with them any other individual who defied the new principles of reason, making no distinction between the insane, paupers, criminals, libertines, those suffering from venereal diseases, homosexuals or blasphemers. Thus, the “Age of Great Confinement”, following a bourgeois rationale, gave way to the “invention” of mental illness by psychiatry at the opening of the nineteenth century.

A dark veil had fallen over the paradisiacal lives that the mentally disturbed supposedly enjoyed, commanded by “the sinister accord between Reason and Absolutism.”

Post-Foucauldian historiography, whether debating or approving his assertions, has definitively consecrated the significance of the eighteenth century for the history of madness. The model of the great confinement has been largely criticised, but there is a broad agreement regarding the new position occupied by madness during the century. It seems clear that madness and deviant behaviours in a broader sense gained visibility and that specific

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strategies, both private and public, were developed to handle them. The discussion has focused on: 1) the role of the growing power of the state in the management of insanity; 2) the birth of medical institutions to confine or cure the mad, with particular attention to its admission procedures and purposes; 3) the degree to which medical knowledge became involved with mental disturbances; 4) religious, social and individual responses to the condition of madness; and 5) cultural representations of madness. Although the limited scope of mental institutions before 1800 has long been established, still more research is being produced on the history of asylums and psychiatry than on madness “outside” mental institutions, with the exception of the work done by British scholars.5

The rise of the asylum throughout the eighteenth century has fascinated historians, first so as to prove the existence of the great confinement and, later, to prove that both mental institutions and a specialized medical knowledge to cure its patients had developed earlier than when Foucault had proclaimed. British historian Andrew Scull has claimed that the century witnessed the efforts of state power to control and confine indigent deviance, devising mechanisms to isolate all sorts of lunatics, beggars and physically disabled people in prisons, workhouses and hospitals. According to his view, the rise of the asylum went hand in hand with the new scenario of capitalism. While capitalism was to blame for the household’s growing incapacity to keep the insane at home, it at the same time allowed for the state to achieve the financial capacity of being able to afford (and control) mental institutions. This “radically novel social control apparatus” run by physicians but controlled by the state, served to demonstrate the collapse of the family-based system of care of the mentally disturbed. Asylums, and the new alliance between medical knowledge and the upper orders of society had come to prevail, and functioned as, a system of social control.6

This purported dark age for insanity was also supported by Michael MacDonald who, in his otherwise innovative study into the casebooks of the astrological physician Richard Napier, identified the great “cataclysm” of the English Revolution as the turning point that

5 For a comprehensive analysis of the European historiography, see Rafael Huertas, “Historia de la psiquiatría, ¿Por qué?, ¿Para qué? Tradiciones historiográficas y nuevas tendencias”, Frenia 1, no. 1 (2001), pp. 9-36. The most important titles for the scope of this thesis are examined below. A brief overview of the indexes of journals specializing in the history of medicine proves this point. See Medical History, Journal of the History of Medicine and Allied Sciences, Social History of Medicine, History of Psychiatry, Frenia or Medicina e Storia.
marks the end of “the older system of therapeutic eclecticism and family care.” Mostly agreeing with the model of the great confinement, for MacDonald “the eighteenth century was a disaster for the insane.” The combination of the rise of public and private asylum for managing the insane and the triumph of a “secular” medical monopoly was supported by the governing elite, which as a whole entailed the abolishment of family care. “As the eighteenth century progressed, more and more people were subjected to incarceration in madhouses and to medical brutality.”

Nevertheless, despite his pessimistic view of the consequences of the changes he identified in the eighteenth century, Michael MacDonald’s study has been fundamental in expanding the field of enquiry for the history of madness. Aimed at examining what he called the psychological stresses endured by seventeenth-century English people, MacDonald delved into Napier’s casebooks to “find out what insanity meant in the lives of people who actually experienced or observed it.” Using radically original sources for his time, he intended to fill the gap he believed was missing in Foucault’s Histoire de la folie: the consideration of how actual, ordinary people experienced madness in their daily lives. His study suggested that mental disorders were widespread in English society, with no specific stratification according to social background, and affecting a clear majority of young people and women. He charted the causalities that Napier’s patients themselves identified as being responsible for their mental disturbances, which led him to suggest that they were “as convinced as we are that social and psychological stress disturbed the minds and corroded the health of its victims.”

Family-related situations – whether conflicts with a spouse or lover, the loss of a loved one, fear of poverty or disputes with neighbours – are the most commonly recognized sources of stress and anxiety for seventeenth-century English men and women.

The attempt to provide a more comprehensive analysis of the social and cultural understandings of madness was undertaken by Roy Porter in his seminal Mind-Forg’d Manacles. Through a proposal that positioned madness as immersed in society, he aimed to

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7 MacDonald, Mystical Bedlam, p. 2. MacDonald argued that until the mid-seventeenth century the care of the insane was left completely in the hands of their families, regardless of their social condition. During this time, the intervention of the state was concentrated in the Court of Wards, the institution in charge of the guardianship of lunatics. The court was suppressed after the English Revolution, and the jurisdiction over lunatics was transferred to the Chancery. For more on this see Chapter 1.
8 Ibid., p. 230.
9 Ibid., p. 11.
10 Ibid., p. xii.
11 Ibid., p. 72.
12 Ibid., p. 74.
elaborate on the connections between lay and medical understandings of insanity, political responses, the law and medicine. Strongly opposed to the negative view of the eighteenth century and to Foucault’s approach, Porter claimed that no centralized power acted “to sequestrate unreason.” The management of madness remained largely private throughout the century, and the insane had remained largely under the care of their families or the community. The English state, he asserted, had not shown any special interest in managing and even less in constraining, madness, which became a public problem only when dangerous. Given that madness was a reality immersed in social experience, the making of “psychiatry” could not be understood as a “plot” to discipline and control society, but rather as the result of a social process. Madness thus appeared as shaped from below, which presupposed that historians had to go beyond the medical records to study it.

Roy Porter’s studies signified a fundamental call to expand the scope and interpretative keys of the history of madness. Not only was he able to shift the view from hospitals to society, but he also aimed at “discovering how madness appeared, not only to doctors, magistrates, and bureaucrats, but within the knotted skeins of personal and social relations.” However, despite the undeniable importance of Roy Porter’s contribution in terms of including the voices of the sufferers in the history of medicine and insanity, his attempt was finally limited to the voice of some exceptional, privileged and notable mad persons, and was ultimately unable to address the family dimension of insanity. His major contributions are situated in his approach to madness as a socio-cultural phenomenon (without discrediting its biological existence), which was constructed, understood and managed by a variety of actors in eighteenth-century Britain. Porter sought to study the cultural configurations of mental disorders by including different voices, widening the spaces where such meanings could appear.

The argument that madness was immersed in social life and not confined in mental institutions extended and enriched the scope of the history of madness. The study of madness could thus be approached by going beyond the history of scientific thinking, and of medical institutions and their rationales, to become a history of the cultures of madness, one that was

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able to connect scientific thinking with lay perceptions, and public provision with medical practices and the patients’ responses. Beyond – and behind – medical knowledge and growing political power was the experience of madness, the family gaze and a wide array of social responses, as the influential studies of Roy Porter and Michael MacDonald first exposed.

What studies such as that undertaken by Andrew Scull had neglected was precisely the complex world existing before and after madness appeared in mental institutions. His assertion that the rise of the asylum demonstrated the exhaustion of domestic care had failed to examine madness beyond the asylum, or to provide evidence as to why the so-called family-based system had allegedly failed. Quite the contrary, as later studies suggested, “the asylum, though increasingly important in the range of options open to communities, did not replace the family as the central locus of care of the insane. Rather, the household remained an important locus of care for the insane, and families maintained a central role in the decisions over treatment and supervision.”16 These studies, produced at the end of the last century, stressed the participation and the power of negotiation exerted by families in the formulation of care provisions for the insane.

Strongly focused on the medical gaze, Italian historiography has approached madness mainly from its institutional dimension and the rise of psychiatry. Italian scholars have tried to demonstrate that asylums created in early modern Italy developed as increasingly medicalized spaces to treat and not only control madness.17 The stress was placed on the spread of specialized institutions throughout the Italian peninsula, medical labelling and management of madness and the involvement of medical practitioners in judicial practice. Yet the non-institutional dimensions of the experience of madness were almost completely neglected. For instance, Lisa Roscioni, in her thorough and comprehensive study of the rise of mental institutions in early modern Italy, examined the reasons for forcing a person to petition

for a relative’s confinement in the Tuscan mental hospital, Santa Dorotea. As a result, her study was strongly focused on the institution, and thus, devoted to the dangerous mad. Although the archive of the Santa Dorotea Hospital, her main source for the Tuscan scenario, is extremely useful for examining the shaping of medical understandings of (dangerous) madness, it is less useful when examining lay understandings. Moreover, the petitions of internment, scant and repetitive, offer a still photograph of the furious mad who had become a danger to themselves or to the community. Furthermore, if we take into account that madness was confined only as a last resort, we must conclude that her study left outside the more common aspects of mental disturbance, which was largely kept at home.

As a result, these approaches are restricted precisely because they isolate insanity from its context, studying madness only once it had left the family domain, and circumscribing the analysis to medical records and, in some cases, criminal records. The problem with this is that historians from different academic traditions agree that the confinement of mentally-afflicted relatives in Early Modern Europe was used only as a last resort. For instance, this has been proven in the cases of the confinement of wives or other problematic relatives in convents or workhouses, and for the mentally disturbed who were committed to mental institutions. For the specific case of Tuscany, Roscioni argued that madness in the eighteenth century was still a family issue, “nel senso che solo nel’assenza, nell’impossibilità o non volontà di provvedere a un parente pazzo si finiva per rivolgersi a un’istituzione esterna.” This fact reminds us of the absent variable in the history of confinement – particularly in the case of mental deviance: how were those problematic relatives handled when they were not confined? In other words, what has been neglected by this historiography is the household as the space (both physical and emotional) where madness was first identified, experienced and handled. Furthermore, precisely given that madness was largely kept in the domestic space, the family, and particularly certain members of the family structure, acted as intermediaries between the public and the private spheres.

18 Roscioni, Il governo della follia, p. 269.
20 Roscioni, Il governo della follia, p. 124.
Finally, it is striking that Lisa Roscioni’s comprehensive study focuses strictly on the institutional space of confinement, making no reference to any other public responses to the phenomenon. The Tuscan state offered two mechanisms for the management of madness: one was confinement while the other was interdiction. For this reason, exploring interdiction procedures, the core sources used in this thesis, illuminates a side of the early modern reality of madness that has been largely left in the dark. By the same token, most of the existing studies are also limited in so far as they fail to follow the itineraries of madness, producing a static picture of a reality that was unstable and flexible. The study by Magherini and Biotti, who did follow madness through its different spaces of appearance, tends to overstate the significance of confinement before 1750, neglecting other institutional responses to the problem of madness, such as guardianship and direct mediation.21

The recent study by Elizabeth Mellyn offers an interesting contribution towards a more nuanced approach to madness. Placing also the family at the centre of her analysis, Mellyn studied the different legal provisions devised between the fourteenth and seventeenth centuries by the Tuscan administration to address the problems caused by madness. Her study suggests that madness was addressed through a collaborative exchange between families and government officials in a common effort that aimed at finding the most appropriate solutions for the problems posed by madness. Rather than serving as proof of the “expanding mechanisms of control”, the civil and criminal court records of Tuscany suggest that public institutions played a limited role in the care of the mentally disabled.22

Given the records of madness between the fifteenth and the seventeenth century are far more scant and lacunose that those of the eighteenth century, Mellyn’s study does not pay particular attention to the connections that can be drawn between the different mechanisms devised to tackle the problems posed by madness. For the same reason, although she examines the cultural meanings of madness by challenging the supremacy of medical knowledge over lay understandings, her study does not differentiate between the different voices that composed the language of madness, nor does it elaborate on the ways in which litigants, medical practitioners or magistrates adapted their language according to each context. This thesis aims to address these two issues.

21 Magherini and Biotti claimed that confinement was the main institutional response to madness until 1750, in “Madness in Florence in 14th-18th Centuries. Judicial Inquiry and Medical Diagnosis, Care and Custody”, *International Journal of Law and Psychiatry* 21, no. 4, (1998), p. 355.
The study of madness has benefited from the expansion of historiography into new sources, resulting from historians’ quest to extend their investigation beyond the walls of the asylum. We can point to two main areas covered by this endeavour; one is the inclusion of criminal records, and the other the introduction of civil court records and parish records dealing with requests for poor relief, which were able to illuminate the history of madness from a different perspective. Criminal and civil law records have in particular proved invaluable. Civil capacity, confinement, criminal prosecution or any other available provision for the mentally ill were governed and regulated by the law. According to Peter Barlett, the concern of legal measures devised to address the problem of insanity is twofold. They constitute a mechanism that directly affected the insane and at the same time they reflect how societies conceived of madness: “The law might thus be very much a part of the life of the insane person, and an understanding of the dynamic between the individual and the law is pivotal to understanding the life of the insane person.”

Scholars such as Marco Boari have claimed that the law preceded psychiatry and medicine in the development of a knowledge of insanity in the early modern period. In his study on the reception and reshaping of Roman law by Italian Renaissance jurists, Boari asserts that the law acted as an organizing element of the knowledge on madness that fed from social life, and articulated political aims. This in the context of the limited authority that medicine held over madness, compared to that of jurists, judges and lawyers. This, in turn, entailed that the diagnosis of madness relied almost entirely upon the law. In fact, legal provisions for handling madness predate any centralized medical or welfare measure in Italy, as well as in the rest of Europe.

However, later research has suggested that specialized legal or medical knowledge had a limited involvement in the assessment of madness, particularly in the British contexts, where much of the role in determining the validity of the testimonies fell to the jury. Given that the “interrogations were designed to assess a subject’s practical understanding of the world, and their ability to deal with it”, there was no need for expert opinion. The effects

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24 “Insomma se anche non ci fosse stata –e forse non c’era- un’idea chiara sulla ‘folia’, una volta ammesso il principio sia pur vago della sua attinenza alla sfera della capacità o dell’imputabilità o altro, era il sistema giuridico stesso ad imporre un più concreto sviluppo e un articolato approfondimento.” Marco Boari, Qui venit contra iura. Il furiosis nella criminalistica dei secoli XV e XVI (Milan: Giuffré, 1983), p. 16.
and consequences of mental afflictions were gauged by plain common sense rather than through medical diagnostic categories. And thus we return to lay society and the family.

Most of the studies that examine the legal management of madness in history have focused on criminal justice, leaving largely understudied the possibilities offered by the records of civil justice.26 The study of inquiries into mental capacity, which constitute the core of this thesis, should be understood as part of the endeavour to expand the view of the study of madness. The study of interdiction procedures, the legal mechanism that deprived a person of his or her rights to administrate their patrimony and manage their affairs, shed light on the involvement of the law with family life, illuminating issues such as the uses of justice and the debate over proper and improper behaviour. Given that interdiction procedures demanded that authorities and families discuss how mental incapacity was to be understood, they constitute a privileged arena in which to study the negotiation of what madness amounted to.

Inquiries into mental capacity remain largely unexplored, except for the studies of Robert Allan Houston, Elizabeth Mellyn, Akihito Suzuki, Thierry Nootens and Laurent Cartayrade, whose studies are discussed in detail below.27 The neglect of these records has perpetuated a somehow distorted view of early modern notions of insanity, given that most studies that draw on criminal or medical records illuminate madness almost exclusively during its moments of crises, and thus provide a static picture of a decontextualized moment. On the contrary, inquiries into mental capacity are able to give a more flexible image of


insanity, illuminating the phenomenon along its different phases. This, as a consequence, allows the historian to draw more nuanced interpretations of madness as a phenomenon that encompassed a wide variety of behaviours, attitudes, emotional displays and social reactions.

Legal inquiries into mental capacity also provide the possibility to examine the shaping of notions of madness and mental incapacity that were embedded in practical concerns for the daily and, particularly, financial behaviour of the defendant. As a result, the historian is able to delve into the understandings of madness and the varied languages of madness, liberated from the constraints of medical categorizations, examining them within their own contexts. All of the existing studies, in fact, have stressed the particularity of madness as a social and relational illness, which “must be understood in social terms relevant to the period in which a person lived.”28 In so doing, the study of madness works as a mirror for the study of its normal counterpart, in so far as the discussion about madness entails a debate on expected behaviour and normativity.

An advocate of the family as the primary locus of care for the insane has been Akihito Suzuki, who has carried out valuable research that stresses the importance of the family in the experience and management of madness. Aiming at examining the interactions between domestic and institutional care of the insane, Suzuki conducted research by drawing from sources that had not initially been taken into account by previous studies, such as parish records of poor relief and inquiries into mental capacity.29 These kinds of studies enabled historians to assert that institutional assistance was only resorted to once familial and private provisions had failed. Furthermore, so important was the family in the study of madness, Suzuki claims, that it illuminates the origins of the nineteenth-century moral treatment from a different dimension. The study of the domestic care of the insane suggests that many characteristics of the moral treatment developed in the early nineteenth-century asylums had their basis in home care. The use of persuasion to control the patient, the importance of

28 Houston, Madness and Society, p. 20. See also Suzuki, Madness at Home, Nootens, Fous, prodigues et ivrognes, Mellyn, Mad Tuscans and Their Families.
establishing a relationship of power and of creating a “channel of communication” with them are all mechanisms that were already present in domestic care.\textsuperscript{30}

Studies on the wide array of public and private provisions for addressing the problems posed by madness and unruly family members have served to demonstrate that responses to madness in early modern Europe were predominantly temporary and far more flexible than what Foucault had envisaged. For instance, Houston’s study on the Scottish inquests into mental capacity suggests that families could turn to a wide range of measures to deal with their unruly and insane relatives. Cognition, the legal mechanism that in Scotland deprived a person of her or his rights to administer property and manage their own affairs, was one among many other available mechanisms, such as home restraint, imprisonment or institutionalization. These mechanisms could be used alternatively or simultaneously, repeatedly or only once, depending on each particular case. Having in mind that measures to deal with the insane were flexible and eminently temporary enriches our understanding of the experience and perception of madness in the Ancien Régime. This thesis draws from this still largely unexplored approach, and proposes the notion of the “itineraries of madness” to study the formulation of negotiated mechanisms for dealing with the problem of madness.

Historians have stressed the extent to which the disclosure of madness in the public realm was dependant upon the dynamics of household life and family conflicts. Cases of madness would have remained unknown to us if not for a circumstantial disturbance in family life, that may even be disconnected from the existence of those deemed mentally incapacitated. R. A. Houston has termed these as contingencies, drawing on Erving Goffman’s \textit{Asylums}, which marked the appearance of madness in the records. As Houston puts it, “Appearing before an inquest, entering an insanity plea, or being committed to an asylum were exceptional experiences. Furthermore, the timing of an appearance depended on much more than a person’s mental state. (...) Certain triggers or ‘contingencies’ like the intrusiveness of behaviour may precipitate action by authorities, neighbours, or kin.”\textsuperscript{31}

Thus, the household can be approached as the place of convergence between different understandings of insanity, as the epicentre of the lay construction of madness that at the same time entailed a debate on the boundaries of normality. In shaping what was to be considered abnormal behaviour, people were defining normality, constructing their identities,


\textsuperscript{31} Houston, \textit{Madness and Society}, p. 91. Pieter Spierenburg and Giordana Charuty have arrived at similar conclusions from different perspectives. See Spierenburg, “Imprisonment and the Family” and Charuty, \textit{Le couvent des fous}. 

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and shaping their interiority. Improper behaviour was identified according to specific values that assigned the level and kind of “rationality” people were supposed to observe.

**Dialogues Between the History of the Family and the History of Madness**

The characteristics of the early modern family, the reduced involvement of medical opinion, and the fact that madness was largely kept at home makes the family an inescapable starting point for the history of madness. The family shaped the framework against which madness was understood, and created the possibilities for external intervention, be it communal, religious, medical, legal, or governmental. And yet, madness is a largely unexplored factor in the history of the early modern family. Taking into account that madness was kept largely at home during the early modern period, it is striking to acknowledge how we still lack studies on how mental afflictions tainted the course of familial life, changing the experience of family relationships, interfering in the distribution of power among its members, forcing them to devise special strategies or even affecting the forging of affectionate bonds. But the presence or identification of madness could also influence how the private life of families was exposed to the public, either in civil or criminal litigation, or in discussions regarding normativity within a changing scenario.

The lack of a connection between the history of madness and the history of the family reflects a mutual disregard for the concerns of each field, a situation that some scholars have tried to change. Fundamental to an opening up to the history of the family were the studies by Akihito Suzuki, which aimed to breach these two historiographies by examining the history of madness through the lens of the development of a domestic ideology.\(^\text{32}\) In Suzuki’s analysis, domesticity shaped the experience of madness, and it is fundamental to understanding how madness was understood and how families reacted to its presence. Following Suzuki’s lead, this study draws from studies of the early modern family to build a larger cultural framework into which understandings of madness can be inserted. By taking into account some of the particularities, developments and changes undergone by the eighteenth-century family, it sheds light on the perceptions of and responses to madness.

The overlap between madness and the family as objects of historical inquiry is in fact twofold. On the one hand, madness was a reality profoundly embedded in family life, as I have said. In a sense, therefore, to study madness outside the walls of mental institutions

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\(^\text{32}\) Suzuki, *Madness at Home.*
necessarily presupposes that we start from the familiar realm. But, the study of madness also sheds new light on some of the traditional problems of the history of the family. Let me demonstrate this by examining how the study of family litigation, one of the most fundamental and productive areas in the history of the family, can benefit from a study that takes into account madness as a category of analysis.

The early modern family has been a particularly productive research field in the last decades, inspiring a variety of approaches and a lively discussion. Particularly central to the history of the family has been the increasing recourse to studying the use of litigation in resolving private affairs between spouses, siblings or parents and children, and between different households and different family lines. The relational conflicts exposed in the courts of law demonstrate that litigants sought government arbitration to negotiate a wide range of issues, including personal expectations and compliance with behavioural norms, property management and economic practices.\(^{33}\)

An important point of concern in this discussion has been marriage, as the foundational institution of the European family, with its symbolic, economic and emotional significance. Marriage has been examined as an entry point for illuminating religious, political or social control, judicial norms and judicial practice, public and private relationships, agency, emotions, patriarchy and inheritance, distribution of powers and gender relations. Influenced also by the eruption of subjectivity and the “emotional turn”, recent studies have stressed the importance of the emotional dimension of the history of the family, incorporating the individual experience into the analysis. Marriage disputes, intergenerational and sibling conflicts, inheritance litigation, and any other family conflicts began to be examined as means of entry into the private experience of family members.

The historiography that draws from family litigation and which examines the family as it was represented in the legal records throws up particularly interesting aspects for a study of the history of madness. Early modern litigation illuminates issues as diverse as paternal and intergenerational relationships, the negotiation of behavioural norms according to age and gender, conflicting conceptions about economic management and transmission of the patrimony, the building of strategies and alliances between and against family members, the

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roles of kinship, the experience of marriage, the distribution of power, and gender relations.\textsuperscript{34} In all these aspects of familial life, the presence of madness, and the notions and reactions to it, left an indelible mark. Conversely, the characteristics of the family, its debates, its conflicts and its strategies of litigation profoundly shaped not only how madness was understood and how family members reacted to it, but also how madness was registered in the records.

The experience and development of marital disputes or intergenerational conflicts, to give just two examples, could be profoundly altered when one of the actors was held to suffer from a mental disturbance. Alternatively, mental disturbance could be argued to have instrumentally changed the outcome in a family dispute. For instance, studies on family litigation frequently examine disputes that placed drunkenness, extravagance and furious fits among the arguments raised against a spouse or a family member.\textsuperscript{35} However, scholars have generally not explored these kinds of accusations from a perspective that takes into account how drunkenness, fury or extravagance were increasingly connected to madness during the eighteenth century, or how similar descriptions appear in inquiries into mental capacity precisely to argue denunciations of madness. This is particularly interesting if we bear in mind that some scholars suggest that drunkenness and certain forms of fury were not deemed to be signs of mental disturbance in family litigation before the eighteenth century.\textsuperscript{36}

The introduction of madness into matrimonial disputes has been touched upon by some British scholars. Laura Gowing has suggested that seventeenth-century English matrimonial litigations give little evidence that wives or husbands would have recourse to “madness, mental distraction, or drunkenness [to] explain violence.”\textsuperscript{37} However, it is possible to find the association between wife-beating and irrationality in witness accounts, and, if we follow Joanne Bailey, the association between extreme forms of violence, irrationality and


\textsuperscript{37} Ibid., p. 219.
madness was entrenched by the eighteenth century. However, these constitute generally marginal commentaries, mostly associated with the problem of marital violence, within a research trend that is much more interested in other aspects of marriage breakdown than in the manifestations and understandings of mental incapacity. Drawing from these random pieces of evidence and based on the findings of the civil and criminal records examined in this thesis, I suggest that a deliberate intertwining of the findings of the history of madness with the findings of the history of the family could be immensely useful for a better understanding of how family disputes were argued in front of a court of law. Madness, particularly during the eighteenth century, seems to have been more visible or, at least, families decided to disclose it more often. Furthermore, notions of madness were not reduced to its furious types, encompassing instead various gradations and manifestations. What the records under examination in this thesis show is that litigants made instrumental use of the argument that their spouse was mad or that their son exhibited behaviours that were associated with madness.

Judicial practices were negotiated and even manipulated by family members to achieve their means. Fundamental to this discussion are the contributions of Martin Dinges and Mario Sbriccoli, who suggested the approaches of the uses of justice and of the interconnections between hegemonic justice and negotiated justice. Entangled with discussions about bottom-up models of social disciplining and negotiated forms of social control, the historiography of justice and family litigation opened up a new line of inquiry, which increasingly took into consideration the agency of litigants, the role of intermediaries in settling private disputes, and the range of alternative solutions for solving conflicts that did not necessarily entail following judicial procedures as the law had intended them to be followed. In this sense, scholarship on matrimonial litigation has claimed that the fact that litigants knew how to manoeuvre and manipulate justice, and that the judicial narratives were


manufactured with specific aims does not rule out their historical value. Litigants had to adapt their narratives to the legal scripts required in the legal space they turned to and to produce “plausible” stories. However, this does not transform them into mere fictional artefacts. Matrimonial litigation as well as the inquiries into mental incapacity studied here demonstrate that petitioners knew how much they were required to say, and how they were supposed to say it; but, beyond the script, we always find glimpses into private life, subjectivity and agency. Litigants had to adapt their narratives to the required legal script, but they nonetheless produced narratives that are unique and one of a kind.40

I would like to draw attention to the shaping of behavioural normativities that can be grasped in the judicial archives, particularly the use and abuse of the judicial instruments by private citizens. Litigation involving family life, in the words of Julie Hardwick, “engaged fundamental questions about household dynamics, about understandings of the relations between gender and authority, and about the significance of public discussion of personal behaviour.”41 Thus, recourse to litigation, being an intrinsic part of the mechanisms for exerting social control from below, enables us to study social debates about accepted behaviour and about the consequences of breaching the norms.42

Historians have stressed the fact that an overwhelming majority of the matrimonial disputes in early modern Europe derived from petitions by women.43 The predominance of female petitions connects historians to issues such as female sensibility, agency and women’s emotional expectations of their family worlds, regardless of whether they were written to “muovere a compassione l’interlocutore.”44 The way in which women appear in the trial

records is far from the common image that depicted them as weak, passive, helpless or victimized by men. On the contrary, they demonstrate a clear awareness of their power as “un’esperta conoscitrice non solo dei canali istituzionali cui rivolgersi, ma anche delle modalità più corrette per ottenere determinati scopi.”

Family litigation gives voice to personal expectations regarding the proper behaviour of a husband, of a son, of a wife, shedding light on the agencies of the different members of the early modern family. Scholars have enquired into what moved family members to denounce each other in front of a court of law, given that usually what was being denounced had been occurring for a long time before. This same problem also applies to the disclosure of madness in the Tuscan records, which also connects the historian with profound issues about expectancies, unfulfilled desires, frustrations and auto-determination.

Family disputes disclose behavioural disorders that were acknowledged as being responsible for the fracturing of familial harmony, as well as conduct that was identified as improper, dishonourable or contrary to the precepts ordained by gender roles. Thanks to significant contributions to the re-examination of patriarchy, gender identities have been approached in new ways that highlight the flexibility of their meanings according to the cultural context. In this regard, historians have called attention to the necessity of connecting the prescriptive discourse on gender roles to the experienced gender identity.

One excellent example of this is the growing fear that arose in Georgian England against profligacy. Nicola Phillips used the memoirs of a father who had recorded the descent of his profligate son into financial ruin, delinquency and moral depravation as her point of entry in order to examine intergenerational conflicts and clashing conceptions of social status, gentlemanly behaviour, masculinity and financial values. The father of the profligate son


was at first desperate and then firmly condemnatory of his son’s behaviour, until he eventually decided to observe and keep note of his son’s depravity by writing it down. Although Phillips only touches upon the connection between moral depravation and insanity (the profligate son of her study posed challenges to society that his contemporaries often took to be the result of mental affliction), her study does make a valuable point for the issues under discussion in this thesis. Mental and emotional disorders were conceived in terms of and recognized as a disruption of femininity and masculinity, filial duty, honour, fatherhood and motherhood, and so forth. Furthermore, her study brings to the fore what other studies have suggested regarding family disorders in that period.

The eighteenth century witnessed a clash between the generations over divergent ideals and conceptions of financial behaviour, autonomy, the value of social status, and proper manifestations of affection.⁴⁹ Enlightenment discourse tended to place increasing attention on disorders of the family, with the proliferation of moral literature promoting particular family values: maternal love, paternal love, parental virtues.⁵⁰

The family disputes that are disclosed in the denunciations of prodigal behaviour and of mental incapacity, both of which constitute the bulk of the cases examined in this thesis, shed light on the active relationships between family members, disclosing day-to-day mechanisms for resolving discords or for devising obstacles to the implementation of patriarchal power. In her discussion on the limits and dynamics of patriarchal power, Linda Pollock has examined the hidden nuances behind a family dispute over patrimony and inheritance.⁵¹ Power relations were not static, and patriarchal power could be hindered by alliances and strategies such as declaring the head of the family as “mentally incapacitated”, and accusing him of “deranged behaviour.”⁵² In this context, as I will argue, the study of the records of madness sheds light on the emotional world of the early modern household from a new perspective, that of the resources employed to deal with disruptive relatives, and, at the same time, reflects the abuse of such labels to win a family dispute.

It is precisely this connection between the definition of gender roles, family conflicts, and madness that has been missing for the early modern period, save for the studies on

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⁴⁹ For two accounts on different aspects of this new setting, see Lombardi, *Matrimonio di antico regime* and Roberto Bizzocchi, *Cicisbeis. Morale privata e identità nazionale in Italia* (Roma-Bari: Laterza, 2008).


⁵² Ibid., p. 10.
inquiries into mental capacity cited above. In this regard, the history of the family, with its special concern for gender as an analytical category, can enrich the discussion on the construction of psychiatry and the shaping of new notions of mental incapacity in the eighteenth century. At the same time, the examination of social perceptions and meanings of madness may shed new light on the experience of the early modern family, how gender roles were debated and performed in practice, the mechanisms by which the allegedly weak members of the family could change the balance of power, and, to give a final example, the concerns and management of conflicts within the eighteenth-century family.

*Interdiction Procedures and the Itineraries of Madness*

This thesis deals with the itineraries and languages of madness in eighteenth-century Tuscany, taking into account the connections between lay, legal and medical understandings. It has two primary aims. Firstly, to examine how mental afflictions were identified, experienced and understood by Tuscan families and, secondly, to explore how, when and with what outcome families resorted to the public provisions devised to respond to the problems posed by madness. The study of the itineraries of madness sheds light on how public provisions to tackle the problems of madness served as a space of encounter between families, medical practitioners and government officials in order to negotiate the meanings, indicators and languages of madness.

We have seen that, before the nineteenth century, the mentally disturbed were kept largely at home. However, this does not mean that madness left no trace in the records during the period. In eighteenth-century Tuscany, there were various courses of action that families could resort to when they had to deal with a mentally disturbed relative. They could seek medical help, or they could turn to family networks, priests or neighbours. They could try to make different household arrangements, and change, for instance, the distribution of roles or the household disposition. Many of these arrangements, as one might expect, left no trace. But there were a range of other resources available for families that did leave a mark, some of which constitute the core of this study. Depending on the case and the conflicts caused by the mentally disturbed, families could request that a government official visit them and try to produce a change in behaviour, or they could ask the local authority or the chief of police to

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issue an official reprimand. When these failed, they could combine legal admonishments with temporary imprisonment, house arrest or internal exile. They could press criminal charges when the behaviour breached the law or they could commit the disturbed person to a mental hospital. Finally, they could also request for them to be interdicted and placed under guardianship.

The itineraries of madness in this thesis start with interdiction procedures, which experienced a notable increase during the century. This is followed by a discussion of criminal insanity and mental institutions, to then examine special requests and other temporary measures. By following the itineraries of madness, I examine how families negotiated understandings and responses to madness with governmental authorities, medical practitioners and judges. The thesis suggests that the understandings of madness were socially embedded, eminently contextual and relational, and codified through culturally meaningful definitions. The narratives of madness show that lay society relied upon its own cultural background in order to identify and explain madness. Strongly conditioned by the purposes of the legal procedures and the foundations of Tuscan society, definitions of madness had been traditionally centred around property and economic behaviour. I argue that the Tuscan legal framework provided open and deliberately vague categories of madness and mental incapacity (prodigo, demente, mentecatto), which derived from a long tradition and remained mostly unchanged. However, while in terms of legal vocabulary long-term continuities seem to predominate, the eighteenth century brings to the fore new concerns and a new codification of familial conflicts, which resulted in a shift in the meanings of madness. The understandings of madness became increasingly open to other aspects of familial and social life, and more importantly, ascribed new roles to tackle its consequences.

Given that the legal language was based on a basic set of categories that remained mostly unchanged, narratives of madness and mental incapacity were able to include new meanings, and expanded to encompass the new social and familial concerns of the century. The eighteenth century saw challenges to patriarchal authority, conflicting expectations over marriage, motherhood, fatherhood and the responsibilities of a first-born, intergenerational conflicts and new forms of affection. All of these, combined with the anxieties generated by disobedience and sexual permissiveness, were the gauges of the debate around mental deviance. To expose these issues, the narratives of madness increasingly delved into the relational dimensions of mental disturbance, paying particular attention to certain forms of emotional disruption. In contrast with the unchanged legal categories of pazzo, demente and
prodigo, we can observe the appearance of the culturally meaningful stravaganza (extravagance), inquietudine (uneasiness), alterazioni and soppressioni di spirito (alterations and oppressions of spirit) or carattere irregolare, volubile and incerto (irregular, changing or uncertain character). These eminently lay forms for describing mental instability are coupled by the changes observed in the medical language, with the appearance of new terminologies that pointed to a diseased brain as the origin of mental affliction, and also paid increasing attention to emotional disturbances in the aetiologies of madness.

It has been pointed out that a constitutive feature of early modern justice was that it was predominantly used to resolve conflicts that had been engendered in the familial realm. Early modern societies turned to the judicial apparatus for mediation in their familial conflicts. The eighteenth century witnessed the explosion of family conflicts in the administration of justice, exposing to the public the private Désordre des familles. The particularities of this new exposure in Tuscany lie in the channel employed, the kinds and contents of the conflicts disclosed, and the solutions followed to resolve them. On the one hand, the increasing number of interdiction procedures suggests that families had found a new channel through which to vent family conflict. But, the changes observed in the languages of madness also suggest that the concerns of the families were increasingly being placed on the relational dimension, and were centred around emotional instability. Finally, in a context where the majority of the reported sources of conflict were produced by male insanity, the solution to family disorder and to patrimonial mismanagement was placed in the hands of women, who were entrusted with the task of domesticating male irrationality. Thus, I suggest, interdiction procedures positioned women as “rational” agents of the family group who had to control the effects of male irrationality.

The basic source of this study is the archive of the Magistrato dei Pupilli, the Tuscan Court of Wards concerned with administering the patrimony of orphans whose fathers had died intestate, and of adults with physical and mental disabilities. Although inquiries into mental capacity were part of the public provisions devised to respond to the problems posed by madness in various European scenarios, this archive can certainly be taken to be a remarkable exception. The existing studies in the field suggest that European records of inquiries into mental capacity are more generous in providing a nuanced and lively picture of

madness than the image usually provided by hospital or criminal records. However, they generally lack the long-term perspective offered by the records of the Magistrato dei Pupilli.\footnote{Houston, Madness and Society; Cartayrade, “Property, Prodigality, and Madness” and Suzuki, Madness at Home.} The time framework covered by the Pupilli archive is, for this reason, remarkable. The bulk of the studies on inquiries into mental capacity have focused on the records left by the procedures undertaken before it was decided that the person needed to be placed under guardianship. This means that, although these studies focus on narratives that illuminate not only the present of the reported mental condition but also its past, they are usually silent about what happened afterwards. On the contrary, the records of the Magistrato dei Pupilli do not stop once the interdiction was decreed, but rather begin with it.

This archive provides an invaluable opportunity in which to trace the different layers that composed the understandings of madness. We not only find the petition, testimonies, the inquiries and opinions of the authorities, and the interdiction decree, but also a wide range of subsequent records that continue to shed light on many aspects of the life of the interdicted and their families.\footnote{The foundation of the Magistrato dei Pupilli, and the characteristics of the interdiction procedure are examined in Chapter One.} As a result, the historian is able to examine how madness was understood and experienced at different times of a person’s life, sometimes throughout their entire adult life. Furthermore, the voices recorded are varied, providing different perspectives and experiences, from the point of view of different members of the family, neighbours, medical practitioners, priests and authorities, to that of the allegedly mentally afflicted. Furthermore, these voices appear during different stages of a person’s life. For this reason, we are able to grasp how perceptions of a person’s madness changed with time, adapting to different contingencies and expanding in response to changing concerns. The greatest bias of this source derives from its very purpose. Given that its primary purpose was to protect property from mismanagement, it only informs on the mental affliction of property holders, keeping in the dark not only the experience of madness suffered by the poor but, to a great extent, by women too. This does not imply that women are silent, as I have already explained, and in fact it provides an interesting view that takes issue with the notion of the feminization of madness, as I will discuss further below.

To counterbalance the limitations provided by the Pupilli records, the thesis also examines the appearance of madness in the criminal procedures of the Otto di Guardia e Balìa, the Tuscan criminal court, the records of the Pia Casa di Santa Dorotea dei Pazzarelli,
the Tuscan mental hospital, and in special requests to the Grand Duke handled by his chief of Police, the Auditore Fiscale. This thesis is particularly concerned with lay (meaning here not specialized or professional) perceptions of insanity, and the ways in which social language came to use legal and medical terms to describe insanity. For the same reason, medical and legal languages are approached as embedded in the social realm, and feeding off the families’ experience and perception of the phenomenon. In other words, insanity is examined from the bottom up, which also explains the structure of the thesis. This strategy allows me to examine the echoes of lay language that can be found in medical testimonies of insanity, and to trace the extent to which medical language evolved as detached from the social. For the same reason, I have decided not to examine eighteenth-century medical treatises on insanity in depth, although these will be used as references to the linguistic backgrounds.

The thesis employs gender as a category of analysis to examine the distribution of power inside the household. In this realm, the study of the mechanisms available to families to cope with the problems posed by madness offers particularly interesting results. As the thesis will later show, the pattern that emerges when families came under the strain of the presence of mental affliction in the head of the family is for women to take this post. In response to the disorder produced by mental affliction, government officials and families negotiated the temporary empowerment of women, who were generally appointed administrators to their husbands or son’s patrimonies, and were the preferred interlocutors of the authorities.

Mental incapacity and madness in general constitute objects of historical inquiry that mirror wider phenomena, from the negotiation of behavioural norms, the settling of age-specific and gender-specific expected behaviour and emotional reactions, to family relationships, medical practice and the social experience of disease. In this sense, although this thesis is concerned with a Tuscan problem, its main questions and theoretical approaches come from other European frameworks. Although this study does not openly employ a comparative or transnational perspective – even if I do make connections to the European context and discuss studies on other geographical frameworks – it does benefit from some of its theoretical and methodological approaches.

Scholarship on the history of science has been occupied over the last years with transnational circulations of scientific knowledge in the early modern period, inside Europe

57 The characteristics of these sources are discussed in Chapter 5.
and, increasingly, across empires. The model of interconnected intersections and circulation is of significant value in shedding a new light on the problem of madness, even if at a “local” level. Using this model allows me to examine the multilevel interactions between lay society, medical knowledge, judicial practice and governing dispositions from a point of view that takes into account mutual accommodations, negotiations and rejections. This thesis is largely concerned with the circulation of languages among different spaces and cultural communities (i.e. the household domain, neighbourhood, medical profession, legal profession, government officials). The underlying idea is that notions of madness were shaped by a multilevel crossing of factors, including a shared cultural understanding regarding proper and improper behaviours, and the circulation of judicial principles and medical knowledge, which at the point of interaction were adapted and reshaped in manifold ways.

In terms of its temporal framework, the thesis covers the period roughly from 1700 until 1780, but the margins are flexible. Various chronologies coincide in this decision. The broader reasons for placing the study in the eighteenth century have already been discussed, both in relation to the chronologies of the history of madness and the history of the family. But, other practical considerations were also taken into account. The beginning of the century was marked by the disastrous end of Medici rule and the beginning of the Lorraine period in 1737. However, the characteristics of the Regency entailed that institutional changes were not immediately perceived. In terms of the management of madness during the first half of the century, the biggest change was produced by a reform of the statutes of the Magistrato dei Pupilli, which resulted in a dramatic increase in the numbers of interdictions starting from

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58 See, for instance the study of Maria Böhmer on the circulation of early psychiatric ideas at the beginning of the nineteenth century. Maria Dorothee Böhmer, “The making and travelling of knowledge: a biography of a medical case history in 19th century Europe” (PhD Dissertation, European University Institute, 2013). To understand, for instance, the shaping of shared medical conceptions in early modern Europe, medical consultation by letter is a privileged topic for the approach of cultural transfer and circulations of knowledge. See, for instance, Nancy Siraisi, Communities of Learned Experience. Epistolary Medicine in the Renaissance (Baltimore: Johns Hopkins University Press, 2013), or Hubert Steinke and Martin Stuber, “Medical Correspondence in Early Modern Europe. An Introduction”, Gesnerus 61, no 3/4 (2004), pp. 139-160. For a recent contribution to the circulations and negotiations of scientific knowledge across empires, see László Kontler, Antonella Romano, Silvia Sebastiani and Borbála Zsuzsanna Török (eds.) Negotiating Knowledge in Early Modern Empires: A Decentered View (Basingstoke: Palgrave Macmillan, 2014).

59 Michael Werner and Bénédicte Zimmermann, “Beyond comparison: Histoire Croisée and the challenge of reflexivity”, History and Theory 45 (2006), pp. 30-50 and Michel Espagne, “Comparison and transfer: A question of Method”, in Matthias Middell and Lluis Roura (eds.), Transnational Challenges to National history Writing (New York: Palgrave Macmillan, 2013), pp. 36-53. For reasons of time and space, I was not able to examine the role of mediators or, to put it better, translators individually in these mutual interactions, but this could certainly be a line of future enquiry. One could identify and follow lay agents, government officials, medical practitioners and priests so as to build a map of the networks of interaction. This has been done to an extent in Chapters 6 and 7.
1718. However, the other spaces of madness remained mostly unaltered until 1750, when a law changed the procedure of admission to Santa Dorotea by making it open to any patient regardless of whether they could pay the required fee or not. This produced a radical increase in the number of patients, which augmented the visibility of madness already resulting from the interdiction procedures.

The mid-eighteenth century was in fact a landmark period also for the changes that can be observed in the languages of madness, when a turn to more nuanced conceptions can be observed. The decision to limit the search to the 1770s was motivated by two factors: on the one hand, the decade constitutes another turning point in the history of madness, with the introduction of a series of reforms for the management of madness that definitively changed its face. In 1767 interdiction procedures were declared free of charge (significantly widening their range of impact), and in 1785 Vincenzo Chiarugi assumed the direction of Santa Dorotea, while in 1789 he wrote the new regulations for the management of mental patients in the new psychiatric hospital of San Bonifazio.\textsuperscript{60}

The thesis is structured into seven chapters. The first chapter is concerned with the foundations of the Magistrato dei Pupilli and the characteristics of interdiction procedures in Tuscany, providing also a contrast with other European inquiries into mental capacity. The second and third chapters examine the categories and languages of mental incapacity, explaining why petitioners resorted to interdiction, how they framed their denunciations, and how interdiction procedures functioned within the debate on expected codes of behaviour. The fourth chapter explores some of the consequences of the fact that women were seldom interdicted in early modern Tuscany, providing insight into how female mental affliction was perceived, and why women hardly appear in the records. These first four chapters constitute Part One of the thesis, which is concerned with the familial experience of madness and the process by which families chose to resort to the Grand Ducal administration to request mediation.

The remaining chapters examine the other elements that complete the experience of madness in eighteenth-century Tuscany. The fifth chapter expands its view into other institutional spaces where madness was recorded (criminal records, mental institutions and special requests to the Grand Duke), to propose that provisions for addressing the problem of

madness formed a network of itineraries to which families could resort. The sixth chapter explores the counterpart to the familial language examined in the first part of the thesis, examining the role of medical opinion in the legal assessment of madness, the circulation of medical categories, the role of priests as recurrent witnesses and, finally, the role of the Auditore Fiscale. The latter appears as a new expert on madness, who functioned as the central piece connecting the networks of understandings of madness that circulated within the different institutional spaces. The final chapter examines the circulation of lay, medical and legal understandings of madness through the new role ascribed to emotional disturbances as the defining indicators of the presence of mental affliction.
PART I. MADNESS IN THE FAMILY
Chapter 1. Interdiction Procedures: A Context for Public Intervention in Family Life

Interdiction is a legal measure with ancient roots that is still in force today, devised to provide protection and care for the mentally impaired. An interdiction sentence deprives a person deemed mentally incapacitated of his or her civil rights, and determines the need for a guardian to protect the interdicted, administer their patrimonies and act in their name. In early modern Tuscany, interdiction procedures were managed by the Magistrato dei Pupilli et Adulti, the Tuscan Court of Wards in charge of guardianships and administering the patrimonies of orphans whose fathers had died intestate and of adults with physical or mental disabilities.

This chapter investigates the legal and institutional context of the Magistrato dei Pupilli and the development of interdiction procedures in Tuscany, examining them against other European contexts, to present a European legal framework in which the Tuscan case can be inserted. It explores the general characteristics of interdiction procedures, their categories and functioning, to argue that they constituted a negotiated intervention of governmental authorities into the private life of families. Interdiction procedures, resorted to in order to resolve familial conflicts as much as to control the economic consequences of mental incapacity, shed light on the explosion of private family life into the public arena.

1. 1. The Foundations of the Magistrato dei Pupilli and its Involvement with Mental Incapacity

The foundation and development of the Magistrato dei Pupilli is deeply associated with the process of state building in Tuscany, from the configuration of the Florentine Republic and its transformation into a Grand Duchy, to the end of Medici rule, the incorporation of Tuscany into the Hapsburg Empire and the Lorraine reforms, until its dissolution in 1808 during the Napoleonic period. Throughout its remarkably long and stable existence, the Magistracy underwent two major reforms, the first in 1473 and the second in 1565, both aiming at expanding its duties.61

61 The medieval statutes were compiled by Francesca Morandini in “Statuti e ordinamenti dell’Ufficio dei Pupilli et adulti nel periodo della Repubblica fiorentina (1388-1534)”, Archivio storico italiano 113 (1955), pp.
The Magistrato dei Pupilli was founded in 1393 by the Florentine Signoria to provide governmental guardianship to families experiencing the devastating effects of the Black Death. It was not only a somewhat belated addition to the diverse communal provisions to respond to the effects of the demographic crisis, but it was also originally devised as a voluntary alternative to familial guardianship. The foundations of the Magistrato dei Pupilli circumscribed its area of involvement exclusively to underage wards, although scholars have claimed that already during this first stage the Magistracy timidly mingled with the curatorship of mentally or physically impaired adults, despite the fact that its regulations made no direct reference to this capacity. For instance, Magherini and Biotti suggested that the Magistrato dei Pupilli in practice extended its area of responsibility to include the curatorship of the insane from its early beginnings, an involvement for which Elizabeth Mellyn has, nonetheless, found evidence in only 4 cases.

Adult guardianship (curatela) during this period was also available through the court of the Podestà (the highest authority involved in civil justice during the Republic). In fact, the later provisions of the Magistrato dei Pupilli for mentally and physically incompetent adults, which were in force until the dismantling of the Magistrato dei Pupilli in 1808, were based on the 1415 statutes of the Comune di Firenze. These statutes stated, in rubric 118 of the second book, that adults could be interdicted “per via ordinaria” following the request of a close relative, which had to be supported by the testimonies of two trustworthy witnesses. However, the statutes of the Florentine Comune made provisions for responding to the dangers posed by economic mismanagement without giving any explicit definition of the reasons for which a person could be interdicted, beyond economic mismanagement.

In 1473 a major reform of the statutes of the Pupilli established state guardianship as an obligatory task of the Florentine government, changing dramatically the purposes,
functioning and scope of the magistracy. The reform entrusted the Magistrato dei Pupilli with the mandatory guardianship of orphans from Florence and its entire territory whose fathers had died intestate or without having assigned a tutor, and with the administration of their patrimonies. As a result, the Pupilli officials were granted exclusive authority to administer and protect their wards’ patrimonies and to appoint them suitable tutors, and they were also empowered to intervene in crucial matters affecting the personal destinies of the wards (from education to marriage). As the historian Caroline M. Fisher has claimed, state guardianship “was the most direct and comprehensive way in which the Florentine government intervened in the affairs of its subjects.”

The 1473 reform also introduced for the first time a rubric with provisions for “the mad [mentecapti], dumb and deaf entrusted under the guardianship [cura] of the said Office”, which declared that “those men or women who have passed the age of 18 years old and who are out of their natural senses [fuori del naturale sentimento]” could be entrusted to the authority of the Pupilli, as was common practice with minors. The requisite measure was, though, that they were first declared by the officials of the Pupilli “to be mad [mentecapti] and out of their natural senses and that it has been agreed for them to be placed under the government of the said office.”

The categories at this stage were highly exploratory. The word mentecapto literally meant to have one’s mind captured or injured, and served to make a loose reference to mental illness, while sentimento, referred also to the intellect, and meant in this context senses or wit, intellect, judgment. In particular, esser fuor del sentimento meant “lose one’s wit, go mad or be mad.” Therefore, without clearly setting the procedure nor the categories of adult incapacity accountable for guardianship, the statutes of 1473 opened the


door for the state guardianship (cura) of adults with physical and mental disabilities, which would later be known as the interdiction procedure affecting prodigals and the demented that constitutes the core of this study.

Further clues concerning the categories accountable for the interdiction and guardianship of the mentally disabled appeared in 1565, when a new reform specified the involvement of the Magistrato dei Pupilli with adult guardianship. This statute reform restated that not only minors were entitled to the guardianship and protection of the Magistrato dei Pupilli, but also adults when they were found to be incapable of managing their affairs. The reform stated that the Pupilli officials could accept under their guardianship [cura] the dumb and deaf “of any age at the request of any individual without any other formality to be observed.” They could also accept under their guardianship “the raving mad (furiosti), the fools (mentecatti) and demented (dementi), or prodigals (prodighi) and squanderers (dilapidatori) of their patrimony and belongings”, which it was “of public interest to preserve.”

This statute reform not only added more categories of adult incapacity accountable for state guardianship, but also specified the procedure to ascertain the veracity of the denunciation and thus establish the need of the interdiction. The provisions operated under the principle that in the case of prodigals and the mentally incompetent, abuses had to be prevented, for “out of malice or any other cause someone could be called or reputed to be as such without being it.” For this reason, the statutes established that in these cases adults could only be submitted to the “guardianship and government” of the officials of the Pupilli after their prodigality or insanity had been previously confirmed by the Magistrato Supremo, or following a direct commission from the Grand Duke. In contrast, guardianship of the dumb and deaf could be established without any further confirmation besides the relatives’ request. Finally, it was stated that all incapacitated adults had to be “interdicted” from the


70 “Provvidono et ordinorno, che li prefatti Uffitiali non possino accettar’ alcuno per furioso, mentecatto demente, o prodigio, et dilapidatore delle substanzie et facultà sua, se non per commissione di S.E.I. o, se prima non sarà chiarito tale dalli Mag.” S.1 Logotenente, et Consiglieri per loro decreto”. Ibid, fol. 4v.
administration of their patrimonies to preserve their properties and that the “interdiction” was to be publicised through bandi placed in public places.\textsuperscript{71}

In 1680, a new reform of the Pupilli statutes was issued to ensure the proper observance of the 1565 statutes. As the new law declared, “part of the things disposed in those Laws and reforms are neglected and not properly observed, and another part of them need new additions, statements and provisions.”\textsuperscript{72} Particularly regarding the provisions for the mentally incompetent, the new dispositions made evident the jurisdictional overlap between the Magistrato dei Pupilli and the Magistrato Supremo produced by the reform of 1565. These dispositions had stated that mental incapacity had to be confirmed by the Magistrato Supremo, which was a condition for the Pupilli to be able to assume the management of the guardianship. Moreover, the interdiction decree had to be issued by the Magistrato Supremo, and only after that could the Pupilli assign a suitable guardian to administrate the patrimony. The fact that the 1680 reforms needed to ratify that the Magistrato dei Pupilli was the institution with the prerogative over guardianship of adults, and thus over the administration of their patrimonies, suggests that the Magistrato Supremo had been trespassing into the Pupilli’s territory. To counterbalance this situation, the reform highlighted that the requisite that subjected the Pupilli’s power of intervention to the command of the Magistrato Supremo, had “neither removed nor diminished” the faculties of the Pupilli over matters affecting the mentally incompetent. To guarantee the observance of the rules, the reform commanded that after the officials of the Magistrato Supremo had confirmed a person’s incapacity, the guardianship was to be entrusted to the Magistrato dei Pupilli, “save, nonetheless, for the cases where, given the circumstances of involvement, it would seem more convenient that the Magistrato Supremo itself appointed those curators, attori, or relatives that were considered necessary and opportune…”\textsuperscript{73}

\textsuperscript{71}"...per preservatione de loro beni et substantie detti offitiali possino et debbino interdire loro l’amministrazione, et mandar bandi ne luoghi publici et consueti della città et altrove, che detto tale e sotto la cura del loro Magistrato..." Ibid, fol. 4v-5.


\textsuperscript{73}“E perchè la Provvisione suddetta non ha levato, o diminuito la facoltà ordinaria competente al Magistrato de’ Pupilli di soprintendere specialmente al governo di simili imperfetti, o per l’età, o per gli accidenti, ma solamente ha provvisto, che l’imperfezioni siano o comandate dagl’ordini di S.A. o riconosciute dal Magistrato Supremo: Perciò il medesimo Magistrato Supremo, secondo la proposizione fattale dai medesimi Clarissimi Riformatori, dichiarò, e dichiara, che dopo fatta dal Magistrato loro la riconoscizione suddetta commetterà alla cura del Magistrato de’ Pupilli l’Amministrazione di simili persone, salvo però i casi ne’ quali per le circostanze
These special cases in which the administration could fall under the direct oversight of the Magistrato Supremo referred in practice to the Cavalieri of the Order of Santo Stefano, and other privileged men and women whose cases were thought to be better protected if concealed under the wing of the Magistrato Supremo. Certainly, less scandal was guaranteed to families if their relative’s incapacity was not publicised through bandi proclaiming the interdiction, as the Pupilli’s statutes commanded it do in similar cases. But, beyond the issue of privileged litigants, the debate over the jurisdiction of guardianships was largely centred on the distribution of the profits derived from the administration of the patrimonies. Since its foundation, the Pupilli had been burdened by financial constraints, which led the officials throughout the magistracy’s existence to devise mechanisms to ensure a sustainable income for the office. This was basically contingent upon the capacity of the ward’s patrimony to pay the designated fees in return for the magistrates’ services, and upon the ability of the magistrates to ensure that the fees were actually paid. State guardianship was designed as a government service that had to be profitable in order to continue to function, and after 1680 the overlap between the Supremo and the Pupilli continued to be hotly debated.

The overlap of the spheres of action between the Magistrato dei Pupilli and the Magistrato Supremo is not a coincidence nor an isolated event, but a constitutional part of the “institutional pluralism” than characterized the Grand Duchy of Tuscany until the Lorraine reforms. In fact, scholars have engaged in a lengthy discussion regarding the institutional disorder that characterized the bureaucratic apparatus of the Grand Duchy, only radically reformed by Peter Leopold in the eighteenth century. Without intending to enter the debate...
over the decadency that allegedly characterized the last period of the Medici family, the fact remains that jurisdictional overlap and “juridical and institutional pluralism” were characteristic.\textsuperscript{77}

This is particularly clear as regards the Magistrato Supremo. Also known as the Tribunal of the Prince (\textit{Tribunale del Principe}), the Supremo was presided over by the Grand Duke’s lieutenant (the \textit{Luogotenente}) and his advisors (\textit{Consiglieri}). Established as the highest civil court in Tuscany, its jurisdiction and competencies overlapped with many other magistracies, particularly the Ruota Civile and the Magistrato dei Pupilli.\textsuperscript{78} The recurrent arbitrary extension of the Supremo’s jurisdiction generated a lively discussion at the end of the seventeenth century, and led to a series of reforms, as the law of 1680 regarding the Pupilli statutes attests.\textsuperscript{79}

As a result, the virtual disappearance of guardianships by reason of mental incompetence observed by Mellyn in the records of the Magistrato dei Pupilli during the seventeenth century is likely to be the result of the Supremo’s involvement.\textsuperscript{80} Magherini and Biotti have attributed this decline in the Pupilli involvement to the 1680 reform of the statutes. They claim that changes brought by this law entailed a significant reversal to the Pupilli’s “prerogative” over the mentally incompetent, so long as it determined that in special circumstances the Magistrato Supremo officials could directly designate the curator and supervise the guardianship without the intervention of the Pupilli.\textsuperscript{81} However, in my view the

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\textsuperscript{79} The atmosphere of these debates and the aspirations of the reformers have been examined in Marcello Verga, “La ruota criminale fiorentina (1680-1699). Amministrazione della giustizia penale e istituzioni nella Toscana medicea tra Sei e Settecento”, in Mario Sbriccoli and Antonella Bettoni (eds.) \textit{Grandi tribunali e Rote provinciali nel tramonto degli Antichi Regimi} (Milan: Giuffrè, 1993), pp. 179-226 and Mannori, “Effetto Domino”.

\textsuperscript{80} Mellyn, \textit{Mad Tuscans and Their Families}, p. 14.

\textsuperscript{81} “...con la riforma del 19 luglio 1680 si attribuisce al Magistrato Supremo anche il potere di nomina diretta di curatori e attori per soggetti riconosciuti mentecatti o prodighi, riservando al Magistrato de Pupilli il controllo
decline of the Pupilli’s involvement in the affairs of the mentally incompetent has more to do with the general overlap that characterized the Tuscan administration rather than with a deliberate reduction of the Pupilli’s competences over mental incapacity. This is particularly the case if we take into account that many laws were not followed, even if they were continuously ratified and published. The fact that the Magistrato dei Pupilli’s competence over the guardianship of incapacitated adults had to be ratified through a series of reforms during its whole period of existence needs to be interpreted in the light of the institutional disorder and lack of clear boundaries between the different public offices that characterized the Grand Duchy. It highlights, furthermore, how the absence of a general compendium of the laws and provisions that regulated the Duchy seriously impacted upon its functioning.\(^{82}\)

Taking these issues into account, I suggest that the 1680 reform needs to be examined from a long-term perspective. On the one hand, it aimed to restrict the excessive involvement of the Supremo in the affairs of the mentally incompetent, not to augment it. We must take into account the fact that the Supremo had been intervening in interdictions and the management of adult guardianships since at least the 1565 reform, even though officially its involvement was supposed to be restricted to the ratification of mental incapacity. On the other hand, the evidence irrefutably shows that starting from the second decade of the eighteenth century, interdictions were predominantly managed by the Pupilli alone. Furthermore, if between 1387 and 1500 Mellyn has been able to find only four guardianships by reason of mental incapacity and 90 between 1500 and 1600 in the Pupilli records,\(^{83}\) the numbers for the eighteenth century suggest a dramatic increase, exceeding 600 hundred cases between 1700 and 1775. Plus, the evidence shows that during the eighteenth century, the officials of the Supremo reduced their involvement almost exclusively to the role of certifiers of mental incapacity. Now, this change was certainly not caused solely by the 1680 reform. The turning point for this issue was finally achieved through the new regulations introduced in 1718.

The evidence suggests that the 1718 reform constituted a watershed for the activity of the Magistrato dei Pupilli. This new law stemmed from the government’s observation that the

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82 For the contemporary discussion on the convenience of creating a compendium of the laws and regulations in force on the Grand Duchy, see Pansini, “Il Magistrato Supremo”, p. 297. Also Edigati, “Da una raccolta di leggi e bandi”, in Montorzi, Tecniche di normazione e pratica giuridica.

83 Mellyn, Mad Tuscans and Their Families, p. 38.
dispositions made in 1565, and ratified in 1680, regarding the management of the interdiction and curatorship of adults manifesting mental or physical incompetence were not “accurately observed.”84 As a result, the new regulation ratified once more the Pupilli’s competence over the interdiction and guardianship of adults with mental or physical disabilities, only this time it clarified that this jurisdiction pertained exclusively to the Pupilli. The law declared that, henceforth, “the dumb and deaf, the raving mad (furiosi), the fools (mentecatti), the demented (dementi), prodigals (prodighi), squanderers (dilapidatori), or others to whom it may be convenient to interdict from the administration of their possessions and faculties” were “exclusively (privativamente)” under the jurisdiction of the Magistrato dei Pupilli.85 “No other tribunal or judge” could intervene in the affairs of the mentally or physically incompetent, and the involvement of the Magistrato Supremo was circumscribed to “declare, either by commission of His Royal Highness, or by their own decree if anyone is furioso, mentecatto, demente, prodigo, dilapidatore, or any other whom it might be convenient to interdict.”86 But, beyond the assessment of mental incapacity, the new regulation specified that they could not intervene any further. Immediately after a person was declared to be suffering from mental incapacity, the case had to be transferred to the Pupilli so that its officials could appoint a curator, supervise the administration of the ward’s patrimony, and manage all the judicial activities involving them.

A simple quantitative analysis attests to the fact that the 1718 reform represented a milestone for the functioning of the Pupilli. Following the reform, many cases that until then had been managed by the Magistrato Supremo now passed to “the protection and rule” of the Magistrato dei Pupilli, which explains the dramatic rise in the number of interdictions during the years immediately following the reform.87 As can be seen in Figure 1, before 1718 the number of interdiction decrees managed by the Magistrato dei Pupilli oscillated between 0 to

85 Ibid.  
86 Ibid.  
87 See ASF, MPAP, Campione di Deliberazioni e Partiti, F. 112, year 1717, F. 113, year 1718 and F. 114, year 1719 and following, and also ASF, MPAP, Memoriale e Informazioni, F. 2299, corresponding to the years 1688 – 1722. As an example, see the case of Gio. Batta Arrighi, interdicted in 1700, passed to the authority of the Magistrato dei Pupilli in July 1718, because “dopo che in ordine al Motuproprio della medesima A.V. R. de 28 Gennaio 1717, circa quelli a quali è interdetta l'amministrazione, abbiamo poste le mani nel maneggio della interessi di Gio. Batta Arrighi”, ASF, MPAP, Memoriale e Informazioni, F. 2299, no. 383.
3 every five years. In contrast, after the reform there was a marked increase in interdictions, rising from 17 interdictions between 1718 and 1720 to 44 over the next five years.

Figure 1: *Number of interdiction procedures recorded in the Magistrato dei Pupilli between 1686 and 1725 every 5 years*


Although since 1565 adults with physical or mental disabilities “could” be submitted to the authority of the Pupilli, in fact only a minority of curatorships for the mentally incompetent were managed by the Pupilli. This can partly be explained as the effect of the Pupilli’s involvement, but also as evidence that families simply resorted to the mechanism in a smaller proportion than during the eighteenth century. From the perspective of the Pupilli officials, the involvement of the Supremo hampered their ability to proceed with the necessary provisions in order to assume the management of the curatorships. The requirement that mental incapacity had to be asserted first by the Supremo so that the Pupilli could “intervene to assist and oversee the interests” of the mentally incapacitated made the procedure less efficient than was desired. But the real problem, according to the Pupilli officials, was the lack of clarity regarding the management of the curatorship after the

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88 ASF, MPAP, *Memoriale e Informazioni*, F. 2299, no. 117, 8 January 1693/94.
defendant’s incapacity had been confirmed by the Supremo, or after the Grand Duke had ordered his interdiction, which allowed for the officials of the Supremo to assign a guardian (curatore) without turning the matter over to the hands of the Pupilli officials. When this occurred, the administration of the interdicted person’s patrimony was often left unsupervised, and the lack of authority of some appointed curators allowed the interdicted to continue managing their affairs in spite of the interdiction. Similarly, the officials complained that the curators would do and undo to their own advantage because they “were not under the eyes” of the Magistrato dei Pupilli.89

 Nonetheless, the change in the procedure needed time in which to adjust, and it required numerous debates between the Pupilli and the Supremo officials regarding their conflicting competencies over the matter. The 1718 reform was recurrently cited by the Pupilli officials as proof of their exclusive jurisdiction over the mentally incompetent in interdiction procedures during the following years. This could happen when petitioners asked the Pupilli to only appoint a curator, requesting for the defendant not to be submitted to the authority of the Pupilli, or when they asked for the defendant to be submitted to the authority of the Magistrato Supremo, instead of to that of the Pupilli. Finally, it also occurred, for instance, when creditors tried to initiate litigation involving an interdicted person in the Tribunale di Mercanzia, despite the regulations which established that all judicial matters involving the interdicted were to be resolved by the Pupilli. In most cases the Pupilli succeeded in defending its complete jurisdiction over the affairs of the mentally afflicted.

1.2. The Interdiction Procedure during the Eighteenth Century

Inquiries into mental capacity in Tuscany were generally instituted through a petition by the defendant’s next of kin to the Grand Duke.90 Every denunciation of mental incapacity had to be corroborated by the testimony of at least two witnesses “of good reputation,” which

89 See the Pupilli report on the interdiction of Gio. Batta Arrighi, in ASF, MPAP, Memoriale e Informazioni, F. 2299, no. 383, August 1718.

90 Although petitions were addressed directly to the Grand Duke, they were actually centralized in the Consulta, from where they were redirected to the competent magistracies. The Consulta was created at the beginning of the seventeenth century as a high court of appeals. According to Nubola, petitions are to be inserted in the myth of sovereignty that sustained the Ancien Régime, which pictured the prince as “father, judge, legislator, and reference point of justice and of fairness, to whom subjects can turn...” Thus, petitions were addressed directly to the sovereign although supplicants knew their requests were actually evaluated by government officials and magistrates. Cecilia Nubola, “Supplications Between Politics and Justice: The Northern and Central Italian States in the Early Modern Age”, International Review of Social History 26 (Supplement, 2001), pp. 36-37.
generally came from family members or neighbours, and only rarely involved medical opinion.\textsuperscript{91} Alternatively, relatives could come directly in front of the Magistrato Supremo to initiate a cause of interdiction. These cases, which were also supported by lay testimonies, were generally made through a procurator.\textsuperscript{92} Once the petition or the initiated cause reached the central administration, an enquiry was conducted to investigate and assess the veracity of the denunciation (from beginning to end, the process could take between two to three months). Depending on the results of the enquiry, those deemed mentally incapacitated were interdicted by the Magistrato Supremo, officialised through an “interdiction decree” that publicly announced that the person had been deprived of his or her rights to administer their patrimony, manage their affairs, and engage in any kind of legal contract. By means of the interdiction decree, the defendant was submitted to the “protection and rule” of the Magistrato dei Pupilli, which entitled its officials to appoint a guardian (\textit{curatore}) or an agent (\textit{attore}) to administer the ward’s property (called in Italian the \textit{sottoposti}, to differentiate them from the \textit{pupilli}), act in their the name and interests, and protect their person.

The basic point of an interdiction was to protect a person and his or her patrimony when they were found to be incapable (\textit{inabile, incapace} or \textit{impotente} were the most used terms) of managing their own affairs.\textsuperscript{93} Thus, to declare a person incompetent, petitioners had to prove that he or she suffered from one of the kinds of incapacity defined by the Magistrato dei Pupilli as subject to an interdiction. The Pupilli statutes referred to the \textit{furiosi, mentecatti, dementi, prodighi,} and \textit{dilapidatori} as the categories of mental incapacity considered liable for interdiction and state guardianship. Of all these categories, interdiction procedures during the eighteenth century in practice employed only two: prodigality and dementia, as can be

\textsuperscript{91} Savelli, \textit{Pratica Universale}, p. 264.

\textsuperscript{92} The “\textit{giustificazioni}”, as the testimonies attesting petitions of interdiction were called, can be found accordingly in the series \textit{Atti e Scrutìre} of the archive of the Magistrato Supremo. The interdiction decree, the appointment of the curator, and all the following actions derived from an interdiction sentence are found in the Magistrato dei Pupilli. This is why in some cases in order to find out under which category the interdiction had been decreed, we need to go to the \textit{Atti} of the Supremo, which is a huge section containing between 4 to 13 volumes per year. The other problem resulting from this is that the \textit{Atti} of the Magistrato Supremo were severely damaged by the Arno flood of 1966, and many \textit{filze} still have the status of “\textit{non consegnabile}”. As a result, I have only looked for the \textit{giustificazioni} of those cases that seemed interesting. This also explains why the category of “undefined incapacity” that can be seen in Figures 3 and 4 is higher than what it should be.

\textsuperscript{93} This is when the person is thought to lack \textit{capacità di agire}, which is fundamental for making use of the \textit{capacità giuridica} that every person possesses since birth. According to the Italian civil code, the interdiction is meant to protect a person who despite having come of age, suffers a “permanent” illness that leaves him or her in a state of being unable to provide for his or her own interests. For the legal definition of the interdiction procedure, its uses and consequences according to the Italian civil code, see Francesco Scardulla, “Interdizione”, \textit{Enciclopedia del diritto}, Mortati and Publiatti (eds.), vol. 21 (Milan: Giuffrè, 1971), pp. 932-952.
observed in Figures 2 and 3.\textsuperscript{94} Dementia was the generic legal term employed in reference to all types of mental disturbance, and encompassed the mentecatto and the furioso. Instead, prodigality – which in turn included prodighi (spendthrifts) and dilapidatori (dissipaters) – was a category that, at first glance, involved only inveterate reckless economic mismanagement, but that enclosed a clear association with unreason and madness.

Figures 3 and 4 demonstrate that prodigality was the most common reason for interdicting a person in the eighteenth century. Interdictions by reason of insanity are outnumbered by interdictions by reason of prodigality, although they demonstrate a relatively constant increase over the years studied.\textsuperscript{95} While prodigality and dementia were the most used categories, in some cases interdictions were decreed by reason of an unspecified lack of ability to manage one’s financial and personal affairs. In these cases, the interdiction sentence declared that because the defendant had been found to be unable to manage his or her affairs, it had been necessary to interdict them. As can be observed in Figures 2 and 3, this third category was in use particularly during the first half of the century, while in the second half we can observe that the procedures tend to specify either prodigality or dementia. Towards 1770, however, this process is somehow reverted, given that a new tendency for voluntary interdictions arises. In these voluntary requests, the defendants argued for the “convenience” of the interdiction to safeguard their patrimonies on account of their “lack of experience” or their unawareness of the basic principles of financial management.\textsuperscript{96}

\textsuperscript{94} Interdiction procedures on account of deafness and muteness are not only rare to find but also left scant evidence during the eighteenth century. Given that they pertain to a different set of conflicts, I do not take the few that exist into account in this study.

\textsuperscript{95} The drop in the numbers of interdiction sentences between 1760 and 1765 is hard to explain. We know that during those years the Magistracy was suffering a financial crisis due firstly to this drop in interdiction sentences, and secondly, because there was a deliberate campaign directed at securing the payment owed to the Magistracy on account of the past administration of many of the patrimonies that had been interdicted. On this, see especially ASF, MPAP, Memoriali, F. 2305, which covers petitions between 1759 and 1763.

\textsuperscript{96} ASF, MPAP, Memoriali, F. 2307, no. 85, December 1767; Ibid., F. 2308, no. 29, June 1770 and Ibid., F. 2310, nos. 236, June 1775 and 266, July 1775.
Figures 2 and 3: Evolution of the categories used in interdiction procedures between 1716 and 1770


Of a total of 599 interdictions decreed between 1718 and 1775, 48.6% were by reason of prodigality, while 32.9% were for dementia in any of its forms. The remaining 18.5% were issued without the reason being specified. The evidence shows that prodigality and dementia
were in fact deeply conflated and were even often used interchangeably, being comprised of symptoms that were not completely distinct from one another. Both categories placed economic mismanagement as a starting point, both assumed a lack of control over mental faculties and actions and, above all, both entailed the same legal consequences.\textsuperscript{97} However, this had not always been the case.

\textbf{Roman Law Origins: Interdiction Only for Prodigals}

The foundations for guardianship provisions of adults with physical and mental disability practiced in early modern Tuscany date back to Roman law. The principles of the Roman guardianship of minors (\textit{tutela}) and curatorship of adults (\textit{cura}) mentally or physically disabled were introduced and adapted with the revival of Roman law and the work of the glossators of Justinian’s Digest in medieval Italy. Guardianship was originally designed as a judicial mechanism to administrate the ward’s property in the absence of the \textit{pater familias} while his children attained full capacity to govern themselves, with the primary aim of protecting the interests of the family. Through the tutordship, the \textit{patria potestas} was transferred to a tutor, who could be testamentary, statutory or appointed by the state (\textit{tutela testamentaria}, \textit{legittima} or \textit{dativa}). The tutorship of minors lasted until puberty, while from that time until full majority they were placed under the care of a curator. In turn, curatorship of adults was based on “the idea that protection should be given to the interests of persons not themselves in a position to provide it, though not in a condition to require true guardianship (\textit{tutela}).”\textsuperscript{98}

The curatorship of adults deemed mentally incompetent followed similar procedures to the tutorship of minors. A \textit{cura furiosi} and a \textit{cura prodigi} can be found already in the time of the Twelve Tables, destined to protect patrimonies and, only in the case of the \textit{furiosi}, to protect also the person. The Twelve Tables established that curatorships were directly handled by the agnates (\textit{cura legittima}), while under Justinian law it had to be previously approved by the state (\textit{cura dativa}). As Susana Gazmuri has stated, “these dispositions were not destined

\textsuperscript{97} These issues are examined in Chapters 2 and 3 of this thesis.
\textsuperscript{98} Carlo Calisse, \textit{A History of Italian Law} [1” Ed. 1903] (New York: Kelley, 1969), p. 603. For a general review of the guardianship of minors see Ibid., and Enrico Besta, \textit{La famiglia nella storia del diritto Italiano} (Milan: Giuffrè, 1962). Among the most important changes raised by the glossators was the possibility of introducing a new order of desirable guardians, giving precedence to the cognate line, particularly the mother. For the Tuscan adjustments of Roman law principles, the backgrounds of the Magistrato dei Pupilli and the development of the guardianship of minors see Fisher, “The State as Surrogate Father”, pp. 16-27 and Calvi, \textit{Il contratto morale}. 

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to protect the insane as individual, but to serve as a link in the long chain of the *gens* and *familia*, which was a matter of interest not only to the family, but also to the State. Curatorship was created to protect primarily the interests of the family, and thus, the property, and only secondarily to protect the interests of the allegedly insane or prodigal.

For the purposes of this study, it is important to briefly define how the *cura prodigo* and the *cura furiosus* were conceived in Roman law, for this will allow us to understand to what extent they were transformed by medieval and early modern jurists, and how they came to be merged into one unique system of curatorship for adults. The curatorships for prodigality and for insanity were conceived differently in Roman law, and so they entailed different consequences. While in the case of insanity the curator was entrusted with the custody of both the person and his or her patrimony, in the case of prodigals, the curator only had authority over the patrimony. On the other hand, Roman law distinguished a difference regarding the origins of the loss of civil capacity in the case of insanity compared to that of prodigality. The fundamental difference, if we follow Marco Boari, was that in the case of prodigals their lack of civil capacity was determined by the law, while in the case of the insane, their civil incapacity was a natural consequence. In other words, prodigality was a category created by the law to catalogue a self-inflicted condition, while insanity was a category that pre-existed the law, a “natural incapacity” that worked as “an objective extra juridical reality” that only had to be judicially “recognized.”

The difference between natural and legal incapacity completely changed the terms of the curatorship and its conditions. Given that the insane were considered incapacitated from the moment their insanity had been triggered, economic transactions carried out by a mentally disturbed person “while” insane could be theoretically void. On the contrary, prodigals lost their capacity only after the law, by means of the interdiction, deprived them of their civil capacity. As a consequence, the interdiction made only future economic actions invalid, with no retroactive power. In both cases, nonetheless, the incapacity was understood as a temporary condition dependant upon the person’s subsequent behaviour, and it could be lifted when their mental disturbance abated or when they demonstrated that they had reformed their behaviour.

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100 Magherini and Biotti, *L’isola delle Stinche*, p. 63.

The most important issue for us here is that in Roman law, interdictions were necessary only in the case of prodigality, for only a judge or a magistrate could deprive them of their civil rights. On the contrary, given that the mental incapacity of furiosi was thought to be natural, the legal interdiction was originally unnecessary. In both cases, their condition prevented them from alienating their property and making any future transactions. In other words, interdictions were created as a legal measure to legally deprive a person of their civil capacities, after which they and their patrimonies were entrusted to the custody of a curator.

The Conflation Between the Categories of Dementia and Prodigality

Elizabeth Mellyn has suggested that prodigality and mental incapacity were first “implicitly” associated during the Florentine Republic, and came to be “explicitly” assimilated during the first century of the Medici Principate. This conflation emanated from society’s “deep and abiding concern about the integrity of property and patrimony”, which equated financial mismanagement to madness. The conflation between insanity and prodigality, Mellyn asserts, served families so as “to regulate economic behaviour in their household and to invalidate contracts made by reckless relatives”, demonstrating a “pragmatic and instrumental use” of the legal mechanism of guardianship.102 The strategy was, she continues, to be able not only to avoid future potentially disadvantageous contracts, but also to be able to declare past contracts void. In order to be able to invalidate past contracts, prodigality had to be assimilated to insanity, for only in the latter case did the incapacity start with the change in behaviour. However, far from this initial motivation, during the eighteenth century interdiction could not be used to invalidate contracts. Quite the contrary, the Pupilli officials explicitly declared that interdiction procedures did not entail the possibility of declaring past contracts void, regardless of whether the defendant was interdicted as prodigal or as insane.

Another important change regarding Roman law tradition is the eighteenth-century understanding of interdiction as the procedure used to legally declare mental incompetence so that a person could be assigned a curator. Adult guardianship was tied to interdiction already in the 1565 statutes of the Magistrato dei Pupilli.103 Furthermore, interdiction was applied for

102 Mellyn, Mad Tuscans and Their Families, p. 96-97.
103 “...detti offitiali possino et debbino interdire loro l’amministrazione, et mandar bandi ne luoghi publici et consuetti della città et altrove...” ASF, MPAAP, F. 248, “Statuti et ordini della Corte et Magistrato dell’Offitiali de’ Pupilli”, fol. 4v.
both prodigality and insanity in its various forms (furioso, mentecatto, and demente), demonstrating that the legal framework made only one provision for all types of mental incapacity, irrespective of the type of alleged insanity (that is, regardless of whether it implied permanent damage or a temporary condition, if it was violent or harmless). This is interesting if we take into account that the term interdiction seems to have been uncommon in the proceedings of adult guardianship before the eighteenth century, according to the existing studies.\(^\text{104}\)

The sources during the sixteenth and seventeenth centuries demonstrate that the most used concept was that of cura. The magistrates decided whether the defendants were in need of being “received under the cura and government” of the Pupilli, or “required a curator.”\(^\text{105}\)

By contrast, magistrates during the eighteenth century referred to their wards as the interdetti and the sottoposti (submitted) and, likewise, petitioners generally requested that their relatives be “interdicted”, and “submitted to the authority and guardianship” of the Pupilli. This terminological change was also visible in the decree issued by the Magistrato Supremo, where curator and curatela were replaced by the term interdiction, which survived with only a slight change the Napoleonic code.\(^\text{106}\)

The interdiction decree of the Magistrato Supremo that ratified mental incapacity, as the statutes of the Pupilli required, was referred to in the sources as “the interdiction decree”, not as “the curatorship decree.”

Based on the fact that the records of the previous centuries give no evidence for the use of the term interdiction, it can be ascertained that the 1718 reform was responsible for this change. So long as it differentiated the competences of the Magistrato Supremo and the Magistrato dei Pupilli regarding mental and physical incapacities, it created a new differentiation between interdiction and curatorship. The first, decreed by the Supremo, was the process by which a person was legally declared mentally incapacitated, creating thus the need for a curator to be assigned for his or her protection. The interdiction decree reached the offices of the Pupilli, commanding the magistrates to assign a person to supervise the administration of the ward’s patrimony, and oversee all matters relating the ward’s life (the attore).

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\(^{104}\) See Mellyn, *Mad Tuscans and Their Families* and Magherini and Biotti, *L’isola delle Stinche*.

\(^{105}\) See, for instance, ASF, MPAP, *Suppliche con Informazione*, F. 2281, fol. 668, 1586: “...che le piaccia farle gratia che detto Jacopo sia ricevuto sotto la cura et governo del Magistrato...”, or , Ibid., F. 2279, fol. 506, 1579: “...che Girolamo... sia sotto posto come mentecatto alla cura et protectione del magistrato nostro...”, both quoted in Mellyn, *Mad Tuscans and Their Families*, pp. 39 and 41.

\(^{106}\) See Scardulla, “Interdizione”, in *Enciclopedia del diritto*. 

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No further regulations were introduced in the practice of interdiction sentences until 1767, when a new law was promulgated by the recently arrived Pietro Leopoldo, who among the many changes he promulgated in the administration of the Grand Duchy, decided to modify some aspects of interdiction procedures. Two of these changes are relevant here: firstly, it eliminated the Magistrato dei Pupilli’s capacity to act as “universal tutor and curator of all minors and adults of the Florentine dominium.” This meant that from thereafter the officials of the Pupilli had to name an external curator or tutor, for they were no longer able to assume it themselves. This is interesting, because although the magistrates had been granted this capacity since 1473, in the case of minors it applied only when the father had died intestate and no next of kin was willing to take the task, while in the case of adults, they were the de facto guardians. Although before the eighteenth century the mentally disabled were

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107 “Legge. Per il Regolamento del Tribunale de’ Pupilli del di 8 Giugno 1767”. In Cantini, Legislazione Toscana, Vol. 27, pp. 356-372. For the heated debate caused by these unwelcome resolutions, see ASF, MPAP, Memoriali, F. 2307, nos. 24-27.

assigned an external curator, the records of the eighteenth century demonstrate that the officials of the Pupilli almost invariably assumed the task, relegating the next of kin to the task of attori.

The other important change regarding interdictions brought by the 1767 regulation was that it granted free access to the services of the Magistrate to the “miserable and poor”, provided their patrimonies did not exceed 500 scudi. As a result, for the first time those patrimonies that until then could not afford the costs of interdiction and guardianship could also have access to the service. The effects of this democratization are clearly evident in the explosion observed in the number of interdictions decreed after 1767 (see Figure 4).

**Characteristics of Interdiction Procedures and their Consequences in the Eighteenth Century**

As a consequence of the interdiction, the person remained submitted to the protection and rule of the Magistrato dei Pupilli (sottoposto a la cura e governo del Magistrato dei Pupilli).\(^{109}\) After the Magistrato Supremo issued the interdiction decree, the case passed to the offices of the Pupilli for the magistrates to manage all the details concerning the person’s guardianship. The Magistrato dei Pupilli acted in its capacity of “universal curator”, so technically the officials were the person’s curators, while an attore (both administrator and agent) was designated to take care of the ward and legally represent him or her. Additionally, the attore was also entrusted with the administration of the ward’s patrimony. After the official assignment, the attore had to officially accept the task, provide a guarantor for his or her administration (mallevadore), and was obliged to give an annual account of the administration to the Pupilli. After the 1767 reform, the Pupilli officials were divested of their role as universal curators, which entailed that the curatorship fell directly into the hands of the attore.\(^{110}\)

Special attention was paid in order to secure the administrator’s trustworthiness and impartiality towards the interests of the interdicted. For this reason, wives and mothers were usually considered the preferred guardians. Given that they had no inheritance right over a

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\(^{109}\) An interdiction decree usually commanded “…sottoporsi il medesimo al detto Magistrato de Pupilli a tenore del disposto della riforma delli statuti di detto Magistrato de 20 Agosto 1565 e del Motuproprio di S.A.R. del di 5 febbraio 1717 nelle forme solite e consuete”. From an interdiction decree of 1740, ASF, MPAP, Memoriale, F. 2301, no. 76.

\(^{110}\) “Legge. Per il Regolamento del Tribunale de’ Pupilli del di 8 Giugno 1767”.
male’s property, it was believed that they had no personal interest in their husband’s or son’s patrimonies. Moreover, a proper administration was in the good interest of their children and themselves, securing their subsistence and future ability to rescue their dowry.\textsuperscript{111} Quite the reverse, agnates were usually regarded with suspicious eyes by the officials of the Pupilli, particularly when they were the direct inheritors of the ward’s patrimony. But, even maternal and matrimonial kinsmen who were not direct heirs were held to be too close and involved with the interdicted, thus increasing instead of mitigating the conflicts in the family. As a consequence, given that the Pupilli officials aimed to resolve existing family conflicts and avert the occurrence of any future ones, males from either side of the family lines were often vetoed on the grounds that choosing them could generate further “\textit{controversie d’interesse}.” By contrast, the patrimony left in the hands of women was thought to create less disorder, even if it meant that temporarily the family structure was left upside down, and the woman ascribed a role equivalent to the \textit{pater familias}.

After the interdiction was decreed, the case often continued to require the Pupilli’s attention, whether due to administrative matters, because of the defendant’s petitions for the interdiction to be revoked, or due to any issue relating to the daily life of the interdicted and his or her family. Guardianships generated a difficult relationship between the interdicted and his or her \textit{attore}. As the interdicted were adults who had been abruptly deprived of their power over themselves and their affairs, they hardly ever accepted the new state of affairs peacefully. The “disorder” their behaviour and personality created for the household was not easily contained and they often resisted the interdiction by recurring to a wide range of stratagems. For this reason, the records of interdiction procedures do not end with the issuing of the decree and the appointment of the guardian. This is not only because the Pupilli supervised the administration of the patrimony, but mostly because the families continued to use the Magistrate to resolve all kinds of conflicts and setbacks during the whole period in which the person was submitted to the Magistrate’s authority. Accordingly, interdiction procedures disclose what we could identify as particular periods of life crisis, cycles of disorder, and also permanent disruptions, as we will see in the next chapters.

Once a person was interdicted, every decision regarding their patrimony had to first be approved by the Pupilli, from the monthly allowance destined for food and clothing of the

\textsuperscript{111} The appointment of a guardian for mentally afflicted adults was not that different from the policies regarding guardianship of underage wards, which was also largely given to widows. See Calvi, \textit{Il contratto morale}, and Fisher, “The State as Surrogate Father”.

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interdicted and their family, to the extraction of money placed in the *Luoghi di Monte* or under fideicommissary restriction. Some issues were even managed directly by the Magistracy, like the arrangements with creditors, or the selling of goods and property, if there were any (done through the *pubblico incanto*, that is by public auction).

The Tuscan interdiction procedure did not automatically entail the suspension of the payment of debts, and much less the invalidation of contracts. If families wanted to institute litigation against some creditor on the grounds that the debt had been contracted while the individual was mentally incompetent, it had to be done after the interdiction, as a different legal procedure. This meant time and money being spent, and was not at all certain to secure a favourable result. Similarly, in terms of the economic situation of the patrimony, the interdiction meant that the Magistrato dei Pupilli acted as arbiter between the interests of the interdicted and the patrimony’s creditors, in what was called the *giudizio universale di concorso dei creditori*. New conditions were set in this procedure to meet the creditors’ interests within the possibilities for payment of the patrimony of the interdicted. But, for sure, debts had to be paid, so interdiction could not be used as a mechanism to skip payment, only, and when possible, to delay it.  

Every one of these actions had to be paid to the Magistracy, according to the tariffs settled in the 1565 statutes. In addition to this, the interdicted had to pay an annual fee to the officials of the Pupilli for their involvement and management, to which had to be added the *attore*’s stipend, in the case that he was charging (close family members, of course, did not charge).  

For all these reasons, interdictions were an expensive matter entailing payments that created difficulties for families whose patrimonies were not large enough. Although some exceptions were made with small patrimonies in terms of granting them the possibility of not paying the annual fee to the Magistracy, in general the officials stated that the fee was mandatory. As a result, until 1767 interdiction was a mechanism available only for defendants whose patrimonies could afford the fees. In fact, government officials, before accepting an adult’s curatorship, had to investigate the patrimony to be certain that it was capable of paying the mandatory fees. However, this does not entail that only the high Tuscan aristocracy appears in the records of the Pupilli, for together with nobles and rich aristocrats in possession

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112 For an example of the potential economic problems following an interdiction and the difficulties of the families to meet the requirements of the creditors, see the case of Andrea Patriarchi, in ASF, MPAP, *Memoriali*, F. 2305, no. 211, 27 March 1762.

113 As the interdicted several times had people from outside the family appointed as administrators, they usually had to pay for the service.
of various estates outside Florence and more than one residence in the city, interdictions affected also people whose possessions were limited to the residence where they lived, or whose income was entirely dependant upon their “personal industry”, such as a pastry cook or an umbrella maker. After 1767, the procedure became available for every person in the Tuscan state, regardless of social position.

The interdiction marked the suspension of the person’s legal capacity, which resulted not only in their being prohibited to administer their patrimony and engage in economic activities, but also meant that the person could not stand trial, serve as a witness or hold public office. As for the effects of the interdiction in other legal aspects of the interdicted’s life, early modern authorities were less consensual, however. Throughout the eighteenth century, it is possible to observe an unsolved debate over the capacity of an interdicted to choose his own lawyer or to make a legal will, for instance. Contrary to what one may assume, on some occasions the authorities validated a person’s capacity to testate, provided this respected the “good custom” (buon costume) and his or her final dispositions were not against the law. But in many other cases interdictions were requested precisely to prevent an unfavourable will.114

Contrary to what might be expected by a modern observer, confinement was not connected to interdiction and was, at any rate, not its consequence. The fact is that confinement was hardly ever requested in interdiction petitions, even when the described individual was troublesome and evidently difficult to handle. There are basically two reasons for this. Firstly, incarceration and confinement in either of the existing Tuscan mental institutions (the pazzeria of Santa Maria Nuova, and Santa Dorotea) was not the preferred nor the easiest solution. As I will examine later, most of the people interdicted in the eighteenth century were not confined in either of the two institutions. Secondly, and more importantly, confinement followed a different legal course than interdiction. While interdiction procedures were managed by the Magistrato dei Pupilli, confinement was regarded as a police matter, so it fell under the competence of the Auditore Fiscale. In legal

114 The magistrates of the Supremo and the Pupilli engaged in several discussions regarding these topics, involving also the Consiglio di Reggenza. Overall the criterion was to decided case-by-case, so that the particular circumstances of each testator and his or her family could be taken into account, together with their particular mental condition. For example, see ASF, MPAP, Memoriali, F. 2302, no. 115, July 1749 or ASF, Consiglio di Reggenza (hereafter CR), F. 756, no. 42, 1750. On the reasons to request an interdiction, see Chapter 3, section 6.
terms, interdiction procedures were managed by civil justice, while confinement was handled by criminal justice, with no necessary connection between the two.\textsuperscript{115}

Thus, a person could be confined without ever being interdicted and, certainly, interdiction was not even considered a relevant antecedent for confinement. It is true that we can find cases of people interdicted while confined at Santa Dorotea or at Santa Maria Nuova, but the majority of interdictions affected mentally disturbed people who were kept at home. Interdiction procedures largely affected people who had managed to marry, have children and perform normal duties for most of their lives. Furthermore, in those cases where interdiction lasted for a long time or where the person was interdicted early in their lives, it did not prevent them from forming a family of their own.

By definition, interdiction was a temporary legal measure devised to last until it could be proved that the person had recovered his or her mental faculties. It could last from a couple of months to the whole life of the interdicted, and could be declared as many times as the person’s mental condition made it necessary. Interdictions could be partially or completely lifted, and this mainly depended, in addition to the development of the defendant’s mental incapacity, on the family’s support for the petition for removal. A partial lifting of the interdiction meant that the defendant was left under direct supervision of an official of the Pupilli or another government authority, who had to approve every financial decision for it to be legally valid. Given that they were considered more secure, partial lifting was a common transitional stage between interdiction and the complete restoration of one's civil rights in Tuscany. If the interdiction was completely lifted, the person could resume complete powers of administration immediately.

Interdictions were used as a last resort by Tuscan families. They were a mechanism to turn to once every other measure to control, persuade or force the person to change their attitude had proved useless. Petitioners often said that relatives, neighbours or an influential person (the local priest, for example) had tried to prevent the radical measure of turning to the Pupilli by recourse to a series of unsuccessful arguments, such as illustrating the negative aspects the disorder provoked in their families, to their patrimonies, or for their honour.\textsuperscript{116} In this sense, resorting to interdiction as a mechanism to cope with family conflict and deviant

\textsuperscript{115} The procedure for confinement and the involvement of the Auditore Fiscale are examined in Chapter 5.

\textsuperscript{116} For example, “avendo l’oratore suddetto fatto intendere più volte al predetto suo fratello per mezzo de i parenti, e d’alcuni suoi confidenti, che voglia ritornarsene alla casa paterna, e desistere dal dissipare, non solo ha disprezzato la loro esortazioni ma più tosto gl’ha minacciati”, ASF, MPAP, Memoryti, F. 2303, no. 241, January, 1755.
behaviour demonstrates what historians of the uses of justice have pointed out. As happens with matrimonial disputes, economic disagreements or the social responses to crime and assault, the judicial system came to the fore once every other measure to solve the conflict privately had failed, notwithstanding the countless efforts made by mediators (i.e. prestigious neighbours, priests, family friends). 117

But interdiction procedures served a twofold purpose: on the one hand, they were intended to provide care and protection for the mentally incompetent against themselves or against others who could potentially take advantage of their weakness. On the other hand, it was a procedure aimed at securing the subsistence of the family patrimony on behalf of the interdicted’s future heirs. Interdiction procedures served to negotiate who was responsible for the mentally disturbed. In other words, they shed light on the articulation of a combined welfare provision for the mentally disabled with shared responsibilities between the families and the state. Interdiction was not only the act of depriving mentally disturbed persons from their civil rights, but it also supposed the state’s involvement in their protection. In fact, the Pupilli officials supervised the caring and feeding of these people, and would generally defend their interests against ill-intentioned relatives. Therefore, interdictions provided the state’s intervention as requested by the families, but this at the same time implied shared responsibilities.

Through the protection of the weak and incompetent members of society, the ducal administration was protecting the economic and moral welfare of the household. Preventing the economic collapse of a family meant preventing the need to procure different sources of maintenance for the affected family members. The economic subsistence of the family through the protection of the family patrimony secured social reproduction and the preservation of Tuscany. The preservation of private patrimonies was beneficial for the state, and was therefore at the core of the foundation of the Magistrato dei Pupilli. 118

The importance of patrimony in early modern Tuscan society has been the subject of numerous studies. In a society based on trust and credit where families had learned “the precarious nature of fortunes”, the difficulty in recovering from debts and the danger of mismanagement were written in stone. 119 The institution of interdiction, thus, builds upon this

117 See Niccoli, Perdonare; La Rocca, Tra moglie e marito; Dinges, “Usi della giustizia come elemento di controllo sociale”; and Sbriccoli, “Giustizia negoziata, giustizia egemonica”.
118 Fisher, “The State as Surrogate Father”.
119 Thomas Kuehn, Heirs, Kin and Creditors in Renaissance Florence (Cambridge: Cambridge University Press, 2008), p. 5. Patrimony was not only at the base of Tuscan society, but was at the same time the object of flexible
fear of mismanagement – it had in fact been tied to this concern since its appearance in Roman law. The hereditary system, the ethos of the aristocratic families and, furthermore, the stability of Tuscan society as a whole were firmly based on the careful accumulation of familial wealth. But, by the eighteenth century, interdiction served a larger purpose than the conservation of family fortunes. Or, to put it in a better way, the subsistence of both middle-class and aristocratic families by the eighteenth century was centred on a complex conflation between patrimony preservation and compliance with moral normativity. The behavioural deviance disclosed in interdiction procedures thus went beyond purely economic concerns, to place the accent on the disorder of the family, and on conflicting views regarding proper behaviour. In a time when the definition of aristocracy was being re-examined, interdictions served particularly well to tackle patrimonial mismanagement and its open defiance of what we could call the moral economy of the Tuscan aristocracy. As Bartolomé Yun Casalilla has suggested, this approach allows us to examine economic behaviour as a “moral choice.” Recourse to interdiction could thus be interpreted as the action taken to defend those moral values that were considered crucial for the reproduction of the family.

The practice of interdiction on the grounds that the person was risking the family inheritance (and, with that, the family name), coincides with the greater concerns of the time regarding social order and stability. This confluence between private and public interests must not be seen as an exemption or as a new phenomenon of the eighteenth century. As in the previous centuries, families petitioned for the state’s intervention with the argument that the family patrimony was at severe risk after the financial mismanagement of a mentally incompetent member. Nevertheless, I would suggest that the perception of mental incapacity surpassed purely economic concerns to progressively place the accent on the emotional realm.

interpretation and strategies, as Kuehn’s study on inheritance shows. He examined property starting from the repudiation of inheritance, to demonstrate the complex ways in which Florentine families interpreted legal structures so as to use them to achieve their aims.


Patrimony itself was connected to affections and conveyed an emotional significance that seems very strange within the parameters of a modern consumer society. Family strategies and kin networks of support were entangled with the emotions ascribed to patrimony and expressed in situations related to patrimony.\textsuperscript{122} In this sense, interdiction suits had a particular emotional value and were therefore marked by the emotional, and not only the material world of the family. This process, which becomes particularly marked in the eighteenth century, allowed for a debate regarding the place of emotions in public and private life, entailing new discussions of proper and improper emotional displays. As will be argued in the last chapter of this thesis, emotional disturbances assumed an increasingly crucial role in definitions of mental affliction.

The interdiction procedure functioned as a mechanism for neutralizing the disorder of the household produced by deviant individuals. As the Pupilli officials would say, interdiction and submission to the guardianship and authority of the Pupilli served to repair and impede ulterior disorders (\textit{per riparare} or \textit{per ovviare ad ulteriori disordini}). The echo of Farge’s \textit{Dèsordre des familles} is evident here.\textsuperscript{123} Nonetheless, we have to take into account that interdictions are not really equivalent to the French \textit{lettres de cachet}. Unlike the latter, interdictions were generally not the resort of executive power. Although it was in the power of the Grand Duke to command the interdiction directly and thus completely bypass the judicial enquiry, in practice this was hardly ever the case. The normal procedure worked as I have shown: inquiries into mental capacity in Tuscany were initiated by a relative’s request and the grand ducal decision was taken based on the observations made by the officials of the Supremo, the officials of the Pupilli and the information gathered at the local level. There is also another important difference. \textit{Lettres de cachet} granted the king the power to arrest and imprison any of his subjects without trial, for any reason. On the contrary, interdictions in Tuscany not only had nothing to do with confinement but, furthermore, were exclusively concerned with mental incapacity defined (even if broadly) according to pre-established categories. Nonetheless, interdictions and \textit{lettres de cachet} are equivalent in as much as they

\textsuperscript{122} For the emotional value of material goods and patrimony in relation to interdiction procedures, see Thierry Nootens, “‘What a Misfortune that Poor Child Should Have Married Such a Being as Joe’: Les fils prodigues de la bourgeoisie montréalaise, 1850-1900”, \textit{The Canadian Historical Review} 86, no. 2 (2005), p. 230-231. On affections related to the circulation of goods see Renata Ago and Benedetta Borello (eds.), \textit{Famiglie. Circolazione di beni, circuiti di affetti in età moderna} (Rome: Viella, 2008).

\textsuperscript{123} See Farge and Foucault, \textit{Le Désordre des familles}. 
both entailed that private matters were made public so that the government, through its police or judicial administration, could mediate, resolve or at least hinder family disorder.

**Abuses, Strategies and Uses of Interdiction Procedures**

In 1761, a petition for interdiction was sent by the underage son of a Rocco Giacchi, arguing that his father was “deprived of reason” (*privo di senno*) to the point of being unable to speak without stuttering, on account of the “fierce and frequent accidents of apoplexy and epilepsy” he suffered. The petition continued, saying that due to his father’s “impotence and inability,” he risked finding himself in “greater anguish”, having nowhere to stay and be cured, and having no other relatives to “supervise” his conduct. The interdiction, however, was not granted. The Pupilli officials claimed that the petition had been made only to avoid the payment of Giacchi’s debts. Furthermore, they discovered that the petition had been actually sent by the alleged demente himself and not by his son, who was absent from the Tuscan state at that time. The petition was thus considered to be a total fabrication by Giacchi, designed as a strategy to skip payment of a debt he had to his father-in-law.

Financial mismanagement was mandatory in order to institute an enquiry into someone’s mental capacity. This did not, however, imply that every case of economic mismanagement responded to a mental incapacity that was liable for interdiction. The sole fact of a patrimony being mismanaged or at risk of bankruptcy did not grant a sentence of interdiction. Entrenched in a judicial system that conceived the protection of the family patrimony as a public responsibility, interdictions gave power to the state to intervene precisely to prevent and control the financial mismanagement of a mentally incompetent person. Not any kind of financial mismanagement, but limited exclusively to mismanagement that was demonstrably the cause of incapacity. Requests for someone’s interdiction based solely on the argument that the patrimony was at risk of bankruptcy, or “anguished” by debts, as it was said, were considered an abuse, and were generally not granted. As the members of the Tuscan administration were well aware, “many times interdictions are decided when there

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124 “...come il prenominato Rocco suo padre mediante i fieri spessi accidenti di apoplessia, ed epilessia, da cui viene incomodato siasi reso balbuciente, e quasi affatto privo di senno, e del tutto incapace di far vive le sue ragioni.” ASF, MPAP, Memoriale, F. 2305, no. 127, February 1761. Please note also that the fits of apoplexy and epilepsy were equated in this petition. For an analysis of this terminology, see Chapter 6.

125 Report of the officials of the Pupilli, Ibid, June 1761. It is interesting to highlight the time that elapsed between the petition and the report, which also tells us about the rationales of the procedure. If cases seemed dubious or were contested by other parties, the report and thus the sentence would take more time.
is no vice of prodigality, grounded [only] either in someone’s inexperience in the management of his patrimony, or because he spends his resources on ends that are not laudable.”

Mental incapacity was evidenced by the person’s economic performance, not by the state of the patrimony itself. In other words, the assessment of mental incapacity was not codified in the presence of debts or excessive spending alone, but much more in the behaviour of the current holder of the patrimony, and the reasons and circumstances surrounding the mismanagement. Why they had contracted debts, why their production had dropped, why they were selling household goods or liquidizing assets, how was their daily performance, how were their relationships with other household members, and which of their actions indicated some kind of mental affliction were the issues. The Tuscan government officials were particularly careful so as not to agree to petitions of interdiction that aimed at skipping or delaying payment of debts, or to expose the abuses and machinations of greedy relatives.

We cannot exclude the probability that families made an instrumental use of interdiction petitions, whether to take advantage of a weaker family member, to avoid or resolve economic mismanagement, to accelerate an inheritance, to avoid an unfavourable will or to produce a change in the balance of power relations in the household. Abuses did exist, and the system was constantly aware of that possibility. For instance, Michel Arcangelo Fini from Greve was denounced by his paternal uncle as demente, and consequently unable to manage his affairs. The Pupilli requested information from Greve, where it was found out with the support of a medical practitioner, that Arcangelo Fini was naturally quiet and passive (of a naturale quieto e non vivace), but not mad. As a consequence, the officials of the Pupilli decided not to grant the interdiction because Fini’s alleged mental incapacity was not severe enough, but also (probably primarily) because he had an administrator who, according to the information that had arrived from Greve, was a perfectly good and honourable man and who was managing Fini’s affairs in a productive and disinterested way. Not only was the interdiction not thought necessary, but the uncle’s petition was suspected of being manipulative and with ulterior motives. The fact that he presented the petition with a very

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126 “...molte volte senza vizio di prodigalità si procede a queste interdizioni, o per l’imperizia, che alcuno abbia nell’amministrazione del suo patrimonio, o perché spenda le sue sostanze in usi poco lodevoli.” Pronouncement of the members of the Consulta regarding a controversy aroused over the validity of a testament made by an interdicted prodigal. ASF, CR, Fiscale, F. 756, no. 42, August 1750.

127 The procedure is recorded in ASF, MPAP, Memoriai, F. 2303, no. 280, June-September 1755.
laconic narrative and without the support of other testimonies certainly did not play in his favour.

Petitions found to be abusive were not granted, but it anyhow happened sometimes that defendants made a petition shortly after the interdiction had been decreed or some times at the same time as their relatives turned to the Pupilli, claiming that the accusations were based on false grounds. If proven true, the interdiction was likely to be revoked and the defendant allowed to resume full civil rights. However, the possibility of ill-intentioned relatives requesting an interdiction only to accelerate the transfer of an inheritance or to take away the patrimony from the hands of a weak family member do not constitute, in my view, a relevant issue in the analysis of the perception and understanding of insanity. This is, firstly, because it was not the easiest or the fastest measure to take. A request for interdiction was expensive, presupposed hard and lengthy bureaucratic work, entailed constant payments, and sealed the intervention of the Pupilli in private family matters. For instance, the Pupilli officials did not necessarily side with petitioners to resolve residential conflicts, a situation frequently disclosed behind petitions for interdiction. Quite the contrary, the Pupilli officials largely privileged the unification of the household. Secondly, and perhaps more importantly, the probability of ill-intentioned requests does not interfere with the study of social perceptions of madness. We can explore how and when madness comes into the fore and the circulation of languages and meaning of madness even when mental afflictions were instrumentally used to take advantage of a family member.

Ill-intentioned, rapacious or abusive motives should be taken as fundamental elements in the articulation of interdiction narratives, but this, however, does not necessarily imply that the denunciation of mental incapacity had been completely manufactured. As Robert Allan Houston has claimed, even if becoming the subject of an inquiry into mental capacity “was partly, or perhaps mainly, a matter of contingencies and entitlements beyond the influence of the subject’s behaviour or words,” it was anyways necessary that the person had previously displayed “symptoms which could be taken to indicate madness.”128 Scholars working on legal records long ago warned us about the manufactured truth produced by judicial proceedings, disclosing “plausible stories” or “legal truths”.129 Narratives were manufactured

according to how much petitioners were willing to disclose. However, the fact that narratives had to be plausible should not lead us to assume they were entirely manufactured.

1.3. Interdiction Procedures as a Family Matter

Although there are some exceptions regarding interdiction procedures initiated by the Magistrato Supremo itself or by creditors, the great majority of the suits were initiated through the petition of family members. The state was at the service of the families in Tuscany through the Magistrato dei Pupilli, and families that could afford the procedure increasingly turned to the Magistrato dei Pupilli when seeking arbitration in the private conflicts arising from the presence of deviant members in the family. The Pupilli was not only concerned with the economic subsistence of the Tuscan families, but could also act as mediator in the family conflicts unfolded by interdiction procedures. In their capacity as universal guardians of the mentally disabled, the Pupilli officials were often called to solve family tensions, to reconcile couples, siblings, or fathers and mothers with their sons and daughters. This placed the officials in the position, actively encouraged by the families themselves, whereby they could freely devise strategies to make household coexistence bearable, resorting to any possible means to pacify and normalize the chaotic environment that often accompanied the presence of the mentally disturbed in the household. This went from admonishments to coercive measures, such as temporary incarceration, to try to put an end to their extravagances and often violent outbursts, combined with an attempt to provide the care and protection that the mentally disturbed deserved. The officials of the Pupilli could dissolve inconvenient marriages, force a fugitive prodigal husband to return home, or persuade a wife to endure a mad husband. They could act as guarantors of the proper obedience to the commands set by hierarchical gender roles, and provide a negotiated response to the inconveniences caused by the mentally disturbed.

Public intervention in family affairs was a negotiated process, a path settled from the beginning of the process of Florentine state formation. The logic behind the interference of

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130 The other Magistracy concerned with civil litigations was the Magistrato Supremo, which in fact often overlapped with the concerns of the Pupilli. A similar logic regarding private family conflicts being disclosed for state arbitration has been pointed out by Giovanna Benadusi. See “La madre e il Granduca. Stato e famiglia nelle suppliche al Magistrato Supremo (Firenze, XVII secolo)”, in Anna Bellavitis and Isabelle Chabot, Famiglie e Poteri in Italia tra medioevo ed età moderna (Rome: École Française de Rome, 2009), pp. 397-415.
the Pupilli in family matters dates back to the construction of the Florentine Republic, and the organization of the state as what Isabelle Chabot called *le gouvernement des pères* (the father’s government). 131 Founded in 1393, the Magistrato dei Pupilli et Adulti was embedded in the oligarchy’s concern for the consolidation of family order and moral standards. Similarly, Caroline Fisher has argued that the office of the Pupilli acted from its foundation as a meeting point for private and public interests, where the government’s intervention over family matters through the institution of state guardianship was a continually renegotiated process. Florentine families were active agents in the growing power of the Florentine Renaissance state, and state guardianship was defined in the community between government and subjects. 132

During the Medici period, the Magistrato dei Pupilli continued to act as a space to resolve family conflicts, developing what Giulia Calvi has called “contratto morale”. During the sixteenth century, the officials of the Pupilli positioned widows as privileged interlocutors, which demonstrates the Magistracy’s tendency to ascribe new value to the maternal line of the family structure. This, in other words, meant that women’s role in early modern Tuscany escaped from the image of segregation and exclusion previously assumed by scholars. Furthermore, precisely because women and their kin were excluded from the line of succession, they could play a predominant role as trustworthy guardians. In contrast, their juridical and social role was inversely proportional to their participation in the hereditary system, where “il prestigio del suo ruolo culturale e affettivo conseguiva direttamente dalla fragilità della sua collocazione successoria.” 133

The same model of negotiation and moral contract can be applied to the eighteenth-century picture regarding the management of deviant adults, which also shows family structures and family strategies that escaped the supposedly rigid patriarchal model. The cognatic structure of the family was empowered by the negotiation of alternatives offered by the Pupilli. The capacity of women to negotiate in the legal arena, notwithstanding the legal constraints posed by the patriarchal system have been recognized in different areas of the

132 Fisher, “The State as Surrogate Father”.
The same assessment is applicable for Tuscan interdictions, with an important particularity, nonetheless. Women were not only the most common petitioners of interdiction procedures (of the petitions that revealed the identity of the petitioner, 206 out of 379 were made by women), but they were the most recurrent interlocutors of the Pupilli in the discussions to determine the existence of mental incapacity and the possible strategies to solve the problems it caused. The role of women as administrators and recurrent mediators between mentally incapacitated men and state officials is an issue that crosses most of the topics examined in this thesis. For now, suffice it to say that women were not only the mediators between the private domain and the public world but, furthermore, were invested with the role of rational agents in the upside-down order created by mental disturbance. The study of interdiction procedures, thus, illuminates from an innovative perspective the shaping of the ideal of domesticity, suggesting that the moral role attributed to women was not constrained to the romantic paradigm of tenderness, resignation and submission.135

Hence, although interdictions affected primarily men (only 26 women were interdicted between 1700 and 1775, compared to 581 men), this does not mean that the judicial space was dominated by men. On the contrary, women continued to be privileged interlocutors of the Pupilli during the eighteenth century, for we observe them as active agents in the negotiation of responses to control and handle their adult sons or their husbands. Women, supported by their kin, learned to use in their favour their position as impartial actors derived from their exclusion of the hereditary line. In fact, of a total of 379 interdictions decreed between 1688 and 1775 in which the petitioner was recorded, 222, that is around 59%, were initiated after a supplication sent by a mother, a wife, or one of her kin (see Table 1). And, usually when a mother or a wife made the petition, they were afterwards appointed administrators of the interdicted patrimony, as already stated.

134 On the legal restrictions against women, see Thomas Kuehn, Law, Family and Women. Toward a Legal Anthropology of Renaissance Italy (Chicago and London: The University of Chicago Press, 1991). See also Lombardi, Matrimonio di antico regime, particularly pp. 12-13 for her critique of Kuehn’s approach. The capacity of women to negotiate and their flexible manoeuvring around legal situations, which they managed to shift in their favour, has been explored in the matrimonial disputes of eighteenth-century Livorno studied by Chiara La Rocca. La Rocca, Tra moglie e marito, p. 21 and passim. On the problem of how to assess women’s role and women’s capacity to turn the patriarchal legal system on their favour, see Premo, “Before the Law”.

Table 1. Distribution of interdiction petitioners according to family lines. 1688-1775

<table>
<thead>
<tr>
<th>Women and their kin</th>
<th>Male Agnates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>Son</td>
</tr>
<tr>
<td>Wife</td>
<td>Brother</td>
</tr>
<tr>
<td>Sister or daughter</td>
<td>Father</td>
</tr>
<tr>
<td>Female marriage kin</td>
<td>Paternal uncle</td>
</tr>
<tr>
<td>Maternal uncle</td>
<td>Nephew</td>
</tr>
<tr>
<td>Marriage kinsmen(^{136})</td>
<td>Cousin</td>
</tr>
<tr>
<td></td>
<td>Grandson</td>
</tr>
<tr>
<td>Total</td>
<td>Total</td>
</tr>
<tr>
<td>74</td>
<td>51</td>
</tr>
<tr>
<td>109</td>
<td>62</td>
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<td>15</td>
<td>7</td>
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<td>8</td>
<td>22</td>
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<td>6</td>
<td>11</td>
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<tr>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td>222</td>
<td>157</td>
</tr>
</tbody>
</table>

It is of interest to point out that the number of women and their kinsmen may not be representative of women’s presence in the legal arena. Firstly, because the picture observed in Table 1 corresponds only to the initial interdiction petition, without taking into account the posterior legal suits carried out before the Pupilli following an interdiction decree, where women and their kinsmen also played a pivotal role. Particularly interesting here are the inquiries carried out following a petition for the interdiction to be lifted, usually sent by the interdicted himself. These inquiries took into particular consideration the opinion of women on the behavioural changes alleged by the interdicted. To secure the revocation of the interdiction, petitioners had to count on their mother’s or wife’s approval. Secondly, women hardly ever acted alone, and questions may be raised as to their actual agency behind these petitions.\(^{137}\)

It is true that there are cases where women appear after their husband’s or son’s interdiction had been decreed, confessing that they never knew about the content of the petition and had been forced to sign it. Nonetheless, the degree of active participation of women in this kind of procedures can also be assessed by means of the long-running perspective allowed by the records of the Pupilli. Precisely because we are not bound to a photographic image of the family conflicts surrounding the interdiction procedure, we can

\(^{136}\) Father-in-law, Son’s father in law, Brother-in-law.

\(^{137}\) On the problem of assessing authorship in petitions, particularly when they are signed by women, see Premo, “Before the Law”.

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observe the pivotal role played by women in the identification of mental incapacity, in the evolution and eventual resolution of the conflict, and in how the deviant behaviour was handled. Furthermore, we find women who requested the interdiction of more than one family member at different times, or who requested the interdiction of the same individual more than once, due to their continual relapses into prodigality or insanity.\textsuperscript{138}

Finally, and to counterbalance this highly debateable matter, marriage kin played a more significant role than that suggested by the numbers of Table 1. Matrimonial kinsmen were usually part of the interdiction procedure at some point, to back up the denunciation made either by women or by men of the agnatic line. Other times, a brother- or father-in-law was preferred as administrator instead of a son or a brother, whose interests in the inheritance of the interdicted patrimony made him suspicious in the eyes of the Magistrato dei Pupilli officials. Matrimonial kinsmen were also part of the living arrangements made by the Pupilli officials in their efforts to settle the disorders produced by prodigals and the demented. Here we see the importance of the horizontal family manifested through the involvement of brothers, who can be seen as particularly active in the protection of their married sisters.\textsuperscript{139}

1.4. Inquiries into Mental Capacity in Early Modern Europe

Inquiries into mental capacity to determine a person’s legal status and establish the necessary precautions to protect those deemed mentally incompetent and their patrimonies do not constitute a Tuscan exception. Called “interdictions” in places that followed the Roman law tradition such as France, Spain and Italy, “commissions of lunacy” in England, or “brieves of idiocy and furiosity” in Scotland, these legal procedures shared common characteristics. They were devised to deprive people deemed mentally afflicted of their civil rights, leaving them under legal guardianship to protect them and their patrimonies. All of these procedures, moreover, functioned as a legal mechanism to be activated at the families’ request. This means that the understanding of mental incapacity that the historian may grasp

\textsuperscript{138} Just to give two examples: Maria Domenica Vinattieri, who in 1751 requested the interdiction of her husband, Tomasso Pesserini, and in 1758 requested the interdiction of her brother, Gio Batta Vinattieri. See, respectively, ASF, MPAP, Memoriali, F. 2302, no. 287, 24 September 1751 and Ibid, F. 2304, no. 156, 21 February 1758. Or the case of Vincenzo Coletti, interdicted on his mother’s request on two occasions, first in 1743 and later in 1747. In Ibid, F. 2301, no. 197, 30 August 1743 and F. 2301, no. 260, 5 April 1747.

from these kinds of sources changes the focus from the medical profession and governmental power to society and the family. However, despite these promising features, inquiries into mental capacity have only recently elicited the attention of historians and the field still remains largely understudied. There are some exceptions, though, upon which this section draws, but none of them focus on the Italian peninsula.  

Interdiction in France followed a similar pattern to that of Tuscany, both being profoundly entrenched in the Roman law tradition. However, although both territories shared their legal frameworks, the societies in which these provisions were inserted changed in practice the aims and application of the procedure, to the point that they followed different paths. Roman law left many fields open to interpretation, for the cases of life were always more complex and numerous than the cases covered by the law, as the Corpus Iuris Civilis itself declared. Accordingly, from the general and somehow rigid framework provided by Roman law, early modern judicial systems developed particular variants, according to the specific requirements of each space.

As in Tuscany, interdiction in early modern France was employed as a legal procedure to deprive a person of his or her rights over their own self and their patrimony by reason either of prodigality or of insanity. Hence, although the procedure in France was also entrenched in the Roman law tradition, during the early modern period it had diverged from its original roots, being applied to both prodigality and insanity. As I explained above, according to Roman law only prodigals were interdicted, whilst the insane were considered incapacitated by nature, making an interdiction decree unnecessary. But, with the revival of Roman law in France, interdictions came to be applied both for prodigals and the insane, and the first documented interdiction of a mad person, according to Thierry Nootens, dates back to 1329. However, although in early modern France prodigality (prodigalité) and insanity (folie) were both subjected to the same procedure, French legal practice never fully blurred the difference made by Roman law regarding the origins of the incompetence and

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140 As argued in the introduction, the history of madness, although it has been able to rid itself of the constraints of the asylum walls, has not yet mined this area. For the existing studies on the field, see for the early modern period, Houston, _Madness and Society_; Cartayrade, “Property, Prodigality, and Madness”; Mellyn, _Mad Tuscans and Their Families_. For the 19th century, Nootens, _Fous, prodigues et ivrognes_; Suzuki, _Madness at Home_ and Maria José Correa, “Lay People, Medical Experts and Mental Disorders”.

141 Quoted in Marco Bellabarba, _La giustizia nell’Italia moderna_ (Roma: Laterza, 2008), p. 82.


143 Nootens, “Fous, prodigues et faibles d’esprit”, p. 49.
consequently, its consequences. If we follow the study of Laurent Cartayrade, it seems that the conflation between prodigality and insanity was less complete than in Tuscany towards the eighteenth century. Preserving in this regard its Roman law roots, the incapacity of prodigals in France was understood to be only partial and dependant upon the decision of a judge while, in the case of insanity, the incapacity was understood to be always complete. In both cases, after the interdiction the person was left under a guardianship, although in the case of prodigals the curator protected only the person’s patrimony, whereas in the case of the insane the guardian protected both the person and the patrimony.

Prodigality and insanity in France were conceived as two types of incapacity that produced the same consequence, but whose origins were not equivalent. According to Cartayrade, what prodigals and the insane had in common was their “irresponsibility, that is the inability or unwillingness to manage one’s possessions according to the socially sanctioned rules and goals...”144 However, while in the case of the insane their incapacity was considered natural or accidental, prodigals were to blame for their mental incompetence. Consequently, the insane were not held responsible for their condition, but prodigals were. A clear distinction was made between “the morally corrupt and guilty, and the sick and innocent”, where prodigality was regarded as a voluntary “moral depravity.”145

Therefore, although prodigality and insanity came under the same procedure in eighteenth-century France, they were kept as two distinct categories liable to interdiction, without evolving into the conflation that I have observed in the Tuscan legal practice. This difference underpins the divergence of the Tuscan procedure, which increasingly blurred the problem of the voluntariness of the prodigals’ incapacity. Through a process that had started already during the sixteenth and seventeenth centuries, by the eighteenth century prodigality was as pitied as insanity. As I will show later, the “vice” of prodigality was thought to give little choice to its victims. In this sense, vice was equated with illness or, furthermore, vice became the illness.

144 Cartayrade explains the use of interdiction for the insane individual also as a practical solution to the difficulty of assessing the exact time from when legal actions were considered invalid, which coincided with the moment the alleged insanity had started. From then on, the incapacity of those deemed insane also started legally with the interdiction decree, avoiding long suits over the need to revoke a past contract supposedly made under a state of insanity. And, “by the middle of the eighteenth century, an interdiction sentence had become from the mere legal declaration of a mad person’s incompetence the cause of this incompetence.” Cartayrade, “Property, Prodigality, and Madness”, p. 60.

145 Ibid., p. 70 and p. 72.
Interdiction was not the only way of dealing with the economic threat posed by madness in early modern France. The French legal framework also allowed the option of the conseil judiciaire, developed around the fifteenth century to provide a less invasive alternative than interdiction for the feeble-minded (faibles d’esprit). The judicial council functioned as a semi-interdiction process by which the individual was put under milder supervision to provide assistance in certain particular acts, which were determined on a case-by-case basis. While interdictions were primarily requested by family members, councils were self-imposed and acquired increasing popularity during the eighteenth century. According to Cartayrade, the council experienced such success, firstly, because it provided more flexibility than interdictions in terms of the categories that were liable under it, which in fact were applied at the judges’ discretion. But, secondly, because it could be applied to particular circumstances, allowing for a personalized system to protect the patrimonies from economic mismanagement without the dishonourable mark that interdiction inevitably entailed.

As I explained above, in Tuscany towards 1770 voluntary interdictions also started to become common, though the connotations and consequences of the procedure were equal to those of interdictions decreed by reason of prodigality or insanity. However, as in France, voluntary interdictions in Tuscany enjoyed greater flexibility and were carried out in a more personalized way. Taking into account that in these cases the measure had been self-imposed, the authorities normally made compromises, giving some degree of autonomy to the interdicted. It could be argued that the categories of dementia and prodigality were already sufficiently flexible in Tuscany so as to allow for personalized variants. However, in terms of its consequences, all types of interdictions in Tuscany were subjected to the same rules, regardless of the category in which it was grounded. For this reason, to some extent the French council could be considered more akin to the Tuscan semi-revocation of the interdiction, the intermediate situation between interdiction and its complete revocation that was usually preferred to a total lifting of the interdiction in the Grand Duchy. This kinship works, despite the fact that in the latter case the measure was not self-imposed and was in fact quite resisted. This milder form of interdiction in Tuscany could last as long as the magistrates thought it necessary to secure the patrimony, and in practice signified that every

146 Nootens, “Fous, prodigues et faibles d’esprit”, p. 49.
147 Cartayrade, “Property, Prodigality, and Madness”, p. 62.
economic move made by the individual had to be pre-approved by an appointed government official in order to be valid.

Two other important differences between the Tuscan and the French interdiction processes should be examined here. One concerns the duration of the interdiction and the other the number and distribution of the categories of mental incapacity. Although, theoretically, interdictions were conceived as a temporary measure, only a small proportion of interdictions were revoked in France during the eighteenth century, and generally one to ten years elapsed between the interdiction sentence and the first request for liberation (mains-levées). On the contrary, interdiction revocations in Tuscany were not rare, suggesting that interdictions were much more flexible there than in France. In what appears to be an exclusively eighteenth-century feature, in Tuscany people could be interdicted up to five times in a lifetime, and the sentence could be revoked from just days to 20 years later, depending on the person and circumstances surrounding each case.148

Regarding numbers, in France requests for interdiction tend to decrease after the second half of the eighteenth century, whilst requests for voluntary council experienced a growing popularity. This suggests, according to Cartayrade, that voluntary council was preferred to a full interdiction, evidencing a movement opposite to what I observe in Tuscany, where the numbers of interdictions tend to grow steadily throughout the century.149 To explain this we have to take into account the fact that the behaviour of interdiction procedures also responds to institutional changes (i.e. a change in the policies of the authorities in charge, or a change in the procedure making it either easier or more difficult), which occur in parallel to social changes that might have influenced the rise or decline of families’ decisions to initiate interdiction procedures. In this sense, Cartayrade takes the decline in interdiction procedures to be the effect of a change in the preferences of the families (and the allegedly incapable) towards the voluntary counsel, which was easier to obtain and entailed less troubles and dishonour. This accounts, he asserts, for an increasing reluctance of family members to resort to the authorities in favour of more private strategies to resolve their conflicts. It is interesting to note here that the increase in the use of interdiction procedures in

148 This flexibility and recurrence of interdiction procedures seems not to be applicable to the previous centuries, if we follow Mellyn’s findings. See Mellyn, *Mad Tuscans and Their Families*.
149 Cartayrade asserts that “voluntary counsel procedures opened to individuals and families a space for compromise which could spare some people the embarrassment and burden of a full-fledged interdiction, and saved their families the cost and publicity of a long suit, especially in potentially contentious cases”, Cartayrade, “Property, Prodigality, and Madness”, p. 93.
Tuscany can be taken to be the result of quite the opposite situation. It could in fact suggest that concern for the consequences of irresponsible behaviour increasingly called for a deeper public intervention in the private domain. This rise was further propelled by the effects of the 1767 regulation that made interdiction available also to patrimonies that previously could not pay the fees charged by the Pupilli for its services.

Another interesting difference between the two geographic frameworks is that interdiction for prodigality in France accounts for the minority of the cases, while in Tuscany, it is by far the most commonly recorded cause of interdiction. Furthermore, towards the eighteenth century in France interdiction came to be increasingly associated with madness and confinement. Petitioners often requested confinement along with the interdiction and, similarly, interdiction sentences increasingly pointed out that the interdicted was to be confined in a specified institution. However, Cartayrade warns us, interdiction did not mean automatic confinement. He argues that interdiction sentences explicitly stated that the guardian was entitled to confine his or her ward, which means that in the absence of such authorization, the guardian could not proceed with the internment. Thus, “confinement was an option offered with, rather than an intrinsic part of, interdiction judgements.” 150 This means that the primary aim of interdiction in France was the protection of the patrimony and the person, and not the person’s confinement, for which a separate procedure existed as well (lettres de cachet).

However, for our purposes, the fact remains that the causality of interdictions in eighteenth-century France was mostly attributed to insanity, and that petitioners tended to request confinement with petitions for interdiction. The Napoleonic civil code ultimately finalized the differentiation between insanity and prodigality by establishing that only insanity was liable to interdiction, while prodigals and faibles d’esprit (feeble-minded) were subjected to the judicial council. 151 In contrast, in Tuscany interdiction and confinement of the mentally disturbed were kept as starkly different procedures, as I have explained, managed by completely different sections of the state bureaucracy, and only came to be associated with each other with the enactment of the Napoleonic code. Moreover, during the eighteenth century, prodigality was the most employed category both to request and pass an interdiction

150 Ibid., p. 65.
151 The Napoleonic code established that “any adult whose usual state is one of imbecility, insanity, or furore, must be interdicted, even though he may experience lucid intervals.” Quoted in Ibid., p. 64
sentence, suggesting that the moral condemnation suffered by prodigality in early modern France was not paralleled in Tuscany.

Consequently, although France and the Grand Duchy of Tuscany shared the same legal tradition, their legal practices regarding interdiction evolved differently during the eighteenth century, with two key differences. Firstly, France did not produce the conflation between insanity and prodigality we observe in Tuscany and, secondly, in France the interdiction of insane individuals came to be associated with confinement. Now, if we move to the British context, we can see that the aims and general characteristics of the legal procedure to deprive someone of his or her civil rights followed similar principles, although framed under a different legal tradition. However, if in the comparison between the French and the Tuscan scenarios it becomes clear that local variants were at play, the examination of the British context similarly suggests that the interpretation and practice of these procedures responded and adapted to local concerns. In other words, although inquiries into mental capacity were widely conceived as a mechanism to neutralize the negative economic consequences of madness, how these consequences were identified and interpreted was highly dependent upon the cultural values of the given society. As was the case in Tuscany, British inquiries into mental capacity were also not connected to confinement. However, contrary to the French and Tuscan scenarios, neither the English nor the Scottish legal frameworks provided any measures for the consequences of prodigality. Although it was identified as a reprehensible vice, the category did not constitute legal reason to deprive someone of the right to administer his or her property.

The whole system regulating mental incapacity in the English legislation was based on two categories, idiocy and lunacy. As defined by the influential English jurist Sir William Blackstone, “an idiot, or natural fool, is one that hath had no understanding from his nativity; and therefore is by law presumed never likely to attain any.”152 In turn, the lunatic, or “non compos mentis” was held to be “one who hath had understanding, but by disease, grief, or other accident hath lost the use of his reason.”153 English law considered that the protection and care of the mentally incapacitated and their estates was a royal prerogative. Therefore,

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152 William Blackstone, *Commentaries on the Laws of England*, Book. 1 (Oxford: Clarendon Press, 1765), p. 292. “If a person hath so much knowledge that he can read, or learn to read by instruction and information of others, or can measure an Ell of Cloth, or name the days of the Week, or beget a Child, Son or Daughter, or such like, whereby it may appear that he hath some light of reason, then such a one is no Idiot naturally.” John Brydall, *Non Compos Mentis or the Law Relating to Natural Fools, Mad-Folks, and Lunatick Persons, Inquisited, and Explained, for Common Benefit* (London: Assigns of R. & E. Atkins, for I. Cleave, 1700), p. 8.

since the thirteenth century those deemed mentally afflicted were put under the guardianship of the Crown, first through the High Court of Chancery, and then through the Court of Wards. After the latter was abolished in 1660, guardianship of lunatics and idiots came to be under the competence of the Court of Chancery.  

According to Michael MacDonald, the dissolution of the Court of Wards had markedly negative effects for the insane. The Court of Wards, he suggests, was not only concerned with administering the patrimony of landowners, as the Chancery was later reduced to doing for, although it was a much “hated institution”, it managed to protect the insane. On the contrary, the Court of Chancery “exploited the insane as the Court of Wards had never done. It was notoriously corrupt, inefficient, and expensive. And in the early eighteenth century it was rocked by one of the most serious scandals in the history of English law.” The notorious level of corruption within the management of commissions of lunacy and idiocy has apparently no parallel in other European frameworks. However, further investigation into the records of the surviving eighteenth-century English inquiries into mental capacity should shed greater light on the subject, as a systematic study still needs to be done. But the bottom line of the controversy was that the Chancery made the properties of the mentally incapacitated an open field for profit and corruption, bluntly disputed between judges, guardians and lawyers. Furthermore, with the rising costs charged by the Court of Chancery for the guardianship of lunatics and idiots, the procedure became affordable only for the richer members of English society.

The legal procedure by which a petitioner could request the Lord Chancellor to inquire into the individual’s state of mind was called commission of lunacy or of idiocy (commission de idiota inquirendo or de lunatico inquirendo). The investigation was directed not only to assert the defendant’s state of mind, but also the date from which it could be established that he or she had become mentally incapacitated. This was fundamental, “because a commission was often used to retroactively annul a contract that had been made years before.”  

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154 On the medieval inquiries into mental capacity, see Richard Neugebauer, “Mental Handicap in Medieval and Early Modern England. Criteria, Measurement and Care”, in Wright and Digby, From Idiocy to Mental Deficiency, pp. 22-43.

155 Michael MacDonald, “Lunatics and the State in Georgian England”, Social History of Medicine 2, no. 2 (1989), p. 302. MacDonald’s assertion was a direct criticism to the benevolent diagnostic given by historians such as Porter. The latter had claimed that the British early modern state’s intervention in the life and affairs of the mad “hardly show the state in an aggressively interventionist mood, attempting to police or exploit the subnormal”. Porter, Mind-Forg’d Manacles, p. 113

156 Suzuki, Madness at Home, p. 19. For an account of the consequences of being legally declared non compos mentis, see Brydall, Non Compos Mentis or the Law.
the enquiry established that the defendant was indeed a lunatic or idiot, this person and his or her property was commissioned to the care of a suitable guardian, generally someone who was next of kin, provided they were not the immediate heir. However, although incapacity by reason of lunacy and idiocy followed the same procedure, the legal consequences of the commission in each case were different. While the legal declaration of mental incapacity was irrevocable in the case of lunacy, the incapacity of lunatics was by definition understood to be temporary, and so they could regain their civil rights when their sanity returned. For this reason, according to Blackstone, very few individuals were declared to be natural idiots, for the deprivation of their rights would have been permanent.157

The Scottish legal framework provided a similar provision for the mentally incapacitated, also based on the dichotomy between idiocy and lunacy (called, in this case, furiosity). In Scotland, those deprived of reason were also put under curatorship, once a “briefe [writ or brief] of idiotry” or a “briefe of furiosity” had been requested from the Chancery.158 As in the other cases examined here, briefes of idiocy and furiosity were requested by close relatives on the grounds that the person was incapable of administering his or her property, which represented a threat to their financial wellbeing and that of their families. In order for a person to be declared mentally incapacitated, an inquest was conducted by a judge to examine the capacities of the alleged insane, a procedure known as “cognition”. People held to suffer from mental incapacity were put under the curatorship of a relative, generally the same one that had requested the briefe, and the person was deprived of her or his civil rights.

Cognitions not only established whether the defendant was mentally incapacitated, but they also indicated the exact time the incapacity had started. All deeds committed by the mentally afflicted since the onset of their condition could be nullified after the cognition. The fact that both in England and in Scotland the legal procedure that established someone’s mental incapacity had retroactive power meant that not only economic contracts, but also legal contracts such as marriage, could be nullified, a consequence that we do not observe in Tuscany, as we have seen. However, legal mental incapacity did not entail a fixed array of consequences, as Houston has argued. Given that the law recognized different gradations and types of mental incapacity, which could be temporary or permanent, and could affect the person in a myriad of ways, “cognosing a person did not automatically invalidate all their acts

157 Blackstone, Commentaries, pp. 293-295
158 My discussion of the Scottish legislation is heavily based on Houston, Madness and Society, pp. 30-90.
while deranged, but it threw them into doubt, and allowed their ‘reduction’ [overturn] at law.”\(^\text{159}\)

Both in the Scottish and English legal frameworks, inquiries into mental capacity were a separate procedure from confinement. To institutionalize or to imprison an insane relative served a whole different set of aims than cognitions or commissions of lunacy. Thus they were regulated by a different set of rules, particularly because confinement was easier, less expensive, did not entail a court procedure, and was largely more discrete. As Houston puts it, inquiries into mental capacity were a much more difficult procedure than confinement (whether at home or in prison), so long as they were “a potentially difficult and necessarily public procedure.” Similarly, commissions of lunacy were expensive, long, and public.\(^\text{160}\)

Even with their dissimilarities, inquiries into mental capacity during the eighteenth century attest to a new visibility of madness all over Europe. Although historiography, following Foucault’s lead, long ago highlighted madness’s growing visibility during the eighteenth century, numbers were overestimated and to a large extent gathered only from asylum entrances. However, what later studies have come to suggest is that the growing visibility of madness during the eighteenth century can be observed not only in hospital records but, first and foremost, in poor law records (in the case of the British context) and inquiries into mental capacity, as the studies reviewed here attest.\(^\text{161}\) The visibility acquired by madness in the Tuscan scenario, thus, is an example of a bigger trend that involved Europe. What makes it particularly interesting, however, are the local characteristics of the process in Tuscany compared to other European frameworks. From a similar standpoint, inquiries into mental capacity departed from the general framework where notions of family roles and emotional patterns were concerned. In this context, the understanding of mental incapacity in Tuscany by the end of the early modern period seems to have been particularly embedded in an ongoing debate about conflicting age- and gender-specific family roles. This is still the case even if we enter the discussion through a source that is deeply tainted by the value ascribed to patrimony in Tuscan society.

\(^{159}\) Houston, *Madness and Society*, p. 62.


\(^{161}\) Together with the studies of Houston and Cartayrade that I have discussed here, see also Suzuki, “The Household and the Care of Lunatics”; Suzuki, “Lunacy in Seventeenth- and Eighteenth-Century England”; Rushton “Lunatics and Idiots” and Rushton, “Idiocy, the Family and the Community.” For an account on the highlights of the historiography on madness, see the Introduction to this thesis.
As we have seen, the European legal framework provided measures to deal with the consequences of mental incapacity in a more-or-less similar fashion but with differences in the procedures. All the procedures that we have reviewed were aimed at protecting the patrimony and at the prevention or correction of economic mismanagement, and were, consequently, used primarily by the privileged. Moreover, in all the cases they primarily affected men. In all the legal frameworks examined here, civil law inquiries into mental capacity operated with categories that were open and deliberately vague. Rather than being concerned with the specific label used, the evaluation of authorities and judges privileged how the families exposed the behaviour, the reasons behind the denunciation, and the extent to which the behaviour was believed to imperil the family. Thus, inquiries into mental capacity were chiefly concerned with the public and domestic consequences of madness, instead of being preoccupied with defining its nature, and this explains why they were not really interested in determining clear diagnostic categories of madness. Their scope was to determine a person’s level of responsibility and to negotiate “the balance between private and public provision” accordingly.162

As Houston has put it, the broadness of the legal definition of insanity coming out of these procedures is explained precisely because of their property orientation. “The difficulty is that sufferers were described cursorily, or classified in the broadest possible terms, by courts whose interest was to preserve property or ascertain culpability rather than to make a precise clinical diagnosis.”163 The aim of the procedure shaped the definition of madness we find in these sources. The problem derived from this is that we are bound to a socially limited conception of what insanity amounted to, given that the perceptions of the non-privileged are not considered in the sample under scrutiny. I have tried to correct this bias by extending the investigation to the Tuscan criminal records, where the poorer segments of society take the “leading” part.164 Nonetheless, the information they provide regarding the mentally afflicted has proved to be scant.

The connection between madness and property is not a feature unique to Tuscany but, rather, is typical of the kinds of sources examined here. Inquiries into mental capacity involved a question of property rather than a question of liberty – even if in some spaces they

162 Rushton, “Idiocy, the Family and the Community”, p. 57. On this, see also Houston, Madness and Society, and Suzuki, Madness at Home.
163 Houston, Madness and Society, p. 24.
164 I refer here to the records of the Otto di Guardia e Balìa, the Tuscan criminal court. Criminal records and the understandings of criminal insanity are examined in Chapter 5.
came to be conflated with confinement. Families debated first and foremost the right to manage a person’s financial affairs, placing control over property as the primary matter of concern. This only highlights the extent to which European elite families conceived of patrimony as a collective rather than as a personal concern. Individual ownership was regarded as a temporary right, a sort of transfer from the family that could be withdrawn the moment the person diverged from the expected path. Thus, individual disposal of one’s patrimony was thought to be subject to family approval, and the disagreement over this issue was to a great extent responsible for requests to deprive a family member of his or her rights of administration on the grounds of mental incapacity. Hence, although inquiries into mental capacity speak not only of patrimony, they do illuminate from a special point of view how patrimony was perceived, and how the disposal of patrimony was profoundly entrenched within the moral economy of the family.  

Inquiries into mental capacity have been approached as extraordinary sources for the study of relations between families and state authorities within the development of different strategies to cope with deviance, placing madness in the broader context of the history of the family and the history of social disciplining. We can access these issues by taking into account aspects such as the marital status of the defendants, the identity of petitioners and the role assumed by household members in the events during and after the inquest was carried out. In my view, this is where the particularities of the Tuscan case are underscored. Taking into account the close connection between property and inquiries into mental capacity, it should hardly be striking to note that in all of the legal spaces where we have studies to base our conclusions upon, men from the upper ranks constitute the majority of the defendants, even if in Tuscany the downright scarcity of women is unrivalled. However, marital status seems to have exerted a different influence in Tuscany, compared to the other locations. Houston and Cartayrade have pointed out that being single was a decisive factor that moved families to resort to public assistance for the government and care of the mentally afflicted in early modern Scotland and France, respectively. In general terms, the appearance of madness in the public records has been attributed to the failure of the domestic sphere, as a clear result of the breakdown in the family structure and, particularly, as the effect of a

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165 For instance, Suzuki examined the issue by suggesting that physicians conceived of their intervention in commissions of lunacy in similar terms, presenting themselves as “guardians of family property.” Suzuki, *Madness at Home*, pp. 66-71.
domestic space crippled by the absence of the feminine figure. Conversely, being married has been seen as a factor that allowed those deemed mentally incompetent to continue their lives under the vigilance and care of their spouses. However, as Suzuki has suggested, the appearance of mental affliction in the records responds above all to the failure of the domestic sphere, which to a broad extent exceeds the sole problem of bachelorhood or widowhood. The Tuscan interdiction procedures support this assertion, for the appearance of single men in the records, whether mature widowers or young bachelors, seems not to be determined by their marital status, but rather by other factors disturbing the family order (i.e. squandering of the patrimony, changes in the family’s balance of power, economic constraints, illness).

In this scenario, the role assumed in Tuscany by the female members of the family as the privileged interlocutors of the authorities, on the one hand, and as primary performers of the role of curbing and caring for incapacitated adults, on the other, seems to be a peculiarity of the Tuscan context. I pointed out earlier how the systematic solution proposed by the Tuscan authorities to contain the disorder of the family tended to empower the female members of the household. Wives and mothers were not only the most common petitioners, but were also placed by the authorities as the interim rational heads of family while the weakened male recovered from his condition, which served both to protect the patrimony and ensure his recovery. Furthermore, when their relatives petitioned for the revocation of the interdiction, it was frequently the support of a mother’s or wife’s voice that moved the authorities in their favour. Only in the cases of elderly interdicted men does the role of the female members of the family seem to have been less decisive, for although wives and daughters frequently took the leading role, on many other occasions it was transferred to the first-born son.

That women were becoming active participants in the administration of justice in a wide range of jurisdictions between the seventeenth and eighteenth centuries is sufficiently known. However, studies on the early modern inquiries into mental capacity fail to provide

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167 Suzuki, “The Household and the Care of Lunatics”, p. 156.
168 On this, see Chapter 3, section 5.
169 For a study on how the age and marital status of male defendants conditioned the identity of the petitioners of the interdiction, see Chapter 2. In the case of women, as Chapter 4 will expose, they were predominantly widows or old spinsters.
170 I am thinking particularly on the increasing number of female plaintiffs initiating marriage litigation or defamation and slander suits, not only in early modern Europe, but also in the Hispanic-American colonies. See, among many others, La Rocca, *Tra moglie e marito*; Seidel Menchi and Quaglioni (eds.) *Coniugi nemici*; Gowing, *Domestic Dangers*; Premo, “Before the Law” and María Eugenia Albornoz Vásquez, “La injuria por
a gender analysis not only regarding the identity and performance of plaintiffs, but also regarding the role assumed by women once the judicial procedure was over, during the guardianship of the mentally incapable. This can be partly explained by their primary focus of attention, which is located in the procedures and not in the guardianship. The studies of Houston and Cartayrade are mostly concerned with how inquiries into mental capacity were carried out, the understandings and meanings of madness disclosed in the procedures, and the general patterns of insanity that can be drawn from them. But, both historians seem to lack the possibility offered by the Tuscan records of following the developments after the interdiction (or cognition) had been decreed. Thus, the fact that Tuscan interdiction records allow us to follow the cases from the initial petition until the revocation of the interdiction sentence (which, as I have said, could cover several days to the whole life of the defendant) becomes once more as an unrivalled advantage. This advantage not only allows us to grasp a more dynamic representation of madness, but it also sheds light on the role of the female members vis-à-vis the Pupilli magistrates and the evolution of the interdicted’s behaviour.

A brief examination of the British, French and Tuscan civil procedures dealing with the consequences of mental incapacity largely demonstrates how the domestic environment shaped not only the ways in which the procedures were carried out, but also how madness was understood and the strategies that were devised to deal with it. In all the scenarios examined, mental incapacity was shaped primarily by the narratives of the families, with barely any intervention from the medical testimonies. Civil and criminal courts seem to have been dominated by lay opinion on mental states, for, as Houston has put it, “‘expert’ medical testimony was neither sufficient nor necessary” in most of eighteenth-century Europe.\textsuperscript{171} Despite what some historians have pointed out, in Tuscany too the identification of mental incapacity, until the eighteenth century at least, was a highly social matter. The alleged mad person had to be known to be mad by the whole community, which had to be ratified by the political authority of the place.\textsuperscript{172} If the officials of the Pupilli still had any doubts, the defendant was inspected by the officials themselves.

\textsuperscript{171} Robert Allan Houston, “Courts, doctors, and insanity defences in eighteenth and early 19\textsuperscript{th} century Scotland”, \textit{International Journal of Law and Psychiatry} 26, no. 4 (2003), p. 343. It is important to stress that when comparing the role played by medical testimonies in civil or criminal trials regarding insanity, one has to bear in mind that the judicial systems were highly different. For a recent overview, see Watson, \textit{Forensic Medicine}.

\textsuperscript{172} Roscioni, \textit{Il governo della follia} and Magherini and Biotti, \textit{L’isola delle Stinche}.
Scholars have pointed out that inquiries into mental capacity should be examined as a space provided by the legal framework to resolve private conflicts, which functioned as a legal measure that families could use at their own will. In all the European scenarios examined here, including of course Tuscany, these procedures followed private initiatives, and cannot be taken to be the product of a top-down disciplining strategy. As Nootens has stressed, in interdiction procedures we find civil justice at the service of the families, to which family members could turn to in order to solve conflicts identified and defined by them. How mental incapacity was defined and which measures were to be taken to respond to it were the result of careful negotiations between families, authorities and the defendants themselves.

1.5. Conclusion: Public Disorders of Family Life

The identification of madness was undeniably a domestic event, but we only have access to it so long as it overran the boundaries of the private realm. In this sense, inquiries into mental capacity are by definition a private situation made public. They can be taken, then, as a manifestation of the publicizing of the private that characterized the eighteenth century on so many levels. If we bear in mind that it was the century that discussed the sex lives of royals and nobles, that witnessed the appearance of the marquis de Sade, Choderlos de Laclos and Carlo Goldoni, and in which there was a lively discussion of the mental and emotional instability of the rulers, it is hardly surprising that inquiries into mental capacity experienced an evident growth in Europe. At the eve of the Revolution, France witnessed the proliferation of pornographic pamphlets discussing noble sexual debauchery, and the proliferation of a new “philosophic” genre that spread from the young writers of the Parisian Grub Street to de Sade. The eighteenth century in Britain ended with King George’s madness, and the exuberant profligacy and reckless libertinage of the Prince of Wales with

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the Queen Caroline affair.\textsuperscript{176} The Italian peninsula also witnessed the exposure of the secrets of marriage, with the peculiar figure of the \textit{cicisbeo}, through which the aristocracy’s sexual behaviour was put under scrutiny.\textsuperscript{177}

In the case of the Grand Duchy of Tuscany, it was the beginning of the century which marked the explosion of private life into the public arena, with the finale of the Medici family and the references to their sexual inefficiency, extravagances and emotional instability. The century closed, however, with a renewed negative view into the episodes that marked the life of the Grand Duke Cosimo III, his unhappy marriage with Margherite Louise and the disordered and decadent life of their descendants, manifested in the publication of Jacopo Riguccio Galluzzi’s \textit{Istoria del Granducato di Toscana sotto il governo della casa Medici} in 1781.\textsuperscript{178} The intertwining of the public and the public, so evident in the success of pornographic literature, and the discussion of the personal lives of the British kings that accompanied the end of the century are but the other side of a coin the one face of which had been seen in the Tuscan events at the beginning of the century.

When we examine the increasing success of interdiction procedures within this context, the family disorders disclosed by the records of the Magistrato dei Pupilli take on a new light, placing their otherwise private and even anecdotal features into a broader context of social and cultural change. The eighteenth century in Tuscany opened with the theatrical end of Medici rule. Involved in passionate scandals and licentious practices, the last members of the Medici family were unsuccessful in their efforts to provide an heir, and were consequently forced to witness helplessly the fall of Tuscany into foreign hands. The Regency entailed new government officials and new rules for the traditional Tuscan politics, not only in terms of government administration, but also by devising new constraints to the traditional social and political hegemony of the patricians.

The eighteenth century appears thus as a discontinuous period, where images of the alleged decadence left by the last Medici were superseded by the reforms ordered by the

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Lorraines. Between reform and continuity, an institution like the Magistrato dei Pupilli is but an open window onto the nuances of a pivotal period of Tuscan history, one that connects us with the particularities of local developments without losing the connections with the European scene, and one that has largely been left in the background of scholarly attention.¹⁷⁹

To the political changes brought about by the end of the Medici we have to add the effects produced by their disordered and scandalous behaviour. The pages Galluzzi dedicated to the last Medici are filled with negative commentaries on the behaviour of the Medici family. Most significantly for us here, he attached to Cosimo, Margherita Louisa, Gian Gastone and the rest of the family a series of adjectives that disclose both a profound rejection and pathetic compassion for their perturbed and tormented personalities. Inaugurating a trend that was to be followed later by first Gaetano Pieraccini and subsequently by Lord Acton, his descriptions of Cosimo portray him as “naturally melancholic”, subjected to passions and agitations originated by the lacerating uneasiness (inquietudine), anguish (he was permanently angustiato and in perpetua agitazione), and maddening jealousy (smanie della gelosia) the iniquities and publicized rejection of his wife cause him.¹⁸⁰

On her side, Margherita Louisa was portrayed as utterly voluble (volubile) and extravagant, with her passionate fits, her capricious behaviour and her complete disrespect and open disdain for her husband. Her scandalous abandonment of husband and children before the open eyes of the public was the extreme paroxysm of the disruption of her expected gender role as mother and wife. This is especially so if we consider how Galluzzi interprets her behaviour by the end of the century. Not only was she too extravagant and an endless source of her husband’s deep anguishes (angustie and inquietudini) but, above all, she exhibited a character that was too unstable to be placed on the side of rationality. Her relentless “extravagances” (stravaganze) and her frequent “agitations” (trasporti) were nothing but the inexorable consequence of her “disquiet spirit” (spirito inquieto), an

¹⁷⁹ See the discussion on the decadent image of Cosimo III’s Tuscany in Elena Fasano Guarini, “Lo stato di Cosimo III. Dalle testimonianze contemporanee agli attuali orientamenti di ricerca. Note introduttive”, in Angiolini, Becagli and Verga, La Toscana nell’età di Cosimo III, pp. 113-136. For an overview of the historiography of the Tuscan eighteenth century, which was largely marked by the paradigm of the enlightened late-eighteenth-century reforms, see Alessandra Contini, “Orientamenti recenti sul settecento Toscano”, in Mario Ascheri and Alessandra Contini (eds.), La Toscana in età moderna (Secoli XVI-XVIII) Politica, istituzioni, società: studi recenti e prospettive di ricerca, (Florence: Leo S. Olschki Editore, 2005), pp. 91-127. For an overview of the social and political changes brought by the Lorraines, see Litchfield, Emergence of a bureaucracy and Marcello Verga, Da “cittadini” a “nobili”. Lotta politica e riforma delle istituzioni nella Toscana di Francesco Stefano (Milan: Giafrire, 1990) and Furio Diaz, I Lorena in Toscana. La Reggenza (Turin: UTET, 1988).

expression that by the eighteenth century had come to convey all the perils of having a disordered mind.¹⁸¹

Margherita’s distorted image of womanhood is paralleled by her sons’ lack of manliness, in their weakness, their inability to produce any offspring, their irresoluteness and passivity. While her elder son sought refuge in the arts and chose a musician as his confidant, Gian Gastone was as tormented as his parents by all sorts of emotional disturbances. His “spirit” was portrayed by Galluzzi as “agitated” and “oppressed by sadness”, and he sought refuge in debauchery and prodigality. His solitude during his years abroad left him with no one “with whom to vent his passion”, so he “grew cruel with himself” (non avendo con chi sfogare la sua passione incrudeliva contro se stesso).¹⁸² Just as his father, Gian Gastone was likewise the helpless victim of another unstable woman, who was as extravagant as her mother-in-law (Gian Gastone described her as manifesting a bisbetico naturale), and alternately subjected to periods of “introspection, tears and eternal angers” (musi, pianti, e rabbie eterne).¹⁸³

Through Pieraccini’s account, we can see the male members of the Grand Ducal family controlled by their appetites and gloom (suffering from Acedia), overcome by a lack of will, and consequently, a lack of control over themselves, and sunken in the waters of irresolution. It is precisely the lack of control that is at the core of the irrationality identified by family members when petitioning for a relative’s interdiction, a lack of control identified in their prodigal practices (drinking, gambling, women, etc), together with their unbalanced, and often violent characters. The end of the family is symbolized through the pathetic figure of the alcoholic Gian Gastone, confined to his bed for the last eight years of his life. What Galluzzi termed, using the common eighteenth-century parlance, “spirito inquieto”, Pieraccini transformed into hysteria. His description of the female members of the Medici family, contrasts the hysterical Margherita Louise with her rigorously religious, but still suffering daughter, Anna Maria Luisa. Both are portrayed as a complete failure in terms of their femininity, the former with the abandonment of her offspring, to whom she showed no attachment, and Anna Maria Luisa with her inability to conceive a child.

¹⁸¹ Galluzzi, Istoria del Granducato di Toscana, vol. IV, pp. 139-151, and passim. These expressions are examined in Chapter 7.
¹⁸² Ibid., p. 230.
¹⁸³ Ibid., p. 218 and 220.
According to Pieraccini’s degenerative theory,\(^{184}\) there was no member of the last branch of the Medici (including the unfortunate ones marrying a Medici) who escaped the pathological tendency of mental disturbance. But, even leaving this diagnosis behind, his reconstruction of the Medicis’ lives has strikingly historical grounds. The failure of the Medici family, their disturbed minds and tormented psychologies bear a close resemblance to how familial conflicts were codified in the records under examination in this thesis.

Rather than trying to prove that the emotional disruptions disclosed by the actions of the last Medici are to be considered as the public signs of a rise in the prevalence of mental disturbances towards the beginning of the eighteenth century, I think they should be seen as the nurturing fountain of the languages and images used by the Tuscan petitioners. Cosimo III’s melancholy, Margherite-Louise’s capricious and unbalanced character (hysterical, according to Pieraccini), and the prodigal and vicious tendencies of Francesco Maria, Ferdinando and Gian Gastone, appear clearly echoed in the interdiction records of the Pupilli. The disorder of the Grand Ducal family mirrors the disorders of the private Tuscan families, in their publicity, in their explosion, in their dynamics, in the distorted individualities and tormented personalities.\(^{185}\)

In the accounts of the lives of the last Medici, from Galluzzi, to Pieraccini and Acton, and even in Anna Banti’s *La camicia bruciata*, fiction and reality meet.\(^{186}\) Similarly, the narratives that can be found in the records of the Magistrato dei Pupilli often have more to do with representations, exaggerations, and emotional reactions than with actual facts (if we take the latter as “reality”). But, following Anna Banti, there are occasions when the imagination can tell us more about the truth than history can.\(^{187}\)

\(^{184}\) According to Pieraccini, the Medici family suffered *Cesarite*, that is, the illness of the Caesars, understood as the tendency of the reigning or aristocratic families to degenerate. Gaetano Pieraccini, *La stirpe de’ Medici di Cafaggiolo* (Florence: A. Vellecchi, 1925), vol. III, p. 413.


\(^{187}\) On this, see Biagini, “Due straniere alla corte medicea”.
Chapter 2. Prodigality In Interdiction Procedures: The Masculinization Of Mental Incapacity

The 1718 reform of the statutes of the Magistrato dei Pupilli listed five types of possible mental incapacities that could result in an interdiction sentence, of which the most common one was prodigality. In this chapter, I will focus only on interdiction procedures whose declared causality was squandering and prodigality. Despite being listed as two different categories in the Pupilli statutes (prodighi and dilapidatori), in practice they functioned as interchangeable categories, signifying the same thing. In fact, most of the cases were defined using both, that is, the individual was interdicted because he was a prodigal, and a squanderer (dilapidatore) of the patrimony.

Prodigality was a condition that was not exclusively ascribed to youth. In fact, contrary to what the popular image of the prodigal son might lead us to think, prodigals were not only young sons who acted recklessly by contravening basic social norms and then repented. On the contrary, interdiction records reveal that men throughout their entire lifecycle, from youths to the elderly, could be defined as prodigals. Furthermore, the most basic characteristic when a prodigal was young was that he lacked a paternal figure, being the direct holder of the family patrimony. In this sense, the concept had more to do with the juridical notion of prodigality, as developed in ancient Roman law, than with the Christian parable.

As explained in the first chapter, interdiction was originally designed for prodigality in Roman law, devised as a mechanism to control the economic mismanagement performed by reckless squanderers of family fortunes. While the incapacity of the insane was thought to be natural (and so they were assigned a curator), what established the prodigal’s legal incapacity was the interdiction decree, as we have seen. During the early modern period, the interdiction of prodigals also occurred in the French jurisdiction, but not in England or Scotland, for example, where the law only provided guardianship for the insane.

According to Cartayrade, the transformation of the Roman tradition to respond to the early modern needs of France resulted in the equivalence between interdiction and legal incapacity, that is, prodigals and the insane were treated through the same juridical

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188 See Boari, Qui venit contra iura; Besta, La famiglia nella storia del diritto; Mellyn, Mad Tuscans and Their Families; Cartayrade, “Property, Prodigality, and Madness”; Nootens, “Fous, prodigues et faibles d’esprit”.
Similarly, as I have shown, prodigality and insanity became conflated towards the eighteenth century in Tuscany also, to acquire a complete legal equivalence. Legally the instrument and its consequences may have been the same, nonetheless, qualitatively it was not the same to have a family member interdicted as insane as to have them interdicted as prodigal. This could explain, in my view, the higher rates of prodigality in interdiction procedures, as the table below shows.

Table 2: Categories of mental incapacity used in interdiction procedures between 1718 and 1775

<table>
<thead>
<tr>
<th>Categories</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prodigality</td>
<td>291</td>
<td>48.6%</td>
</tr>
<tr>
<td>Dementia</td>
<td>197</td>
<td>32.9%</td>
</tr>
<tr>
<td>Unspecified incapacity</td>
<td>111</td>
<td>18.5%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>599</td>
<td>100%</td>
</tr>
</tbody>
</table>

Note: Interdictions by reason of being deaf and mute are not considered in this study, given their rarity throughout the period.

Prodigals were generally men of varying ages, but all were performing the role of heads of the family (even 18 year olds who had recently inherited), and in most cases were interdicted on the request of a close relative – a mother, a wife, an elder son or a brother. Prodigality was a distinctly male disorder, with different connotations according to age and social role. Its predominant features were excessive spending, extravagant actions, tendency to gambling, compulsive selling of household goods and frequent drunkenness, all marked by manifestations of unrestrained passions, recognized in their uncontrollable characters, uncertain temper, and frequent violent disruptions. All these indicators fitted under the umbrella of the “vice of prodigality”, a disorder considered severe enough to have the affected person declared mentally incapable of managing his affairs, to interdict and have him submitted to the authority of the Magistrato dei Pupilli. Bearing in mind that interdictions could be decreed by reason of prodigality, madness (demenza) or physical impairment, why were the majority of these persons accused of being prodigals instead of demente? How was

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189 Cartayrade, “Property, Prodigality, and Madness”, p. 60.
the legal incapacity of prodigality framed? What were the meanings Tuscan culture ascribed to prodigality?

In this chapter, I argue that prodigality was understood as a category of mental incapacity that, on the surface, related only to economic mismanagement, but which enclosed intricate assessments that point to a disordered mind and disturbed disposition, to the extent of blending with the categories of straightforward madness (*demente, mentecatto, furioso*). The study of prodigality sheds light on the configuration of mental incapacity broadening the picture of what was defined as madness. My argument is that in the process of petitioning for the interdiction of a prodigal, families reshaped legal and medical knowledge of madness into a socially meaningful language. Mental incapacity was defined through and by social experience, disclosing a new concern for the mental and emotional worlds that tended to explain disordered behaviours as a mental dysfunction.

2.1. Adolescents and Young Prodigals: Indiscipline, Irreverence and Pleasures

Legally speaking, the history of a prodigal started at the age of 18 in early modern Tuscany because, in order to be interdicted, the individual had to have gained the right to administer his patrimony (whether by receiving an inheritance, or, in the case of orphans, because they had come of age). Practically speaking, however, the career of the prodigal often started before they acquired the right to administer their patrimonies; I have therefore decided to include adolescents in this section, referring to males younger than 18. The study of young prodigals sheds light on the configuration of youth as a separate period of life, which could end between the ages of 28 and 30.190 What defined young prodigals was precisely their youth; their disorder was distinctly constructed in relation to their tender age and, consequently, their ages were generally recorded in the petitions.

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The case of young prodigals is also marked by the fact that they were usually denounced by their mothers. In fact, they were usually firstborn orphans of a father who had been under the legal guardianship of their mothers (in most cases, if we follow Calvi\(^{191}\)) or under the care of another close relative. In fact, young prodigals are to be examined against the legal possibilities given to women by the Tuscan patrilineal system, so long as their cases were, in many instances, managed by their mothers, who would usually be appointed administrators of the patrimony after the interdiction.\(^{192}\) This means that young prodigals were under their mother’s power, who would be able to intervene in their lives and youthful actions through the interdiction, as we will see.

Before discussing the characteristics of prodigal behaviour, I would like to note here the significance of the fact that mothers were the recurring petitioners in the interdiction of young prodigals. Most had been appointed legal guardians (by their deceased husbands or by the Pupilli), which meant that petitioning for the interdiction of their son would not be the first time they came into contact with the Pupilli. They counted with an informed background that wives, for example, did not necessarily have. They knew the mechanisms of the institution, they were familiar with the language that had to be employed, and they knew, finally, how to manipulate the system to accomplish what they intended.

Young men’s prodigality was characterized by their tendency to spend excessively to satisfy their pleasures and passions (from clothing, to alcohol, women and gambling), which led them to compulsively sell all kinds of items in order to cover their expenses. This was generally accompanied by being openly confrontational towards parental authority, an unruly character, an uncertain temper and the manifestations of abrupt changes of mood and an uneasy disposition (expressed in terms of *furiosi trasporti*, or *capo irregolare*).\(^{193}\)

Timing in the identification of young prodigality was crucial. When cases of young prodigals were disclosed to the authorities, the petition was commonly sustained with the claim that he had shown a “tendency” to dissipate from adolescence. Proof of this tendency was often provided by special clauses in the father’s will, who had stated that his elder son was not to obtain full administration of the patrimony until he was 22 (and sometimes older),

\(^{191}\) Calvi, *Il contratto morale*.  
\(^{193}\) From this point of view, the career of the Florentine prodigal seems no different from that of the English one, although, as shown by Nicola Phillips, parents did not have the resource of interdiction to control them. See Phillips, *The Profligate Son*.  

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or even completely denying him the right to inherit. Elders saw young prodigals as a direct threat to the family (both economically and morally speaking), because of the early onset of a behavioural disorder that was widely known and feared.

A young man defined as prodigal was not necessarily thought to be experiencing a crisis of youth, or having a temporary derangement. In this sense, prodigality was not only seen as the effect of a “wild” stage, or a difficult period. In other words, interdiction was a powerful weapon to control difficult young men, but the notion of difficulty must be extended so as to include deviances that went beyond the framework of deliberate recklessness.

The very fact that they had developed the disorder in adolescence was used to maintain that they were unlikely to change, and that it was in their nature to be vicious, uncontrollable, passionate, and therefore disturbed. Or, as in the case of the 26-year-old nobleman Simeone Carlo Beroardi, his “vice of prodigality, and natural instinct to squander and dissipate” were so deeply entrenched, that it had not been possible “to remove it, or eradicate it from his spirit.”194 In other words, the young prodigal had a disorder the roots of which were to be found in adolescence, but which had exploded with the inheritance of his patrimony, whether because he had turned 18 (if he had been a fatherless orphan before he came of age) or because of his father’s death.

The case of Alcino Contucci, from Montepulciano, interdicted just before he turned 18, seems particularly illustrative. His disorder had started after the death of his father, when he was 14 years old, in the form of continually escaping from the different places he had been sent for his education (seminars and schools), open disrespect towards the authority of his mother and tutors, disregard for his rank, and a clear tendency to squander.195 When his mother and uncles succeeded in bringing him back home (in the end he had escaped to Naples to enrol as soldier), his rebellion went as far as to steal from his mother and announce that when he turned 18 he would abandon his mother for good, threatening to divide the paternal patrimony so as to dissipate the portion belonging to him (he was not the elder son).

194 “Questo vizio di prodigalità, e naturale instinto a scialacquare, e dilapidarne non è stato possibile di rimuovere, ne di svelleare dall’animo del predetto Simeone Carlo Beroardi”, ASF, MPAP, Memoriali, F. 2303, no. 189, June 1754.
195 He had been first put under the care of a priest, and “di questo luogo, savio e prudente, da cui dopo pochi mesi senza motivo alcuno se ne prese da fuga; indi fu posto nel seminario vescovile di questa città di dove parimente scappò, e pervenuto nuovamente nelle mani della madre e tutori fu mandato a Roma in Collegio Bandinelli dove mal volentieri si trattenne anni 4, dopo il qual tempo venutosene a casa in occasione di vacanze, si sottrasse dalla medesima nascostamente, e andò ad ingaggiarsi per soldato a Napoli, di dove poi disertò, e si messe a fare il guardiano di armenti nelle campagne del regno suddetto...”, ASF, MPAP, Memoriali, F. 2306, no. 65, December 1763. A similar case can be seen in the interdiction of Gimignano Durazzi, 20 years old. ASF, MPAP, Memoriali, F. 2302, no. 286, September 1751.
Threatening to squander their portion of the patrimony was recurrent feature of young prodigality, a threat that was taken seriously by families and government officials alike. Squandering away the family patrimony, or giving it away to someone outside of the family endangered the whole system of the Tuscan elite, and was precisely what the government repeatedly tried to prevent, as can be seen in the interventions in private life and economic management by the Auditore Fiscale (the chief of police and supervisor of criminal justice), on the direct command of the Consulta, the decisions of the Magistrato Supremo and those of the Pupilli.

In such cases, interdiction acted as a preventive measure that had a twofold purpose: to avoid economic ruin and to control or restrain the individual. Given that youth was regarded as a particularly problematic period, or at least crucial for one’s future life,\(^196\) early detection of the tendency to the vice of prodigality was considered particularly important. The seed that was implanted in youth would be impossible to modify later on. If a young boy under 18 years of age was corrupt, this represented a strong clue as to how he would behave in the future.\(^197\) If the disorder had started early in life, it was seen as more or less irreversible damage, “his present life being a strong indication and argument of his future life.”\(^198\)

The incapacity of young men aged from around 18 to their early twenties was also presented by their relatives in terms of inexperience, as if they were immature, not yet prepared to act as heads of the family. Above all, they were presented as lacking the necessary prudence for proper economic behaviour, because of their youth, but also because of their lack of discipline, their characters, and their opprobrious tendencies. Youth was considered an extremely “fresh” age (età così fresca), which made young men prone to diversions and passions, weak and inexperienced in economic management.\(^199\) In this sense, their mothers or tutors denounced them as having useless distractions, or lacking the necessary character and talent to manage their affairs. But they were also thought to lack “world experience” (senza

\(^{196}\) See, for example, Ben-Amos, Adolescence & Youth, Sharpe, “Disruption in the Well-Ordered Household”, or Trexler, Public Life in Renaissance Florence. For intergenerational conflicts, especially associated with conflicting notions of masculinity, see Phillips, The Profligate Son.

\(^{197}\) As the underage Matteo Sarti, who “attesa la pratica di alcuni pessimi compagni, che di continuo l’hanno sedotto, e seducono a modo loro, va continuamente dissipando nell’osterie, giochi, et altri vizi tutto quel poco di danaro, che gli viene in mano”. ASF, MPAP, Memoriali, F. 2306, no. 77, February 1764. 

\(^{198}\) “essendo la vita presente forte indizio, e argomento della futura” Those were the terms used by the testimonies collected for Matteo’s case. Ibid.

\(^{199}\) ASF, MPAP, Memoriali, F. 2307, no. 77, September 1767.
esperienza di mondo), which prevented them from being aware of the risks of living a life of pleasure and dissipation.200

Youth in itself, therefore, could justify the interdiction, as can be seen in what was said in relation to the 20-year-old Vincenzo Fossi, who “because of his youth, and imprudent behaviour, we think it is convenient to interdict the administration.”201 But, on the whole, the records show that, at least for the period from 1720 to 1770, young men do not represent the majority of interdictions per year. In other words, it would seem that though youth was considered a period of crisis in life, young men were not interdicted at a higher proportion than middle-aged or old men. Prodigality was considered a seriously damaging disorder, which had the power of obscuring the rational faculties of individuals. Young men who presented the tendencies of prodigality, in the absence of a strong paternal figure, would be lost in the perils posed by uncontrolled passions if not controlled with the help of the Pupilli in due time. The career of the prodigal often proved that, notwithstanding the interdiction and the Pupilli’s intervention, although the officials of the Pupilli had the support of the police forces to make them yield to their mother’s authority, they would continue to have uncontrollable characters, committing all sorts of extravagancies and excesses.

The young men denounced as prodigals to the Pupilli were also described by their families as frivolous pursuers of social prestige, devoted to superfluous diversions, and consumed by their desire to appear as independent gentlemen who treated themselves splendidly (trattarsi splendidamente).202 This was particularly visible in cases of impoverished noble families, as young men made desperate attempts to maintain their status. Such was the case of the 26-year-old Simeon Carlo Beroardi, whose natural tendency to squander was devoted precisely to his passion of living with grandeur (vivere alla grande).203 Noble of birth, he became an orphan at 20 and, as the only one left in his direct family, he went to Florence to have the time of his life, and dissipate all his inheritance on carriages, servants, showy clothing, feasts and sociability (conversazioni geniali).204 He refused to leave

200 ASF, MPAP, Memoriali, F. 2304, no. 53, August 1756.
201 “per l’età sua giovanile, e poco prudente condotta, crediamo sia espediente, che gli sia interdetta l’amministrazione”, ASF, MPAP, Memoriali, F. 2304, no. 104, June 1753.
202 ASF, MPAP, Memoriali, F. 2303, no. 26, March 1752.
203 Also referred to in a different case as “passione che lo domina in volere passare per grande“. ASF, MPAP, Memoriali, F. 2303, no. 49, August 1752.
204 His noble family was originally from Perugia. In the absence of close relatives, the interdiction was petitioned by his creditors. As for his splendid life, the original in Italian says: “cominciò a trattarsi splendidamente, e sciolto da ogni ritegno si portò a questa città, ove vivendo alla grande con carrozza, servitù, e abiti riguardevoli dissipò in pochi anni con questo splendido trattamento accompagnato da conviti, festini, e
Florence to confine himself in Castiglion Fiorentino, as the Magistracy fruitlessly ordered, controlled as he was by his vices. To complete the picture, he devoted himself to idleness, maintained a close friendship with a married woman and, due to his quarrelsome character, was more than once challenged to a fight (battersi).

As in the case of Beroardi, petitioners recognized the disorder of prodigality in these men’s indiscipline and irreverence, and in their open disrespect towards legal rules and behavioural norms. Laden with debts as they often were, these young men would leave the city to avoid paying their creditors, or even to avoid the Magistracy’s commands. In a feature that we will also encounter with regard to middle-aged and old prodigals, their disorder spoke of conflicting expectations of life, of their gender roles, of their masculinity. If with the middle-aged prodigals, as I will show, the unfulfilled expectation was their disregard for their role of pater familias, with the young men it was their obstinate preference for idleness, grandeur and debauchery. They refused to work, or study (depending on the case and social rank), preferring instead to completely dedicate their time to the fulfilment of their passions and appetites, recklessly pursuing the excesses of the new enlightened sociability.

Perceptions of prodigal behaviour should be thus interpreted as entrenched in changing notions of masculinity, and marked by the eighteenth century clash between different conceptions of it among the generations, for “competing discourses of masculinity co-existed.” In this sense, conflicts generated with the young prodigal shed light on a debate about masculinity, normativity and expected moral and economic behaviour, exposing it from the perspective of a conflict between spending and saving, between following a career of drinking, duelling and leisurely pursuits, and a more rational, polite and self-controlled model of behaviour.

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205 The discussion on the conflicting expectations of gender roles in family disputes is vast. See Pollock, “Rethinking patriarchy”; Desan and Merrick, Family, Gender, and Law; Crawford, Blood, Bodies and Families; Alexander Cowan, Marriage, Manners and Mobility in Early Modern Venice (Aldershot: Ashgate, 2007); and the studies based on the matrimonial disputes of the ecclesiastical tribunals edited by Seidel Menchi and Quaglioni, starting with Coniugi nemici.


Refusal to work, and persistent or obstinate idleness are a characteristic of the three stages of prodigality, but in the young men the difference is that it was presented as particularly troublesome because they had no direct paternal authority. In fact, the absence of a paternal figure was identified as one of the causes that could lead to the manifestation of a prodigal disorder. Tutors would often complain to the Magistracy about their pupil’s disobedience during adolescence, when they refused to go to school or obey any of their commands, constantly escaping, and taking refuge with their mothers (when the latter were not the legal guardians). Social status should be placed at the core of the conception of deviant behaviour, and was also present in the perception of madness. Mental incapacity was indicated by a person’s inability to respect basic norms and, in this sense, the prodigal disobedience of an uncle or a mother is echoed in the madman’s incapacity to understand authority. As we should recall, mothers, uncles, and brothers filled their petitions with their social perceptions of life, with how they understood the norms.

Interdictions, as I have said, were used as a last resort, when all the possible resources to control the young man had been exhausted before turning to the Magistracy. Every available family strategy had been put to work before turning to the Pupilli, evidenced by the fact that interdiction petitions, although generally signed by a mother, a wife or male next-of-kin, were generally supported by the extended family. Mothers were supported by their kin or by paternal relatives of the defendant, who had previously tried, unsuccessfully, to influence the behaviour of the individual. The two family lines could be united by the aim of controlling the squanderer although, of course, sometimes in contentious cases, alliances would be made to support one or the other side.

Sending the petition meant that a state of urgency had been reached, when the prodigal had passed the accepted limits of tolerance, putting himself, and the patrimony, under eminent risk. This state of urgency was characterized by a life completely dedicated to vices and passions, gambling and squandering. As Giuseppe Maria Fede, an 18-year-old who “seduced by bad company, has abandoned his studies, and has devoted himself to pleasures and conversations, and has in such a way disregarded his subjection to the tutor, that he does not come back home if not after midnight, to rest few hours in his bed, and return the next

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208 As I stated before, the majority of the cases appearing in the Pupilli regarding young men correspond to individuals whose fathers had died, and who were under the care either of their mothers, or uncles. I have found only 5 cases where the petitions for interdiction were signed by fathers.
morning to the usual career completely opposed to good custom, and to the education he received...”

Interdiction in such cases came as a valuable (and external) resource to restrain an otherwise uncontrollable, intractable young man, over whom the tutor had lost all possibility of re-establishing his (or her, where the tutor was the mother) authority. However, interdiction was not always completely useful regarding the governing of an individual, and sometimes it would not even achieve the purpose of reducing his spending. The family conflict would not necessarily be resolved with the interdiction, and problematic situations would follow, sometimes, during the whole life of the interdicted.

The case of Count Giovacchino Ceuli from Pisa is particularly interesting here because, although his concrete age is not given in the sources, he appears repeatedly in the records of the Pupilli, giving us a long-term view of his character, the evolution of his disorder, and the reactions of the community, his relatives and the Magistracy. He was interdicted in August 1749, when his creditors petitioned the Magistracy, describing him as a prodigal lost by the passion of gambling (cards and lotto). He reappears again in 1752, but now married with a small child, having left Pisa, and still ruled by his passions. On this occasion he was depicted by his wife Anna Maria Lorenzani, as a violent man, capable of doing anything in order to obtain more money to satisfy his passions. She feared him, and denounced to the Magistracy his continuing insults and mistreatments. She had been unsuccessful in trying to straighten her husband out, and even petitioned not to live with him anymore, so that she and the child could be safe from his disruptive character. According to the community’s report, the mistreatments she suffered were driven by Ceuli’s constant need of money, and her refusal in giving it. His unruly and increasingly violent character led to his incarceration in 1757, this time petitioned by the officials of the Pupilli themselves. Eight years after the interdiction, he had become a man completely ruled by his passions, manifesting increasingly dangerous outbursts of rage, and performing “criminal acts” (mostly

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209 The original is as follows: “si è lasciato sedurre dai compagni cattivi, ha abbandonato gli studi, si è dato ai piaceri, e alle conversazioni, ed ha talmente scossa la soggezione del tutore, che non è tornato più casa, se non dopo la mezz' notte, per riposare, poche ore nel suo letto, e ritornare la mattina susseguente alla solita carriera del tutto opposta al buon costume, e all’educazione ricevuta fino da suoi primi anni”. ASF, MPAP, Memoriali, F. 2304, no. 53, August 1756.

210 “Et in oltre renderla libera da nuovi insulti, che sarebbe per ricevere ritornando esso suo marito, sperando che il medesimo possa rimettersi ogni qual volta provi il rigore di qualche gastigo, quando così piaccia alle SS®° LL. Illme”. Letter of Anna Maria Lorenzani, 16 May 1750, in ASF, MPAP, Memoriali, F. 2303, no. 31.

211 ASF, MPAP, Memoriali, F. 2304, no. 133, 23 August 1757.
fraud and a willingness to fight with whoever opposed his intentions, be it a creditor or a public state official).\textsuperscript{212}

Ceuli was perceived as uncontrollable, unreasonable and unmanageable, and his disruptiveness did not seem to change with age. Articulated upon narratives that from diverse perspectives, through different voices and at various times coincided in their negative assessment, the case shows that the disorder behind the prodigal often went beyond a mere life crisis that would yield with adulthood. His behavioural disorder and disturbed disposition accompanied him and tortured his relatives for over 15 years. Although his interdiction was lifted in 1758 after a promise on his part to mend his ways, he still appears in the records until at least 1764.

At the same time, this case shows that the conflicts and tensions surrounding a prodigal were not necessarily solved by the interdiction (and this goes for the three categories). All the signs of unruly character, and especially, the outbursts of fury, and the overwhelming passions that governed those individuals were now directed towards the person who had been appointed the new administrator of their patrimonies. In the case of young prodigals, this task was often given to the mother, which could revive the conflict, instead of reducing it. All their anger would be destined towards the person who denied them the use of their resources, with increasing irritation when it was not possible to demand from the “obstinate administrator [in this case the mother] who had never wanted to obey his command, neither through letters, nor through begging.”\textsuperscript{213}

In the power games between family members, mothers and wives could be sometimes in opposing positions, as the interdicted son would use his wife as means of diminishing the mother’s power. The issue of the administration of the patrimony was, again, at the core of the conflict. Ceuli chose between his mother and his wife as to which was to have control over him, deciding ultimately for the latter. In general, wives played an instrumental role in the attempts to govern the unruly prodigals. The wife was also used as a first resort of family strategies in their efforts to control the unruly prodigal. Wives appear as influential agents that could convince the husband to turn back home and reassume properly his duties as \textit{pater familias}, as a last resort to make him regain his senses. When Giovacchino Ceuli fled Pisa for the city of Massa, where he continued his disorderly life “gambling and spending needlessly”,

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\item \textsuperscript{212} “Gi’atti delittuosi et arbitrari dal medesimo fatti”, Ibid.
\item \textsuperscript{213} “...non ha mai potuto esigere ne detto Borghini ne altra persona incaricata dopo del supplicante ne pure un soldo dall’ostinatissima sua attrice la quale non la mai voluto obbedire, ne a lettere, ne a preghiere”. ASF, MPAP, \textit{Memoriali}, F. 2306, no. 109, July 1764.
\end{itemize}
his wife Anna Maria Lorenzani also went there, “advised by relatives in order to induce the husband to return to Pisa, and turn to a prudent behaviour”\textsuperscript{214}. The wife could be a resource, but success was not guaranteed, and deeper conflicts could arise from their intervention, as in this case. Ana Maria Lorenzani’s attempts to correct her husband ended violently and unsuccessfully, as she herself informed the Pupilli.\textsuperscript{215} But, seven years later, Ceuli would petition for his wife to be appointed as administrator instead of his mother, whom he said he could not trust, so that he could be “secured of everything, and quiet in soul and body.”\textsuperscript{216} The close relation between emotions and patrimony here is evident, as are the changing balances in the family disputes disclosed by interdiction procedures.

To recapitulate, the young prodigal’s disorder was constructed in terms of a lack of control. His unrestrained behaviour was indicated by his dissolute ways of living (sregolato modo di vivere),\textsuperscript{217} his unruly character, or by the fact that he lived his life completely at the mercy of all kinds of pleasures and vices. All this would engender what was called an improper and/or extravagant behaviour, and these were all characteristics that could be resumed as the symptoms of a “irregular mind” (capo irregolare).\textsuperscript{218} These men were disqualified from administering their patrimony and managing their own affairs because of their irrational behaviour, being ruled instead by their passions and appetites. They were thought to be gentlemen lost in their passions (gentiluomo perduto),\textsuperscript{219} whether drinking, gambling, women, or crapule.\textsuperscript{220} Will and self-control were capacities totally absent in the prodigal.

Their youth was also declared responsible of their frivolous desires, and particularly, their weakness, or their easily influenced nature. They were presented as having a temper that was too complaisant and easy, which made them prone to the influence of friends of bel

\textsuperscript{214}“Dopo qualche tempo andò alla detta città anche l’Anna Maria Lorenzani sua moglie consigliata dai parenti affine d’indurre il marito a ritornare a Pisa, et a darsi ad una prudente condotta”. ASF, MPAP, Memoriali, F. 2303, no. 31, 29 August 1757.
\textsuperscript{215}Testimony of Ana Maria Lorenzani, Ibid.
\textsuperscript{216}“almeno il supplicante amministrando la di lui moglie sarà sicuro di tutto, e quieto d’anima, e di corpo”. ASF, MPAP, Memoriali, F. 2306, no. 109, July 1764.
\textsuperscript{217}ASF, MPAP, Memoriali, F. 2302, no. 21, March 1747/48.
\textsuperscript{218}ASF, MPAP, Memoriali, F. 2303, no. 52, September 1752.
\textsuperscript{219}ASF, MPAP, Memoriali, F. 2302, no. 128, 12 August 1749.
\textsuperscript{220}The 4\textsuperscript{th} edition (1729-1738) of the Vocabolario degli accademici della Crusca, defined “crapula” as the vice of eating and drinking excessively, “Vizio, che consiste in troppo mangiare, e bere”. In http://www.lessicografia.it/CRAPULA, accessed November 20, 2010.
The pernicious influence of these kinds of acquaintances was thought to act as a seductive force pushing them towards taverns, gambling and other vices. And those vices were precisely the sign needed to declare a man mentally unable to manage his affairs, so long as other forces, different from will and rationality, controlled him.

Therefore, besides the component of youth, the young prodigal proved his incapacity to administer his patrimony particularly because of this lack of rationality. This was demonstrated in his dissipation, in his pursuit of pleasure, in his unwise conduct. But it was also proved in his emotional behaviour, his constant disruptions, his uncontained rage. Prodigality, thus, also presupposed emotional disturbances, making the man prone to furiosi trasporti,222 or in general to violent outbursts of anger.223

Young prodigals were prisoners of vices that were thought to overshadow their capacity for discernment. It was on account of this that they acted unwisely and irrationally, as if their minds were not functioning properly. In fact, when a prodigal was declared “cured” from his vicious inclinations, it was because he had started to demonstrate better discernment and a wiser conduct.224 It was thought that a man who spent so much time in taverns, in the company of married women, caring only for vanities and pleasures, had lost his senses. But lets us move forwards to the middle-aged prodigals, and see if this problem may become clearer.

### 2.2. The Adult Prodigal: Vicious and Passionate Heads of Family

This section focuses primarily on middle-aged family heads, whose precise age was usually not recorded, but which was roughly from their thirties to their fifties. They were generally married, and still had young children, and accordingly their identity was defined through their gender role. They were presented, usually by their wives, as husbands and

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221 The prodigality of Paolo del Rosso, nearly 20 years old, was explained in terms of his young age, and his “complaisant and easy” temper, in Italian, “si per ragion della detta età, si per ragione della qualità dell’animo suo troppo condescendente”. ASF, MPAP, Memoriali, F. 2303, no. 30, April 1752.


223 The role attributed to manifestations of uncontrolled anger in the configuration of lay, legal and medical notions of mental incapacity are examined in Chapter 7.

224 As Elena Poletti said in order to free her son from the interdiction: “per essere in esso cessate, quelle viziose inclinazioni, per le quali ricorse per interdirli l’amministrazione, e per essere egli dobuto [sic], di un miglior discernimento, e più saggia condotta”. ASF, MPAP, Memoriali, F. 2306, no. 223, October 1765.
fathers who were in open abandonment of their duties. Wives would petition for the interdiction usually with the supporting signatures of their firstborn son, or another male figure. As in the cases of young prodigals, women generally petitioned with the support of kinsmen of either line of the family.

In descriptions of the middle-aged prodigal disorder, we can find the same symptoms that we found in young prodigals: dissipation, a propensity to contract needless and capricious debts, irregular or illegal economic practices (usually scrocchi or illegitimate mallevadorie), dissoluteness and debauchery. And, finally, they were also described as extravagant and disturbed, of unruly and violent character, emotionally unstable and governed by their passions and vices.

The notion of natural incapacity holds a particular mark in the case of middle-aged prodigals, as if it was natural for them to squander, just because they lacked the (mental) capacity to act differently. Their dissipation stemmed from lack of the capacity (mancanza di capacità) to administer their patrimony and regulate their affairs. \(^{225}\) It is precisely because this mancanza di capacita was implicated, that I am not entirely certain that prodigality was deemed as a voluntary disorder (while madness was considered an involuntary condition). \(^{226}\) Evidently, there are cases when prodigal actions were deemed as the effect of deliberate recklessness, and where vices and passions were judged as tendencies that could have been controlled if the individual had wanted to. But there are many other cases where the disorder was presented in terms of his natural tendency, natural incapacity, innate instability; all of which occurred regardless of the intentions of the affected individual.

The aggravating factor in the case of the middle-aged was their open disregard towards their role as pater familias and their responsibility towards their wife and children. Invariably in this category the nuclear family (wife and children) is always mentioned when petitioners tried to illustrate the negative effects of a prodigal. The desire of escaping, or the actual abandonment of wife and children seem common features of the middle-aged squanderer. Wives appear as accusing their husbands of creating all kinds of unnecessary debts, dissipating the patrimony in all sorts of vices and diversions, and then abandoning wife, children and debts. Consequently, the abandonment of their duties as active heads of the family comes as a first symptom of the middle-aged prodigal disorder, to both prove the

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\(^{225}\) Interdiction proceedings of Stefano Maria Giorgi, ASF, MPAP, Memoriale, F. 2307, no. 13, April 1767.

\(^{226}\) This has been claimed by Mellyn, Mad Tuscans and Their Families, and Cartayrade, “Property, Prodigality, and Madness”.
negative consequences of a prodigal career, and illustrate the gravity of the disorder in itself. This is important, because it could be proven that debts had been contracted for justified reasons, in which case, they were not interdicted. Although, in those cases they would not have escaped, and they would not have been described as vicious, and most of all, they would not have failed in their gender duties.

Actually, the most obvious difference that we can find between the young and the adult prodigals could also be framed in terms of their having wife and children of their own to be responsible for. In this sense, the offense of the middle-aged prodigal was aggravated by the fact that, with his dissipation, he was denying his wife and children the necessary resources for living. The disorder of the prodigal *pater familias* was based primarily on the fact that he was neglecting (or that had “always” neglected) his role as head of the family, which in its topsy-turviness, supported in itself the diagnoses of a behavioural disorder whose roots, once more, were to be found in a mental faculty that did not work properly. For instance, the prodigal nature of Ranieri Fares, interdicted in June 1765, was defined in the testimonies in terms of a father of 10 children, who wasted all his income on useless things, and who had “never thought about giving a good education to his family, or about their necessary maintenance, having gambled all the money he had earned.”

In fact, the middle-aged prodigal disorder was often associated by petitioners with the breaching of the codes of behaviour expected from a head of the family. A male role that was complementarily defined by their behaviours in the private or domestic sphere as well as in the public world. The private behaviour could affect the reputation of a man and his family, particularly whether they performed their duties of father and husband with the adequate measure of rationality, self control and economic management. Quite at odds with this ideal, prodigals persisted in giving priority to the fulfilment of their passions and caprices over their duties as heads of the family, a pertinacity that forced their relatives to request interdiction.

Their prodigal actions and behaviour put the family reputation at risk, but also the economic resources for its subsistence. The interdiction of a middle-aged prodigal, especially when he had a wife and small children, was marked by the intention of his next of kin to avoid the responsibility (which, in the absence of the father, would fall to them) of feeding and maintaining the abandoned family. If those men could, therefore, not be convinced by words to leave their pleasures and caprices, or to come back home and guarantee a proper life.

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for their wife and children, they would have to be forced by the Magistracy. If their behaviour could not be changed by such a corrective measure, at least the patrimony would be secured for the future of their children. Similarly, idleness, and a refusal to work were also strongly contested, following the same principle.

Lack of control over his actions, appetites and passions were at the core of the reprobation suffered by the squanderer. The descriptions of his behaviour often emphasized his *sregolato modo di vivere*, his *voluttuose idee*, his incapacity to manage his affairs. Economic behaviour encoded a more profound lack of control over his body, his mind, his actions, and a man enslaved by his passions and appetites was a distorted image of masculinity. The complete lack of control they showed was dishonourable and, thus, a disruption of their accepted male gender role. As argued by Elizabeth Foyster, “men were expected to demonstrate their greater share of reason by exercising self-control or ‘self-mastery’ over the passions, emotions and temptations which were thought so easily to sway the ‘weaker’ vessel.”

Foyster examined the energy and resources devoted by English husbands to preserve their male honour, even to the extent of paranoia. Conduct books, however, were reminders that male honour had to be preserved using male strength along with reason. But, above all, men were never to lose their temper in the grip of uncontrolled passions.

To the dissipation of the patrimony, an immoderate way of living, the gambling and the excessive drinking, some petitions added the presence of a mistress, and the consequent disrespect and mistreatment of the wife. Prodigality was understood as a category of mental incapacity that encompassed a recklessness and lack of control that affected not only economic behaviour, but also morality. It was not only that they engaged in innumerable debts, countless non-profitable contracts and the compulsive selling of goods, but also that they were involved, repeatedly, with different women. This was not a one-time adulterous relationship, or a unique affection with the wrong woman, but a tendency that had become customary.

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228 As an example, we could mention Francesco Guastelli, denounced as a squanderer by his brothers because, besides his prodigal behaviour, he had abandoned his family, with great “disadvantage and disaster for his family”. They tried to convince him to come back and reassume his duties, even promising that they would pay all his debts if he was to abandon his vices, but “his pertinacity in wanting to live only under his own caprice”, forced them to turn to the Magistracy, requesting the interdiction. In ASF, MPAP, *Memoriali*, F. 2307, no. 45, August 1767.


230 Ibid.
In many of these kinds of cases, the wife’s petition was far more dry, reducing her denunciation to the economic misbehaviour, compared to the extended and even spicy details presented in the testimonies collected by the Magistracy’s informers. The importance of witnesses in family litigations has recently been stressed by Julie Hardwick, who claims that they give the community’s expectations and judgment of the behaviour under discussion (she refers primarily to marriage litigations), and at the same time connect the private and the public worlds, partaking in the state’s regulation of the family life.\(^{231}\) Witnesses and testimonies also connect us to the context of the accused deviant behaviour, giving us a complement to the personal-private gaze.

For instance, in June 1759 Agata Sammicheli, supported by her elder son, petitioned for her husband’s interdiction. Defined as prodigal, the description of her husband’s behaviour alluded strictly to his economic mismanagement, and it was only in the testimonies where dissipation was connected to dishonourable behaviour and violent actions against the wife. From Sammicheli’s place of origin, Lucolena, the Magistracy was informed that Giovanni Sammicheli regularly frequented “the house of a (female) neighbour, where he ordinarily spends most of the day eating, and drinking, and having a good time (bel tempo) causing public scandal, being this one of the main reasons why he mistreats in words and in actions, his wife.”\(^{232}\) The case is extremely interesting because in February 1760, Giovanni Sammicheli petitioned to be released from his submission to the Magistracy, claiming the falseness of the supplication made by his wife and elder son, and arguing that they had plotted against him.\(^{233}\) Strikingly, the official disavowal by his son and wife of their initial accusations supported Sammicheli’s petition.\(^{234}\)

The act of petitioning against an unruly and violent husband must have been a difficult thing to do for a woman in the eighteenth century. But it also shows them as active agents in

\(^{231}\) Hardwick argues that, “witnesses, along with plaintiffs, royal prosecutors, and judges, formed litigation communities that explicitly addressed specific issues, in this instance about family in separation suits, and implicitly engaged the macrocosmic issues such actions raised about relationships of gender and property, household and state”. Julie Hardwick, “Between State and Street: Witnesses and the Family Politics of the Litigation in Early Modern France”, in Desan and Merrick (eds.), *Family, Gender, and Law*, p. 104.

\(^{232}\) Visits “la casa di una sua contadina, in cui ordinariamente va passando la maggior parte dei giorni in mangiare, in bere e in darsi bel tempo con pubblico scandalo, essendo questi uno dei principalissimi motivi, per cui si in parole, che in fatti maltratta la propria moglie...”. ASF, MPAP, *Memoriali*, F. 2305, no. 14, September 1759.

\(^{233}\) ASF, MPAP, *Memoriali*, F. 2305, no. 53.

\(^{234}\) The retractions of wife and son are also interesting because of the procedure used by the magistrates to make sure they were not forced by the man to withdraw, and at the same time because they present a different narrative than in the initial petition.
this process of shaping the perception of legal incapacity, protected by their sons, or by their kinsmen. In the theatre of alliances and family strategies, it was common for the interdicted to denounce family plots against them, and certainly we have to concede that sometimes this may have been the case. Nonetheless, when the interdiction was petitioned out of ulterior motives other than the protection of the patrimony and the family, we usually have a liberation petition following shortly after the interdiction sentence.

The wife’s involvement in the interdiction procedure could be both to denounce the husband as squanderer, and to plead in his favour, with the intention of proving her husband’s amendments, his “honourable” behaviour, sane state of mind, and economic abilities. In most of these latter cases, women adduced the perils suffered by the family during the head of the family’s submission to the Magistracy, the high expenses resulting from this situation, and the necessity of regaining the original structural order of the family. Provided that in many cases the patrimony’s administration was assigned to the wife, the distortion of the traditional family structure was further enlarged by placing women as active heads of family. In these cases, new conflicts followed the initial ones. The disempowerment of the head of the family imperilled the reputation and social position of the family, and could also affect its economic future. But, it also seriously affected family life, for the interdicted seldom reacted passively to their disempowerment. All these arguments point to the fact that petitioning for interdiction was not the easiest solution for controlling an unruly husband, or solving a matrimonial conflict. Women did not necessarily have their conflicts solved with the interdiction of their husbands.

As in the case of young prodigals, violent behaviour was a recurring image in the description of the middle-age disorder, with the difference that in the cases of the former the anger would be directed against creditors, in street brawls, and occasionally against the mother. In the case of heads of family anger, on the contrary, would usually be directed against the wife. Rather than entering into issues of matrimonial violence, what interests me here is the recurring image of perturbed emotional states in the description of the prodigal’s disorder. Because they were known to be ungovernable, they were also feared, with their alienated temper, and unrestrained passions. Besides the evident similarity with declared cases of madness, the violent outbursts of the prodigals were often the reason for the Magistracy’s intervention.

As already stated, petitioning for an interdiction was not the easiest, nor the fastest solution to control a prodigal. It has to be taken into account that the interdiction in itself was
dishonourable to the family, as long as the reprehensible practices and licentious living of the man were made public by the Magistracy,\textsuperscript{235} and because it required paying the annual fee charged by the Pupilli, and the income of the administrator. Plus, every action that was made through the Pupilli had to be paid, and interdictions usually presupposed the inventory of the goods, selling part of them, or renting others. So, from neither the economic point of view nor from the social point of view, was it the easiest solution.

Yet, despite the difficulties an interdiction would exert on family life, it was nonetheless used to control disordered members of the family. Furthermore, denunciations of prodigality were not only centred around the basic facts of the reckless economic mismanagement that was held liable to interdiction. The signs of mismanagement were in fact profoundly mingled with the identification of the signs that would lead to petitioning for the interdiction of an insane person. An uncontrolled body meant an uncontrolled mind, and an uncontrolled mind signified irrationality. Thus, their uncontrolled mental and emotional capacities were used by the families as arguments to justify the interdiction. Here the notion of vice, especially with regard to drinking and gambling, seems crucial.

If drinking and gambling were sometimes part of the young prodigal’s disorder, in the case of the middle-aged they often appear as the defining factor of the disorder. We should bear in mind that the eighteenth century in Tuscany witnessed the proliferation of a series of measures to regulate gambling and public spaces of alcohol expenditure (bettolle, cantine), demonstrating the new public concern originated by these vices.\textsuperscript{236} Accordingly, the practice of gambling and the tendency to drunkenness functioned as a “winning” argument to sustain a petition for interdiction. This is particularly the case of the narratives of middle-aged prodigality, which attributed especial relevance to gambling and excessive alcohol consumption. These two vices were identified both as the paradigmatic symptoms of the prodigal disorder, and as its causal factors. Rather than being undisciplined and violently disobedient, disrespectful of social hierarchies, and pursuers of splendour and pleasures, as the young prodigals supposedly were, the middle-aged were primarily described by their relatives as consumed by alcohol and gambling, lost in the effects of such vices, and thus, irrational and unable to control themselves.

\textsuperscript{235} After an interdiction, the authorities of his place of origin had to publish bandi which declared that the person had been interdicted, so that no business or economic contract could be made with him.

\textsuperscript{236} See Cantini, \textit{Legislazione Toscana}, vols. 20-27. On the legislation regarding gambling, see also Andrea Addobbati, “I guastafeste. La legge toscana sul gioco del 1773”, \textit{Quaderni storici} 95, no. 2 (1997), pp. 495-538.
Alcohol, and perhaps to a lesser degree gambling, were thought to seriously compromise the mental faculties of an individual, and proved his mental incapacity. In fact, we know that patterns of alcohol consumption changed in eighteenth-century Europe. Scholars have suggested that the eighteenth century witnessed a shift in the culture of alcohol. There was an increase in the amount consumed, which explains the “new” visibility gained by alcohol and the new conflicts associated with it. This went hand in hand with changes in the representations of drunkenness, particularly regarding the damaging effects it had on mental faculties. Throughout the century it became clear that excessive drinking could not only produce physical damage, but could also cause insanity, destroying reason and neutralizing will.

In eighteenth-century Tuscany, the very fact that the individual was continuously under the effect of alcohol, and seized by the power of gambling, was thought to demonstrate that there was no possibility of a future change in their behaviour. Drunkenness especially was seen as proof that it was not a temporary crisis, or a difficult “phase” in their lives, but a disorder, one that was shown in their behaviour, but that was thought to seriously compromise their minds. Excessive alcohol consumption seriously corrupted a person’s mind, to the extent of incapacity in the eyes of his relatives, and was seen, therefore, as the main causality of their squandering. Because individuals were supposedly weakened by drinking and gambling, they were seen as helpless objects before the seduction of ill-intentioned friends, who would deceive them and profit from their weakness and alleged stupidity.

As I suggested before, the most negative effect of excessive alcohol consumption was believed to be the effects it produced in the mental faculties of the drinker. Alcohol was thought to obscure rationality and will, making the person drunk and thus, “stupid in

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240 For example, it could be said that “non mancano persone che profittino della debolezza di esso, e con spogliarlo del denaro col giuoco, e con fare dei contratti troppo vantaggiosi...”. ASF, MPAP, *Memoriali*, F. 2303, no. 27, February 1752.
mind.” In fact, the Italian term used was *ebrio*, which came from *ebbrezza*, and was defined by the Vocabulary of the Crusca as the obfuscation of the mind caused by excessive alcohol consumption. Similarly, to get drunk (*imbriacare*) was to ingest “so much wine, that the vapours and spirits ascend to the brain, obfuscating the intellect.” Attesting to the ubiquity of these understandings of the effects of alcohol, the expressions used in interdiction petitions are that the drunkard had “almost lost the use of reason.”

Petitioners therefore identified drunkenness as a causal factor of madness, because it could make the individual feeble-minded, and hence incapable of governing himself. Therefore, because their mental capacities were compromised, they could not be held responsible for managing their lives and affairs. Accordingly, this state of mental incapacity was what allowed petitioners to obtain an interdiction sentence for a prodigal relative. Interestingly enough, most of these lay diagnoses of mental disturbance did not need a medical certificate as support.

In the reprobation of excessive drinking we can also find a strong disapproval of taverns themselves, as places of homosociability (the term in Italian was *bettola* or *osteria*). Rather than focused in the violence commonly associated with taverns, interdiction petitions centred their condemnation on the type of men that could be found drinking in them, usually considered as coming from a lower rank than the accused. Honour and respectability were at risk when frequenting these places, which had such a power over men that they could even become their homes (there are, in fact, frequent reports of drunk prodigals who actually lived in the taverns). They were also places associated with a licentious life, and the presence of libertine women of ill repute, where men could forget about honour and basic duties.

Drinking also made the task of the administrator difficult, as the interdicted would demand financing for his “vice”, and the cases prove that often it was easier to have the prodigal at the tavern drinking, than at home suffering violent outbursts because alcohol was

241 “che Ignazio lor fratello è molto debito al vino, perloche diviene spesse volte ebrio, e stupido di mente...” ASF, MPAP, Memoriali, F. 2304, no. 26, May 1756.
244 ASF, MPAP, Memoriali, F. 2304, no. 115, July 1757.
denied him. The administrators were in fact accused of wasting vital resources for the daily living of the family, with their “condescendence to the desires, and irregular behaviour of the submitted [the interdicted], giving him the indulgence of living in drunkenness, and of being constantly at the taverns.”

Finally, we should not forget the emotional component of the prodigal’s disorder. They were thought to be what we today would call emotionally unstable, which in the eighteenth century was expressed with references to an unruly character, uncontrolled temper, or more commonly, extravagant humour. The component of violence comes here again, a violence that was conditioned by their need to satisfy their vices. The vicious prodigal, especially one consumed by the “need” for alcohol and gambling, was greatly feared by his wife, who would often seek refuge against her husband’s outbursts of rage in the parental home.

The evidence examined suggests that middle-aged prodigality was marked by this vice “dependence” in a larger extent than in the cases of its younger or elder counterparts. A significant part of the narratives describing middle-aged prodigality described their altered states of mind on account of drunkenness and the disturbing forces derived from the need to gamble. Rather than being undisciplined and violently disobedient, disrespectful of social hierarchies, and purveyors of splendour and pleasures, as the young prodigals supposedly were, the middle-aged were primarily consumed by alcohol and gambling, lost in the effects of such vices, unable to control themselves.

2. 3. Elderly Prodigals: The Liberties and Restrictions of Old Age

The prodigal disorder affecting the elderly was primarily defined by their age. In fact, petitioners usually defined them as old, either by stating their precise age (from their sixties onwards) or by presenting their disorder as caused by their “advanced” or “decrepit” age. Their disorder was attributed either to the natural decline of age, or to the effect of some sort of seizure, or “accident” as the petitions generally called it. But in both cases, the physical and mental effects of aging played a crucial role. The interdiction procedures affecting elderly

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245 “[l’] Attore è oltremodo condiscendente ai voleri, e contegno irregolare del detto suo sottoposto dandogli il comodo di vivere in ubriachezze, e del continuo per le Bettole, quando potrebbe far valere il danaro, che in quelle spende, in riparo delle necessità comuni della casa...”. ASF, MPAP, Memoriali, F. 2304, no. 12, case initiated in September 1755.
prodigals demonstrate that old age was perceived as problematic in eighteenth-century Tuscany, with an increasing awareness of its incapacitating effects, both physical and mental.

As in the other two categories of prodigality, the disorder of old prodigals was identified primarily by their wrong economic decisions, excessive expenditure and growing debts. But here, with the difference that the physical and mental consequences of their “decrepit” age were held responsible for their squandering. Their incapacity could range from physical impediments to mental derangement, and was accountable for their capricious and extravagant actions, and their uncontrolled passions. As in the other two categories, the old prodigal was also associated with a vicious and licentious life. In any case, the degree of responsibility petitioners assigned to disturbed mental faculties varied, being presented as melded with other factors, such as the presence of the so-called natural tendency to squander.

While young prodigals were usually denounced by their mothers or uncles, and middle-aged prodigals by their wives, elderly prodigals were usually interdicted after a petition sent by their eldest son. That means that in the case of the elderly, their interdiction has to do with how old age was perceived by the younger members of the family, by those closest kin that had to confront the social and family problems produced by old age. Historians have discussed the difficulty of assessing the onset of old age, generally determined between the sixties and seventies for men, and the fifties for women. In the case of eighteenth-century Tuscany, interdiction petitions evidence a growing awareness of the problems posed by old age. A significant number of petitions ascribed mental incapacity to the person’s “advanced age”, which was generally identified between the late sixties and early eighties. The fact that old age was identified as a distinct stage in the life course, and moreover, as a particularly problematic one is confirmed by the fact that the interdiction petitions specifically defined them as old, even as “decrepit”. The issue of their age was considered a relevant factor to be taken into account in order to understand their prodigal disorder, and affected also the possible solutions the Pupilli’s intervention could give.

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246 Already in the middle ages the onset of old age was roughly identified between 60 and 70 years old, depending on the sources and their purposes. “Exactly when the individual ageing process makes an adult ‘aged’ or ‘elderly’ is a matter of social convention and legal and administrative definition”. Paul Johnson, “Historical readings of old age and ageing”, Old Age from Antiquity to Post-Modernity, ed. Paul Johnson and Pat Thane (London and New York: Routledge, 1998), 3. Biological and cultural conceptions and representations of old age have been the subject of numerous studies. See, for instance, Elizabeth Sears, The Ages of Man: Medieval Interpretations of the Life Cycle (New Jersey: Princeton University Press, 1986) and The Long History of Old Age, ed. Pat Thane (London: Thames & Hudson, 2005). On the ages of women, see Chapter 4.
Consequently, interdictions open a window onto the social construction of the problem of the elderly, making them another entry point into what Angela Groppi has called the “welfare prima del welfare”. The care of the elderly, she claims, was considered a shared responsibility in early modern Europe, and the responses to old age resulted from a connection between private assistance and public intervention, both in the so called “nuclear” families of the north of Europe, and in the “extended” families of the south.\(^{247}\)

Focusing on eighteenth-century Rome, Groppi has suggested that the problem of the elderly was addressed through a carefully negotiated partnership between state policies and family strategies. The care of the elderly was considered a family responsibility, and the legal system promoted and certainly imposed the rigid observance of this social duty.\(^{248}\) Old people, she claims, were admitted into institutional facilities only when their decrepitude could be proven and when the family could pay for them, or in cases where their total abandonment by or lack of relatives was certain. At the core of Groppi’s analysis lies the assertion that the care of the elderly in eighteenth-century Rome was the effect of negotiated and constructed values of solidarity.\(^{249}\)

The situation of the elderly in eighteenth-century Tuscany seems to have posed similar problems to those suggested by Groppi. The cases where the officials of the Pupilli had to legally force a male son to pay for the maintenance an elder parent are indeed significant. In this regard, the interdiction of an old father was a complicated matter, because the pleading son had to respond to the care of the father, in the case that he could manage to prove that the latter had reached, indeed, a state of incapacity.

It has to be said that in the case of old squanderers, the resemblance and even merger with cases of declared madness is apparent in most of the cases. But, in spite of the fact that in the majority of the cases involving old men they were declared more-or-less explicitly as being mentally disturbed, they were commonly categorized and interdicted as prodigals, and not as *dementi*. Also regarding the notion of age, the elderly prodigals posed a different problem than their younger counterparts, particularly when they were described as having a

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\(^{248}\) Angela Groppi, “Assistenza alla vecchiaia e solidarietà tra generazioni in età moderna”, in Fazio and Lombardi, *Generazioni*, pp. 51-68.

\(^{249}\) Groppi has stressed that the early modern period presents “uno scenario che smentisce la naturalità del legame solidale tra generazioni, evidenziandone la costruzione attraverso gli strumenti giuridici e le pratiche sociali di negoziazione tra ambito pubblico/istituzionale e ambito privato/familiare”. The elderly emerged as a socially meaningful group along with the emergence of public policies of assistance. Groppi, *Il welfare prima del welfare*, p. 9.
natural tendency to squander, or had always been known to be extravagant and “odd”. In these latter cases, the extravagances, mistreatments, and dishonourable conduct had been a permanent presence in the lifecycle of the family, but for some reason the old man’s misbehaviour had become unbearable. This in part explains why squandering alone did not prompt families to request interdiction, nor did the decision rest solely on economic concerns. The moment for petitioning the interdiction of an old father had more to do with the exacerbation of his misbehaviour, his lack of respect for the family honour, the aggravation of his mental derangement, or a change in the power balance of the family group.

Another difference that can be found in the perception of the squandering elderly, compared to that of young or middle-aged prodigals, has to do with the consequences of their squandering, which in the case of the older prodigals was judged differently. The main concern of their pleading kin was no longer the maintenance and education of a young family, but rather the inheritance, and the right of the eldest son to inherit an intact patrimony. But, again, it was not merely an economic concern. It is true that petitions contained a series of accusations that pointed to their lack of respect towards social norms, to their unreasonable economic behaviour, and, above all, to the future of the inheritance. Nonetheless, the records of the Magistrato dei Pupilli also reveal that denouncing an old father as a squanderer was often used as a mechanism to resolve the conflicts aroused by the coexistence with old parents, which could be even harder when adult sons and daughters had to cope with “powerful” fathers.

It is well known that power relations and shifting balances marked the relationships of the early modern family. The accusation of the old squanderer often disclosed these kinds of conflicts, marked by a negative view, on the part of the plaintiffs, of what it meant to be old. Their advanced age made them useless, uncomfortable, extremely problematic in the eyes of their closest kin. On the other hand, because the interdiction of an old father was an act of disempowerment, they usually did not remain passive to their interdiction.

A number of testimonies submitted by the old prodigals themselves uncover the abuses they had to suffer. They expressed a distinct feeling of being humiliated by their relatives, treated as if they were foolish, childish, deprived of reason. Quite the contrary, they structured their supplications in a way that tried to highlight their determined will and clear awareness of the situation, expressing a distinct desire to be liberated from their sons or heir’s control, and often denouncing some sort of plot against them. Evidently, we only can assess this from what was written in the petition, not knowing if the petition was actually written by
them, or if the “awareness” was only regarding the son’s actions, not proving the actual condition of his mind.250

The petitions submitted to the Pupilli suggest that old parents were a burden to their families, a constant inconvenience because they had to be taken care of, but also because their behaviour, often problematic and improper, compromised the family’s honour and the transmission of the patrimony. Of an age where most of them had married sons and daughters, they demonstrated an unrestrained desire for freedom, to be liberated from their social and economic responsibilities, their paternal role, and their duties as husband. But most of all, according to their relatives, their old age made them incapable of controlling themselves and behaving properly. The old squanderer had lost his capacity of discernment, had no reason, and was therefore unreasonable.

According to his relatives, the disturbed state of mind affecting the old prodigal prevented him from making rational decisions, whether because out of his weakness he was seduced into dissipation and extravagant actions, or because his so-called “decrepit age” made him “impotent” in mind. Otherwise, it may be considered that alcohol had produced his disturbed state of mind. Drinking was, again, often accused of being instrumental in the old prodigal’s disorder. Firstly, it was considered a dishonour to have an old father known to be a drunker, and a habitué of taverns and other public places where alcohol was purchased. Secondly, the natural incapacity developed with aging was thought be aggravated by the “abuse he makes of wine, to the point of being always in such a continual drunkenness, that it provokes in him a complete alienation of mind.”251 This alienation of mind was held responsible for the complete dissipation of his patrimony, and could even be held accountable for his choosing a wife of a lower social rank, a decision completely contrary to good decorum and honour. In fact, remarriage (most times with a younger women of a lower social rank) was another cause that could force a son to petition for his old father’s interdiction.

Late remarriage was identified by petitioners as an endless source of family conflicts, and it was even used as confirmation of the perturbed state of mind of the old man. Either they would spend all their income with the new wife (and children, if they had them),

250 On the difficulties of examining the agency of plaintiffs and defendants in cases related to mental incapacity, in the context of insanity pleas, see Rabin, Identity, Crime, and Legal Responsibility.
251 The cited case refers to the interdiction of the 85-year-old Giovanni Battista Vinattieri, who wanted to squander all his income with his young, future wife. ASF, MPAP, Memoriali, F. 2304, no. 156, February 1758. His case appears again in F. 2304, no. 168; F. 2304, no. 210 and F. 2304, no. 239, all with denied petitions for liberation submitted by Vinattieri.
neglecting the rights of their previous sons and daughters,\textsuperscript{252} or they would dissipate their patrimony pursuing the love of the young lady, not even marrying her.\textsuperscript{253} It was certainly regarded as extravagant (either an extravagant behaviour, or due to extravagant humour) to pretend to remarry at such an old age. The disorder and offence in these cases was to be living with people of an inferior social rank, feeding them, financing their distractions and diversions, and thus seriously disrupting the codes of honour and loyalty commanded by blood. Driven by their affinities, they would forget the blood ties that attached them to their sons and daughters and to their family name.\textsuperscript{254} A father who mistreated his sons and daughters, and who denied them “the necessary for their living” to instead spend it in the satisfaction of his pleasures, was a man of “extravagant humour.”\textsuperscript{255}

From this point of view, the old prodigal’s disorder was characterized by his lack of respect for the codes and norms appropriate to his gender and social rank. Old squanderers usually followed their inclinations freely, showing a total disrespect towards their relatives and family name. They were usually represented as disrespectful of the family hierarchies, disregarding the rights of the firstborn son, whether disinheriting him, or discrediting him in front of the rest of the household members.\textsuperscript{256} A petition to submit an old prodigal to the Magistracy’s arbitration was, therefore, an act of disempowerment of the head of the family, as part of the strategies that sons could use to undermine patriarchal authority.\textsuperscript{257}

To illustrate the moral reprobation that the old prodigal’s actions generated in his relatives, petitions often made reference to the character of the defendant, stressing

\textsuperscript{252} See also the cases of Gerardo del Ponte, a vicious prodigal who wanted to remarry and spend his remaining patrimony only on his pleasures, denying a dowry and maintenance to his daughters and sons (aged between 17 and 21), ASF, MPAP, Memoriale, F. 2304, no. 57, September 1756; or the 77-year-old Girolamo Coci, epileptic and married for the third time, who dissipated the patrimony of his first family in the new and constantly growing second one, ASF, MPAP, Memoriale, F. 2304, no. 59, October 1756; the marital conflicts between Ipolito Gaetano del Chiaro, avanzato in età, and his young wife, ASF, MPAP, Memoriale, F. 2306, no. 220, December 1765; or the case of Francesco Rigi, and the second wife of his diseased father, in ASF, MPAP, Memoriale, F. 2305, no. 79, May 1760.

\textsuperscript{253} See, for example, the case of Giuseppe Caiozzi, who at the age of 77 fell in love with a younger and poorer woman, whom he managed to marry to another man to avoid any suspicious rumours of their own romance, afterwards inviting the married couple to live with him. The affair ended with the couple taking advantage of him and dissipating his patrimony, which forced his daughter to petition for his interdiction. According to the daughter, Caiozzi was completely enraptured by the woman, and this had caused a sort of alienation of mind, this time due to love. In ASF, MPAP, Memoriale, F. 2307, no. 46, August 1767.

\textsuperscript{254} Patricia Crawford has examined the influence of blood and kinship in the experience of fatherhood. Blood, she states, is a key concept to understanding the construction and experience of the early modern family. Crawford, Blood, Bodies and Families.

\textsuperscript{255} ASF, MPAP, Memoriale, F. 2304, no. 158, January 1758.

\textsuperscript{256} ASF, MPAP, Memoriale, F. 2300, no. 249 and 274.

\textsuperscript{257} The issue has been discussed by Linda Pollock starting from a family litigation in seventeenth-century England. Pollock, “Rethinking patriarchy”.

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particularly his uneasiness, from his irritability, his extravagant humour, to his low spirits (*spirito abbatuto*) or oppression of spirits. Thus, I would say that petitioners shaped their accounts of old age prodigality mostly based on the recognition of emotional disturbances, which have a predominant position in comparison to their younger counterparts. Moreover, it appears that the emotional disturbance recognized in the old prodigal was thought to be a sign of insanity to a higher degree than in the other two types of prodigality. The actions, gestures, manner of speaking and emotional state of the old prodigal fitted into the expected pattern of madness. But, as in the cases of the young and middle-aged, they were interdicted on the grounds of prodigality, not of madness, and medical testimonies appear only rarely (mostly to certify apoplexy).

Descriptions of old-age prodigality were also mixed in with expressions such as “he has always been a man of diversions” (*uomo di bel’tempo*). The question here is, of course, why their families had tried to interdict them only at the end of their lives, if they had always been prodigals? The interdiction of Piero Bencivenni, of “advanced age”, may be illustrative for this issue. The supplication, made by his younger brother, melded strictly economic misbehaviour with moral flaws, emotional instability and mental dysfunction. The closing argument probably says more than the opening ones: the petitioner was 29 years old and, being Piero’s younger brother, had hopes of inheriting his patrimony soon, and he was “fairly” worried that by that time it would be reduced to nothing. Consequently, the question remains: was the argument of supposed insanity and emotional instability presented as a means to accelerate the inheritance, or was it included because the man “really” was unbearable to live with? The repetitive and inexpressive nature of the testimonies enclosed with this particular petition shed no light on the matter.

### 2.4. Conclusion: Prodigality or Insanity?

Here is where the problem of what determined the use of one category or the other (prodigality or dementia) comes to the forefront. For social and cultural reasons, and particularly because interdiction in itself was dishonourable to the family, families preferred to declare their deviant kin as being prodigal rather than mad, which would entail labelling

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258 See Chapter 7.
them under the category of demenza. On the other hand, the conception of madness and mental incapacity was clearly wider than what can be grasped from the contemporary medical literature. In fact, a considerable number of petitions simply described the deviant actions of the defendant without using any label. Plus, the records of the Magistrato dei Pupilli show that the label of prodigal was often interchangeable with the label of demente. A person could be interdicted for prodigality and afterwards, when lifting the interdiction, the officials of the Pupilli could say it had been originally issued by reason of demenza. Prodigality could change into demenza or vice versa with no particular pattern.

I do not want to imply that prodigality was only a category that allowed petitioners to disguise insanity, but instead to suggest that prodigality was a category that comprised the notion of insanity. Prodigal behaviour in itself was, as I have argued, a kind of mental disturbance. Being a prodigal was thought to denote irrationality, and a prodigal’s reprehensible behaviour was said to stretch to madness. Whether because of their excessive drinking, their irregular characters, extravagant humour and unrestrained passions, they all were thought to have lost control over their mental faculties. The practical conflation in which prodigality and dementia found themselves was not so clear in traditional jurisprudence, as we saw in the first chapter. In general, the interdiction records show that there was no practical reason to differentiate prodigality from insanity. I have found only one record where a magistrate of the Supremo argued for the necessity to differentiate between the two. Mental incapacity supposed a “defect” that could only be assessed by expert medical opinion, and not by family members, this report from the Supremo said in 1734, while the “defect of prodigality” necessarily presupposed the presence of mental capacity, and consequently needed to be proven by facts provided by the plaintiffs.

By customary rule, as I have showed, interdiction procedures by reason of prodigality did not require medical knowledge but, nonetheless, the actions of the squanderer were attributed by petitioners to a perturbed and irrational state of mind. In so doing, the language used by petitioners to describe and explain prodigality speak of a lay knowledge about mental disturbances entrenched in the particularities of social life. People were at ease in explaining

261 “pare che arrivi fino alla demenza la sua mala condotta”, ASF, MPAP, Memoriali, F. 2303, no. 72, February 1753.
262 Report of the Magistrato Supremo regarding the petition to interdict Diacinto Cicci, accused of prodigality and of mental incapacity and absentmindedness (smemoriato) due to advanced age and a series of “accidents”. The petition was not granted. ASF, MS, Suppliche, F. 1185, fols. 373-377 and 288-389, May-June 1734.
their relative’s behaviour in terms of mental dysfunction and emotional imbalance, and in identifying a lack of rationality as the key factor responsible for such disorder.
Chapter 3. Interdictions By Reason of Demenza

The Tuscan legal framework provided five categories of mental incapacity liable to interdiction, if we follow what was listed in the statutes of the Magistrato dei Pupilli. These included the *furiosi* (furious or raving mad), the *mentecatti* (fools or idiots), the *dementi* (demented), the *prodighi* (prodigals) and *dilapidatori* (dissipaters). However, although the statutes listed five types of mental incapacity, interdiction proceedings in practice rested heavily on only two categories, prodigality and *demenza*, which encompassed the *mentecatti* and the *furiosi*. Following a trend that begun in 1530 with the introduction of the vernacular in judicial practice, categories of mental incapacity tended to conflate nuanced interpretations into simple categories.

Prodigality, it was established in the previous chapter, was the most recorded category in interdiction procedures. It indicated a behavioural disorder whose degree of mental impairment was frequently hidden, but that in any case supposed an open defiance of the accepted standards of rational behaviour. But who were the *dementi* and what did it mean to be demented? Why were people interdicted by reason of dementia? What determined the employment of prodigality over dementia to justify an interdiction petition? Furthermore, why were people sometimes interdicted without there being a category recorded?

Focusing on interdiction procedures by reason of dementia, this chapter examines who was recorded as demented, how mental incapacity was described, and explores the implicit or explicit circumstances that compelled families to seek recourse to the interdiction. Drawing on R. A. Houston’s notion of the “contingencies” that determined the appearance of madness in the records, the chapter is built upon the contention that the election of one or other category of mental incapacity was not strictly bound to the actual characteristics perceived in the defendant’s mental disorder. The election of one over the other category responded

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264 On the effects of the introduction of vernacular in the language of mental incapacity in the previous centuries, see Mellyn, *Mad Tuscans and Their Families*.

265 Houston, *Madness and Society*, p. 92. This idea is in turn inspired by the sociologist Ervin Goffman, who in his *Asylums. Essays on the social situation of mental patients and other inmates* (1961) suggested that “in the degree that the ‘mentally ill’ outside hospitals numerically approach or surpass those inside hospitals, one could say that mental patients distinctively suffer not from mental illness, but from contingencies”. Quoted in Ibid, pp. 91-92.
instead to careful calculation, which by no means signifies that interdiction narratives were complete constructs of manipulative and avaricious relatives.\textsuperscript{266}

The chapter aims to examine the different layers that composed the category of demente. By focusing on the family petitions to interdict an allegedly insane individual, the testimonies of neighbours, priests or other family members that backed up the denunciation, and the inquiries carried out by the officials of the Pupilli, the chapter studies how, when and why a determinate mental derangement appears in the records. The core argument of the chapter is that the definition of mental incapacity in eighteenth-century Tuscany has to be approached as a collective, or even consented category that allowed nuanced interpretations and responded to a wide range of private and public interests. The legal categories of mental incapacity made use of medical terminology only rarely, despite what has been claimed regarding the infiltration of medical terminology in the Tuscan civil and criminal courts by the sixteenth century.\textsuperscript{267} As Elizabeth Mellyn has recently suggested, despite what could be concluded from the appearance of juridical treatises that praised the expert authority of the medical profession to assert mental illness and judge physical evidence from the human body, the judicial assessment of mental incapacity continued largely to be based on lay narratives.\textsuperscript{268} However, although the categories underwent little change over the century, the descriptions that filled those categories introduced increasingly complex connotations.

The chapter starts with the story of the interdicted Lorenzo Baldinotti, which given its characteristics in terms of time-span, language, circumstances and actors involved, is symptomatic of the general picture of interdiction procedures by reason of dementia. It examines the connotations and legal consequences attached to the category of demente to then delve into the vocabulary and meanings of the category. The chapter then moves to an exploration of the recorded causalities of mental disturbance, and its most defining indicators. The chapter ends by examining the circumstances surrounding the recording of mental affliction in an attempt to understand the reasons for which families resorted to interdiction.

Interdiction procedures affected predominantly adult men, from 18 years of age onwards. As a consequence, the picture they give contains an inherent gender imbalance. To counterbalance, explain and reflect on this silence in the sources, female mental incapacity

\textsuperscript{266} For a similar approach to the subject, see Ibid., pp. 92-97.
\textsuperscript{267} Magherini and Biotti, “Madness in Florence in 14\textsuperscript{th}-18\textsuperscript{th} Centuries”, and Magherini and Biotti, L’isola delle Stinche.
\textsuperscript{268} See Mellyn, Mad Tuscans and Their Families, pp. 161-192.
will specifically be discussed in the next chapter. However, many of the issues under examination here also apply to women.

3.1. Lorenzo Baldinotti

On May 5, 1745, one Lorenzo Baldinotti petitioned the Grand Duke requesting to be freed from the interdiction that had submitted him to the authority of the Magistrato dei Pupilli two years previously, in 1743. In a moving narrative, he recounted the sufferings he had gone through since his interdiction, for which he held responsible a certain Marco Guerrini, his wife’s maternal uncle. In his petition, Baldinotti asked for the Grand Duke’s protection against the abuses and humiliations he suffered at the hands of his marriage kin, with whom he was forced to live by direct command of the Magistrato dei Pupilli.

“Your Excellency should know [he said] that to this point the treatments that I receive from the Signor Marco Guerrini have become unbearable. Moreover, he sees fit to interfere in all my affairs, against my will, acting as if he was the master over my self and what is mine even to the great detriment of my interests. He is in agreement with his sister, the mother of my wife, who also treats me badly in actions and in words, pushed by her said relatives, and this they can do and do so continually because I find myself forced to cohabit with them, and be in their house.”

Interestingly enough, Baldinotti’s petition made no reference to the reasons for his interdiction, or to his present mental condition, but focused exclusively on the emotional distress his present situation caused him. He felt that his marriage kin (particularly Marco Guerrini) were only interested in his patrimony, and had deprived him of his natural rights just to take advantage of him. “Mi considerano come un [u]omo di paglia”, he said, that is, he was a man of straw who could be used to their convenience. His petition was intended to revoke the interdiction, or at the least partially regain his rights to administer his patrimony. He requested also to be allowed to live alone with his wife and children in a residence of his choice.

269 “...sappia dunque V.S. Illma essersi ormai resi insoffribili li trattamenti, che ricevo in tutto dal Sig. Marco Guerrini, quali di più a suo capriccio vole [sic] entrare in tutti i fatti miei, senza la mia volontà, facendo il padrone sopra del mio, e della mia persona ancora con danno notabile de miei interessi essendo d’accordo seco la di lui sorella, madre di mia consorte, quale parimente malissimo mi tratta in fatti, in parole, messa sù dalli suddetti due suoi parenti, che lo possono fare, e lo fanno ad ogni momento per trovarmi e tenermi forzatamente a convivere con loro, et a stare nella loro casa”. ASF, MPAP, Memoriale, F. 2301, no. 169(2°), Petition of Lorenzo Baldinotti, May 1745.
However, the circumstances behind Lorenzo Baldinotti’s interdiction were far more intricate than what his narration suggests. He was interdicted for the first time in 1725, then once more in 1730, again in 1741, and a last time in 1743, dying in 1755. Although he was interdicted 4 times during his life, he was only openly categorized as insane (demente was the legal term used) during the last interdiction proceedings. The way in which Lorenzo Baldinotti’s insanity was disclosed through the 4 proceedings suggests that categories liable for interdiction were used instrumentally. It sheds light, at the same time, on the complicated interplay between the different notions, interests, concerns and requirements that converged in interdiction procedures. Moreover, it illuminates particularly well the backstage of interdiction procedures, disclosing the profound forces that moved families to seek recourse in the grand ducal administration for mediation, giving important clues as to when and why Tuscan families resorted to interdiction as a legal measure to cope with the mentally disturbed.

Lorenzo Baldinotti was interdicted for the first time in January 1725, followed by a second interdiction in August 1730 and a third in February 1741.\textsuperscript{270} The reasons for and the circumstances of these first three interdictions are fairly vague. The first interdiction was decreed based on the succinct claim, made by his maternal uncle and his brother-in-law that, given Lorenzo’s financial mismanagement, he “needed” to be assigned a curator to administer his property and act in his name.\textsuperscript{271} The second petition, signed this time also by his elder brother, Stefano Baldinotti, claimed Lorenzo was “in a state of incapacity” that prevented him from managing his affairs.\textsuperscript{272} In other words, the first two interdictions had been decreed based on information that was not recorded, either because it had not been necessary to disclose more details, or because these details had been given to the authorities but still not recorded. As we will see later, the second option, which seems more likely to be the case here, was a frequent strategy to circumvent the employment of specific categories.

The third interdiction followed roughly the same pattern. It was decreed in February 1741 following a request of the same petitioners, claiming Lorenzo was (once more)

\textsuperscript{270} ASF, MPAP, Campione di Deliberazioni, e Partiti, F. 119, fol. 77, 4 January 1724/25 and Ibid, Memoriali, F. 2300, no. 319, 2 August 1730.

\textsuperscript{271} ASF, MS, Atti e Scritture, F. 1866, fol. 1529, 18 December 1724.

\textsuperscript{272} ASF, MS, Atti, F. 1912, fol. 6, 2 August 1730. This interdiction involved also a second brother of Lorenzo’s, a certain Jacopo Antonio Baldinotti.
“incapable of being able to administer his estates.” Yet the interdiction decree introduced this time a revealing detail. It read that the need to interdict Lorenzo had been determined based on Stefano’s allegations that his brother “was not in a state of being able to administer his patrimony by himself due to his imperfections [imperfezioni].” Although again fairly vague, the proceedings on this occasion disclosed that these states of incapacity were produced by some unspecified “imperfections”.

A major change occurred in the fourth interdiction brought against Lorenzo in August 1743, providing the first sign that he had been perceived and identified as insane long before that. The proceedings were initiated this time with a note from the chief of police, the Auditore Fiscale, informing that the Council of Regency considered it expedient to once more interdict Lorenzo Baldinotti, so long as given “his known indispositions”, he was committed to Santa Dorotea, Florence’s mental hospital. Although the note referred to what were called Baldinotti’s “known indispositions”, we are told of them only now, owing to this reference to his committal to the mental hospital.

The fact that no allusion to the nature of these so-called “indispositions” or “imperfections” was made in the previous proceedings is certainly puzzling. Furthermore, the interdiction of 1743 was similarly ineloquent on the subject, for it failed to elaborate further on the contents of the note written by the Fiscale, and neither text even employed the category demente. Many interesting lines of enquiry may be pursued here. Why was Baldinotti committed to Santa Dorotea? Why did the Auditore Fiscale not only intervene in this case, but act as expert authority to certify Baldinotti’s mental incapacity? Why is there no trace of Baldinotti’s mental condition prior to 1743 in the records of the Pupilli? Moreover, why were the interdiction proceedings of 1743 still elusive on the subject? Why had he been interdicted the previous three times? What was the connection between interdiction and confinement? What were the circumstances surrounding Baldinotti’s life and mental affliction?

The involvement of the Auditore Fiscale with the management of madness will be examined in a later chapter, but let us establish for the moment that in Tuscany interdiction

[274] “...non essere il Sig. Lorenzo Ferdinando Baldinotti di lui fratello in stato di potere da se medesimo amministrare il suo patrimonio mediante le sue imperfezioni...” ASF, MPAP, Memoriali, F. 2301, no. 110, February 1740/41.
[275] “Trovarvisi per le sue note indisposizioni ristretto nello Spedale di S. Dorotea Il Sig. Lorenzo Baldinotti...” ASF, MS, Suppliche, F. 1188, fol. 871, August 1743. The records of Santa Dorotea Hospital reveal that Baldinotti was confined there between 18 July 1743 and 17 February 1744. See ASF, Santa Dorotea (hereafter, SD), F. 23, no. 3. For the interdiction decree, see ASF, MPAP, Memoriali, F. 2301, no. 192, August 1743.
and confinement constituted separate procedures, completely disconnected from one another. While the former pertained to civil justice and fell under the jurisdiction of the Magistrato dei Pupilli and the Magistrato Supremo, confinement constituted a matter for the police and was therefore supervised by the Auditore Fiscale, who was the chief of police, and who supervised the administration of justice, was a member of the Consulta and had direct access to the Grand Duke and the Council of Regency. As a result, we see that on some occasions the Auditore Fiscale was consulted by the Pupilli regarding the behaviour of the defendants, or, as in this case, his word constituted the certification of madness of the kind that determined the need for interdiction. But his involvement was clearly not mandatory, especially given the fact that in the majority of the cases ending up in the records of the Pupilli the kind of mental disturbance under scrutiny did not constitute public danger nor disturbed the public peace – therefore it did not justify the need for the Auditore Fiscale to intervene. The procedure for committal worked in a parallel course to that of interdiction, was supervised by different authorities and aimed at completely different purposes. Someone could be confined without being interdicted, or be interdicted without ever being committed to a mental hospital.

This clarifies why the 1743 interdiction was decreed based on the note of the Auditore Fiscale, but it does not explain why we find no clues regarding how his mental derangement was perceived until 1747. The petition to revoke the interdiction of 1743, which opened this section, failed likewise to disclose any details in this regard. It is only from 1747 on that we are given new insight into how Lorenzo Baldinotti’s family identified, made sense and dealt with his mental disturbance. Furthermore, this happened not because his mental condition in itself was under scrutiny, but rather because the family conflicts surrounding him, in large part due to his deviant behaviour, escalated. Mental incapacity was fully described not as a result of the judicial proceedings to define its legal status, but rather as a side effect of them, once the involved parties resorted to the mediation of the authorities to sort out some of the consequences madness entailed. In the case of Baldinotti, first it was the need to define a legal guardian for his underage son, and afterwards it was the issue of where was he to live and who was to be held responsible for his wellbeing.

In February of 1747, Lorenzo’s five-year-old son was placed under legal guardianship, following a petition of Marco Guerrini, maternal uncle of Lorenzo’s wife. The petition argued that, given that Lorenzo had now been committed to the pazzeria (madhouse) of Santa Maria

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276 On this, and on the function of the office of the Auditore Fiscale, see chapter 5.
Nuova Hospital in Florence, the infant needed to be legally considered an orphan. In response to his request, the Pupilli officials informed the Grand Duke that Lorenzo had been interdicted as “demented”, which in combination with the fact that he had been confined, proved the appropriateness of Guerrini’s petition.\(^{277}\) Significantly, this is the first time that Lorenzo Baldinotti was openly referred to as *demente* in the records of the Magistrato dei Pupilli.

After this, Guerrini petitioned several more times to request that the Pupilli intervene regarding Lorenzo’s whereabouts. In May 1747, he explained that Lorenzo, given his “insufficient understanding,” needed to be taken care of, and at the same time live separately from his wife.\(^{278}\) Here Guerrini provides new insight as to why his relatives had sought the Pupilli’s intervention so many times before, and why he had been admitted and discharged more than once from the two mental institutions existing in Florence – Santa Dorotea and the *pazzeria* in Santa Maria Nuova.

Married twice and with four children (one of whom was from his first marriage), Baldinotti had turbulent relationships with all the members of his family, including his marriage kin. As a result, his residency was never a settled matter, and he wandered at random between his various family residences, prisons, fortresses, hospitals and even private accommodations. As mentioned above, in 1745 Baldinotti was forced to live with his marriage kin in a cohabitation that elicited great bitterness and insuperable differences. Marco Guerrini voiced the interests of Lorenzo’s wife, Maria Fine Ridolfi, representing his niece numerous times in court, and acting as mediator between her, Lorenzo and the government officials. On numerous occasions he tried to spare her from having to share a roof with her troublesome and occasionally violent husband.

This is how we learn that in February 1747 Lorenzo Baldinotti had been sent to Santa Maria Nuova hospital because of his “unhealthy mind,” a “defect” that compelled him to insult his wife and children, and to perform other “imprudent and improper actions.”\(^{279}\) However, only a few months later Lorenzo was released after one of his brothers, the priest Zanobi Baldinotti, petitioned to take care of him, promising to guard and feed him properly. But the arrangement ended abruptly after two months, when Lorenzo was violently expelled

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\(^{277}\) ASF, MPAP, *Memoriali*, F. 2301, no. 252, 16 February 1746/47. It is interesting to note here how the consequences of interdiction were not automatic, for even if Lorenzo Baldinotti had been interdicted in 1743, when his son was around two years of age, he had not been automatically deprived of his *patria potestas*. This only happened over three years later.

\(^{278}\) ASF, MPAP, *Memoriali*, F. 2301, no. 265, 29 May 1747.

from his brother’s residence. According to the Pupilli officials, Zanobi was unable to suffer Lorenzo’s recurrent “insolences and furious outbursts” any longer. As a consequence, Lorenzo ended up living under the roof of a “very poor man” without custody and lacking the necessities to feed himself, as Guerrini dramatically put it.

Subsequently the Magistracy advised in June 1747 that Baldinotti again be sent to Santa Maria Nuova until he made a complete recovery. Following the Pupilli’s suggestion, the case was placed once more into the hands of the Auditore Fiscale, who after a series of unsuccessful attempts to discipline Lorenzo, considered that the only solution was to imprison him. Although the Fiscale had “exhorted him to be wise, particularly with his wife” (who had recently given birth), Lorenzo had nevertheless turned up at her residence, where he performed “many mad actions” (fece molte pazzie). When more complaints arose regarding Lorenzo’s behaviour, this time coming from the Florentine prison, he was once more sent to Santa Maria Nuova.

This second time Lorenzo Baldinotti remained in Santa Maria Nuova for around ten months, until his brother Zanobi intervened again to obtain his release. As before, the priest tried to share his residency with his brother, but the cohabitation proved once again to be impossible to bear after three years. After that, neither his agnates nor his marriage family were willing to take on the unpleasant responsibility of bringing him under their care. Finally, in July 1754, Marco Guerrini petitioned to once more liberate the Baldinotti patrimony from the authority of the Pupilli, and for Lorenzo’s wife to be appointed administrator. Additionally, he requested that Lorenzo Baldinotti remain under the government’s authority, whilst living in his brother Zanobi’s care. The latter, on his part, pathetically refused Guerrini’s request.

This new conflict gave space to more accurate descriptions of Lorenzo Baldinotti’s mental derangements, disclosing the variety of terms that characterized eighteenth-century interdiction procedures. Guerrini added to his petition a detailed account of the development of Baldinotti’s madness that highlighted the dangerous consequences it entailed to his family.

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280 Ibid.
281 Ibid.
282 Ibid.
283 Ibid.
285 ASF, CR, F. 759, no. 11, June-July 1755.
286 ASF, MPAP, Memoriali, F. 2303, no. 210, July 1754.
He declared that even before Baldinotti’s first marriage he had been incarcerated and confined several times on account of “his extremely extravagant brain [stravagantissimo cervello] and long series of follies [lunga serie di spropositi].” Baldinotti had become a widower in 1743, after which he had married his present wife, Maria Fine Ridolfi. According to Guerrini, barely two months after the marriage Baldinotti had been imprisoned and afterwards confined to Santa Dorotea Hospital, where he was kept for ten months. He was then released after Guerrini’s request, who thought he recognized “some signs of correction in the mind of Baldinotti”, and consequently allowed him to live with his wife and marriage kin again.

For the next three years, Guerrini continues, the household had suffered Lorenzo’s “incredible extravagances and disorders” (let us not forget he was forced to live with his marriage kin), until in 1747 he was incarcerated again and afterwards sent to the pazzeria of Santa Maria Nuova. The rest of the story is already known to us, marked by the families’ intolerance over Lorenzo’s extravagances and his consequent itinerancy between mental institutions, prisons and private locations. Since 1751 he had been living alone at his villa in San Donato in Avane outside Florence, where he had been banished by order of the Auditore Fiscale. Almost blind, he had become a nightmare for the surrounding neighbours, displaying an exacerbated level of new extravagances, dissoluteness, scandals and disorders.

According to the enquiry conducted by the Pupilli officials to inform Guerrini’s petition, Baldinotti’s agnates had declared that it was “notorious that Lorenzo Baldinotti… is of an extravagant, furious and uneasy nature [naturale stravagante, furioso, ed inquieto], and sick in his mind.” The officials supported this by referring to Lorenzo’s mental distress with expressions such as he was “not perfect in his judgment” (non è di perfetto giudizio), had an “extravagant brain” (cervello stravagante), and performed numerous “nonsense, scandals and extravagances” (spropositi, scandali e stravaganze).

This is how we grasp some of the circumstances that surrounded the troubled life of Lorenzo Baldinotti, whose cyclical mental disturbance, although it had been part of his entire life, had still enabled him to live, at given periods, a normal life – he managed to marry twice.

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286 Ibid.
287 Ibid.
288 The Auditore Fiscale in fact received pressing denunciations from the prior of San Donato in Avane against Baldinotti’s ‘unchristian’ behaviour, with his ‘viciousness’ and ‘public sensuality’. ASF, CR, F. 759, no. 11, June 1755.
289 ASF, MPAP, Memoriali, F. 2303, no. 210, August 1754.
290 Ibid.
and produce offspring. Lorenzo Baldinotti was perceived as mentally afflicted early in his life, was subjected to four interdictions, was interned both in Santa Maria Nuova and in Santa Dorotea hospitals several times, and constituted a recurring problem for his relatives. Nonetheless, the language his family and the authorities employed to define his behaviour was strikingly imprecise and indisputably lay in nature.

The reconstruction of the events and perceptions surrounding Lorenzo Baldinotti’s mental disturbance is particularly fruitful for understanding the language used to define mental incapacity, because it shows that the labels employed were embedded in social life, and were socially meaningful. Rather than trying to make their description fit into rigid medical or legal categories, Baldinotti’s relatives were able to describe him in their own words and, of course, according to their own interests.

Clearly the terms employed were connected to the reasons behind the petition and the situation it was trying to highlight. For instance, Baldinotti was described as of lacking the necessary intelligence to manage his affairs properly in a petition relating to the administration of his patrimony, while he was defined as extravagant, disquiet and violent when his brother was pleading not to be forced to live with him. Similarly, further details on his mental derangement were only given after the fourth and last interdiction, and were given not to secure a positive response regarding the interdiction, because it had already been issued, but as a way of illustrating the anguish his perturbed behaviour exerted on his relatives.

The fact that we do not have the wife’s perspective, which we usually do in other cases, is because her voice was assumed by her maternal uncle. Guerrini himself, when petitioning once again for Zanobi Baldinotti to assume Lorenzo’s care, depicted the mentally disturbed actions of Lorenzo by highlighting the suffering they inflicted on Maria Fini Ridolfi and the children, and the immeasurable care, they, the marriage family, had devoted to Lorenzo. Both pleas, that of Guerrini and that of Zanobi Baldinotti, are emotionally charged with details of their suffering when forced to live together with the mentally disturbed Lorenzo. For instance, in the eyes of Zanobi it was a matter of life and death not to be forced to live again with his brother: he had only one bed in his parish, which he would had have to

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291 Given that the Tuscan legal system conceived various gradations of mental incapacity, along with the characteristics of Catholic marriage, it is not rare to find men who married after they had been interdicted for reasons of prodigality or dementia.
share with Lorenzo, although, on account of his various illnesses (*diverse indisposizione*), this would shorten his life, he said.292

Lorenzo Baldinotti’s example representative is on many levels. We could say that, in terms of the nuanced details left in the records, it constitutes an example of the “exceptional normal.”293 However, this may obscure the extent to which this case can be taken as example of a more general way of understanding, experiencing and dealing with madness. The situations illuminated by his story, the lexicon used to manufacture it, the complicated negotiation between the families, the mentally disturbed and the authorities regarding the meanings and consequences of madness, as well as the measures taken to deal with it are not exceptional. We find countless examples, mostly scattered in various records, which enable us to conclude that this was a standard response to mental deviance in the eighteenth century. In what follows, I will explore the language of mental incapacity and its meanings and the situations that moved the Tuscan families to resort to interdiction. The problem of the itineraries of madness, and the range of mechanisms for dealing with it provided by the Grand Ducal administration will be addressed in later chapters.

### 3.2. Vocabulary and uses of *Demenza* in interdiction procedures

*Demenza* came from the Latin *demens*, which literally means *de*: “out of”, *mens*: “mind”, that is, out of one’s mind.294 In Italian early modern medical culture, *demenza* meant simply “*perdita del senno o dell’uso corretto delle facoltà mentali*,” and was used interchangeably with *amenza* and *insania*.295 The contemporary juridical culture ascribed a similar connotation to the category. For instance, in the famous medico-legal treatise of Paolo Zacchia, *Quaestiones medico-legales* (1621-1635), *demenza* was the “generic” term employed to make reference to “*tutte quelle affezioni che colpiscono la facoltà razionale in

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294 See the online version of the *Vocabolario etimologico della lingua italiana* [1907], s.v. “demente”, in [http://www.etimo.it/?term=demente&find=Cerca](http://www.etimo.it/?term=demente&find=Cerca), accessed January 30, 2015.
295 “loss of one’s sense or of the correct use of one’s mental faculties”. Dini (ed.), *Il medico e la follia*, p 3.
modo da menomarne le operazioni.”

Still during the eighteenth century, demente was a standard medico-legal category to designate all types of madness, under which all the other labels of mental disturbance or unsoundness of mind were grouped. Outside the realms of law and medicine, demenza meant plainly “madness”, if we follow the Tuscan vocabulary of the Accademia della Crusca, which defined demenza as “sciocchezza, pazzia.”

The meanings given to dementia in the early modern period were very different to the current medical notion of dementia, which was consolidated only at the beginning of the twentieth century. Today dementia is understood as “an irreversible disorder of intellectual functions”, and it differs from mental retardation because the former is understood as an “acquired cognitive impairment” while the latter as congenital. But, until the early nineteenth century, dementia was “the umbrella term meeting the need for a word broadly defining intellectual, memory and personality impairment.” It encompassed different degrees of mental incapacity, from congenital feeble-mindedness and partial intellectual impairment, to mental affliction with lucid intervals and even straightforward insanity.

In the context of the judicial practice of the Magistrato dei Pupilli, dementia was the legal term employed to interdict someone on account of an incapacity openly ascribed to mental disturbance, and was the second most used category. In the majority of cases, the term was first employed by petitioners and their supporting witnesses and afterwards repeated by the authorities. Only in a few interdiction procedures was the category introduced by the authorities, as the result of the inquiry conducted by the magistrates to assert the veracity of the accusation. In any case, rather than functioning as a diagnostic category, the term demente served to identify the interdicted, as evidenced by the books where the officials kept the accounts of all the relevant events and litigations related to their wards. Particularly during the first half of the century, when a new ward was recorded for the first time, the clerks usually

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wrote either prodigo or demente by the side of the name, together with the town of origin. Unfortunately for us, this practice cannot be taken to be the rule, and with time it fell into disuse.

As the Baldinotti case so eloquently showed, one of the difficulties of examining interdiction procedures by reason of demenza is in differentiating them from interdictions by reason of prodigality, given that the proceedings many times do not attribute any particular category of incapacity to the defendant. Plain incapacity or constitutional financial mismanagement were many times preferred to the labels prodigo or demente (see Table 2). This to some extent explains why the clerks eventually ceased to record the category that motivated the interdiction; in terms of the administration of guardianships, it made no difference if the wards had been classified as demented or prodigals.

Table 2: Categories of mental incapacity used in interdiction procedures between 1718 and 1775

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prodigality</td>
<td>291</td>
<td>48.6 %</td>
</tr>
<tr>
<td>Dementia</td>
<td>197</td>
<td>32.9 %</td>
</tr>
<tr>
<td>Unspecified incapacity</td>
<td>111</td>
<td>18.5 %</td>
</tr>
<tr>
<td>Total</td>
<td>599</td>
<td>100 %</td>
</tr>
</tbody>
</table>


The conflation between prodigality and dementia, examined in the previous chapter, is yet another issue that hampers the endeavour of examining only interdictions by reason of demenza (or the interdictions whose declared reason was dementia). Firstly, the two categories were employed interchangeably or as if they were complementary sorts of the same general kind of incapacity. As a result, interdictions by reason of dementia are many times hidden behind cases that initially appear to relate only to prodigality. Secondly, prodigality was a behavioural tendency that was present at the very core of every interdiction petition. The behaviours that indicated prodigality – that is, reckless spending, excessive and growing debts, compulsory selling of household goods, emotional instability and debauchery – were

300 For instance, “Gio Battà Catanzi di Bibbiena, Demente”, or “Cav. Buonamico Buonamici di Volterra, Prodigo”. The place of origin is not always recorded. See the filze of the Campione di Deliberazione e Partiti.
the legitimate and basic reason that moved families to request an interdiction in the first place. To put it differently, so long as in order to be interdicted there had to be economic mismanagement of some kind, all the interdicted were represented as prodigals by their families. All but women, that is, who except in one or two cases, were not depicted as prodigal.301

For all these reasons, the incidence of interdictions decreed by reason of insanity, or requested by families who perceived their relative’s behavioural disorder as the result of some level of mental impairment is difficult to assess. For the purpose of giving an approximate idea of the proportion by which the incapacity was thought to be the result either of demenza or of prodigality, I have created a table that groups under demenza all the interdiction proceedings that at some point employed either demente or any other concept by which the behaviour was openly attributed to mental disturbance or intellectual impairment (the range of terms will be examined in the next section of this chapter). In many of these cases the category of prodigality was also employed, but was coupled with a series of other terms specifying that the economic mismanagement was the result of a mental affliction. I also include under dementia those cases where the category of demente or the open reference to a kind of mental disturbance was introduced only in later proceedings (generally in relation to the interdicted’s maintenance and custody), or in the proceedings for the revocation of the interdiction, even if the initial proceedings that led to the interdiction had attributed the mental incapacity only to prodigality. The interdictions counted under prodigality relate to those proceedings that employed only the category of prodigo to classify the incapacity. Finally, the cases of “unspecified incapacity” correspond to proceedings that left no record of the reason that had motivated the interdiction, which for the most part relate to interdictions for which only the decrees have survived. For this reason, the number of people interdicted for dementia is not really indicative of how interdiction procedures dealt with mental disturbances. We could perfectly well assume that a larger number of families perceived the defendant as mentally afflicted than is reflected in this table, but they decided not to make it explicit or to record it.302

301 For more on this, see Chapter 4.
302 My discussion here refers only to the level of perception of mental disorders, regardless of whether the categorization was sometimes instrumental for greedy or abusive relatives. What interests me is how madness was understood and how lay society drew from and contributed to legal and medical understandings of insanity. The possibilities and limitations of notions of madness as a socially constructed or as a natural phenomenon have been rigorously discussed by scholars. For an overview, see Bynum, Porter and Shepherd, The Anatomy of Madness, vol. II, “Introduction”, pp. 1-16; Houston, Madness and Society, pp. 19-27, among many others.
Taking into account the fact that the distinctions between prodigality and dementia were not always fully discernible, the question is why petitioners and government officials decided to classify the behavioural disorder of a defendant under one or the other category, and why in some cases we find that the category of mental incapacity was not even recorded. We have to take into account that all the evidence suggests that prodigality did not respond to a completely different set of characteristics and circumstances from dementia. The fact is that the reports and opinions of government officials in each proceeding usually repeated the same categories that had originally been employed by the petitioners, witnesses and local authorities. Furthermore, they hardly ever questioned the categories introduced in the petitions, unless they were found deliberately untruthful – which actually occurs in a minority of the cases. This means, on the one hand, that the authorities respected the language frame introduced by petitioners. But, at the same time, it suggests that the categories recorded were probably the result of a previous verbal agreement between the government officials, local and religious authorities, and the families. In many cases, however, the officials introduced new synonyms to the initial category(ies) employed by petitioners and witnesses.

We could say that the proceedings employed the term *demente* to catalogue behaviours that were taken to be the result of mental illness. This seems evident, but what is less clear is if in all the cases of prodigality mental disturbance was thought to be absent. In this sense, we must bear in mind that we only have access to the written records of how mental incapacity was manufactured. In other words, we are bound to what they were willing to disclose, to how petitioners shaped the disorder of their deviant family member so that it corresponded to the purposes and requirements of interdiction.

To have a relative declared mentally incapacitated presupposed that something that was better off left concealed would be made public. In this sense, the higher numbers of interdictions by reason of prodigality also speak of a society that favoured the label of prodigality over the label of dementia. Even if prodigality was not free of social stigma in early modern Tuscany, it was certainly less disgraceful than dementia, and above all, was easier to obliterate. The financial future of a family seemed to have been less affected if a member was interdicted for prodigality than for dementia. Evidently, this depends on the kind of prodigality manifested by the person but, in general, marriage proposals or prospective

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303 This “agreement” in the employment of categories of mental incapacity and insanity has also been found to be the case in England regarding the administration of poor relief on account of mental incapacity. See Rushton, “Idiocy, the Family and the Community”, p. 57.
financial endeavours seem to have been hardly affected. That prodigality was generally less stigmatized than dementia is proven by the rising number of voluntary interdictions observed towards 1770, which were precisely formulated around a constitutional tendency towards financial mismanagement. Furthermore, prodigality could be taken to be the result of the demands of eighteenth-century sociability rather than the outcome of mental impairment.304

It was not only preferable, but above all, an accusation of prodigality was sufficient to interdict a family member, given how Tuscan society valued patrimony and how patrimony defined the elite. In fact, the foundation of the Magistrato dei Pupilli back in the Republican period had been bound to the social and political aspiration to preserve the patrimonies and wealth of families, which was considered a service of public utility.305 In this sense, denouncing (and proving) a state of risk for the family’s inheritance was argument enough to achieve an interdiction sentence. However, in spite of this moral economy, and moreover, because of it, over time the narratives get each time more complex, introducing new aspects to the argument of squandering, particularly in terms of the explanations given to deviant behaviours.

Subsidiary Categories

Interdiction narratives generally conceptualized madness as a sickness (infermità), or a defect (difetto), or, on other occasions, with the more precise expression of “sickness of the intellect.” Although all kinds of mental disturbance were categorized under the generic condition of demente, this does not mean that demente was the only label of straightforward mental incapacity employed. After demente, the categories most commonly used are melenso and mentecatto, and slightly less frequently, stupido and stolido. These terms worked as alternative descriptors of dementia, and were employed mostly in combination, as if by being grouped together they could exert a cumulative effect. According to contemporary definitions, a mentecatto was somebody “mentally ill, stupid [sciocco] and mad [pazzo].” Whilst the term mentecatto appeared to contain a broader range of mental afflictions, from stupidity to outright madness, the other three concepts appear exclusively related to a loss or alteration of

304 See chapter 2. The boundaries between a social life a la mode and the carrier of a prodigal doomed to interdiction were hard to define even in the eighteenth century, and it mostly depended on generational conceptions about social life, decorous and desirable levels spending, which were increasingly contrasting. See Bizzocchi, Cicisbei and Phillips, The Profligate Son.

305 See Fisher, “The State as Surrogate Father”, and Chabot, “Le gouvernement des pères”. For the role played by economic concerns in the identification and responses of families to control mental disturbance, see Nootens, Fous, prodigues et ivrognes.
intellectual faculties. Melenso was “sciocco, imbecile [scimunito], foolish [balordo]” and sciocco was “someone who lacks wisdom and prudence.” In turn, stupid and stolido, as the other synonyms used to define melenso, all pointed to different variants of being intellectually diminished, a fool or insane.306 In general, people labelled with those terms were described as lacking capacity and intellect (privo di capacità e intelletto), as bereft of sense, reason or judgement (privo di senno, privo affatto di cognizione e favella), as weak of mind (debole di mente), as weak and stupid of wit (debole e stupido ingegno, or capo debole), as stupid of talent (scemo di talento) or as imbecile in mind or spirit (imbecille di mente or imbecille di spirito).

Someone could simultaneously be defined as mentecatto, stolto, imbecille and poco sano di mente, without the need of delving into the precise characteristics of the person’s mental condition. But, furthermore, someone could even be classified as melenso and at the same time be said to manifest signs of frenesia or be subjected to a manic furore (furore maniaco). Categories of mental incapacity were not exclusive from one another and had no fixed meanings. On many occasions, terms that seem at first sight strikingly contradictory could easily coexist as descriptors for one and the same person. For instance, Orazio Penci was interdicted in August 1752 after a petition signed by his mother and three sisters declared that he dissipated “on account of his dementia” (stante la sua demenza). Their petition was supported by a testimony signed by a priest and “respectable” neighbours, which declared that for the past weeks Orazio Penci “is not healthy of mind, and it can be said he is demented” (non si ritrova sano di mente, e può dirsi demente), causing him to dissipate his patrimony and seriously endangering the maintenance of his mother and sisters. Among the signatories to the testimony was a physician who added that Orazio Penci suffered from frenzy (frenesia), which made him completely lose the use of reason. The authorities report concluded that Penci was currently melenso and debole di mente, but made no reference to the said frenzy.307

307 ASF, MPAP, Memoriali, F. 2303, no. 50, August 1752. Orazio Penci’s interdiction was revoked in July 1754, when a priest’s testimony certified he had recovered his soundness of mind. See ASF, MPAP, Memoriali, F. 2303, no. 195, July 1754. The problem of expert witnesses and their role in the assessment of mental incapacity is examined in chapter 6. For the employment of furore maniaco, see the interdiction and subsequent petitions of Francesco Rossetti in ASF, MPAP, Memoriali, F. 2305, no. 131, June 1761 and F. 2307, no. 95, December 1767.
While Penci’s relatives and acquaintances described him in terms that highlighted his level of intellectual disability, medical opinion defined him with a term that pointed towards a more violent condition, introducing a qualifier that neither the petitioners and supporting testimonies, nor the authorities wanted to incorporate. Interestingly enough, the Pupilli’s conclusion repeated the lay language, not the medical one. For the purposes of interdiction procedures, Penci’s mental incapacity was exhibited by his irrational insistence in squandering and his neglect of his primary social role: providing for the economic subsistence of his mother and sisters. Through their centralizing concern with the consequences of madness, interdiction procedures tended to superpose the signs with the consequences of mental incapacity. For this reason, not every petition had to be filled with forceful terms that were arbitrarily incorporated so as to indicate the absence or damage of reasoning faculties. Petitioners could also simply say that their relative needed to be interdicted because he or she was *demente*, without elaborating more on the nature of the alleged mental disorder.

Almost any kind of madness could fit under this general lack of reasoning. *Mentecatto, melenso, stupido* and *stolido* evidently highlight the importance of declaring the defendant intellectually impaired, and thus incapable to manage his or her affairs. However, this is not to imply that people interdicted as *damenti* were necessarily perceived to be feeble-minded, and even less to suggest that Tuscan families distinguished no gradations in the mental disturbance of their relatives. Post-interdiction narratives, particularly those related to the wide spectrum of conflicts generated by the troublesome nature of the interdicted, evidence that families definitively recognized different kinds of madness, particularly because each kind produced a different set of problems to the household. But a frenetic or someone perceived as prone to violent reactions could have been locked in a room or isolated in a villa while the interdiction was requested without it being recorded in the petition. The labels *melenso, imbecille* or *demente* simply highlighted better that the person was in a mental state that impeded his or her normal functioning. Petitioners intended these labels to appear as determinant and stable as possible, so as to imply that the defendant’s mental condition definitively obstructed his or her normal functioning. A frenetic could, say, suffer periodic fits of anger, but be able all the same to manage his or her affairs. Hence, references to mental impairment worked better to illustrate the extent to which the person was mentally incapacitated to manage his or her affairs.

Another term comprised under *demente* was *pazzo/a*, which can be taken as a category much more embedded in social language, full of cultural meanings and a recurrent object of
literary representations. Pazzia meant plain madness, and could also assume all its forms. To be pazzo was to be “oppressed by madness”, encompassing from foolishness, to someone who is “bestial and furious [furibondo]”, “strange and extravagant”. Pazzia was “to be bereft of discourse, and of sense”, and was the antonym of wisdom.308 Although pazzo/a accompanied by furioso/a was the category accountable for committal in the Tuscan mental institutions, by itself pazzo was less specific, and did not constitute a legal category. Given that it was not legally accurate, during the eighteenth century the term pazzo was generally avoided by the government officials directly involved with interdictions. When we find the term in the records of interdiction procedures, it usually corresponds to lay narratives, particularly those which are more descriptive, as an effort to qualify the denomination of demente previously given. It appears generally as a marginal commentary accompanying a person’s name supporting a testimony, saying that he indeed knew the person to be mad, or that the defendant was widely known to be mad (reputato per pazzo). Pazzo was used in a wide range of situations and, as can be drawn from the definitions just listed, it comprised madness in both its passive and violent forms, including people deemed foolish or feeble-minded (melensi), and the raving mad (pazzi furiosi). But it was also used to label those behaviours considered strange and extravagant, which points to a wider range of behaviours, and could be used also in a “lighter sense”, being present in many proverbs, as can be seen in the subsequent definitions given by the Vocabulario of the Crusca Academy.

The categories that formed the legal language of madness examined here were largely not novel to the eighteenth century. Most of them were instead Italian translations of Latin terms, introduced when the official language of the Tuscan courts of law was changed into the vernacular at the beginning of the sixteenth century.309 Thus, in a context where continuity apparently seems to be the rule, it might be important to highlight the changes brought up by the eighteenth century. Firstly, it should be pointed out that some of the original Roman categories, such as fatuus or non compos mentis, although they had been incorporated in the early modern Consilia and in juridical treatises such as Zacchia’s Quaestiones medico-legales, had fallen into disuse by the eighteenth century. But, most of all, the range of

309 For the Roman law categories of mental incapacity, and the effects of the introduction of the vernacular in the court proceedings see Mellyn, Mad Tuscans and Their Families. For early modern medico-legal taxonomies of mental illnesses before 1700, see, for instance, Rita Mazza, “La malattia mentale nella medicina del cinquecento: Tassonomia e casi clinici”, in De Bernardi, Folia, psichiatria e società, pp. 304-316; Colombero, “Un contributo alla formazione”, in Ibid, pp. 317-329 and Dini, Il medico e la follia.
categories used by the eighteenth century had mostly been reduced to prodigality and *demenza*, which provided the fundamental precondition for the possibility of shaping narratives that could respond to the changing social meanings. Given that these basic legal terms remained unchanged and circumscribed to simple definitions, they could encompass a wide spectrum of nuanced meaningful contents. So long as no specialized knowledge was required to denounce a relative of mental incapacity, narratives could instead focus on individual perceptions, particular events, actions or expressions that were meaningful for each witness or petitioner.

The fact that prodigality and dementia, accompanied by its secondary descriptors, predominated in eighteenth-century interdiction narratives highlights two important observations, both of which constitute the subject of later chapters. On the one hand, it indicates by opposition that melancholy had come into disuse by the eighteenth century. And, on the other, it implies that medical language did not have a major impact outside the specialized circle of medical knowledge. Terms such as *fissazioni*, *delirio* or *turbazioni di fantasia*, which appear in medical testimonies of interdiction procedures towards the second half of the century, were not assimilated in the families’ or in the authorities’ narratives.\(^{310}\)

### 3. 3. Types and origins of mental incapacity

Contrary to what can be observed in the case of prodigality, *demenza* was a category that was not defined by age. Save for the case of the elderly, interdictions by reason of *demenza* destined no particular attention to the age of the defendant. Rather, in these cases narratives centred around the indicators of mental perturbation found in the defendant’s behaviour, where age made no qualitative difference. Instead of focusing on the person’s family role according to age – which was crucial in the case of interdiction by reason of prodigality, descriptions of *demenza* focused directly on its indicative signs. To explain the extent to which a person was unable to manage her or his affairs, petitioners frequently made reference to the characteristics of their mental affliction, alluding to its origins, predominant signs, and most evident consequences. Thus, conditioned by its purposes, these narratives tended to shape types of mental incapacity that were not age-specific. In fact, most of the interdiction procedures by reason of dementia make no reference to the age of the defendant.

\(^{310}\) See Chapter 6.
As I will explain later in this section, the exception is constituted by the elderly, whose dementia was framed as stemming primarily from their advanced age, which placed the latter at the centre of the discussion.

Early modern societies broadly conceived of madness as conforming to two general kinds, one violent and the other passive, as scholars have pointed out. Interestingly, this general differentiation is not so visible in the eighteenth-century interdiction records of Tuscany. Firstly, because all types of mental disturbances were piled under the category of dementia, and, secondly, because acute cases involving frenetic or manic conditions do not appear frequently enough in the interdiction records. If one looks at the records of Santa Dorotea hospital, it would seem that Tuscany acknowledged only violent madness as a public problem. Conversely, an examination of the archive of the Magistrato dei Pupilli gives at first sight quite the opposite situation.

This contradiction is partly explained because interdictions followed a completely different procedure from confinement. Although both were part of the Tuscan state’s response to the problem posed by madness, they pursued starkly different aims. Given that interdiction and confinement responded to different needs, the records of each provision configured madness in different ways. While the accent of a petition for interdiction had to be placed on the person’s incapacity to perform his or her normal duties, a petition for confinement was expected to emphasize the dangerousness of the person’s mad behaviour, as Roscioni has pointed out. In general, the mad behaviour described in interdiction narratives was less destructive and threatening than the one described in the petitions for the admission to Santa Dorotea. In fact, although the statutes of the Pupilli considered furioso, mentecatto, demente and prodigo as possible types of mental incapacity, the furioso scarcely appears in the interdiction records.

However, not all those categorized as demente suffered from passive types of mental disturbance. The dementi were also described as prone to suffering fits of fury, acting in the heat of anger and even brutally beating another household member. They could also both be

311 MacDonald, Mystical Bedlam; Rabin, Identity, Crime, and Legal Responsibility; Roscioni, Il governo della follia; Magherini and Biotti, L’isola delle Stinche; Biotti, È matto e tristo, pazzo e fastidioso, among many others.
312 See, for example, ASF, SD: Motupropri, Rescritti, etc, 1750-1785, Istrumenti e Ricordi, Memoriali e Ricordi. The Santa Dorotea archive has been thoroughly examined by Roscioni, Il governo della follia. Chapter 5 of this thesis examines the procedure of admission to the Tuscan mental hospitals, seeing them as one station among the many stations that comprised the itineraries of madness in the eighteenth century.
313 Ibid.
suicidal and a threat to other peoples’ lives. In fact, many of them were also sent to Santa Maria Nuova or Santa Dorotea before, during or after they were interdicted, as the following chapters will show. However, these characteristics were not necessarily disclosed in interdiction petitions, especially because determining dangerousness was neither necessary nor decisive to assessing to what extent a person’s mental disturbance disrupted his or her normal functioning.

Details regarding the characteristics of the disorder were only introduced if the information could produce an effect on the evaluation by the authorities. Contrary to what happened regarding violence or level of dangerousness, informing the authorities that the condition suffered by the defendant had hereditary precedents or that he or she had suffered in the past from similar episodes of madness could be decisive. The fact that mental affliction could be hereditary, and present itself episodically during the life of a person were valuable details that served to secure a favourable response on the part of the authorities. Most of all, they demonstrated that the denounced mental incapacity was not a malicious manufacture of rapacious relatives who only intended to seize hold of the defendant’s patrimony.

Establishing that madness had been part of the family history argued in favour of the interdiction, for the notion that mental illness could be transmitted across generations provided a degree of certainty to the denunciation. For instance, if a defendant had a father who had been interdicted, this not only served to prove that the petition was probably not malicious but, furthermore, it was considered a demonstration that the defendant had little chances of not repeating his father’s fate. We observe this awareness in the words of the Supremo officers regarding the entourage of a defendant interdicted for demenza in 1767. His son, they said, “is entirely imbecile, so it seems that the vice is in the blood.” Petitioners understood how the argument of hereditary madness worked very well, for they usually pointed out that the defendant had a relative who had been recognized by the law as suffering from mental incapacity. It served, in this way, to prove the accusation of madness and its inevitable consequences.

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314 “il suo figlio benche ammogliato, e di età, è affatto imbecille, onde pare che il vizio sia nel’ sangue”. The commentary appears when the interdicted, Gateano Migliorini, petitioned for his interdiction to be revoked. The Supremo officials argued against the lift and against the possibility of transferring the administration to his son, for he was held to be equally deranged. ASF, MPAP, Memoriali e Negozi di Cancelleria, F. 2307, no. 22, June 1767.

315 See for instance, the interdiction procedures for Anton Gaetano Diaccetti or Antonio Baldinotti, respectively in ASF, MPAP, Memoriali, F. 2304, no. 32, June 1756 and F. 2307, no. 169, September 1768.
Cyclical madness played a similar role. Although the fact that a person was held to be prone to periodic episodes of mental derangement highlighted the temporary nature of the disorder, this only demonstrated more soundly the need for the interdiction. For one, it highlighted the fact that the disorder was not new to the family, and that they had not turned to the institution at the first hint of difficulty. As, for example, with a 90-year-old man, whose “decrepitudo” was aggravated because he “frequently falls into frenzy, as he has fallen many other times in the past.”

But it also worked as proof of madness, demonstrating that it had been requested in the best of interests of the sufferer, and serving as a precedent for subsequent interdiction. In fact, these people were generally interdicted more than once throughout their lives, as in the case of Lorenzo Baldinotti presented at the beginning of this chapter, in which case the interdictions were decreed on the basis of the evidence that had been presented the first time. Similarly, the notion of episodic madness served to ground petitions for each interdiction to be lifted, as it also served to petition for its reactivation if the person relapsed once more into his or her madness.

Rather than establishing a difference regarding levels of dangerousness, interdiction procedures tend to centre most of their attention on the quotidian consequences of madness. As a result, the different kinds of madness appear minimized by means of descriptions that reinforce how the person’s behaviour causes a disruption in his or her life and that of their families. This is the case with those who were unbalanced, extravagant, suffered from uneasiness or were, in general, easily overcome by their passions, for these characteristics necessarily affected the way they conducted their business and managed their affairs. The closeness between dementia and prodigality is most evident in the case of unbalanced and unquiet types. As prodigals, dementi squandered their patrimonies, they could not control themselves, had unruly tempers, and often behaved improperly. These kind of dementi, also labelled melensi or deboli di mente, were characterized by their extravagancies and disrespect for social norms and social hierarchies. However, as later chapters will show, these characteristics were not necessarily brought to the fore when arguing in favour of the interdiction, and usually emerged once the interdiction was decreed.

316 “ritrovandosi d’età d’anni novanta in circa pone in gran disturbo, e sconcerto tutta la sua casa, famiglia e sia per la di lui età decrepita, o per esser solito dare in frenesia, come più volte in altri tempi ha dato”. Interdiction of Antonio Forenzani, ASF, MPAP, Memoriali, F. 2302, no. 73, January 1748/49. For a similar line of argument on the part of petitioners, see Ibid., F. 2304, no. 194, August 1754 and F. 2305, no. 131, June 1761.
**Origins and Causations Ascribed to Mental Affliction**

Petitioners tended to identify the origins of mental disturbances in relation to particular events of the individual’s lifecycle. Depending on this, the condition could be held to be natural, accidental, temporary or permanent. In some cases the origin was thought to be natural, that is, inborn or caused by aging. In other cases the origin was situated outside of the natural order, understood as the effect of an infirmity, of an accident, of the experience of highly disturbing event or of the abuse of wine. Additionally, psychological factors played an increasingly determinant role in the increasingly personalized explanations for mental disturbance. In what follows, I examine how petitioners identified certain origins and causes of mental disturbance, introducing the opinion of authorities when there was a debate. Medical notions regarding the origins and causes of mental disturbance are examined in a later chapter.317

Not only had melancholy almost disappeared from the language of madness in eighteenth-century Tuscany, but explanations of mental disturbances based on the principles of humoral theory were also vanishing. Not only do we not find descriptions relating to humoral imbalance, but there is also no allusion to the typical external factors that were thought to affect their balance.318 Despite what might be expected by taking into account the traditional association between fits of insanity and certain seasons of the year, there is little evidence of seasonal fluctuation in the interdiction narratives. We know that seasons and weather were still held responsible for the triggering of episodic mental afflictions in some medical circles in the eighteenth century.319 Although petitioners and witnesses frequently described episodic fits of madness that could assume the form of periods of low spirits or of exacerbated violent behaviour, the emphasis was placed on how these fits affected the

317 See Chapter 6.
318 The external factors capable of affecting a person’s health were called the six non naturals. These were air, sleep and waking, food and drink, excretion and retention, movement and rest, and finally, accidents of the soul. For an overview, see Sandra Cavallo and Tessa Storey, *Healthy Living in Late Renaissance Italy* (Oxford: Oxford University Press, 2013). For more on this, particularly on the incidence of the passions of the soul in mental afflictions, see Chapter 7.
319 William Buchan’s popular *Domestic Medicine*, first published in Scotland in 1769, explained that “Diseases of the mind often intermit for several years, and return again. In some they return annually at the solstices; in others about the time of the equinoxs. Sometimes the raving fits observe the lunar periods.” Quoted in Houston, *Madness and Society*, p. 161. Medical consultations by letter by Italian physicians generally considered the influence of the seasons in the frame of the six non naturals, but without attributing, to my knowledge, any predominant role to seasonal change. Medical Consultations of Alessandro Pascoli, *Delle risposte ad alcuni consulti su la natura di varie infermità, e la maniera di ben curarle*, vol. I (Rome: Rocco Bernabò, 1736), particularly pp. I-11. Through the study of Elizabeth Mellyn we know that during the sixteenth and seventeenth century petitioners used to explain mental afflictions taking into account factors such as weather and seasonal change. See Mellyn, *Mad Tuscans and Their Families*, pp. 128-160.
person’s mental faculties, and that the fits were regular and recurrent, rather than on what had caused them. Similarly, the relevant detail was thought to rest on the recurrence of these fits.

When no causality was found, the disorder was likely to be considered as inborn, with the sayings of “has always been of unsound mind”, or “of little intelligence”. As a report from the authorities of Pisa stated regarding a case in 1756, there were people who had the bad fortune of having a weak head, of being so unintelligent that they almost were mentecatti.320 In these cases, rather than constitute a defining characteristic, the reference to a mental incapacity, which had been manifested early in the life of the person or which had been present for as long as witnesses and relatives could remember highlighted the reliability of the denunciation.

The other natural cause of madness is old age. Although the physical and mental decay caused by ageing was not necessarily equated to senility or to a state of dependency, ageing nonetheless posed particular challenges to those directly or indirectly experiencing it.321 It was widely acknowledged that old age could compromise mental faculties, affecting daily performance and ultimately lead to the loss of the ability to manage one’s own affairs. Interdiction procedures served precisely to tackle some of the most serious economic and relational consequences aroused by old-age mental incapacity.

Old age has increasingly gained the attention of historians. Transcending initial studies that focused almost entirely on demography, the historiography of old age during the past three decades has challenged the model of the “golden age” of old age in pre-modern societies.322 To counterbalance the romantic approach to old age, recent studies have examined issues such as: meanings and experiences of old age according to gender and social background, status and social role of the aged; intergenerational relationships and co-residence conflicts, perceptions about ageing and the conflicts posed by ageing to families and the state; and the provision of family or public systems of assistance, among others.323

320 Interdiction of Gio. Antonio Rossi, “giacché per sua mala sorte, egli è di capo assai debole, e poco meno che mentecatto…”, ASF, MPAP, Memoriaali, F. 2304, no. 31, June 1756.
321 Although studies have stressed the overreliance on the idea that old age equated with senility in pre-modern societies, scholars have not studied in depth what this senility or decrepitude amounted to and how it was experienced, handled, cared for or discredited. See Daniel Schäfer, “‘That Senescence Itself is an Illness’: A Transitional Medical Concept of Age and Ageing in the Eighteenth Century,” Medical History 46, no. 4 (2002): 525-548 and David G. Troyansky, Old Age in the Old Regime (Ithaca, NY: Cornell University Press, 1989), 109-124.
323 See, among others, Ibid., Groppi, Il welfare prima del welfare; Albrecht Classen (ed.), Old Age in the Middle Ages and the Renaissance. Interdisciplinary Approaches to a Neglected Topic (Berlin: De Gruyter, 2007); Pat
However, old-age mental incapacity still constitutes an unexplored field. The visibility of old age in interdiction procedures, both as a characteristic of prodigality and as a defining factor of one type of dementia enriches our perspective of the intergenerational conflicts generated in relation to the transfer of property which, as historians have pointed out, marked the experience of old age in early modern Europe.⁴²⁴

In fact, the elderly are the only age group that appears neatly defined in petitions by reason of dementia. Interdiction procedures portrayed aging as characterized by increasing mental damage, which seriously affected the person’s rational faculties to the point of turning him or her “impotente di mente.” The image frequently provided in these cases is that of a mind which has first turned childish (rimbambito), and then irrevocably declined into melensaggine and imbecillità di mente. As I said in the previous chapter, interdiction petitions denouncing the elderly generally started stating the “decrepit age” of the defendant, as if it was the decisive fact proving all the rest of arguments.⁴²⁵ However, whether the elderly man or woman had actually reached that stage was a matter for discussion, and so petitioners had to provide evidence beyond the sole reference to the defendant’s advanced age. As expressed by a Pupilli official in 1728, certification of someone’s advanced age by itself was not enough to determine that someone could be rimbambito, for he could perfectly be “of a sturdy nature and sound mind.”⁴²⁶

For this reason, the interdiction procedures involving the elderly were often controversial regarding the assessment of their state of mind, disclosing a heated debate between the authorities, the elderly and their families. Indeed, the elderly constitute the age group that most eagerly contested interdictions, sending repeated petitions for their interdiction to be revoked. In fact it is not rare to find that they were interdicted for a decrepitude which was considered to produce an evident stupidity (melensaggine), but be later reinstated to their civil capacities because they had demonstrated a change of attitude.⁴²⁷


³²⁵ See Chapter 2, section 3.
³²⁶ “detta sola fede dell’ età non si convince che il medesimo non sia di robusta natura e di sana mente di modo che per la sola età possa dirsi rimbambito.” Report of the Pupilli officers, ASF, MPAP, Memoriali, F. 2300, no. 249, July 1728.
³²⁷ See the interdiction and revocation of Baldassarre Marcheschi, 80 years old in ASF, MPAP, Memoriali, F. 2303, no. 120, July 1753 and no. 240, January 1755.
This suggests that evaluating the mental capacity of an 80 year old presupposed concerns that went beyond how their mind was working. As in every other interdiction procedure, regardless of the type of mental incapacity denounced, authorities, families and defendants negotiated the place, authority and role of the members of the household. In the case just cited, the 80-year-old man saw his interdiction revoked not because there had been an actual change in his state of mind, but because his household situation changed.

Interdiction procedures shed light on conceptions of old age that portray it as a distinctly difficult stage of life, one that required the provision of new measures and which could constitute a Pandora’s box of family life. Tuscan families could resort to the Pupilli’s intervention to mediate between them and the elderly by means of the interdiction procedure. Thus, in interdictions by reason of dementia involving the elderly, families brought into the discussion not only the elderly relative’s economic mismanagement, but also their odd and stubborn behaviour, their increasing mental obfuscation, their need to be taken care of, fed and clothed. Interdiction procedures affecting the elderly, even if configured under the rubric of prodigality, are always entangled with the discussion about what it meant to grow old, how old age affected the family structure and balance of powers, and which were the defining signs of its mental decay. For this reason, these procedures illuminate the shaping of a pathologized conception of what old age was, presenting it as a negotiation between families, authorities and the elderly.328

Mental incapacity by reason of old age was frequently combined with other external causes, such as a past illnesses, or, more commonly, an apoplectic stroke or epileptic seizure. In these cases the onset of the person’s mental decay was precisely identified at a certain point, which combined to the advanced age provided a degree of factuality to the denunciation. Apoplexy, which was particularly seen as a sign of decrepitude, served particularly well to argue that the person had reached a stage of mental and physical prostration, leaving them bereft of reason and partially or totally immobilized.

But not only elderly mental incapacity was ascribed to external events. A person could be said to have become stupid in mind, or mentecatto after suffering an accident, such as a

serious fall, for example. Among the illnesses identified as responsible for triggering a state of mental incapacity, epileptic seizures and apoplexy definitively take a predominant place. But, in many cases, the nature of the illness reported was not specified, and in many cases it is not clear that they circumscribe that “illness” (infermità) to a mental illness. Given how the body was connected to the mind in early modern culture, with a range of physical disarrangements that were thought to be able to affect mental health, it is perfectly possible that a physical ailment was being referred to. In other cases, petitioners simply state that the person had “fallen” (caduto) into dementia (or any other of its subsidiary categories), or “had fallen into many and diverse indispositions, [which] reduced him to unsound mind”, without disclosing the nature of such indispositions. More precise origins of the mental incapacity can be found in medical testimonies, but, as a later chapter will argue, medical practitioners tended in general to employ the same unspecified language employed by petitioners and lay witnesses when giving their specialized opinion.

When not relating to the elderly, accidental or external origins introduced the problem of duration into the assessment of mental incapacity, which explains why petitioners tended to avoid establishing a cause for the mental incapacity. For instance, a man was said to have turned “melenso and debole di mente because of a series of illnesses,” the nature of which was not revealed. In a slightly diverging explanation, a priest had testified for this case saying that he had “always thought of him as a man of little judgment and reprehensible conduct” (di poco giudizio e di poca condotta). Thus, indicating that an illness or an accident as the cause of a mental impairment could easily coexist with the argument of “has always been” or “I have always thought of him” to be mad, which transferred the discussion from causes (highly debatable) to consequences, which could be quantified and confirmed with facts.

Drunkenness is the last cause of mental incapacity identified by petitioners that can be observed in the sources. The fact that in this case the origin had been self-inflicted made no difference for the argument of the interdiction. If anything, it proved even more the factual

330 See ASF, MPAP, Memoriali, F. 2300, no. 341, December 1730; F. 2304, no. 54, April 1756 or F. 2305, no. 127, February 1761, among many others.
331 See, for instance, how witnesses held the “misfortunes” and “illnesses” suffered by Francesca Paoli responsible for her “state of dementia.” ASF, MPAP, Memoriali, F. 2303, no. 13, December 1751.
332 “essendo caduto in più e diverse indisposizione, e ridotto di poca sana mente, si era reso del tutto incapable”, ASF, MPAP, Memoriali, F. 2302, no. 270, July 1751.
333 See Chapter 6.
334 Interdiction of Niccolò Sinibaldo Reali, ASF, MPAP, Memoriali, F. 2304, no. 85, March 1757.
existence of incapacity, and the behavioural disorder affecting its victim. The effects petitioners and witnesses attributed to excessive alcohol consumption (usually wine) were loss of control and damage in the intellectual faculties of the individual. Drunkards were frequently described to have become stolido, melenso, or frequently “out of himself” (fuori di se) by their immoderate consumption of wine.\footnote{See respectively ASF, MPAP, Memoriali, F. 2302, no. 243, March 1751; F. 2304, no. 61, September 1756; and F. 2303, no. 249, March 1755.} Family members tended to stress the damaging effects wine had on the human mind and thus, the financial effects on the household of having a pater familias who would be easily deceived or seduced into making unfavourable contracts.\footnote{See, for example, the interdiction of Domenico Bini. ASF, MPAP, Memoriali, F. 2304, no. 61, September 1756.}

Physical signs such as restlessness (inquietudine) or periods of exacerbated activity that prevented the defendant from sleeping at night also appear in the descriptions.\footnote{See, for instance, the description of Anton Gaetano Diaccetti, examined in 3.6. According to the testimonies, he “…teneva inquieto il vicinato, con far del remore, di notte con far del fracasso con le secchie, scuotere usci, e molti altre impertinenze…” ASF, MPAP, Memoriali, F. 2304, no. 32, June 1756. Extravagance and inquietudine are examined in Chapter 7.} These symptoms, which constituted a crucial sign characterizing uneasiness and extravagance as I will show in the last chapter, indicated the extent into which bodily signs could disclose the disruption in a person’s mind. Mad people lacked the rational will that allowed the individual to govern his or her actions, passions and appetites. Mad people could not govern their minds nor their spirits, that is, they could not take control over their thoughts and feelings. They would therefore be described by those who knew them as having extravagant and peculiar ideas, unable to chose one, or too fixed in another. The same would apply to their emotions, which were too inconstant and fluctuating to be ascribed to a rational being. Accordingly insanity was revealed, as it was said regarding a demente in 1760, in the “volubility of his feelings” and in “the extravagance of his behaviour, characterized by his way of speaking and by his fixation in his determinations, unreasonable to the extent of not being able to persuade him to do what is convenient.”\footnote{The original goes: “possiamo affermare essere il medesimo incapace, si per la volubilità de suoi sentimenti che per la stravaganza delle sue operazioni si nel parlare, che nel praticare fisso nelle sue risoluzioni, ancho inragionevoli [sic], da non potersi persuadere, ne muovere, ad operare, a quanto convenga.” ASF, MPAP, Memoriali, F. 2304, no. 60, September 1756, interdiction of the melenso Giacinto Torsi. Testimony of the mother and sisters.} Similarly, the individual’s recovery from a period of
insanity could be argued in terms of his having recovered his capacity to command his speaking and actions, and restrain his passed extravagancies.\textsuperscript{339}

It was not just physical factors that, according to lay knowledge, could contribute to the explosion of a mental derangement but psychological factors also played a role, particularly when we get to hear the voice of the mad. One defendant claimed that his mental breakdown had been cause by his \textit{animo angustiato}, another explained that one of his episodes of mental affliction had been triggered after his wife had abandoned him, which produced in him a “fierce oppression of spirits that took him out of himself”\textsuperscript{340} (\textit{fiera soppressione di spiriti, che lo levò a fatto di se}). However, these explanations usually come out in later proceedings, once the presence of madness and the extent of its consequences had been determined.

Interdiction procedures are generally silent regarding the origins of mental incapacity, except for the reference to these marks in the life of a person that could signal the onset of the affliction. For the same reason, those who suffered a mental impairment from birth were not necessarily differentiated from those whose mental affliction had been triggered later, or whose madness was episodic. The onset of the disturbance only mattered if it demonstrated something regarding the consequences it exerted on the family. As a result, petitioners generally preferred to delve into the signs of madness rather than determine its origins and probable causes. First and foremost, interdiction petitions had to convince the authorities that the defendant was indeed incapable of managing his affairs, for which the argument of “has always been”, or “has always known to be” served the purpose straightforwardly.

The temporal dimension of insanity played a different role in civil than in criminal procedures. The success of an insanity defence was dependant upon the possibility to determine the exact duration of the alleged insane episode, for this established if the crime had been committed with or without intent.\textsuperscript{341} On the contrary, to secure an interdiction sentence petitioners had to convince the authorities that the alleged mental disturbance exerted considerable damage on the economic resources of the family, regardless of whether the condition had been present since the defendant’s birth or only for the last couple of

\textsuperscript{339} ASF, MPAP, \textit{Memoriali}, F. 2304, no. 90, September 1760, Testimonies to the petition for liberation sent by Giacinto Torsi.
\textsuperscript{340} Petition of Antonio Corsini, ASF, MPAP, \textit{Memoriali}, F. 2304, no. 87, April 1757, and petition of Angiolo Barchesi, ASF, MPAP, \textit{Memoriali}, F. 2303, no. 118, February-July 1753, respectively. Both cases are examined in later chapters.
\textsuperscript{341} Criminal insanity is examined in Chapter 5 of this thesis.
months. While criminal procedures were concerned with past consequences of madness, civil procedures engaged with its present and future consequences.

3. 4. Indicative Signs of Madness

Despite the constant use of the word *mente*, it was widely recognized that the “essence” of madness was to be “visible and known by its appearance.” Gestures, behaviours, demeanour, external appearance, the way a person spoke, walked, related and reacted to others were its verifiable signs. In fact, the foundations of the legal assessment of madness had since antiquity relied on the principle that madness could be recognized through its outward signs. In other words, the mind was accessed through the external bodily signs of the person, which made madness very difficult to prove.

The problem was that this assertion depended on highly debateable external indicators, which could not only be interpreted differently according to one’s point of view or intentions, but also be easily hidden or, even worse, simulated. The juridical treatises that circulated in Early Modern Europe usually warned about the difficulties of differentiating a real from a feigned madness, a danger faced by ecclesiastical and civil courts alike. Authors like Paolo Zacchia were well aware that the signs of madness were sufficiently known by lay people so as to perform convincing acts in order to obtain a mitigated sentence. For this reason early modern jurisprudence perpetually attempted to develop a system of proof to avoid fraudulent insanity pleas and detect cases of manipulation and abuse in civil law. The Tuscan legal system, after the revival of Roman law and following the lead of Zacchia’s *Quaestiones medico-legales*, had constructed a catalogue of insane actions and extravagant behaviours to

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distinguish madness in criminal and civil procedures. Zacchia had presented many physical signs, such as cavernous eyes, or the marks of insomnia, which were determinant as long as they were impossible to feign.\textsuperscript{344}

However, judicial practice throughout Europe by the eighteenth century still largely relied on common sense and non-expert opinion to assess madness in criminal and civil courts of law. Furthermore, descriptors and signs were much more flexible in practice than what had been recommended by authors such as Zacchia. Contrary to the narrative that identified the eighteenth century as the onset of the medicalization of madness, British historiography has stressed the slow introduction of medical opinion in the judicial arena. As Houston has pointed out, in criminal and civil courts we can find the use or recalling of the existence of a “general or common standard of what constituted normal mental functioning.”\textsuperscript{345}

Following a long-standing tradition, recognition of its outward manifestations was critical in the assessment of mental incapacity. To be mad was to look mad and behave like a mad person. For instance, English law established that natural idiots could be identified because they could not count until twenty, could not name their parents, or could not tell their age. Similarly, a person could be held legally mad if a witness could declare “that they did see him to do such Things, or heard speak such Words, as a man having Wit, or Reason, would not have done, or spoken; namely, they did see him throw Stones against the Windows; or did see him usually to spit in Men’s Faces; or being asked a Question, they did see him hiss like a Goose, or bark like a Dog, or play such other Parts as Mad-folks use to do.”\textsuperscript{346} Following the same principle, Zacchia had stated that a melancholic could be recognized because they reacted strangely in front of other people, for they usually “become angry and are consumed by rage at the least provocation; they scream and shout; they threaten those present as well as those who are absent. With a savage countenance and violent motion of the body, they are terrifying.”\textsuperscript{347}

\textsuperscript{344} Mellyn, Mad Tuscans and Their Families, pp. 177-178. On the classification of Zacchia, see Chapter 5.
\textsuperscript{346} Brydall, Non Compos Mentis, p. 68.
\textsuperscript{347} Paolo Zacchia, Quaestiones Medico-Legales, Book. 3, Title 2, Questio 5, “De simulata insania”. Quoted in Mellyn, Mad Tuscans and Their Families, p. 177. On the importance of appearance in the assessment of madness in early modern courts, see also Houston, Madness and Society, pp. 176-182; Boari, Qui venit contra iura, part. Pp. 60-74, or Monica Calabritto, “‘Furor’ Melanconico tra teoria e pratica legale,” Studi storici 51, no. 1 (2010), pp. 113-137. The physical manifestations of madness and the patient’s appearance were also crucial to
The assessment of madness in the Tuscan courts was similarly based on physical and outward signs. Interdiction narratives frequently tried to prove a defendant’s insanity by declaring that they had “heard and seen him say and commit continual and diverse absurdities and acts of a real mad person.” The authorities’ assessment was built upon a combination of first-hand observation and what could be retrieved from the testimony of witnesses. Petitioners and witnesses generally concentrated on appearance and social behaviour, besides the squandering, when presenting their “proofs” of madness. Extravagancy, emotional instability, suicidal or violent tendencies were accompanied by certain bodily manifestations. The profound significance of extravagancy and emotional instability are examined in later chapters, but for now let me elaborate on how the body was held to give a conclusive sign. Perhaps responding to a judicial practice that privileged the recognition of bodily signs over demeanour and behaviour in the legal assessment of madness – the former were considered reliable and verifiable, while the latter could be easily simulated – interdiction narratives tended to include descriptions of external appearance and way of speaking when there was need to establish the veracity of a contested denunciation.

Speech and physical impairment were amongst the most easily verifiable signs of mental incapacity and petitioners and authorities alike frequently resorted to them. For even if a defendant could “appear at the first sight that he speaks judiciously, when one continues to converse with him it becomes clear that his mind is not right.” Because speech was thought to be particularly revealing of a person’s state of mind, testimonies confirming the insane way of speaking of the person being denounced were particularly crucial. In fact, the Pupilli officials often contrasted the denouncements with their own visual assessment on the subject, summoning them to court if they were able to move by themselves, or sending an examiner. These visual assessments, although also based on clothing, demeanour and mobility, were especially based on speech.


349 “Per quanto si dice per la città il Cancellier Lorenzo Maestrini fa molte debolezza e nel discorrere parla impropriamente e benche nel primo abordarlo apparisca che parli sensatamente; continuando poi a discorrere si vede che la di lui mente non stà a dovere.” ASF, MPAP, *Memoriali*, F. 2300, no. 311, June 1730.

350 See, for instance, the interdiction of the 80-year-old Alessandro Bambi, “avendo riconosciuto dal discorso avuto col detto Alessandro… che… era incapace…” ASF, MPAP, *Memoriale e Informazioni*, F. 2299, no. 93, June 1692.
The inability to follow a coherent discourse and use the right words to express themselves is generally one of the signs signalling the effects that an apoplectic or epileptic “accident” had exerted on the mind. Difficulties of speech were in these cases accompanied by defective vision, difficulties of hearing and problems of mobility. Physical impairment, in fact, was conflated with insanity in uncanny ways. We have to bear in mind that being deaf and mute was listed among the causalities that could justify interdiction, according to the Pupilli statutes. But deafness or blindness were also included as physical symptoms accompanying the presence of madness, together with problems of speech or mobility. The legal conflation between physical and mental disability during the early modern period seems to be still understudied, despite the remarkable success experienced by disability studies in recent years. However, as Mellyn warns us, “The mad may have suffered from some find of physical impairment, but the physically impaired were not necessarily considered mad.”

In interdiction procedures, the fact that a defendant’s mental incapacity was accompanied by some level of physical impairment served to illustrate the extent to which the person’s normal functioning was obstructed. Not necessarily because physical, sensorial and mental impairment were equated, but mostly because they were seen as leading to the same consequences. Physical, sensorial and physical impairments hindered people’s normal functioning, constraining their capacity to manage their own affairs and conduct their own business, making them the potential victims of fraud and manipulation. This meant not only that they could be easily defrauded but also that they were not self-sufficient. Michele Frulli, around 60 years old, according to his brothers, “was and had always been demente, and incapable of managing his own affairs, and has always lived deprived of sight, and under the custody and care of the supplicants.”

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351 See, for instance, descriptions of the 71-year-old Rinaldo Picchianti, seriously damaged after two apoplectic fits. The strokes had left him practically paralyzed and almost feebleminded (“sommamente debilitato nella cognizione di mente”). This was revealed by his inability to follow a coherent discourse and to employ the right words to express himself, to the point of speaking like a small child (“...facendo per lo più discorsi d’inerzie, e senza proposito, e altre funzioni puol dirsi puerilmente...”). Although this is not an interdiction procedure, it follows similar patterns to interdiction petitions. It corresponds to a petition made by Picchianti’s relatives to the Otto di Guardia to protect him from the manipulation of abusive strangers. ASF, Otto di Guardia e Balìa, Straordinarie, F. 2680, no. 36, November 1757.

352 Procedures by reason of being deaf and mute were, in general, decided with little contention. Almost no evidence was given on the part of petitioners, as if the sole physical condition was proof enough.

353 Mellyn, Mad Tuscans and Their Families, p. 19. Some attempt has been made in breaching this gap in the recent study of Turner on understandings, attitudes, representations and experiences of eighteenth-century disability, although his main focus is still placed on physical disability. David M. Turner, Disability in Eighteenth-Century England: Imagining Physical Impairment (New York: Routledge, 2012).

354 ASF, MPAP, Memoriali, F. 2304, no. 2, July 1759.
This is particularly clear in the case of the elderly. The fact that their minds were deteriorating was generally proved by their weakened bodies, an indelible sign of the passing of time. Aging left a perdurable mark on the individual’s body as well, and if the state of their mind could be the object of debate, their increasingly crippled bodies were incontrovertible. Physical impediments of sight, of movement and of speaking served, in this context, not only to support the assertion of mental decrepitude, but mostly to illustrate the need of the interdiction. The critical consequences of the elderly’s reprehensible financial conduct, with their wrong decisions, their indiscriminate selling of goods at a reduced value and their total opposition to any well-intended advice, assumed more convincing tones when combined with a “decrepit age”, “bodily indispositions” and problems of speech, demonstrating their being a “uomo stordito, e privo de ragione.”

Facial expressions and physical gestures are not easily found among the descriptions of mental incapacity in the eighteenth-century interdiction narratives. It is possible to find some comments regarding the defendant’s body language and appearance, generally included to suggest that the person has ceased to abide to the basic norms of civility and personal care. For instance, a defendant was “universally reputed by everyone” to be “wandering alone, roving with the beard of a capuchin.” These signs, combined with his past licentious and scandalous practices, and his distance from the Christian precepts demonstrated to the authorities that he was “not completely in his mind” (non pare che sia d’intera mente).

However, these remarks on the physical appearance are in fact marginal compared to the considerable significance attributed by interdiction narratives to descriptions that signalled the breaching of codes of behaviour, as the example just cited suggests. Furthermore, the authorities’ opinion on this case suggests that it was far more important for them to determine if the defendant was dissipating, and how and why, rather than establishing whether his personal appearance conformed to what was expected for a madman.

A similar situation occurs with nudity. Among the outward signs of madness, the naked body of the madman or madwoman running amok through the streets is a well-known cultural stereotype of madness, which, however, is not as present in the interdiction records as might be expected. Nudity generally occupies a space in the studies of madness, and it has been singled out as a valuable key to grasp the meanings of early modern madness. For

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355 Interdiction of the 89-year-old Giuseppe Frizzi, ASF, MPAP, Memoriali, F. 2306, no. 245, March 1766.
356 ASF, MPAP, Memoriali, F. 2303, no. 151, November 1753. See the case of Antonio Corsi, described as having shown the gestures of a madman, discussed in the next section of this chapter.
instance, historians working with inquiries into mental incapacity have also included nudity under their examination of the outward signs of madness. In general terms, historians have argued, on the one hand, that external appearance was determinant in early modern societies for indicating social status, which placed nudity as symbol of poverty and as a source of shame and lack of decorum. On the other hand, historians have also read the disdain and rejection of the nudity and filthiness of the mad body by using the interpretative codes provided by the framework of the civilizing process and the growing importance of hygiene and manners. However, nudity and indecent appearance have a low profile in the eighteenth-century Tuscan interdiction narratives, following the same trend observed with regard to gestures and facial expressions.

Tuscan interdiction narratives present alternative models to the stereotype of the raving mad running naked or unconventionally dressed, whose frantic and frenetic behaviour severely threatened the social order. The eighteenth-century interdicted evidently threatened the social order, but I have found only one case where petitioners recurred directly to the image of the naked, wandering mad. There is abundant reference to the defendant’s indecency, but it is mostly related to behaviour, not appearance. Furthermore, interdiction narratives do speak of clothing, but usually in reference to the excessive acquisition of them, not to their absence. If anything, the Tuscan interdicted were overdressed, in some cases clothed “above” their economic capabilities, and in others leaving the rest of the household deprived of decent outfits to wear, but they themselves were not naked.

Rather than reading the Tuscan narratives as an exception against the more common early modern European cultural understandings of madness, I suggest that the difference responds, once more, to the special characteristics of Pupilli records under examination here. Particularly if we take into account that the disoriented or raving mad running naked or indecently clothed through the streets do appear in the records of Santa Dorotea. Thus, the stereotype does appear in other Tuscan records, only that interdiction narratives did not include it. This is, to my view, the relevance of taking into account a wider picture to grasp

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358 Francesca Paolo del Feo, interdicted twice, was said to have dissipated her patrimony to the point of “reducing herself to wandering through the streets almost naked” (si era ridotta per le strade, quasi nuda, vagando). ASF, MPAP, *Memoriali*, F. 2303, no. 264, December 1754. Her case is examined in chapter 4.
more nuanced conceptions about madness in the early modern period. As I will try to show in later chapters, following the itineraries of madness allows us to understand the extent to which early modern petitioners and witnesses were extremely selective in their characterizations and their language. For the purpose of securing an interdiction sentence, instead of giving physical descriptions, it was more effective to delve into the financial and relational performance of the defendant.

3. 5. Meanings and Perceptions of Madness

*The Purpose of Interdiction Shaped the Definitions of Madness*

According to Andrew Scull, during the eighteenth century the “long-standing cultural stereotypes of mad behaviour, encompassing extravagance, incoherence, incomprehensibility, menace, and ungovernable rage” persisted. Scull, *The Most Solitary of Afflictions*, p. 48. The stereotype of the dangerous and frightening mad led the historian to assert that madness in “its most extreme manifestations – wild ravings, disturbances of the senses, deep depressions – were profoundly disturbing and disruptive events.” In like manner, studies focusing exclusively on asylum records have generally concentrated on the raving, dangerous mad, producing an image that tends to underestimate more nuanced representations of madness which can only be grasped by taking into consideration a wider range of records. This is what happens if one takes the image of the *pazzo furioso* produced by the records of Santa Dorotea, most of whom were dangerously violent and suicidal. The result is a stereotype much closer to the features of the dangerous, naked and wandering mad present in literary sources, than to the nuanced representations that can be found in records such as the inquiries into mental capacity under study here. This is not to deny that madness constituted a disturbing and disruptive experience, but rather to highlight that madness had many faces in the early modern period.

All these circumstances suggest that the perception of mental incapacity was wider than what we can grasp by clinging solely to the label of *demente* and to the purposes of

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360 Ibid., p. 175.
361 This is particularly clear with the studies focusing on the representations of mental disability (corresponding to the idiot or feeble-minded), which illuminate the variety of interpretations, language and representations given to it, a first step towards a conception that is less static on the representations of madness. See Wright and Digby, *From Idiocy to Mental Deficiency* and Jonathan Andrews, “The (un)dress of the mad poor in England, c.1650-1850”, Part 1 and Part 1, *History of Psychiatry* 18, no. 1 and no. 2 (2007), pp. 5-24 and pp. 131-156.
interdiction proceedings. This is particularly so because the evidence shows that the most interesting discussions regarding what it meant to be mentally impaired, and how families made sense of their relative’s mental afflictions come to light after the interdiction was decreed. That is, there was generally little contention about the category chosen to frame the interdiction. However, there was less agreement, and hence, more need to delve into the characteristics of the given mental incapacity, when the discussion entered the terrain of what was to be done with the defendant after the interdiction.

If we were to limit our interpretation only to the vocabulary used, we would have the idea that people interdicted in early modern Tuscany as *demente* suffered almost exclusively from intellectual disability. Nonetheless, when the otherwise empty labels of *demente*, *mentecatto*, *melenso* were filled with the narratives of individual stories, a much more complex understanding of mental disturbance comes into the fore. The mentally disturbed denounced to the Pupilli were not only passive mentally impaired people, but also evidently problematic to deal with, and some of them certainly suffered violent outbursts.

Although grouped under one overarching category, interdiction procedures by reason of dementia disclose nuanced conceptions of mental incapacity in accordance to different levels and gradations of mental disturbance. There was a general, and in my view, intentional imprecision in the legal application of the term *demente*. As such it could be open to the characterizations given by families and neighbours, granting enough space to definitions that were socially meaningful. The Pupilli was not looking for a medical diagnosis, but rather for a reliable description of the consequences of the alleged mental disturbance, regardless of how it was labelled. In this sense, reducing the picture of how mental incapacity was conceived to the two legal categories of the time (prodigality and dementia) may be misleading. On the contrary, the categories of mental incapacity were deliberately undetermined so as to encompass the manifold gradations comprised in mental incapacity, without resulting in the blurring of distinctions.

A similar interpretation has been made regarding the ambiguity found in the meanings ascribed to lunacy and idiocy, the two basic categories provided by the legal framework in early modern England. Considered by Peter Rushton to be the product also of a “careful legalistic vagueness”, the dichotomy between lunacy and idiocy remained more or less untouched during the early modern period.362 Studies on the English provisions and legal

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362 Rushton, “Idiocy, the Family and the Community”, p. 49.
treatment of the mentally disabled and mentally afflicted have suggested that the theoretically stark differentiation between the lunatic and the idiot was much less determinate in practice. However, Jonathan Andrews has drawn the attention of scholars to the problematic consequences of exaggerating the deliberate vagueness and flexibility of early modern categories of madness and mental disability. To avoid this he argues “for the meaningfulness and coherence in practice of early modern distinctions between types of mental disablement and mental illness.”

These studies also demonstrate that the employment of one over the other category is tightly connected to the nature and purpose of the institution where it was recorded. The English legal framework divided mental incapacity into two types, lunacy and idiocy, stipulating different consequences and providing a different range of provisions accordingly. Lunacy by definition supposed a temporary condition from which the individual could emerge, and included the possibility of lucid intervals. On the contrary, idiocy was conceived as a permanent condition, either born with or developed in early childhood. Lunacy supposed straightforward madness and was liable to confinement, while idiocy was applied to mental impairment, which was perceived to be generally milder, not dangerous and less disruptive of family and social life. As a consequence, idiots were generally cared for in domestic environments, which made them less visible. In fact, idiocy was recorded in parish records precisely by petitioners seeking parish provision under the Poor Law framework once “the private caring system disintegrated, through death or poverty.” As explained at the beginning of this thesis, lunacy and idiocy were thought to entail different legal consequences. While a legal declaration of mental incapacity by reason of idiocy was irrevocable, a person legally declared lunatic was deprived of his or her civil rights only temporarily, until the afflicted regained his or her faculties.

This differentiation between the lunatic and the idiot is applicable to a certain extent to the difference between the Italian pazzo and pazzo furioso, except that both of them were comprised under demenza in the framework of Tuscan civil court proceedings, and no real difference was made between those who had suffered their condition since birth and those

363 Jonathan Andrews, “Identifying and providing for the mentally disabled”, in Wright and Digby, From Idiocy to Mental Deficiency, p. 66. A similar point was made by Rushton, “Lunatics and Idiots”. On the meanings of lunacy and idiocy, its contexts, implications and provisions, see, the articles of Rushton “Idiocy, the Family and the Community” and Neugebauer, “Mental Handicap in Medieval and Early Modern England”, in Ibid. See also Suzuki, “Lunacy in Seventeenth- and Eighteenth-Century England”, Parts 1 and 2.

364 Rushton, “Idiocy, the Family and the Community”, p. 56.

365 See Blackstone, Commentaries, p. 292-296, and Chapter 1, section 1.4 of this thesis.
who had developed their mental affliction later in life. Here lies precisely the crucial point to this problem. For the purposes of interdiction procedures, it simply made no difference if the defendant was considered to be idiot (melenso would have been the most accurate equivalent) or lunatic (equivalent to the furioso or raving mad). Both received the exact same treatment in the civil courts and both entailed the same legal consequences. More importantly, interdiction under the Tuscan juridical framework was by definition conceived of as temporary. The system considered that people who had been feeble-minded “since always” could perfectly well resume their administrative rights provided they could prove they had regained their capacity to manage their affairs (or prove, alternatively, that the initial declaration of mental incapacity had been wrongful and ill-founded). Therefore, all types of mental affliction were placed under the comprehensive umbrella of demenza, regardless of whether it was considered dangerous or harmless, permanent or temporary, straightforward or mild. The difference was that the furioso could be also admitted to a mental hospital, provided his or her family petitioned for that purpose through the appropriate channels, which was not the case for the melenso. This opposition, devised with the purpose of determining whether it was necessary to provide a custodial solution, was not made in terms of symptoms and characteristics, but in terms of the person’s perceived levels of dangerousness. 366

So diverse were “the types of illnesses comprised under the category of dementia,” that it was necessary to devise different regimes for the cure and management of each case, as the administrative board of Santa Dorotea explained to the officials of the Pupilli in 1759. 367 For instance, only a pazzo furioso needed confinement, while a person afflicted by “melancholic fixations,” as was the case of the patient that originated this report, would benefit more from a more cheerful environment where he could enjoy better air. However, both types of madness or, to put it better, all types of madness were liable to interdiction, for which they were generically categorized as dementi.

The purpose of interdiction procedures made it useless to make this distinction. Interdictions were decreed provided it could be proven that the defendant was indeed mismanaging his or her property, and that it could be established that this mismanagement was caused by a constitutional incapacity. Whether it was a case of prodigality or dementia,

366 For the procedure of confinement to Santa Dorotea, see Chapter 5, section 2 of this thesis.
367 “...differenti sono le specie delle malattie comprese nel genere della demenza...” ASF, MPAP, Memoriali, F. 2304, no. 223, February 1759.
or if it was caused by a congenital intellectual impairment or some kind of mental illness developed later in life was, for this purpose, secondary.

_Culturally Meaningful Understandings of Madness_

Petitioners and witnesses had to load with meaning the conventional categories of mental incapacity if they wanted to convince the magistrates. It was in the descriptions of irrational and extravagant actions that petitions and testimonies dedicated most of their ink, filling with content the unspecific definitions of _demente_, _mentecatto_ or _melenso_. For this reason interdiction narratives shed light on social conceptions and cultural stereotypes of madness. The negotiation of cultural standards of what constituted mad behaviour in the legal space offered by inquiries into mental capacity thus illuminates, from a different angle, an issue that has largely been approached through cultural manifestations like literary and visual arts.\(^{368}\)

Financial irresponsibility was evidently at the core of the cultural meanings ascribed to madness, so long as interdiction petitions were grounded in every family’s prerogative to protect their patrimonies.\(^{369}\) However, economic irresponsibility by itself was not a sign of mental derangement. As I suggested in the previous chapters, the conflation between prodigality and insanity occurred in certain characteristics of those who squandered, not in the squandering in itself. Indicators of a perturbed state of mind were found in the context of the squandering, in the defendants’ strange behaviours, their unbalanced characters, their pattern of unclassifiable reactions. One could tell that an allegedly _demented_ person was indeed mentally disturbed not based solely on the fact that he or she dissipated, but on how and why they did it, and, moreover, if they understood that it was wrong to do it.

At the core of the conception of mental incapacity we find the inability to situate oneself in a given context, shown in the person’s inability to perform normal activities, on the one hand, and to comply with basic social norms on the other. To engage in inconvenient contracts, not out of ambition or reckless spending, but out of pure incapacity was considered clear evidence, according to one contemporary Florentine, of the individual’s alteration of

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\(^{369}\) This was discussed in Chapter 1.
The allegedly altered state of mind of this defendant had prevented him from understanding that he was selling property at an undervalued price, for instance. In other cases, they were described as stubbornly contracting debts and engaging in illicit contracts that they would afterwards not acknowledge any responsibility for, behaving arbitrarily and demonstrating no concern over the consequences of their actions.

Defendants were portrayed as completely unaware of the consequences of their actions, and particularly, oblivious to the material strain their mismanagement put on the family. Mad people were held incapable of differentiating good from wrong or beneficial from harmful. This was one of the basic notions used in insanity pleas, so they could not be held responsible for their actions. In terms of civil activities, it meant that they could be easily deceived into unfavourable financial actions, or even contradict the most basic rules regarding the transmission of the family patrimony in early modern Tuscany. For instance, Antonio Becciani acted deliberately against the norms imposed by the patriarchal hereditary system when he announced that he would donate his portion of the patrimony to an unknown third person. His purpose was deemed a clear sign of his perturbed state of mind in his mother’s eyes, and was instrumental for the interdiction sentence he finally received.

In their effort to demonstrate that the alleged mental disturbance justified the interdiction, petitioners provided a list of the defendant’s record of irrational acts, which, as a matter of fact, went beyond financial performance. Contextualized by ordinary circumstances, petitioners and witnesses described to what extent the defendant’s behaviour was in opposition to the standard or expected performance for an individual according to gender and social rank. An excellent example of how this operated in practice is the one discussed below.

In August 1754, Antonio Corsi was interdicted because he had turned “frenetic and weak of mind”, giving “evident signs and demonstrations of his unhealthy mind”, as the officials of the Pupilli stated. The interdiction petition was signed by Corsi’s sister, who claimed he “had been giving clear signs not only of his incapacity to manage his affairs as any good head of family is expected do, but furthermore, of being of unsound mind” (*mente poco*

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371 His father had been found equally *melenso* years before. For the interdiction process of Antonio Becciani, see ASF, MPAP, *Memoriali*, F. 2306, no. 120, August 1764, for a further discussion of this case, see Chapter 7. It was common to denounce male and female defendants for the intention of making testamentary dispositions that distorted the patriarchal system of inheritance. The guardianship procedures examined by Mellyn also follow this same pattern. See Mellyn, *Mad Tuscans and Their Families*, for instance pp. 164-167.
372 “[S]’è reso frenetico, e debole di mente” and “ha dato manifesti segni, e dimostrazioni di poca sanità di mente.” ASF, MPAP, *Memoriali*, F. 2304, no. 194, August 1758, Reports of the Magistrato dei Pupilli and the Magistrato Supremo, respectively.
The first sign of insanity she recorded was Antonio’s sudden refusal to fulfil his duties at the Merchant’s court (Corte di Mercanzia, the commercial court), where he was employed as assistant of the court records keeper. What made his refusal so odd, according to the woman’s narrative, was that he did not have any reasonable impediment preventing him from performing his usual tasks. The subsequent signs were that he had unexpectedly dismissed his own servants so that he could live in complete isolation. After that he had lived completely alone, manifesting no interest in the supervision of his affairs and showing complete indifference for the administration of his patrimony.

The prevalent concern of Corsi’s sister was his refusal to participate in social life. Through a testimony she sent later on to the Pupilli, we know that Corsi not only longed for solitude, but insisted on confining himself at his residence with “bladed weapons and firearms” (arme bianche, e da fuoco), refusing to see anybody. He also carried his weapons wherever he went, which apart from being illegal, she presented as a source of particular risk to society on account of his well-known mental disturbance. Every new action he performed gave new signs of his insanity, said the sister, confirming the fact of his dementia.

The testimonies she presented backed up her diagnosis of insanity with commentaries such as that from some moths before, whereby Antonio Corsi had begun to “give evident signs of not being right in mind” he had decided to live completely alone. There was also a testimony from the Cancelliere of the Tribunale della Mercanzia, who attested that Antonio had been absent from his post despite the efforts he had made to convince him to return. As he said, “I have many times advised him and beg him to come back to his working post,” but he had not been able to succeed, and Corsi prolonged his absence without giving any justification. He simply would not assume any responsibility for the abandonment of his post, even if some of his unattended tasks needed prompt attention. This, in the eyes of the plaintiff, witnesses and authorities demonstrated his detachment from the real world (and consequently, his insanity).

373 “[H]a cominciato a dar manifesti segni non solamente di essere incapace di attendere ai propri interessi in quella guisa che si pratica da ogni buon padre di famiglia, ma di più ancora di essere di una mente poco sana.” Ibid, July 1758. Note how the government officials repeat the terms used by the petitioner and witnesses.
374 “[H]a cominciato a dare manifesti segni di non essere di perfettissima mente, essendosi ridotto a star solo in sua casa”. Ibid.
375 Ibid.
376 He refused to give back the keys of the cupboards where money to be paid to third parties was kept, even after he was commanded to do so by legal force. His stubborn refusal was identified as another sign of insanity.
Serving as a clear example of the conflation between the passive and violent type of madness, or of the proximity of terms like *frenetico* and *debole di mente* (weak of mind), his behaviour was also depicted as extravagant and violent. Not only had he shut himself off in his villa with weapons with which he might eventually harm himself, but when he left the place, he carried his weapons with him. To demonstrate the potential hazard his wanderings posed for public life, one witness claimed he saw Corsi passing every day in front of his *bottega* (shop) “making a thousand gestures to the people” which showed that he was mad (*pazzo*). He had even once seen him approach and threaten to attack with his sword a soldier who was speaking with a barber, with no recognisable motive. The soldier had been on the verge of responding to the provocation with his sword, but his companion prevented him by saying that Corsi was a *pazzo* and so could not actually defend himself. The soldier, according to the witness, had later said that there was indeed no point of killing a madman. In the eyes of the witness and his two victims, Corsi’s provocation was nothing but the mad actions of an insane person, given its utter absurdity and plain disregard for the rules of civility.

The story of Antonio Corsi discloses particularly well the social notion of insanity, a culturally and historically grounded notion that made no use of medical or legal labels. He refused to work, insisted on isolating himself and engaging in street brawls, all actions that could not be rationally explained. The attitudes and behaviour described were considered as “manifest signs and demonstrations of his unsound state of mind”, in Italian, of his *mente poco sana*, the sister said. To the petition, the officials of the Pupilli concluded that Corsi had become “*frenetico e debole di mente*”. No medical testimony was added, and no further attempt was made to categorize Corsi’s insanity. Although his sister had petitioned for Corsi’s internment in a mental institution, this request was ignored by the Pupilli.

Corsi’s insanity was given away by the context that accompanied his actions, not by his bad temper or the act of threatening someone with his sword. The clue to his insanity rested on the fact that he did it with no apparent cause. Not because he was offended, nor even because he was drunk, but because he was passing by. Furthermore, although the magistrates later introduced the term *frenetico*, in the narratives of the witness we find no direct allusion


378 The interdiction of Antonio Corsi is rather exceptional for two reasons: it is one of the few cases where the petition was sent by the sister of the denounced, and it is the only case I have found where the petitioner requested for the confinement of the individual together with the interdiction.
to Corsi’s emotional state when he was about to attack the soldier, almost as if the
provocation had been accompanied by no classifiable emotion. What seems clear is that
Corsi’s provocation could not be placed on the map of conventional behaviours nor on the list
of acceptable emotional reactions. On the contrary, the story presents soundness of mind
through the rational and compassionate reactions of those who encountered the madman,
whose controlled reactions and well-governed passions served to demonstrate everything
Corsi was not.\textsuperscript{379}

\textit{Relational and Social Dimensions of Madness}

Interdiction procedures illuminate the cultural dimension of madness, shedding light
on how the understandings of madness were shaped in accordance with specific geographic
and cultural contexts. Madness was a social experience, in the sense that its effects surpassed
the boundaries of the family to involve the surrounding community.\textsuperscript{380} This context shaped
the evaluation families and government officials made of each individual mental disturbance.
Madness was obviously acknowledged as a condition suffered by an individual person, but it
was understood as an individual sickness that had important social consequences, so its
understanding was profoundly intertwined with how it affected others. The circumstances
surrounding the defendants played a crucial role, such as, marital status, whether they had
children or not, who they lived with or who took care of them. But, on top of that, behaviour
was assessed always considering its context, not in the abstract.

Whilst age was not a determinant in interdictions by reason of dementia, gender and
the position occupied by the defendant in the household order were. Madness was portrayed
by being inserted in specific contexts, for the way madness manifested and was codified
changed according to the defendant’s position in the family. Given that the breach of
behavioural norms was bound to each person’s expected roles, the three basic types we
examined in relation to prodigals are also at the core of the descriptions here. And so we have
the young bachelor, disobedient, defiant and riotous, the married man who resoundingly fails
to fulfil his basic duties as head of family, and the old man who fails to acknowledge that the
time has come to transfer his powers. The rule applies also to women, but probably to a
greater extent. Most of the women interdicted were widows (a condition almost mandatory in
order for them to be in a position to squander), and mostly of an advanced age. If they were

\textsuperscript{379} The connection between disturbed emotions and madness constitutes the central argument of Chapter 7.
\textsuperscript{380} Houston, \textit{Madness and Society}; Suzuki, \textit{Madness at Home}; Nootens, \textit{Fous, prodigues et ivrognes}. 

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spinsters, they were old spinsters, never young. In the case they were in their forties, they were widows. The accusations, in these cases, were related to their inadequacy with regards to their financial management, as if their access to patrimony was the outcome of some unfortunate circumstances that should have never occurred.\textsuperscript{381} The breach of social norms that constituted the essence of the codification of madness varied in accordance to expectations that were age and gender specific.

The petitioners’ identity is very much connected to the family position of the defendant, and the motives behind the petition. Most generally, petitions for interdiction on the grounds of straightforward madness (demenza) were sent by wives, mothers, brothers and sons. For instance, when they were married, the evidence suggests that the petition was made by the wife or the defendant’s brothers, depending on the relational circumstances that surrounded the family group. Interdictions were not only marked by the iniquities of a transmission system which privileged only the elder brother. It was most definitively an important part, but something else had to detonate the need of a wife or a brother to recur to public intervention. On some occasions we see that the male brothers conducted parallel litigation regarding the family inheritance in front of the court of the Magistrato Supremo, while contemporaneously or at a different time one of the brothers was interdicted by petition of a different family member.\textsuperscript{382} When the petitioners were women, they were supported by an uncle from either side of the family lines. In some cases the petition was made by a member of the marriage family, like a husband denouncing the disorders caused by his brother’s wife, or a concerned father whose daughter was married to a mentally disturbed man.\textsuperscript{383} An example of the effect the marriage family could have on the life of a mentally disturbed is shown in the case of Baldinotti examined at the beginning of this chapter, and also in the case examined below.

Giovan Battista Becciani from Mugello, married and father of four children, was interdicted by a petition of his close relatives (their precise blood relation was not recorded, but they were clearly from the Becciani line). The petitioners declared that both Giovan

\textsuperscript{381} This is particularly so when the petitioners were nephews or sons, who evidently saw these women as naturally incapable of mingling in financial affairs (in stark opposition to how the Tuscan administration positioned women). See Chapter 4.

\textsuperscript{382} This is the case of Lorenzo Baldinotti, whose brothers were involved in a lengthy litigation over their inheritance. Many of the families of the interdicted pursued litigation regarding patrimony in front of the Supremo. Given the enormous proportions of the records of the Supremo, I have not followed this line of inquiry, although it could be an interesting field to explore in the future.

\textsuperscript{383} See Table 1, “Distribution of interdiction petitioners according to family lines. 1688-1775”, in Chapter 1, section “Interdiction procedures as a family matter”.

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Battista and his wife were incapable of administering the patrimony, the former because he was *mentecatto*, the latter because she lacked the necessary economy. Furthermore, they claimed the actual problem was the wife, who “makes her family suffer greatly.” She was prone to splendour and excessive spending, and because the couple lived separately, she consumed her husband’s resources in socializing with other people, without leaving anything for her husband. Testimonies signed by trustworthy witnesses added that Becciani was incapable because he was *stolto* and *mentecatto*, and that his wife squandered and raised her children with no education. The report from Mugello confirmed that Becciani was “so imbecilic and of unsound mind” (*talmente imbecille, e poco sano di mente*) that nobody believed him capable of managing his affairs, because he completely lacked the necessary economy and prudence.384

The real argument of the petition was that Becciani needed to be assisted by a person who could really take care of his affairs. All the consulted parties agreed that it could not be his wife, for if she were to be designated administrator, she would most certainly squander the patrimony in direct detriment to her children. Therefore the interdiction petition aimed more to distance Becciani’s allegedly squandering wife from the patrimony than to deprive him of his rights of administration. The results of the argument are particularly interesting given that in a large majority of the cases interdictions were petitioned by women (although many times supported by their male kin), and they were generally the preferred administrators of their husband’s patrimonies.385 Not only was this not the case here but, furthermore, the squanderer was said to be the wife, not the defendant. She was not entitled the category of prodigality, but rather was considered as both the evidence of her husband’s mental impairment and the source for the sufferings of the whole family. As a result, rather than being an example of madness upside down, this case underpins the relational and social dimension of insanity.386

Financial mismanagement was not the only concern behind the disclosure of madness. Squandering and/or the risk of bankruptcy were only the starting points for much more nuanced conceptions that were evaluated against the daily performance of the defendant. The failure to control one’s wife was a major indicator of mental incapacity, as were the failure to perform as *pater familias* and to oversee the education of one’s children. As appears evident

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385 For a larger context on the role of women and their kin as petitioners, guardians and administrators of their children’s and husband’s patrimonies, see Calvi, *Il contratto morale*. See also Chapter 1, sección 1.3.
386 Women were generally not entitled the category of prodigality. On this, see Chapter 4.
here, mental incapacity was measured against behavioural norms that were embedded in cultural and religious precepts that had been at the core of the formation of the Tuscan society and that were reinforced by the post-Tridentine church.\footnote{The importance of a proper education and correct marital relations were part of the topics covered by the post-Tridentine efforts conducted by missionaries and preachers to introduce Catholic values into the family. See Elisa Novi Chavarria, “Ideologia e comportamenti familiari nei predicatori italiani fra Cinque e Settecento. Tematiche e modelli”, \textit{Rivista Storica Italiana} 100, no. 3 (1988), pp. 679-723.} Interdictions were thus a way to solve the disorders of the families that put the social order at risk. It is important to insist here that the wife’s disorder was not the fact that she was administrating her husband’s patrimony, but that she was making ill use of it, and probably, given the hints at her lavish social life, that she was being too lax and liberal with her relationships. It becomes clear, thus, how interdiction could be employed to put into order the disorder of the families, all commanded by the sacrosanct ideal of patrimonial preservation.

3. 6. Familial Circumstances Behind Interdiction Petitions

We have to take into account how families shaped the context of defendants’ mental incapacity to fully grasp why families resorted to interdiction at a given point. The familial circumstances surrounding each interdiction petition profoundly marked its disclosure. Something had to change or happen so that the family decided, first, to disclose mental affliction and, then, do it through an interdiction petition. This is even more clear if we bear in mind that a wider range of provisions to address the consequences of madness existed in the eighteenth century, which means that interdiction was not the only available option. While the other institutional or legal spaces where madness made an appearance are examined in the next chapter, we need to address here the problem of the circumstances that explain why families decided to resort to interdiction among the available measures. My suggestion is that interdiction procedures tackled two main issues: they addressed the problem of financial mismanagement at the same time they introduced a third party into the disturbing relational dramas generated by and because of madness. It is in the examination of this second aim where I see the most rewarding results.

The records of the Magistrato dei Pupilli unequivocally demonstrate that family conflicts were not only of private importance, but were held to have a direct impact on social life, thus entering into the sphere of public concern. The involvement of patrimony in the private conflicts that were exposed to the ears of the Pupilli officials only heightened this
transposition of the private into the public arena. Although the declared reason for petitioning for an interdiction is always related to dissipation, risk of bankruptcy and a family on the verge of financial ruin, interdiction procedures always disclose profound family conflicts that, for one reason or another, had exploded, making the interdiction peremptory. By means of this reading, the timing of interdiction petitions appear much more connected to the rhythms of family life than to changes in the mental condition of the defendant, as studies in the field have suggested.\textsuperscript{388} The contextual contingencies that we see operating in the election of one or other category of mental incapacity or in the preference for culturally meaningful descriptors to define it, also shed light on the process that led a family to resort to interdiction.

Among the declared reasons that moved families to request the interdiction, issues relating to patrimony administration assume a prominent role. This is almost self-evident given that protection of the family patrimony was the Magistrato dei Pupilli’s main purpose and was the primary reason behind interdiction procedures. Therefore, petitions commonly begun by declaring that the defendant, out of his or her madness, was dissipating the patrimony (stante la sua demenza, va dilapidando\textsuperscript{389}). As prodigals, those codified as dementi were also defined by their financial mismanagement, and were consequently described as squanderers. We know that, generally speaking, both dementi and prodigals were deemed mentally incapacitated because they had been proven to be unable to manage their affairs, take care of their family and perform their role as head of the family. In the case of women, they were perceived as incapable to ascribe to and respect the limits of their position as temporary property holders. But this apparent simplicity cannot distract us from the main question that needs all the same to be posed, which is what moved families to send a petition for interdiction?

There are two circumstances related to time surrounding interdiction procedures by reason of dementia that we need to take into account. One concerns the time frame between recognition and disclosure of the mental disturbance, the other concerns the rhythms of property transmission. Regarding the time frame, we do find mental afflictions of recent manifestation that were soon after exposed to the authorities. But, the majority of the interdictions (at least when considering those for which we have records of the petitions, supporting testimonies and authorities’ reports) relate to defendants who were said to have always been mentally disturbed, or in which the more-or-less defined origin of the

\textsuperscript{388} Houston, \textit{Madness and Society} or Suzuki, \textit{Madness at Home}.

\textsuperscript{389} ASF, MPAP, \textit{Memoriali}, F. 2303, no. 50, August 1752, interdiction of Orazio Penci.
derangement is said to have occurred many years before the petition was made. A similar situation is observed regarding property holding. We have cases involving recent property holders, and cases relating to long-term property holders (not only the elderly), suggesting that coming into one’s inheritance was not the only factor, nor the most decisive one, to explain a recourse to interdiction. The records thus suggest that the timing of the interdiction petition does not necessarily coincide with either the first recognized manifestation of mental disturbance nor with transmission of property.

Squandering by itself is an equally unsatisfactory factor for explaining why families resorted to interdiction procedures at a given point. Squandering is generally presented by interdiction narratives as a behavioural tendency that had long been a constituent part of the defendant’s personality. It is true that in many cases the dissipation is said to have reached a point of severe bankruptcy risk, and more than once it was said that someone had petitioned for an interdiction just to avoid paying his debts. There is no point in denying that interdictions were a real economic measure to manage overgrowing debts. However, I believe that we should take the squandering only as a window into more hidden factors, related to patrimony and financial behaviour, but not reduced to them. For, the family conflicts disclosed by interdiction petitions were precisely codified behind conflicting perspectives regarding economic behaviour.

In some cases we can find clear triggers for the interdiction. Like a 65 year old whose foolishness and stubbornness had ultimately exploded, because he had been incarcerated, his assets impounded, and his patrimony at risk of total ruin. To the economic and social consequences of having this type of relative in the family, we have to add the age variable, because when they were old, their increasing insanity and their shattering bodies made it compulsory to intervene.

Other reasons moving a family to petition for interdiction were related to changes in the family group which affected the distribution of power in the family. In fact, interdiction could be conditioned by a recent inheritance, whether because the defendant had come of age, or because the death of a relative had given him access to the family’s patrimony. But in these

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390 In the case of young prodigals, particularly those interdicted shortly after (or even just before) they came of age, inheritance evidently detonated the need to request the interdiction, although in these cases the behavioural disorder had been present long before the changeover of the property holders.

391 See, for example, the interdiction of Gaetano Cantagalli. ASF, MPAP, Memoriali, F. 2301, no. 54, July 1739 and no. 84, March 1740.

392 See the interdiction of the 65-year-old Cosimo Cambellotti, ASF, MPAP, Memoriali, F. 2307, no. 147, June 1768.
cases, it was not rare for their fathers to have left a special clause in their wills to prevent their mentally afflicted sons from assuming the administration of the family assets. Additionally, they could have been under the care of a curator who had recently died. The interdiction could also be part of a testamentary disposition. For instance, a man who had always taken care of a feeble-minded brother left the testamentary provision for his wife to assume the guardianship of the demente. However, the actual reasons behind the decision of a family to petition for interdiction are generally masked. This is particularly the case when the allegedly mentally incapacitated is said to have always been mad. In interdiction procedures that were not contested, and that appear only once, we never get to know what had prompted the petition. But in many other cases we do get a glimpse into what could have happened.

The most recurrent phrase indicating the motives behind interdiction petitions relates to the plead for the authorities to intervene as soon as possible in order to “oppose”, “impede” or “repair” the disorders caused by deviant behaviour (per ovviare, per riparare, per provvedere, per impedire ulteriori disordini). Mentally disturbed individuals were generally depicted as troublesome and ungovernable members of the family who refused to obey the commands stated by social norms. Economic mismanagement appeared thus as a pretext through which resolution to aggravated family conflicts could be channelled. At the backstage of interdiction petitions we are always confronted with changes in the balance of relationships within the family.

Interdiction functioned as an alternative to resolving family conflicts and restoring family order. One individual refused to recognize the authority of his firstborn brother (pretende essere esso il padrone di tutto, e di comandare esso), acting as a furious man, and pretending to be the padrone. Another, out of his decrepitude and weakness of mind, was unable to properly govern his sons. Or we have the case of Giuliano Damiani, who petitioned because he had the misfortune, as he said, of having a brother who was not sui compos, defective in his hearing, speaking and brain (imperfetto nella lingua, nell’udito, e nel cervello). The actual problem was that his mentally disturbed brother recognized authority in no one but himself, and was so domineering that neither servant nor labourers were willing to work under his command. He would even threaten to kill the entire household, his 78-year-old brother.

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393 See the interdiction of Gio. Francesco Miniati, ASF, MPAP, Memoriali, F. 2307, no. 75, July 1767. This is in fact the only case that to my knowledge was petitioned by a sister-in-law.
394 Interdiction of Gaetano Damiani, ASF, MPAP, Memoriali, F. 2303, no. 62, December 1752.
395 Interdiction of the 84-year-old Filippo Gori, ASF, MPAP, Memoriali, F. 2304, no. 114, July 1757.
old mother and equally old uncle included, forcing the latter to flee from the house to save himself. His well-known “extravagances” made him worthy of the public label of pazzo, which seriously affected the economic prospects of the family because nobody would dare to make contracts with him. Nobody could control him, and with his improper and distorted ideas he turned his household upside-down, as the Pupilli was informed by the Podestà of Peccioli. As other cases show, Damiani’s family had resorted to all kinds of mechanisms to control him before turning to the Pupilli, and when they finally did, it was acknowledged to them that they could not continue suffering his frenzies (a word used by the Podestà of Peccioli, not by the petitioner).

The interdiction petition was in these cases the way out of the explosion of a family conflict, one that was not anymore caused by the death of a household member, but because of a change in the alliances between the members. They can be read, in this sense, as part of the renewed familial conflicts that during the eighteenth century demonstrated that second-born sons (cadetti) and women from the aristocracy were profoundly discontented with the traditional hierarchies of the patriarchal family. These conflicts, which according to Lombardi can be observed in litigations that placed the problem of unequal marriages at the centre of the conflict with increasing frequency, constitute but a different side of the same problem that we see reflected here. Intergenerational conflicts, and conflicts between siblings were also vented through interdiction procedures. Fathers who refused to hand over their position to their elder sons, brothers who disputed the management of the family patrimony, but who also disputed the possibilities of cadetti and women to decide on their marriages and life courses.

In fact, the interdicted usually argued in their defence that the petition had been originated as a plot against them, a product of new alliances among family members. This could explain why family members at some point in the life of a person deemed mentally afflicted “since always”, had decided to petition for an interdiction. To what extent interdiction procedures were employed as a mechanism to resolve family conflicts is best demonstrated in the reasons given by authorities to revoke interdictions, or not to grant them. The decision to turn to the authorities for their intervention did not, in fact, necessarily result as the petitioners intended. Interdiction procedures were an arena open for negotiation, and

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396 ASF, MPAP, Memoriali, F. 2303, no. 62, December 1752. Interestingly enough, he was only interdicted, and not sent to one of the Pazzerie.
397 Lombardi, Matrimonio di antico regime, pp. 386-391.
authorities often assumed the voice of the weak members of the family. For instance, Michele Fabbroni, 86 years old, was considered by the authorities as still capable of managing his affairs. In fact, the magistrates sided with the defendant’s version, who had depicted a violent familial environment that had forced him to flee from the residence he shared with his sons, who had even dared beat him while he slept.398

Contrary to what could be expected, interdictions were not only revoked once the defendants could prove they had regained their mental faculties or had emerged from derangement. In fact, most times this was very hard to prove, except for the cases in which the disorder had been framed as episodic. As interdiction procedures were much more about the relational dimension of mental incapacity than about the precise characteristics of the alleged mental disorder, petitions for the revocation of interdiction usually centred around the defendant’s change in attitude with regards to their financial behaviour and in relation to the way in which they related to the rest of their family members.

The elderly, for instance, could see their administration rights restored even when they had been legally declared to have helplessly lost their mental faculties. Occasionally, in fact, they were able to revert the interdiction, managing to prove their soundness of mind, or their actually being “of a healthy body and awakened mind,”399 but usually this was combined with allusions to the existence of a family conflict that had originally moved the plaintiff, most commonly their elder son, to petition for the interdiction as a disempowerment weapon. If they could prove that the family disorder had been resolved, the Pupilli officials would generally not refuse their petition.

**Familiarity with the Procedure**

The more problematic a mental affliction was for a family the more colourful the narratives get, with descriptions that delve into the extravagant actions of the alleged mad, inserting them in the specific relational dimensions that characterize each family. It is probably in the accounts describing the troublesome and more disruptive behaviours where we can find more insights into the experience and perception of mental disturbance. Insanity was deemed as a complete disruption of the family, a force capable of making everything topsy-turvy. Furthermore, insanity many times constituted a recurrent presence in the family

398 ASF, MS, Suppliche, F. 1209, January 1762, fols. 78-79.
399 See the revocation after only a few days of the interdiction of the 85-year-old Gaspero Pratesi. ASF, MPAP, Memoriali, F. 2306, no. 284, August 1766.
history, which generally resulted in the family members being more aware of the depths of interdiction procedures, knowing precisely what to say and how to say it. Women appear here as the most active agents, empowered by the position the Pupilli had for centuries ascribed to them, and managing the strings of familial life.

According to Elisabetta Montanti, her son Anton Gaetano Diacceti seriously threatened the family patrimony with his misbehaviour, “disquieting the entire household” with his unsound mind. Suggesting that she had sought help before, she explained in her petition that it was already known to the Pupilli that Diacceti was of weak mind and uneasy spirit (debolezza di mente ed inquieto spirito). Moreover, his father had also been interdicted as demente, as Anton Gaetano would be after his mother’s request. The petition was backed up by testimonies that described Diacceti’s irrational and extravagant behaviour, in his open defiance to social hierarchies and to the basic norms of conduct. His private behaviour affected the whole neighbourhood, meeting the common imaginary of the scandalous madman.

We find in this case the usual flexibility of terms. His mother spoke of his uneasy spirit and his weakness of mind, while testimonies defined him as scemo di cervello, and without judgment (senza giudizio). Testimonies also said he unsettled and prevented his neighbours from sleeping, making annoying noises with his continual wanderings, his rattling of doors and other “impertinences.” Recognizing no authority but himself, he slept most of the day, and acted extravagantly at night. He had been banished from a neighbourhood for his annoying habits, and was in desperate need, according to the testimonies, to be placed under the authority of somebody who would control him. As we saw in the case of prodigality, irrationality was recognized in men who were not able to abide by the rules set by social hierarchies, which was aggravated in those cases, such as the present one, where there was no paternal authority to contain and direct them. Diacceti needed, the testimonies said, to have somebody who would make him feel intimidated, because only in that case he would stop harassing and mistreating his parents.

From the Magistracy’s report we know that mother and son had been in conflicting positions since Anton Gaetano had come of age, when his desire to be appointed administrator of his father’s patrimony, which was under the guardianship of Elisabetta

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400 Petition of Elisabetta Montanti, ASF, MPAP, Memoriali, F. 2304, no. 32, June 1756.
401 “…teneva inquieto il vicinato, con far del remore, di notte con far del fracasso con le secchie, scuotere usci, e molti altre impertinenze…” Ibid, Testimony of Jacopo Luccioli, June 1756.
Montanti, made him take all kinds of actions against her (initiating legal actions against her, accusing her of squandering the Diacceti patrimony, among others). The officials of the Pupilli stated the necessity to provide protection for the “anguished” mother against her son’s harassments so as to prevent any further vexation.\(^{402}\)

The case of Diacceti shows a woman, Elisabetta Montanti, who had learned to deal with madness years before, at least since her husband’s interdiction in 1718 (that is, 38 years earlier).\(^{403}\) The fact that she was appointed legal guardian of her husband, and administered the patrimony ever since means that she had long ago learned to move through the legal mechanisms offered by the Magistrato dei Pupilli. She managed to control her son because she knew how to legally argue the case. Although Diacceti tried to reverse the interdiction sentence, the officials of the Pupilli, with the consent of the Magistrato Supremo, sided with the mother, ruling in her favour.\(^{404}\) Never during the suit was it necessary for the Pupilli to rely on a medical opinion to assess Anton Gaetano’s mental disturbance.

Repeated contact with the legal structure resulted in a clear sophistication of the arguments, strategies and vocabularies employed by petitioners. Not only do we find cases of people subjected to episodic madness alternating with lucid intervals that allowed them to periodically come out of curatorship, but we also encounter mental disorders transmitted from generation to generation. It is not rare to find cases of fathers interdicted after a petition of a son, or daughters who were, in their turn and many years later, also interdicted. The same occurs with husbands, wives and marriage kin, which not only suggests that interdiction was a legal measure known and conveniently used by the privileged groups in Tuscany, but also explains the circulation and evolution of the language of madness we find in interdiction procedures throughout the century.\(^{405}\) Cyclic disorder frequently derived also in various

\(^{402}\) Ibid.

\(^{403}\) ASF, MPAP, *Campione di Deliberazioni e Partiti*, F. 112, fol. 51v.

\(^{404}\) For Anton Gaetano Diacceti’s petition to reverse the interdiction sentence, see ASF, MPAP, *Memoriali*, F. 2304, no. 42, July 1756.

\(^{405}\) See, for instance, the cases related to the Vinattieri family: Giovan Battista Vinattieri was interdicted four times between 1733 and 1764; in 1751 his sister interdicted her husband. In this case, although Vinattieri himself was a doctor, there is no medical category, and his condition evolved from prodigality, passing through apoplexy, extravagance and decrepitude, to end in mental alienation caused by drunkenness. In one of the many petitions he sent to ask the interdiction to be lifted, he included a medical testimony asserting he was a “uomo di buona mente, e di buoni costumi...” ASF, MPAP, *Memoriali*, F. 2305, no. 55, March 1760. The interdictions can be found in Ibid., F. 2300, no. 425, September 1733; F. 2301, no. 99, October 1740; F. 2302, no. 287, September 1751; F. 2304, no. 156, February 1758 and F. 2306, no 76, February 1764. There is also the case of Pier Francesco Panfi interdicted in may 1732 after a petition aducing that in his advanced age, he was absentminded, sent by his daughter Maria Maddalena Panfi with the support of her husband. In 1743, Maria Maddalena Panfi was herself interdicted when her two sons and their guardians said she suffered from epilepsy.
periods spent in Santa Dorotea, or Santa Maria Nuova. As a result, these cases usually involve a family group well acquainted with what it meant to be mad, how it was argued in court or in medical environments, and what were the available provisions to cope with its consequences. This is why we need to follow the itineraries of madness to fully grasp the shaping of understandings of madness and the circulation of its languages.

3. 7. Conclusion

This chapter has showed that the language of mental incapacity developed in the eighteenth-century records of the Magistrato dei Pupilli was a cultural translation of the juridical language that had been used in civil trials for centuries. Legal knowledge had been appropriated, matured, and reformulated, incorporating the new concerns of the eighteenth century. Rather than proving the medicalization of madness, the interdiction procedures of eighteenth-century Tuscany thus speak of a socialization of madness.

Overall, categories of mental incapacity did not change in relation to the previous centuries, except for a categorical preference for the term demente, which came to encompass all the other categories of mental incapacity except for prodigality. From the mid eighteenth century onwards, the differentiation between prodigality and dementia becomes increasingly clear. As the century advances, fewer cases of prodigality are conflated with dementia, and the narratives to define and exemplify the latter introduce a greater variety of descriptors.

The openness and vagueness of legal categories enabled petitioners and witnesses to focus their descriptions on the behaviour of the defendant by recurring to their own terminology, giving space for a cultural negotiation over the indicators of insanity, and the possible mechanisms to minimize its private and social consequences. The increasing visibility madness acquired throughout the century appears thus correlated by the social appropriation of increasingly nuanced understandings of madness, nourishing from the circulating notions provided by the different languages (legal, medical, religious, political) that contributed to define the meanings of madness in the different institutional spaces where it could be disclosed, as later chapter will show.

which left her with “offuscazione di mente, e priva di memoria.” See ASF, MPAP, Memoriali, F. 2300, no. 380, May 1732 and Ibid., F. 2301, no. 201, September 1743, respectively. For cases of mental disturbance transmitted across generations, see the interdiction of Lorenzo Baldinotti and his son Antonio Baldinotti, examined in section 1 of this chapter, and also in Chapter 5 at various points; also, the interdiction of Gio Batta Becciani and his son Antonio Becciani, examined in Chapter 7, section 2.
The eighteenth-century notion of madness had broadened to contain daily, private perceptions of mental afflictions, encompassing personal experiences, social meanings and relational dimensions. The understandings of mental incapacity appear thus inseparable from the experience of the family, demonstrating the extent to which the perception and codification of madness was as much personal as it was contextual and relational. For this reason, while interdiction procedures prove to be scarce in providing medical categories, they are, nevertheless, generous in the information they give about the family. Through them, and with the excuse of describing a mentally-disturbed relative, the narratives ultimately define the Tuscan families in all their complexity. Through the interdiction procedures we witness a family structure that escapes the rigid patriarchal model, presenting interconnected relations between maternal and paternal kin, shared and negotiated responsibilities, conflicting personalities with conflicting agencies; all placed on the legal arena of the Magistrato dei Pupilli seeking public arbitration. Furthermore, as later chapters will show, the way out of the disorder produced by mental incapacity, which was predominantly male in Tuscany, was the appointment of women as interim heads of family. The cure for the social consequences of madness was, thus, not only to secure the patrimony from the madman’s financial mismanagement, but ultimately, to place him under the custody of women.
Chapter 4. Women in the Understandings of Madness

Female insanity constitutes a difficult field to study in eighteenth-century Tuscany, since in all the institutional spaces where madness made an appearance in the early modern world, female insanity has a limited presence. Given the Tuscan patriarchal system of inheritance and property possession, interdiction procedures were, by default, a legal mechanism destined to control the consequences of male mental deviance. Similarly, as I will show in the next chapter, mental institutions and criminal records are equally unforthcoming on the perceptions and experiences of female mental disorders. Historians have in fact recently pointed to this absence, which strongly contradicts the traditional vision first developed by some scholars regarding the feminization of madness during the eighteenth century. The fact that women are under-represented in the eighteenth-century records of madness has led Houston to assert that female confinement constitutes a myth, particularly the idea that “men used asylums to get rid of unwanted wives.”\textsuperscript{406}

This chapter deals with female insanity, with the aim of elaborating what female madness meant to according to Tuscan families of the eighteenth century. The fact that female insanity is predominantly silenced in the records only makes the subject difficult to investigate, but it should not lead us to assume that this absence means that women’s madness was not identified, or that women were not thought to suffer from mental disturbances. Taking into account that the disclosure of madness was contingent upon factors often external to the manifestation of mental disturbance,\textsuperscript{407} it is clear that how many women were recorded as mad and how female madness was perceived are two different things. On the other hand, the fact that Tuscan society recorded male madness with such an overwhelming predominance when compared with its female counterpart is in itself a clear sign of the gendered categorization of madness in early modern culture.

The ways in which madness made its appearance in eighteenth-century Tuscany suggest at least two things in this regard: firstly, that the concerns generated by madness were predominantly related to the consequences of male mental disturbance; and, secondly, that female insanity continued to be largely concealed in the domestic sphere or codified under a


\textsuperscript{407}Houston, Madness and Society, p. 92. The notion of the “contingencies” that marked the appearance of madness in the records was largely examined in Chapter 3.
different key (i.e. unruliness). So long as the codification of madness in Tuscan society was profoundly intermingled with property and financial behaviour, it constituted an affliction which predominantly attacked men. Furthermore, precisely because women were by nature and law shielded from its effects, they were positioned as the interim heads of family and entrusted with the responsibility of reintroducing the lost rationality to the household.

The virtual absence of female insanity in the records is partly amended when we turn to medical records. One of the most successful medical genres of the century, the Consulti Medici, recorded abundant cases of women suffering from the female mental affliction of the century, hysteria.\(^4^0^8\) Men also suffered in at least an equal proportion from other nervous or mental afflictions according to the contemporary medical language, but the frequency with which patients (or medical practitioners acting in their name) consulted on the mental afflictions of women is evidently at odds with their rare appearance at inquiries into mental capacity. Similarly, the examination of the admission records of Santa Dorotea, the Tuscan mental hospital, suggests that women were increasingly being confined during the eighteenth century. If between 1647 and 1749 women represented a minority of the patients admitted to the hospital, the numbers tended to even out during the second half of the century.\(^4^0^9\)

However, the aforementioned female visibility in Santa Dorotea Hospital from the second half of the eighteenth century is not necessarily representative, particularly when we take into account that only the raving mad (pazzi furiosi) were admitted to the institution. This means, as explained in the previous chapters, that only those men and women considered a serious danger either to themselves or to society were deemed liable for committal. Therefore, the type of insanity that emerges from the Santa Dorotea records is the violent type, which in women was portrayed particularly in terms of suicidal tendencies, furious fits against their relatives and offspring, or dishonesty and sexually-charged wandering through the streets.

Nonetheless, raving madness (the pazzo furioso, or the maniaco) was not the only kind of insanity eighteenth-century families had to deal with, nor was it the only category that can be found in social language denoting mental disturbance. Given that only a minority of those regarded as insane were confined, the records of Santa Dorotea should be taken as the uncommon side of madness. For this reason, even if restricted to the wealthy classes and

\(^4^0^8\) The success of this medical literature belongs to what historians call the popularization of medicine. Roy Porter (ed.), *The Popularization of medicine, 1650-1850* (London, New York: Routledge, 1992). Some of the contents of these medical consultations by letter are examined in Chapters 6 and 7.

\(^4^0^9\) Roscioni, *Il governo della follia*. See Chapter 5 for the admissions procedure and a brief insight into the history of Santa Dorotea.
unrepresentative in terms of gender, interdictions open the spectrum towards the more common side of insanity, the one that was largely at home. Interdiction procedures, and the legal space provided by the Magistrato dei Pupilli are a useful entry point into the social language of madness outside the walls of mental institutions, as we saw in the previous chapters, even if they focus predominantly on male mental incapacity. First and foremost because they do shed light on female insanity by their contrast, and because they position women in the role traditionally ascribed to men.

4. 1. Madness and Gender

Michael MacDonald’s Mystical Bedlam opened the analysis towards gender differences in the history of madness, for Napier’s casebook recorded more women than men as suffering from insanity, sadness or anxiety. Nonetheless, MacDonald was reticent in concluding that psychological disturbances were seen as a special characteristic of female suffering, preferring explanations such as that women had the habit of consulting physicians, or that psychological distress made women more vulnerable than men. MacDonald stressed that “both in its stereotypes of insanity and in the institutions that certified people as mad, Tudor and Stuart society was more concerned about men who fell insane than women.”

Although women were regarded as mental weaklings and as the passionate sex, a particular connection between women and madness was not made, MacDonald emphasized. “Despite the general conviction that women were especially prone to turbulent emotions, most medical writers paid surprisingly little attention to their mental maladies.” However, he did recognize that gender stereotypes influenced the identification of the symptoms of mental diseases. Symptoms of mental disturbances were built upon “culturally” expected behaviours that tended to see men as active, angry and violent, while women were seen as passive, sad and vulnerable.

In contrast, Elaine Showalter, in an influential study published in 1987, claimed that madness towards the end of the eighteenth century had come to be seen as “one of the wrongs

410 MacDonald, Mystical Bedlam, p. 38.
412 Ibid., p. 268. MacDonald argued that “the weakness of women’s reason and the power of their passions should have made them more vulnerable to severe insanity. And yet descriptions of madness and frenzy in sixteenth and seventeenth century medical books always refer to the typical patient as male”, p. 269.
of woman,” holding an “essential feminine nature unveiling itself before scientific male rationality.” Drawing, for instance, on MacDonald’s study of the records of Richard Napier, Showalter considered it to be an indisputable fact that woman outnumbered men among the mentally ill before the Victorian era, although she established that the process by which madness became a “female malady” was only completed during the nineteenth century. Since the appearance of Showalter’s study, feminist researchers have been searching for the origins of the construction of madness as a feminine disturbance. The most important issue under examination is if the feminization identified by Showalter at the end of the eighteenth century can be transferred to the previous centuries. This quest has produced studies on the gendered meanings of lovesickness, the political uses of female melancholy and the feminine origins of depression.

Interdiction procedures to some extent call into question the assessment made by some historians regarding the process of the “feminization” of madness between the eighteenth and nineteenth centuries. Ingram and Faubert, for instance, have claimed that madness was regarded as a condition that enhanced feminine characteristics. Madmen, from this point of view, were thought to have lost their masculine attributes, falling into a feminization of their character, being sensibilized by emotions, and weakened by their passions. In eighteenth-century Tuscany, interdiction procedures were indeed used by the families to control the damage caused by men who were acting against the basic paradigms of their masculinity. They failed to act with rationality, economy and propriety, manifesting their total incapacity to control themselves.

However, I would advocate caution when ascribing this to a process of the feminization of insanity. On the one hand, the evidence suggests that passions and

415 See particularly Showalter, The Female Malady and Kromm, “The feminization of Madness”.
recklessness were not considered by Tuscan families as exclusively feminine characteristics, and men falling into mental incapacity were not labelled as effeminate. To be overwhelmed by one’s passions was identified as a symptom of both male and female mental disturbance, as later chapters will show, and this was not thought to affect their masculinity or femininity. The overwhelming number of men interdicted during the eighteenth century who were described as manifesting a wide range of emotional disturbances suggests that emotional suffering was not considered an exclusive prerogative of women.417

Furthermore, madness was certainly not limited only to passionate behaviour, and female insanity was not necessarily thought to be an exacerbation of feminine characteristics. Emotional disturbances, and mental afflictions in general were believed to seriously hamper a person’s daily performance and, in this sense, they prevented them from fulfilling their gendered duties. Both men and women, when deemed insane, were thought to be a distorted image of their genders, but in my view they were not considered to have lost their gendered qualities in the process. Likewise, neither did it imply an interchange of gender qualities either, nor the exacerbation of only one of them.

The particular context illuminated by the Magistrato dei Pupilli serves to challenge the conception of insanity as naturally female. It is telling, for example, that women were placed in a “masculine” position when appointed administrators of their “irrational” husband’s or son’s patrimonies. If women were indeed deemed as naturally insane or tending naturally to madness, why put them in this evidently “rational” position? Based on these arguments, I suggest that insane women are absent from the records not because their insanity was deemed natural and constitutional in such a way that it simply did not require that any external measures be taken to deal with it. Rather, their mental afflictions were less recorded because it was easier to control and hide them through different methods (monasteries, for one), and, especially, because their madness did not disturb family life as male madness did. For this reason, I believe that we must take into account how, and when, female madness appears in the records.

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417 For the role played by emotions in the shaping of new understandings of madness, see Chapter 7.
4. 2. Women and Interdictions

Despite the Tuscan patriarchal inheritance system, women were also interdicted and submitted to the Magistrato dei Pupilli. Nonetheless, as one might suppose, female cases were rare. Between 1700 and 1775, I found only 28 female interdictions, which, when compared to the 599 male interdictions issued in the period, is certainly a reduced number. However, even if they are rare, they are of value in exploring some of the meanings ascribed to female mental incapacity.

We know that the primary purpose of interdictions was to respond to the dangers of economic mismanagement caused by mental incapacity, regardless of the defendant’s gender. Consequently, we can assert that women were interdicted because they were deemed to be mismanaging their patrimony. Nonetheless, behind this primary reason we find different typologies codified behind the notion of economic mismanagement, connected to the reasons that motivated the petitioners to request the interdiction. As was the case with men, women appear in the records when, for some reason, the family order and stability had been disturbed. This imbalance could be produced by shifts in the distribution of family powers, like the death of a member, the marriage of another, or a change in the alliance between another two. This could produce shifts in the ownership of the patrimony, or change the living situation of the household. But, we must keep in mind that the model examined regarding men also applies here: the decision to interdict a family member was not directly conditioned by the shifts in property ownership. In other words, women were not interdicted only because they had recently inherited.

Madness is known to us because something had changed, a change that does not necessarily coincide with the first manifestation of the mental disturbance recorded. As we have seen, people could be interdicted, or confined, after having been mad for years. Families turned to the authorities for help when the behaviour of the alleged insane had reached a turning point, whether because of this change in the balance of the family, or because the derangement in itself had become aggravated, placing the family at risk. In the particular case of women, their mental derangement appears when some external factor had placed them outside the range of masculine authority: the death of their father, the refusal to marry, the abandonment of their husband, widowhood.

Consequently, female mental incapacity also appears as tightly connected to the female lifecycle. Scholars have pointed out the extent to which cultural values shaped the calendars of women’s life cycle, superposing and complementing biological markers such as
menopause. Furthermore, the cultural concerns over specific stages of a woman’s life were strongly connected to their role and position in the family: daughter, wife, mother, widow.\textsuperscript{418} For the same reason, the stages of a woman’s life were usually represented according to men, contingent upon their relation to these men. Accordingly, descriptions of women interdicted and submitted to the authority of the Pupilli changed according to their position within the family and their age. They were never young, although in some cases we know they must have been under the age of fifty (given that they are said to have small children).\textsuperscript{419} But, in most cases they are defined as of an advanced age and, furthermore, as widows or spinsters of an advanced age. Closely related to the women’s position in the family and their ages, petitions were made by their sons, their marriage kin, or whoever had inheritance rights over the patrimony they were thought to be mismanaging.

\textit{Female Dementia: the Consequences of Old Age}

The first important characteristic of the female interdiction procedure is that prodigality is an almost absent category, and that most cases were decreed either on the grounds of dementia, or without recording the category. We find cases when the interdicted woman was openly defined as “deprived of capacity and intellect,”\textsuperscript{420} “mentecatta” (foolish),\textsuperscript{421} suffering a “defect of memory”,\textsuperscript{422} incapacitated by her “imbecility of mind and little cognition”\textsuperscript{423} or directly said to be demented, with no further information.\textsuperscript{424} Within the


\textsuperscript{419} It is generally agreed that old age in women was thought to start relatively earlier than in men, at around the age of 50. See Heide Wunder, \textit{He is the sun, she is the moon. Women in Early Modern Germany} (Cambridge, Mass.: Harvard University Press, 1998), p. 32, and the literature in the previous note.

\textsuperscript{420} Interdiction of Anna Maria Speziali and her son Michele Mercati, both deemed demented. They were said to have no light and cognition of their actions. ASF, MPAP, \textit{Memoriali}, F. 2303, no. 133, July 1753.

\textsuperscript{421} Interdiction of Maria Lucrezia Porcellini, said to be “mentecatta” and “demente”. The plaintiff was her sister, worried for their shared patrimony, which they had recently inherited. ASF, MPAP, \textit{Memoriali}, F. 2301, no. 157, July 1742.

\textsuperscript{422} Interdiction of Maria Maddalena Bianchi, petitioned by her sister and niece. ASF, MPAP, \textit{Memoriali}, F. 2300, no. 559, August 1737.

\textsuperscript{423} Interdiction of Ester Levi Valle, ASF, MPAP, \textit{Memoriali}, F. 2302, no. 200, August 1750. The interdiction was petitioned by her brother.
category of dementia, we also have women who were said to have suffered from apoplectic or epileptic fits that rendered them of unsound mind. But, what did demenza amount to with regard to women? Did gender make a difference?

Margherita Bellini was interdicted on account of her dementia after a petition sent by her sister in August 1757.\textsuperscript{425} Although we know she had been committed to Santa Dorotea Hospital on her brother’s request in 1751, no reference was made to her committal. A comparison between both petitions sheds light on the extent to which the woman’s situation in the family, and the aims motivating the petitioners to resort to a public intervention marked the vocabulary employed. In the confinement petition, Margherita’s brother explained that she was an unmarried woman of 62 years of age who for 16 years had been “severely injured in the mind with frequent maniacal insults, and her illness has turned increasingly worse, with furious fits, which are of [the kind of] strangling herself, throwing herself into the well or out of a window, escaping or similar things.”\textsuperscript{426} By then she was living with her brother, and his petition in fact resulted from his unwillingness or inability to continue taking care of the perturbed Margherita. In contrast, the interdiction petition sent six years later by her sister made no allusion either to her situation at Santa Dorotea, nor to her maniacal insults and furious fits. The vocabulary used was so plain that it was strictly limited to the most elementary requirements. It declared that Margherita was “demented” and, as such, “incapable of managing and administrating her things.”\textsuperscript{427} The interdiction petition made by the sister was prompted by her particular concern over the patrimony they both shared.

In a similar manner, the 55-year-old Maria Maddalena Scardigli was interdicted after a petition sent by her cognate nephews, who declared that their spinster aunt possessed a small house (casetta) from which “out of her dementia and madness [she] had dissipated all the furniture it had” because she could not manage her affairs.\textsuperscript{428} She could not earn her living, they added, and had reduced herself to poverty. The testimonies provided to support the

\textsuperscript{424} Interdiction of Deifila Neri widow of Landini, demente. ASF, MPAP, Memoriali, F. 2307, no. 145, June 1768; or the interdiction of Lodovica Gherardi, 49 years old, demented. ASF, MPAP, Memoriali, F. 2301, no. 108, December 1740.

\textsuperscript{425} ASF, MPAP, Memoriali, F. 2304, no. 131, August 1757.

\textsuperscript{426} “…da 16 anni in qua è gravemente offesa di mente con frequenti insulti manici ed aggravandosi sempre più la medesima nella malattia con furiosi trasposti, quali sono di strozzarsi, di gettarsi nel pozzo, e dalle finestre, di scappare, e cose simili.”ASF, SD, Motupropri, Rescritti..., F. 1, no. 6, December 1751.

\textsuperscript{427} ASF, MPAP, Memoriali, F. 2304, no. 131, August 1757. She supported her petition with a lay testimony.

\textsuperscript{428} ASF, MPAP, Memoriali, F. 2302, no. 129, July 1749.
nephews’ petition confirmed the woman’s lack of reasoning faculties and madness, stressing the fact that she was alone, and as such, was in desperate need of protection and help.

This last issue connects us with the usually hidden destinies of women suffering from mental disorders in the early modern period. It can be said that we know of her madness precisely because she lacked family networks to take care of her, as in the situation of Margherita Bellini examined above. Only that in this case the petitioners sought to prevent Maria Maddalena Scardigli from completely dissipating what was left of her resources, so that they could continue to provide for her living. In other words, the nephews sought to avoid the case of being legally forced to maintain her, as would probably happen in the eventuality that she “succeeded” in ruining herself.

Both these women had reached old age, a change in the life cycle entailing new social consequences. Furthermore, contrary to what can be observed in the case of old men, women denounced for mental incapacity were generally singled out as defenceless and in need of protection. In fact, the records of the Pupilli show many cases of women alone, whether spinsters or widows with no resources to maintain themselves, requesting protection from the Magistracy. The standard procedure was to legally force their kinsmen (marriage kinsmen in case they had been married and had produced offspring) to provide for their needs.

Thus we are confronted with the issue of how and when cases of female insanity were made known, which in turn shaped the way the mental disorder was portrayed. In fact, old age accounts for the majority of interdicted women, combined with the death of a relative, the need to provide care for them or familial controversies over their inheritance. And so the fact that they were old, usually alone or with grown-up children, marked profoundly the narratives of female mental incapacity.

Old age, as we saw in the previous chapters, was thought to compromise a person’s mental faculties, producing a progressive mental decay that ultimately rendered them “completely incapable of being able to discern between useful things and harmful things.”

The consequences ascribed to female old age present an important difference. While in the case of elderly men the inheritance line was predetermined, in the case of women it could go where she decided. Consequently, in interdiction requests involving old women we can observe a recurring concern for the future of their inheritance. Maria Cassandra Langieri, for

429 Groppi, Il welfare prima del welfare.
430 “età assai avanzata, e di mente non sana, e di tutto incapace a potere discernere le cose utili dalle dannose.” Interdiction of Anna Maria Farsi widow of Frangioni, of “advanced age”. ASF, MPAP, Memoriali, F. 2301, no. 26, October 1738.
example was interdicted in July 1748 when she was in her 80s, because, according to “some relatives”, in her advanced age she had given signs that she was not able to manage her affairs and, furthermore, that she could be the victim of insidious comments regarding how she would dispose of her patrimony. In other words, the ultimate reason of the petitioners was to prevent her from making any undesirable transfers of property or making a testament contrary to their interests.\footnote{ASF, MPAP, \textit{Memoriali}, F. 2302, no. 48, July 1748.}

Interdiction petitions were elicited by specific circumstances, which sometimes went beyond the disordered behaviour that they denounced. In this sense, when the denounced woman was said to be old, plaintiffs would refer not only to her incapacity to manage her affairs, but also to the need to prevent the woman from making her last will. As in the male cases, the issue of the last will, or the possibility of selling or giving away assets, was raised when the family conflicts led the relatives to believe that the individual could distort the rules of inheritance. When they were women, and particularly when they were spinsters, the line of inheritance was not as clear as in the case of men, and to that the plaintiffs added the circumstance of her being of unsound mind.

Such was the case of Maria Maddalena Panfi, interdicted in 1743 because she had suffered some “corporal indispositions” and had lately had more “accidents” (we know they were epileptic attacks) which had rendered her “mentally obfuscated, and absent of memory.”\footnote{“…quale per le sue indisposizioni corporali, et in specie per avere il di 28 Agosto 1743 prossimo passato sofferto più accidenti, si ritrova con qualche offuscazione di mente, e priva di memoria.” ASF, MPAP, \textit{Memoriali}, F. 2301, no. 201, September 1743.} The petition was requested, nonetheless, due to her sons’ fear that she would make a testament contrary to their interests, because some “little differences” had lately emerged between mother and sons. Beyond the interdiction, the petitioners wanted to prevent her from making her testament at all costs, so that she “could not proceed to any act, whether upon the living, or by \textit{causa mortis} without the consent and approval of a legal person.”\footnote{“…non possa procedere ad atto alcuno, o sia inter vivos, o sia causa mortis senza il consenso, et approvazione di qualche persona legale…” Idem.}

Not only were male petitioners concerned for the inheritance of old women, but this was in fact a great preoccupation of their daughters too. In these cases the loneliness of widowhood in old age is combined with the growing emotional instability that was usually thought to accompany one’s last days.\footnote{On this, see Chapter 7, section 3.} As with any other interdiction procedure, the attempt to interdict an old mother or an old aunt was the last resort taken to solve a growing relational
conflict. This can be observed in the interdiction of the 78-year-old Maria Eleonora Faraoni, a widow denounced in 1750 by her three daughters, because at her “decrepit age” she lacked the necessary “clarity of cognition and capacity to dispose of her affairs.”435 The petition stemmed from the daughters’ apprehension that their mother would make an unconventional will, so they specifically requested for Maria Eleonora to be forbidden to make any final disposition regarding her patrimony without the approval of an officer of the Pupilli. The Consulta argued that so long as Maria Eleonora Faraoni did not suffer from “imbecility of mind”, nor had the “reprehensible vice of prodigality”, there were no grounds for prohibiting her the free disposition of her possessions.

Maria Eleanor’s daughters petitioned again in 1753, arguing this time that their old mother was “consuming what remained of her life and her limited resources” in long-lasting suits against them, influenced, they suspected, by ill-intentioned domestic servants, who “joined to her passions”, and exacerbated her enmity towards her daughters.436 By doing so, according to the daughters, the domestic servants hoped to take advantage of Maria Eleonora and profit from her weakness. The response of the Pupilli was to try to reach a friendly solution between the two sides, respecting on the one hand Maria Eleonora’s request to rescue her dowry, and on the other, the daughters’ petition to protect Maria Eleonora from the abuses of her servants. After they mutually agreed to resolve their differences through a neutral arbiter appointed by the Pupilli, the case ceases to appear in the records, most likely due to the probable death of the 80-year-old Maria Eleonora.

Interdiction procedures do not shed light on the unproblematic experience of old age, which we cannot assume did not exist, but they are revealing about those cases where the lives of the elderly had become problematic for those surrounding them. We should therefore bear in mind that not all of the elderly deemed mentally incapacitated were condemned to having an interdict against them. What I wish to highlight here is that their mental derangement was made public because of a circumstantial reason. This applies to any institutional or judicial space in which madness was recorded, regardless of the age of the sufferer. As, for example, with the insane mother of two underage daughters who, after her husband’s death, abandoned them. We only know of her existence because the girls needed

435 “per la detta sua età oramai decrepita non può essere in grado d’avere tutta la chiarezza della cognizione, e capacità di disporre delle cose sue.” ASF, MPAP, Memoriali, F. 2302, no. 209, September 1750.
436 “va consumando il resto della vita e le poche sostanze in detti litigî, che dubitano venghino fomentati da persone domestiche, che uniformandosi alle passioni della medesima, procurano per tale strada farsi merito per averne retribuzione dalle di lei povere sostanze”. ASF, MPAP, Memoriali, F. 2303, no. 105, April 1753.
somewhere to live. Or, the old woman over whose inheritance her nephew and niece were fighting. Whoever was to be held the legal inheritor, was to be in charge of the old lady, mentally incapacitated in her advanced age (she was said to be *barbogia*). Or, to give a last example, the daughter who petitioned for her half-brother to provide economically for the care of their old and foolish (*melensa*) mother.

When referring to women interdicted on the grounds of their advanced age, we should not imagine only a defenceless old woman being taken advantage of, and consequently in need of protection. They were also depicted as rebellious, as were the interdicted old men. In fact, rebelliousness was a reason for petitioning for a relative’s interdiction. Here, as with the other categories, the level of recognized mental derangement or the open identification of mental disturbance to explain the odd behaviour observed in these women also deserves discussion.

In April 1734 the widow Ottavia Margherita Almeni was interdicted after a request sent by her only son, the Cavaliere Lorenzo Poltri. In the petition, Poltri declared her incapable of managing her affairs “due to her age and the prejudices she occasioned.” One year later, Ottavia petitioned for her release claiming that she had been unfairly declared incompetent by her son and other “malevolent” relatives. The petition had been written, she argued, only to prevent her from compensating some creditors and, above all, for marrying for a third time. Contrary to what her son had denounced, Ottavia assured the Pupilli that the wisdom (*saviezza*) and economy by which she managed her own affairs were well known, and the interdiction therefore was only acting against her interests, causing more financial damage than what it was supposed to prevent.

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437 ASF, *Fanciulle Abbandonate di Santa Maria e di San Niccolò dette “Del Ceppo”*, F. 4, no. 62, June 1610. They were consequently sent to the Monastery of the *Fanciulle del Ceppo*. In her insane state, the woman had left the matrimonial home to live with her brothers, abandoning her daughters. Although the episode dates back to a century before the period under concern here, I think it can be perfectly applied to the eighteenth century. The Conservatory of Santa Maria e San Niccolò del Ceppo was founded in response to the danger of prostitution for abandoned women. On its foundations and organization, and on other charity institutions for abandoned women in Florence, see Philip Gavitt, *Gender, Honor, and Charity in Late Renaissance Florence* (Cambridge: Cambridge University Press, 2011), pp. 171-177 and passim, and Lombardi, *Povertà Maschile, povertà Femminile*.

438 ASF, *Fanciulle Abbandonate di Santa Maria…*, F. 2, N. 34, 1659. While the legal procedure was unsolved, she was sent to the Fanciulle del Ceppo.


441 ASF, MPAP, *Memoriali*, F. 2300, no. 482, April 1735.

442 She referred here to the different payments that had to be paid both to the Pupilli and to the administrator after an interdiction was issued.
From the inquest carried out by the Pupilli to investigate her petition we know that she was a 64-year-old widow who had been married twice, and who wanted to stop being a widow by marrying, for a third time, a young cadet. According to her son Poltri, who sent a written testimony to contradict Ottavia’s version, it was because of her lack of economy and the “love that entered her head”, that she had dissipated half of her patrimony, following her lover throughout the Italian peninsula and spending enormous amounts on the cadet’s encouragement. Poltri even added that the young cadet was inducing Ottavia to sell all her assets and leave Tuscany so as to marry him in Naples.

To prevent the marriage, prevent her ruin and prevent the eventuality “of being forced, driven by honour and justice, to feed and maintain her after she had dissipated everything”, Poltri, with the support of other relatives, had petitioned for the interdiction one year before. By doing so he had intended to guarantee for his mother that she be able to live with due decorum, his testimony asserted. In fact, he explicitly said that with the interdiction he had not sought to deprive Ottavia of her right over her patrimony, which was indeed also his right-to-be, but only to protect her, and avoid her ruin. If he had wanted to take away her patrimony, Poltri explained, he would have “rightfully” done it already, but that would have left her without the possibility of living with due decorum and honour.

Because the Pupilli backed the son, and considered Ottavia Almeni to be a woman of reprehensible conduct and unstable character (inquieta), the interdiction was not lifted until 10 months later, when a decree released her from the interdiction, but left her nonetheless subject to the supervision of the Auditore Giacomo Conti, from the Magistrato Supremo. Why the state came to this solution we do not know, but what seems clear is that she did not marry the object of her affections, and probably chose to continue managing her affairs herself rather than follow her passion. Suggesting what made her disordered in the eyes of the authorities, the Pupilli officers noted her strong character, and described her as a woman difficult to calm and hard to convince.

443 “dependuto [sic] della sua poca economia, e da gl’amori, che gli sono entrati in testa di volersi rimaritare a un giovine cadetto in età di sopra 64 anni e da questi amori è dependuto, che ella ha dissipato la metà del suo patrimonio”, Ibid, testimony sent by the Cavaliere Lorenzo Poltri (Ottavia’s son from her first marriage) to the Pupilli.
444 “...per non mi avere a trovare ad essere obbligato a titolo d’onore, e di giustizia a darli gl’alimenti, e mantenerla dopo averà [sic] dissipato in tutto”, Idem.
445 In so saying, Lorenzo Poltri wanted to ensure the Pupilli that his petition was not driven by a personal interest, claiming that he would content himself with inheriting whatever would be left after Ottavia’s death.
446 The liberation decree is in ASF, MPAP, Memoriali, F. 2300, no. 499, February 1735/36.
447 ASF, MPAP, Memoriali, F. 2300, no. 496, February 1735/36.
Her traces appear on two further occasions after the said release from interdiction, relating in both instances to her economic affairs and pointing to her willingness to participate and take full action in matters that concerned her, despite the efforts made by her son to take control.\textsuperscript{448} Finally, we have a last notice of her existence in 1749, when Lorenzo Poltri petitioned to secure some jewellery, silver and furniture because his mother had recently suffered what was called an “apoplectic accident.” At 79 years of age, “the accident had rendered her”, in the son’s words, “deprived of mind, and speaking.”\textsuperscript{449}

If we follow the same logic as shown in the better documented male interdiction procedures, we can infer that, although the word \textit{demente} was never used to characterize Ottavia Almeni except at the very end of her life, she was nevertheless deemed mentally disturbed and indeed irrational by her relatives. Her head was thought to have been taken, perturbed by her passions, which drove her to distort the social order and gendered hierarchies.

It is also telling that it was assumed by the men involved in the case (her son and agnates, her administrator, the officers of the Pupilli) that due to the age difference and the lower social origin of Ottavia’s lover, he just wanted to take advantage of her. A young man would only be perceived as taking advantage of an older woman in situations like this, especially because of the difference in rank. To this we have to add that it was said that her head had been captured by this amorous affection, as if love had obscured her rational faculties, rendering her, in fact, insane. It is true that the actual image of love being the symptom and the cause of her insanity was not used in the narratives that portrayed Ottavia’s disorder, but it is also true that the story is reminiscent of the conceptualization of “lovesickness” as represented in eighteenth-century medical and lay literature, which was to become a psychiatric category in the nineteenth century.

For instance, in 1772 a certain Antonia Perini who was committed to Santa Dorotea was said to suffer from amorous madness (\emph{pazzia amorosa}), that is, it was understood that her insanity stemmed from her love fixation.\textsuperscript{450} A tendency for exacerbated passions was in fact at the core of the medical conceptualization of hysteria, where passionate affections to the point of fixation was one among the various emotional disturbances that could overwhelm the

\textsuperscript{448} ASF, MPAP, \textit{Memoriali}, F. 2300, no. 517, July 1736 and N. 526, September 1736.
\textsuperscript{449} “…sua madre alle settimane passate fù sorpresa da un Accidente apopletico, per ragione di cui rimase priva di mente, e di favella”. ASF, MPAP, \textit{Memoriali}, F. 2302, no. 116, July 1749.
\textsuperscript{450} Her case has been examined by Lisa Roscioni, \textit{Il governo della follia}, pp. 3-18.
mind and irritate the nervous system to produce a mental breakdown. Ottavia Almeni had not been described using any of these terms and yet the reference to her unconventional amorous affection for a younger and lower-born man points in that direction.

Love could obscure women’s rational faculties, leading them to act not only improperly with regards to their virtue, but also to wrongly spend part of their patrimony to satisfy their lover. A “disordered passion” (sregolata passione) could dazzle (leaving her acciecata) a woman, particularly when she was a lonely widow, making her spend substantial amounts on gifts of goods and money. However, the pernicious effect of passions such as love, and particularly unrequited love, could equally affect both sexes. Following recent studies that have questioned the allegedly gendered origins of lovesickness, interdiction procedures in this sense once again call into question this traditional approach.

Interdicted men of all ages, but particularly those of young or advanced age, are frequently portrayed as the helpless victims of disordered amorous affections. The interesting thing is the different key assumed by the objections to the passionate affections of the elderly. Falling in love late in life, and being openly driven by amorous affections could also be singled out as evidence of both male and female mental incapacity. Deeply entrenched in the expectations about proper behavior according to the stages of life, “lecherous old men and women were the butt of jokes and attacks in many literary sources.” Old age passions were considered as being against the laws of nature, and lustful tendencies in old men and women were seen as a form of madness, following a tradition that can be traced back to antiquity. Accordingly, love affairs and late remarriage (mostly of men in this case) were used as arguments for the interdiction of an elderly parent.

Lovesickness was certainly not constrained to the elderly, but when it affected them the explanations and meanings given were tied to age. Their advanced age was seen as a weakening force that rendered them helpless to the effects of these improper feelings. The

451 Margherita Roselli, a widow from Arezzo. ASF, CR, Fiscale, no. 64, August 1757.
452 The detrimental effects of extreme love affections or unrequited love, and their connections to melancholy, have been the object of numerous studies. For a recent study with interesting suggestions that call into question the gendering of this affliction see Lesel Dawson, Lovesickness and Gender in Early Modern English Literature (Oxford: Oxford University Press, 2008). For the eighteenth century, see Roscioni, Il governo della folia, pp. 318; Ingram and Faubert, Cultural Constructions of Madness; Houston, “Madness and gender”, p. 310-311. For an account from the point of view of the experience of sufferers, see Katherine Hodgkin, Madness in Seventeenth-Century Autobiography (Basingstoke: Palgrave Macmillan, 2007), pp. 177-191.
453 Ottaway, The Decline of Life, p. 31.
frailty generated by age made their minds fertile ground for the development of a mental derangement caused, in this case, by an intense passion. Similarly, precisely because this amorous affection manifested in old age, it was used as further proof of its oddness, making it at the same time utterly improper.

*The Difficult Personalities Concealed Behind Dissipation*

Although women were also interdicted because they were thought to be dissipating their patrimony, their squandering is hardly ever framed in terms of “prodigality” – the exception being the case just examined. For instance, Francesca Celli was denounced by her brother-in-law for dissipating her dead husband’s patrimony with the help of her sister. The accusation was that she dissipated because she spent it to her own advantage so that she could remarry “with all commodities.”455 The interesting thing is that women were thought to be perfectly capable of squandering, and even to be the cause of their husband’s prodigality, only that in their case the label was generally not applied.456 The new characteristics of eighteenth-century sociability, with its increasing expenses, also resulted in women spending above their means, even when they were not the direct holders of the assets. In aristocratic circles in particular, within the context of the new relationships that have been studied by Roberto Bizzocchi, women were often at the centre of criticism for their excessive expenditures and loose morality. For instance, in 1747 a woman was sent to a conservatory for disordered women (the Conservatorio dei Mendicanti), because her excessive attachment for her *cicisbei* pushed her into improper public manifestations of affection and spending on exceedingly expensive gifts, demonstrating her “bad employment of money” (*pessimo uso del danaro*).457

However, dissipation in the case of women also served as a target for criticism regarding certain characteristics in these women’s personalities, which suggests how their mental faculties were conceived. Dissipation concealed other “bad practices” that were not only related to an excess of liberty and loose morality in the public world, but foremost denoted a disturbed disposition. The characteristics and perception of the levels of mental

456 For instance, see the interdiction of Giovan Battista Becciani, who was considered to be such an imbecile that he let his wife squander away his patrimony. ASF, MPAP, *Memoriali*, F. 2308, no. 79, January 1771. The case is examined in Chapter 7.
disorder manifested in the denounced behaviour are to be found in scattered details, in expressions and descriptions that, without really intending to, reveal cultural notions of what female unsoundness of mind constituted.

Caterina del Pugliese was interdicted together with her husband Lorenzo Buonaccorsi Perini in October 1764.458 Their interdiction resulted from creditors’ pressure over both their patrimonies, which were said to have been reduced to a miserable state. In this case, the interdiction was issued both to protect the family and to respond to the creditor’s demands, and consequently no category other than “dissipater” was needed to issue the sentence. Nonetheless, we know that Lorenzo Buonaccorsi suffered from “nervous affections”, while, as Caterina herself said years later when petitioning for her release, she felt she had been treated as if she was “a person without reason or prudence.”459 Her sentiment was aggravated by the fact that she had not only been deprived of her administration rights, but her children were also taken away from her so that they could receive a better education.

Although in Caterina’s interdiction procedure no allusion was made to her mental faculties, nor to her behaviour besides the mismanagement of her patrimony, the development of her case exposes a far more complicated picture. She strongly resisted the interdiction decree, issuing a series of infructuous petitions to be released from what she called her “ignominious submission.”460 Her rebellion and need to control her affairs was so strong that she repeatedly confronted her administrator and the Pupilli’s authority. She continued to manage her affairs, making contracts and monetary transactions forbidden for those under interdiction, “considering herself a free proprietor [libera padrona].”461 She went so far as to hide the key of one of her villas to prevent the Pupilli from selling the furniture. Violating a direct command from the Pupilli, she even went to rescue some furniture and household effects with one of her sons at another of her villas, which were confiscated by the Pupilli to be sold at the public auction to pay the family debts.462 Her troublesome personality and her

458 ASF, MPAP, Memoriale, F. 2305, no. 129, October 1764. This is the only case that I have found where both husband and wife were interdicted.
459 ASF, MPAP, Memoriale, F. 2306, no. 140, December 1764 and F. 2307, no. 20, May 1767, for Caterina del Pugliese’s release petition, not granted.
460 Idem. Other release petitions can be found in Ibid, F. 2306, no. 267, June 1766 and F. 2307, no. 170, January 1768, when she was finally liberated.
461 Report signed by her administrator, where he declares himself incompetent to put Caterina under control.
462 “passando sopra ogni rispetto dovuto agli ordini sovrani, si portò verso la fine di settembre insieme col figliolo maggiore Niccolò Buonaccorsi alla Villa di Giogoli, dove erano custoditi sotto sigillo una buona quantità di mobili per aspettare le disposizioni del Magistrato, e questi arbitrariamente portò via, e trafugò”. Ibid.
inability to follow the norms imposed by state officers resemble the situation seen in prodigals and demented men, showing that economic mismanagement by itself did not suffice for an interdiction sentence. Caterina Pugliese’s deviance had in fact started early. We know that in her youth, while still secluded in a Convent for her education, she was involved in a curious matrimonial affair, when the news reached the Consulta that she had promised herself in matrimony to two men at the same time. One of them was a promise secretly signed without her parents’ consent, while the other had been arranged by her relatives, engaging her to marry the man who was to become her future husband, Lorenzo Buonaccorsi Perini.463

Contrary to the case just examined, those women interdicted and submitted to the Magistrato dei Pupilli were generally under no direct masculine authority and, consequently, they were thought to be defenceless against deception. This defenceless state was deemed particularly harmful because they were in a position to squander, being direct holders of the family patrimony. They were under no scrutiny or supervision, something the interdiction was designed to provide.464

The interdicted women were portrayed as the opposite of the numerous women who were appointed administrators to their sons’ or husbands’ patrimonies. In this sense, there is a clear opposition between the rational and independent role played by women as guardians of their children and husbands and their being held as the core of the normative and disciplining efforts focused in interdiction procedures. Although the image presented by female interdiction procedures cannot be taken to be the rule, given their small number, they do speak of the danger women alone posed to society. For, even when women were nominated guardians of their underage children or administrators of their husbands or children’s patrimonies, they were usually not alone. Although they were the preferred interlocutors of the Pupilli, and they were ascribed a leading role in the restoration of the familial disorder produced by male mental incapacity, they could usually count upon the support (and supervision) of their kin.465

463 The affair was entrusted to the hands of the Auditore Fiscale Filippo Luci. ASF, CR, Fiscale, F. 754, no. 6, 1739.
464 For example, Isabella Franceschi, widow of Rucellai Ricasoli, was said to need the close scrutiny and control of the Auditore Giacomo Conti, because she had been receiving wrong advice. Probably due to her high rank, she was not interdicted, but was assigned a curator without him being named as such. ASF, MPAP, Memoriale, F. 2299, no. 399, July 1719.
465 It is important to recall here that, since its early beginnings, the Magistrato dei Pupilli tended to give guardianship and patrimony administration to widows, so having women with administrative power over the family inheritance was not a novelty or a rarity in the eighteenth century. According to the studies of Catherine Fisher and Giulia Calvi, women in this context appear not as the weak member of the household, but rather as
Women denounced for mental incapacity were thought to need the assistance of a man to behave properly and manage their economic affairs. In general they are said to have been under the direction or supervision of a man (if they were widows or spinsters who had long been the direct holders of a patrimony, this could be a brother or a son), whose recent death had left them defenceless and totally vulnerable to the possibility of people taking advantage of them. This was the case of Lisabetta Miralda Gaci, interdicted in November 1730 because of her “little conduct, judgment and stability.” Until then, she had been under the supervision of Giuseppe, her priest brother, but because he had recently passed away, Lisabetta was unsupervised. According to the plaintiffs, who happened to be her future inheritors, since she completely lacked the capacity to manage her affairs, she could be the victim of fraud by the people surrounding her. But, it was not only her weakness that rendered her liable to an interdiction. She was considered to be defenceless because she was thought to lack the necessary judgment (in the sense of diminished intellect), but also because of her supposedly improper behaviour, details of which were not given. But, most of all, she was said to be unstable, to lack stability. In 1730, and in the context of a female interdiction, it was not necessary to go into further details on the nature of such instability (mental, emotional, behavioural, we do not know). Nonetheless, from the rest of the cases appearing in the Magistrato dei Pupilli, instability, or recklessness, was a typology very much present in interdiction procedures, which pointed to the incapacity to control one’s mind and emotions.

Flexible Definitions

Categories of mental incapacity were also flexible when applied to describe women. To examine this it may be useful to investigate the case of Maria Francesca Paoli del Feo, interdicted twice on account of a mental disorder that was never precisely nor definitively defined. She was first interdicted in 1751 and then once again in 1755, both times at the request of her brother. Maria Francesca Paoli was the mother of 6 children, whom we first meet with an absent husband and then as a widow. In her first interdiction she was alternately described as in a “state of dementia,” with “imbecility of mind,” and “stupid and foolish [stupida e melensa].” In 1754 her interdiction was revoked because her “soundness” had

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the powerful and, most of all, rational one. See Fisher, “The State as Surrogate Father” and Calvi, Il contratto morale.

466 “...poca condotta, giudizio, e stabilità di detta donna...” ASF, MPAP, Memoriali, F. 2300, no. 329, November 1730.
“returned”, but she was interdicted again in 1755 because she had “relapsed into her prodigality.”\(^{467}\) In simpler words, first she was considered demented, then of sound mind, and finally prodigal, her case being one of the very few where this last category was applied to a woman.

Maria Francesca Paoli is a perfect example of the extraordinary situation women had to be in in order to be interdicted (and thus become known to us). In her case it was not because she was a widow or a spinster, as we have seen in previous cases, but a married, yet abandoned middle-aged woman (for later developments, we know she was interdicted at the age of 35), who was “forced” into a position where she had to play a role that did not suit her. Her economic incapacity worsened when she became a widow, forcing a definitive intervention of the Pupilli. Moreover, because her brother was a friar of the Servite Order, he could neither supervise nor take care of her, making her “emancipated” position even more dangerous. Her marriage kin did not participate in the process, and were in fact never considered as possible administrators of her patrimony.

The way her disorder was described by the men acting as supporting witnesses in the different stages of her procedure is symptomatic of the “extraordinary” situation she found herself in. The first petition for interdiction sent by her brother was supported by two written testimonies, each signed by priests who endorsed her interdiction. One stated that Francesca Paoli was “frequently and almost always” in a “state of dementia” because of the “misfortunes” and “infirmities” she had suffered.\(^{468}\) The other framed it in terms of the “long and severe adversities, and great troubles” she had suffered, accompanied by an undefined illness.\(^{469}\) As her administrator recalled in 1755, with her husband’s disappearance she had been left “without the guidance of any relative that could supervise the administration of her resources”, which she had dissipated to the point of reducing her “to wandering the streets, almost naked.”\(^{470}\)

According to the clergymen’s testimony, her disorder originated in the experience of being abandoned by her husband and left with six children to feed by herself. It is true that

\(^{467}\) ASF, MPAP, Memoriali, F. 2303, no. 13, December 1751; no. 196, July 1754 and no. 264, January 1755.

\(^{468}\) “…ritrovasi per le sue disgrazie sofferte, et infermità, spesso, e quasi sempre in stato di demenza”. Testimony of the Bali Ottavio Giugni Priore of S. Maria Impruneta. ASF, MPAP, Memoriali, F. 2303, no. 13, December 1751.

\(^{469}\) “…per lunghe, e gravissime traversie, e guai grandi sofferti con malattie”. Ibid.

\(^{470}\) “…ritrovandosi la Maria Francesca del fù Gio Pietro Paoli… senza guida di alcun suo congiunto, che riguardasse l’amministrazione delle di lei rendite quali andava così dissipando, che si era ridotta per le strade, quasi nuda, vagando…”. Testimony of Filippo della Nave. Ibid, no. 264, December 1754.
because she was left unsupervised she could dissipate her patrimony and thus end up interdicted in the first place. But that explains why she ended up in the Pupilli records, not how those around her conceived of the nature of her disorder or how they explained its causalities. This is where the testimonies given by the two clergymen and the narrative given by her appointed administrator become relevant. In the three cases, the emotional element of her suffering comes to the fore. As we saw, she was thought to be in a state of dementia caused by the severe adversities she had had to endure, of which her husband’s absence was crucial. It is revealing that the expression used was that she was “frequently and almost always” in a “state of dementia”. That is, she was not deemed at first as irrevocably demented, but in a temporal state of dementia induced by her sufferings.

When described as wandering naked through the streets, Francesca Paoli’s disorder meets the common image used to describe madness in the early modern period, as we saw in the last chapter. The mad women that were sent to Santa Dorotea in fact frequently fulfilled this stereotype. Maria Umiltà Baldi, for example, was committed to Santa Dorotea in January 1756, because she had “tried to throw out of the window her own children many times, and when she could escape from the custody of her husband, and of other household members, she began to wander as a vagrant through the streets, half naked, and in that manner she entered once into the Church of the fathers of S. Francesco di Paola, while there were many people, causing great scandal to everyone.”

Strikingly, nonetheless, at the same time Francesca Paoli was described adopting the same elements that were used to argue for a confinement petition, her disorder was framed under prodigality, not dementia. However, if we follow her administrator’s narrative, we can confirm that although in the second interdiction procedure she was not defined as demente, she was definitely perceived as mentally disturbed.

Although she was not deemed a piazza furiosa, she was described as progressively violent. According to her appointed administrator, after the first interdiction in 1751, Francesca Paoli had been sent to live with him, so that he could take care of and control her. Usually this responsibility was given to the next of kin but, in this case, as her brother was a friar in a convent he could not perform this duty and so it was given instead to this “outsider”. She went to live there with one of her daughters, while the other one was sent to the Conservatorio dei Mendicanti. Two years after the interdiction, Francesca started to

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471 ASF, SD, Motupropri, Rescritti..., F. 2, no. 2, January 1756.
demonstrate signs of better behaviour. As he considered she was acting more wisely, her administrator entertained the possibility of the interdiction being revoked. In fact, her liberation was granted after a petition signed by her brother who, following the administrator’s advice, claimed that Francesca was completely sound of mind, as to be “able to give any kind of advice.” Her soundness of mind would not last for long, however.

After her interdiction was revoked, the administrator remained as her supervisor and procurator, to assist Francesca in the management of her affairs. But according to the administrator, once she “felt free from the submission to the Magistrato [dei Pupilli]”, she “started to interfere with his appointed duty with mistreatments and insufferable insults.” Her aggressive behaviour made him and his wife leave the house they all still shared, forcing him even to turn to the Auditore Fiscale for a warrant to expel her. Francesca’s rebelliousness, violence and uneasiness made her intolerable to everyone surrounding her. Neither her mother, nor her friar brother were willing to receive her and take care of her, until she finally moved to a countryside villa that she owned, where she continued to disturb those surrounding her. She was later said to be seen wandering around wearing indecent clothes, and a few years later she was involved in an obscure marriage proposal. Still subjected to her disordered mind, on that occasion, the authorities explained her involvement as coming out of her instability (leggerezza), for she did not seem “of a mind completely healthy” (non mi è pars di mente del tutto sana).

We finally meet her in 1765, when her daughter petitioned the Auditore Fiscale to be spared from the ignominy that her mother, dressed indecently and permanently drunk, caused her.

Francesca Paoli del Feo’s story is interesting on many levels. For one, it depicts the evolution of a mental disorder over a large timespan, picturing her at different points of her life over almost 15 years. It also demonstrates how labels of mental incapacity were also flexible when applied to women, so that they could adapt to the changing circumstances. Finally, it illuminates on some level what had to happen in order for a woman to appear in the records. Francesca was more-or-less alone, as her brother’s monastic life left her without social networks. She had offspring, but we are told that they were also unwilling to assume her care. In this sense, her final appearances in the records are very similar to the story of

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472 ASF, MPAP, Memoriali, F. 2303, no. 264, December 1755. Testimony of Filippo della Nave.
473 ASF, MPAP, Memoriali, F. 2303, no. 196, July 1754.
474 ASF, MPAP, Memoriali, F. 2303, no. 264, December 1755. Testimony of Filippo della Nave.
475 ASF, CR, Fiscale, F. 759, no. 55, October 1756.
476 ASF, CR, Fiscale, F. 762, no. 2, August 1765.
Lorenzo Baldinotti, and indeed, to the stories of most of the interdicted who repeatedly appear in the different legal spaces provided by the Tuscan administration to solve the problem posed by the insane. In many cases, the eighteenth-century interdiction procedures and the contemporary institutional records show families at a breaking point but then being able to recompose through the intervention of the authorities, and thus the cases cease to appear. But, in certain other cases we see the same names reappearing at different times and in different legal spaces. This leads me to suggest, as I will argue in the next chapter, both that families moved from one provision to the next, sometimes simultaneously, in their efforts to resolve the problems posed by madness, and that any available mechanism was by definition temporary, producing what I have called the itineraries of madness.

4. 3. Female Madness beyond Interdiction: the Spaces of Women

If interdiction procedures predominantly affected men, where can we find the women who suffered, or were deemed to suffer, from mental disturbances? How can we bypass this institutional and constitutional silence? And, why do madwomen appear less than madmen in the eighteenth-century records? What explains this silence over the existence and characteristics of female insanity? It is certainly not a matter of prevalence (i.e. that men were biologically more prone to insanity than women), but has instead to do with the social role of women, on the one hand, and with the problems posed by insanity, on the other. The most obvious answer is that, as interdiction procedures were bound to the existence of a property over which the individual had ownership rights, there was simply no need to interdict most women in Tuscany. So long as women were excluded from the inheritance system (beyond their dowry), irrational and irresponsible actions committed by women did not have the damaging economic effects of those perpetrated by men. In fact, for the most part, women had no patrimony of their own to squander. But there is more.

We know that men deemed mentally incapacitated to manage their own affairs ended up interdicted and submitted to the Pupilli. For this itinerary to commence, family members had to perceive that something was wrong with their relative, that the individual had deviated from the path of normality. However, the “appearance” of mad people in the records is not necessarily conditioned or governed by the development of the mental disorder in itself, as I have argued. In other words, something had to occur for the family to turn to state intervention, which was generally related to a destabilizing change in the household.
dynamics, and dependant upon the fluctuations of relational conflicts. Against this background, we could hypothesize that female insanity did not provoke the same disorder in family life that mad men did. Mad women could be taken care of, controlled, neutralized, and therefore silenced more easily than mad men, and certainly their economic damage was less severe. But, furthermore, female mental disturbances had a different effect on the household dynamics than male ones did.

Consequently, female mental disturbances seem bound to the realm of private life in eighteenth-century Tuscany, coming to the surface only in extraordinary cases: widows with administrative power over their family patrimony (either by marriage or by inheritance), usually at the end of their lives; or suicidal and scandalous women of different ages whose families could not control them, or whose families were absent, who ended up in Santa Dorotea. Any other encounter with madwomen in the eighteenth century records is more the result of a random and accidental discovery by the historian. I will explore some of these “accidental” recordings in what follows.

Defiance of the patriarchal order is a characteristic that we meet in many of the insane women described above. Following MacDonald, “although parental authority and patriarchalism were neither absolute nor unchallenged, reverence for the hierarchical bonds between parents and children and husbands and wives was so strong that it shaped popular conceptions of insanity.” Nonetheless, were all women who defied parental dispositions, such as over who to marry or where to live, or who did not recognize the authority of those above them considered mentally disturbed? If we acknowledge that madness was recognized as open defiance to social hierarchies, then these women should be included in the category of madness, although they were not openly defined as such. For example, young men challenging paternal authority were labelled as prodigals and others openly as demented, as I showed in the previous chapters. Nonetheless, the line between moral deviance and mental disturbance here is difficult to draw. Because it is one thing to say that madness was recognized in acts of rebellion against patriarchalism, and a different thing to assert that rebellion was always seen as a kind of madness.

This is not to say that female insanity was exclusively seen as an act of rebellion. As happens in the case of men, defiance and rebellion can be singled out only as the detonating factors of the disclosure of madness, as the contingencies that marked its appearance,

although this does not mean that women were thought to be insane only when they were rebellious. We know that one of the characteristics of family disorders in the eighteenth century was the perceived increase in the rebelliousness of young men and women. We saw that in the case of young men this would result in a petition of interdiction on the grounds of prodigality. Prodigality was seen as a distortion of the ideal of the *pater familias*, due to their inability to provide for the economic and moral needs of the family. Squandering, open defiance of social hierarchies, from the paternal to the family hierarchy they were supposed to lead, were seen as a serious alteration of the masculine prototype. And this alteration, as we saw, was conflated with madness in the most intricate ways. Women, in contrast, were hardly ever defined as prodigals, because prodigality was, as I showed, an intrinsically masculine category. How can we find, then, the equivalent of prodigality in women, if there is any? In other words, which category, or for which reasons could families ask for the state’s involvement to manage female relatives deemed mentally disturbed, without recourse to the legal category of dementia?

A clue to solving this problem can be found in denunciations of unruly women, whose rebelliousness is usually portrayed as a rebellion against marriage or monastic life, the most common destinies their gender roles imposed. If we follow the same logic used in previous chapters regarding the conflation between prodigality and dementia, we could say that the disclosure young, middle-aged and elderly female unruliness was used as a mechanism to neutralize and handle the disorders produced by what was increasingly ascribed to the effects of a perturbed mind, and altered emotional states. The risk, nonetheless, of asserting that madness was identified in an act of rebellion, according to Houston, is that “this argument also leans towards the notion that mad acts were voluntary – a protest against social conventions – whereas one of the cornerstones of definition for eighteenth-century people was that insane behaviour was outwith the control of the sufferer.”

Hence, we must be cautious not to assume that acts of rebellion in women were necessarily thought to trigger mental derangement, or that every rebellious woman was labelled as mad. Nonetheless, the boundaries between unruliness (or deviance in general) and madness are in many cases porous. And this precisely because madness was recognized in behaviours that were perceived as being at odds with the expected norms. Rebellion, consequently, was listed as one of the signs of insanity, whether female or male. The family

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479 Houston, “Madness and gender”, p. 310-311
narratives recorded in the archives of the records of the Magistrato dei Pupilli bear witnesses to this.

Female Life Courses

The second characteristic of the appearance of madness applies this time more to women than to men, and is circumscribed to the spaces where women were destined to be. As Gabriella Zarri has pointed out, the monastery and the family were the spaces of confinement of female life in medieval and early modern times. If female insanity is inevitably tied to early modern female spaces, then it is in a direct relationship with the course of a woman’s life: marriage, conventual life, spinsterhood; being tied to the economic and social situation of their families. Consequently, if we are to elucidate what female madness meant in eighteenth-century Tuscany, we must enter, first, the realm of the family and, second, that of the convent.

The course of a woman’s life was a major cause of familial disputes in the eighteenth century, with the added novelty of an increasing number of cases where women tried to intervene with an active voice over the matters that affected their lives. The possibilities and strategies available to women to evade the consequences of patriarchal authority in the context of the familial disputes handled by the Magistrato dei Pupilli are a useful starting point for examining women’s rebellion through the scope of this study.

Giulia Calvi has explored the strategies used by women to negotiate the destinies of their own lives, particularly their recourse to intermediaries such as the officers of the Pupilli. Calvi follows women’s capacity for negotiation through the Tuscan seventeenth and early eighteenth centuries, in a development that shows female voices were becoming increasingly louder and more self-confident, until they eventually had a say in what had previously been their pre-set path in life. While the choices of women through their life cycle were still confined to the quandaries of patriarchal society (and thus, determined by the dowry they could get), we hear voices of women rebelling and negotiating their destinies using different strategies.

480 Gabriella Zarri, Recinti. Donne, clausura e matrimonio nella prima età moderna (Bologna: Il Mulino, 2000). She uses the term “recinti”, taking into account its functions as a space and its metaphorical sense as confinement or reclusion. “Il controllo sociale esercitato sulle donne nella civiltà europea tardo-mediievale, non meno che nella prima età moderna, si esprime prima di tutto come controllo sul corpo e assume per lo più le forme della reclusione o della ritiratezza. Il recinto circoscrive uno spazio e lo identifica; definisce una proprietà e indica un possesso; stabilisce un limite ma non ne preclude l’accesso”, Ibid, p. 23.
481 Calvi, Il contratto morale, p. 153 and passim.
Cases of women who would plead not to be forced into an unwanted marriage, or to forced monachization, become increasingly common during the eighteenth century. Voices such as that of Caterina Guiducci, who in 1742 defended before the officers of the Pupilli her right to choose not to marry and not to take vows, in spite of the pressures exerted by her brother-in-law. A voice that could hardly be heard in the seventeenth century had become a possibility in the eighteenth, when women who refused passively to follow the path designed for them by their next of kin are no longer so rare. Some of these features we have already seen in the interdicted women examined above.

Women in the eighteenth century tried, albeit often unsuccessfully, to intervene in their matrimonial prospects, and would exert increasing pressure to be allowed to take a leading role in the shaping of their lives. Petitions were issued to the Pupilli to control the effects of these excessively libertarian intromissions in paternal authority, be it because they intended to marry against their parent’s approval (a problem that took on alarming proportions during the century), or because they refused to choose a monastery for an allegedly temporary forced reclusion.

For instance, Ginevera Bruschini had “arbitrarily” left her paternal uncle’s home, and intended to arrange her marriage by herself. The Pupilli commanded, according to the statutes, that she immediately stop her pretentions of freedom, inform the Pupilli of her preferred candidate and leave the matter for the officers to decide. The same happened with Maria Antonia Pagnini, for whom we have more information regarding the characteristics in her personality that made it so dangerous for her to decide by herself. She had been released from the Convent where she was schooled and put into the custody of an honourable family, when it reached the ears of the Pupilli officers that she intended to arrange her marriage by herself. Driven by what the officers of the Pupilli called her “imprudence” and “little

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483 Caterina Guiducci was in a legal dispute with her brother-in-law because he wanted to take away from her what she had received from her share of the paternal patrimony when she had decided not to marry or take vows (per non si essere voluta né maritare, né far monaca). ASF, MPAP, Memoriali, F. 2301, no. 146, February 1741/42, quoted in Calvi, Il contratto morale, p. 210.
484 See, respectively, ASF, ASFP, MPAP, Memoriali, F. 2305, no. 9, July 1759, and Ibid., F. 2302, no. 87, February 1748/49. On the increasing preoccupation of adults with their son’s and daughter’s reluctance to respect their suggestions regarding marriage, see Lombardi, Matrimonio di antico regime, p. 378-380.
485 The officers of the Pupilli commanded of the authorities in Vico Pisano, where the girl was from, the following: “farete aver a voi la detta Ginevera, e li comanderete d’ordine nostro che non proceda a verun’ trattato di suo accasamento, senza la precedente permissione del Magistrato nostro, ma che ne faccia fare a noi la proposizione del soggetto che ella vole, perche si esaminino le di lui circostanze, e si possi di poi tassarsi quella dote, che sarà di giustizia”. ASF, MPAP, Filza di Lettere, Missive, e Responsive, F. 2490, 15 June 1740.
judgement” (poca avvedutezza), she had contracted a promise of marriage “forbidden by our laws.”

But women’s desires were often respected by the authorities, provided they demonstrated the necessary judgement that women were expected to have. The once inflexible parental decisions came to be discussed by daughters who were no longer willing to be passive witnesses while others decided upon their lives. Thus, as we have seen in other spaces of the judicial system, women appear as active agents in the uses of justice, employing the legal structure to make their once annulled voices heard. However, rather than examining the possibilities exerted by women so as to intervene in their destinies, we need to focus here on the way these women’s personalities were depicted by their opponents and how they described themselves, to see if we can get closer to the conception of female insanity. Because these cases served as an arena in which to discuss the boundaries of sane behaviour, it is worth reflecting on women’s intellectual capacities and on the occasions when their behaviour denoted something more than a mere desire for liberty.

Petitions by young women denouncing their elders for constraining their life choices, or for failing to abide by their maternal or paternal roles are also interesting in as much as they demonstrate that women were not considered to be “naturally” irrational, nor that they had diminished rational capacities. Quite the contrary, the evidence shows them not only exerting their strong agency, but also being empowered by the judicial structure. In 1736, Maria Rosa Masi denounced her father for abandoning her and failing to fulfil his duties as head of the family, explaining that because of this she had been forced to leave the paternal household to live with her married sister. The purpose of her petition was to force her father to pay the dowry he had been legally sentenced to pay a year before in a suit initiated by Maria Rosa herself. It was now possible for her to marry, she explained, but she could lose

486 ASF, MPAP, Memoriali, F. 2304, no. 243, May 1759. Maria Antonia Pagnini was the daughter of Anna Felice Venturi, a troublesome woman who had long been involved in legal suits over her daughter’s guardianship and education and whose case will be examined later. For the moment I would like here to recall the interesting fact of both mother and daughter’s troublesome tendencies. Both women were described in terms associated with mental disturbance. Maria Antonia was said to be of little judgement, which in itself was not so telling. But, if we consider the fact that her mother was said to demonstrate a lack of motherly affections and alienazione di animo, something like emotional alienation, we can presume that her daughter also demonstrated some of the emotional inconstancies that so preoccupied eighteenth-century society.


489 ASF, MPAP, Memoriali, F. 2300, no. 506, April 1736.
her suitor given that the matrimonial promise would be dissolved unless her father paid as soon as possible. Even though her father had been forced by a decree of the Pupilli to pay the dowry, he obstinately refused to pay. The father, on his part, claimed that the alleged abandonment had been a subterfuge by his daughter that aimed at taking advantage of him. Indeed, Maria Rosa had gone to live with her sister “to enjoy full liberty”, and because she did not want to cohabit with her progenitor.\textsuperscript{490} In other words, the father intended to accuse Maria Rosa of rebelling against paternal authority, to delegitimize her petition. Nonetheless, the Pupilli judged in favour of the daughter, and the father was forced to pay the dowry.

Women’s petitions against men holding the authority given by patria potestas (whether natural or transferred, as in the case of guardians) could only be successful if they were exactly in accordance with the patriarchal hierarchy. We can find plenty of requests in the Magistrato dei Pupilli sent by abandoned women, who repeatedly strove to be maintained by their responsible male relatives. These kinds of requests were generally conceded, and fathers, brothers, uncles, and marriage kinsmen, were repeatedly sentenced to pay and assume responsibility. But women could not always get their way in these kinds of requests, particularly when their behaviour was on the edge of abnormality. Their personalities and their state of mind were closely scrutinised, and their male counterparts in the litigation usually resorted to arguments that undermined their position by putting their mental sanity into question.

The story of the widow Maria Maddalena Cardini was also initiated by her defiance to impose hierarchies, when, having disagreed with her daughter’s guardians, she took the girl and fled from the marriage household, seeking refuge in Florence from the “persecutions” and physical abuses they exerted on her. She claimed to the Pupilli in 1744 that she had been unfairly accused of mismanaging her daughter’s patrimony, and of neglecting her education.\textsuperscript{491} But the strategy worked against her, for her daughter was abruptly taken away from her, to be sent to a convent. Through the Pupilli’s report on the matter, we learn that the disagreement had started because Maria Maddalena Cardini, who shared the guardianship and administration of her daughter’s patrimony with two other individuals, had intended to marry the girl without taking into consideration the opinions of the other two guardians, who were in

\textsuperscript{490} In the words of the father, “La verità è che la detta Maria Rosa per goder tutta la libertà, non volle più stare insieme, con l’altra sua sorella fanciulla appresso del genitore, e perciò se ne andò da una sua sorella maritata, dove allettata da il suo cognato trovò modo di ottenere fuori della casa paterna gli alimenti con sommo incomodo di detto suo padre avendo avuto dalla casa paterna le infratte robe.” Idem.

\textsuperscript{491} Petition of Maria Maddalena Cardini, ASF, MPAP, Memoriali, F. 2301, no. 137(2°), 11 July 1744.
fact opposed to the alliance. Under these circumstances, the Pupilli officers decided to send the girl to a convent.\textsuperscript{492}

But Maria Maddalena Cardini, as with the other women we have seen, would not yield, and fervently attempted to visit her daughter, trying to convince her to declare that she was in the convent against her will.\textsuperscript{493} Maria Maddalena even tried to get her daughter out of there with the argument that she was suffering, and was even sick due to the ill effects that the monasteries exerted on her. But her claim was contradicted by the mother superior and the daughter herself, and her strategy proved unsuccessful.

In descriptions of Maria Maddalena Cardini we encounter various of the characteristics associated with the mentally disturbed. She was seen as too insistent, too obstinate, too irrational in her tenacious opposition to the authorities’ rule. But she also contravened the most sacred duty of a woman. Her behaviour as a mother was reprehensible and distorted the expected norm. In fact, women’s disordered dispositions were frequently pictured in relation to how they behaved as mothers. Guardianship litigations are particularly illuminating on this type of scrutiny into the mind of the widow, where references to her irrationality, instability and passionate demeanour served an instrumental purpose.

Anna Felice Venturi, widow of Pagnini, had between 1745 and 1757 been involved in a lengthy suit against her marriage kin regarding the guardianship of her only daughter. She was accused of having abandoned her new-born child because, when her husband was still alive, she had “capriciously and without any motives” left the matrimonial residence, and in so doing she had demonstrated, in the eyes of her marriage kin, “lack of tenderness and love towards the daughter.”\textsuperscript{494} This lack of tenderness evolved into alienazioni di animo (alienations of mind or disposition) when the child’s paternal grandmother petitioned for legal custody over the child. Claiming that she deserved be appointed guardian instead of Anna Felice, she argued that the latter was still too young, had remarried, and demonstrated “alienazione di animo” and “little tenderness” towards the child.\textsuperscript{495} She blamed Anna Felice for the legal resolution of sending the child to a monastery at the “tender” age of four, where she was so disturbed that she “could not stop crying and lamenting, so that to secure quietness

\textsuperscript{492} Report of the Magistrato dei Pupilli. Ibid, 17 August 1744.
\textsuperscript{493} Report of the officers of the Pupilli on the case of Maria Maddalena Cardini, Ibid, 17 August 1744.
\textsuperscript{494} ASF, MPAP, Memoriali, F. 2301, no. 191(2\textdegree), 10 November 1745. The girl was sent to a Convent, nonetheless, at the age of 4, which elicited a new series of petitions sent by the mother, now remarried.
\textsuperscript{495} ASF, MPAP, Memoriali, F. 2302, no. 79, November 1748. Written testimony sent by Lucrezia Targini.
for the nuns and the health of the girl the tutors were forced to let her out and take her back” to the grandmother for her education.496

The interesting issue for us here is that the argument of Anna Venturi’s abandonment, her lack of maternal qualities and capriciousness, later transformed into alienazioni di animo, was used when the marriage kin were trying to revoke the Pupilli’s sentence which granted the child’s guardianship to the mother until she was six years old. Initially the Pupilli had ruled in Anna Venturi’s favour, considering she had left her husband for good reasons. But the girl was sent to another convent in 1749, while her mother, now remarried, kept on petitioning to be allowed to live with her.497 Her daughter was asked on several occasions if she wanted to live with her mother and stepfather, but she “frankly and with a vivid spirit” (francamente, e con vivo spirito) refused. Begging the Pupilli not to send her to her mother, the girl claimed to have “many reasons”, the most pressing being that “given her previous denials,” and the fact that she had been ill-treated by them, she “legitimately feared receiving bad treatment from them, particularly from her stepfather.”498 The officers of the Pupilli, along with the girl’s relatives, presumed that after her second marriage Anna Felice “had lost her affection for her daughter”, as was generally said in similar cases.

Gender roles defined the proper behaviour of men and women in the early modern period, wherein both roles and behaviour were thought to be a natural consequence of their constitution. Mothers were supposed to develop maternal affections towards their children, and the action of abandoning a new-born daughter was seen as against nature, which explains Anna Felice’s mother-in-law’s recourse to the image of alienation. Anna Felice’s behaviour was depicted as estranged from nature, constituting her disorder, attesting to her deviance, and denoting a distortion in her mental faculties. It is true that her alienation was not put in terms of an illness, but the word in itself had a medical connotation that is difficult to dismiss.

Deviant motherhood, or distorted maternal affections were identified by petitioners as a sign of disorder, as a proof that these women were manifesting something that was not right,

496 Idem.
497 ASF, MPAP, Memoriali, F. 2302, no. 110, April 1749, and F. 2304, no. 135, August 1757.
498 “mà quanto al portarsi anche per pochi giorni a casa della di lei madre, recusò costantemente a volervi andare, anzi pregò il detto senatore Uguccioni ad interporli, e supplicare il Magistrato nostro a volerla onnivamente da ciò dispensare per più ragioni, e specialmente, perché a cagione delle ripulse atre volte da essa fatte, e del sopracennato attentato dei predetti coniugi giustamente temeva di ricevere da loro, e massimamente dal patrigno un’cattivo trattamento”, Idem.
that was not natural, that was not as it was supposed to be.\footnote{Values associated with motherhood play, of course, a major role. See Calvi, \textit{Il contratto morale}, pp. 107-161. Calvi suggested that between the sixteenth and eighteenth centuries, the relationship of wife-mother was inverted, “il valore culturale, etico della maternità, quello su cui si fonda il patto reciproco fra donne in quanto soggetti giuridici e Stato, ha prodotto le madri morali”, Ibid., p. 158.} Accepted behaviour and social codes relating to motherhood are, once more, tied to patrimony, as was in the case of men. The features of a distorted motherhood can be found when the mother was taken to be dissipating her children’s patrimony, or when she was thought to exert a bad influence over her offspring with regard to economic management. This was the case with Maria Livia Vernacci and her 18-year-old son Segno Maria Baldesi, interdicted for prodigality on his paternal uncle’s request.\footnote{ASF, MPAP, \textit{Memoriali}, F. 2300, no. 408, April 1733.}

Segno Maria’s father had stated in his testament that his son was not to be allowed to live with his mother if she was to remarry, as she had done.\footnote{On the common requisite of staying “donna et madonna” in order to be appointed guardians and administrators of their children’s patrimony, see Calvi, \textit{Il contratto morale}, p. 19-29 and passim.} But the problem lay not only in the woman’s remarriage, but in her “change of attitude” after having done so, particularly her alleged intentions of taking advantage of her position and influence over her son to dissipate his patrimony. In fact, the uncle claimed that “during the short time she had her son under her guardianship, she had dissipated and even partly destroyed his patrimony.”\footnote{According to the Pupilli, “la madre di detto Segno Maria passata alle seconde nozze con poco buona fortuna cerchi tirare a se detto suo figlio per avvantaggiarsi con le di lui entrate, le quali nel poco tempo, che ebbe detto suo figlio sotto la sua tutela in tutto dissipò avendo anco in parte disstrastrato il di lui patrimonio”. ASF, MPAP, \textit{Memoriali}, F. 2300, no. 408, April 1733.} And afterwards she was accused of inducing Segno Maria to request the lifting of the interdiction sentence only to take advantage of his patrimony.\footnote{ASF, MPAP, \textit{Memoriali}, F. 2300, no. 426, October 1733.} An accusation that portrayed a mother as having economic interests over her son’s patrimony was a strong accusation at a time when a mother’s affection was supposed to be pure and secure precisely because this meant that she did not (and could not have) any economic interests in her children’s inheritance.\footnote{This was the basis of the moral contract developed between the state and widows explored by Giulia Calvi, built upon the specific quality of maternal love, which was “essere esterno all’interesse patrimoniale ed alla logica verticale della trasmissione dei beni e cioè alle norme portanti del sistema patrilinare.” Calvi, \textit{Il contratto morale}, p. 31.}

Showing an interest in her son’s patrimony was considered by her opponents and the Pupilli as demonstrating a lack of real maternal affection towards her son; as serious as the alienazione di animo displayed by Anna Felice towards her daughter. In other words, these women were disqualified by their legal adversaries through recourse to attitudes that revealed
that their feminine nature was not functioning properly. And the feature chosen in both cases was the distortion of maternal affection.

In a society where social position and identity had to be exposed to external recognition, being accused of distorted motherhood entailed the same as when a man was denounced for failure as a *pater familias*. Even more so when we take into account the increasing importance of maternal values such as tenderness, self-control, resignation and propriety during the eighteenth century. Domesticity and ideal motherhood required a virtuous (in the sense of self-controlled) personality, which was deemed fundamental so long as it was thought they would be passed on to their children. “The virtues that one wished to pass on to one’s children had to be qualities demonstrated by the mother as well.”

It is important to recall here that mad women committed to Santa Dorotea were commonly portrayed as defying codes of motherhood too, with their neglect and even open violence towards their offspring. Lack of affection towards a woman’s offspring was considered a sign of insanity in lay narratives of the Tuscan eighteenth century. The examination of a third, and final, case, will clarify further the extent to which the features of distorted motherhood mingled with rebellion and emotional instability.

Eleonora Cecchi was involved in a legal dispute with her stepson in 1751, over her late husband’s testamentary disposition which forced her into living conditions she was not willing to accept. Eleonora’s husband had stated that she was to be appointed guardian of their mutual children, a boy and a girl, as long as she was to live together with her husband’s elder son, which she was not willing to do at first. As a consequence, according to the stepson’s narrative, the girl had been sent to the Ceppo monastery in Pistoia, but the boy had been allowed to live with his mother. Some time after, however, she had changed her mind and yielded, expressing her willingness to at least live in the same city as her stepson, although not in the same house. Her new “cooperative mood” did not last, however, and from then on she never stopped disturbing both her stepson and the Pupilli officers with her constantly changing petitions. She was portrayed as moved and commanded by her “extremely uneasy spirit” (*spirito inquietissimo*), and subject to constant shifts of mood and

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fickleness, as when “having changed her mind, she went back to Florence carrying her child [the boy] in the most strange time of bitter winter, [and then] leaving him abandoned.”

Maternal behaviour gave valuable keys to interpret a woman’s state of mind. In this case, Eleonora’s uneasy spirit had led her to commit the unforgivable sin of abandoning her child, and later her uneasy spirit (spirito inquietissimo) pushed her to petition the Pupilli to remove her daughter from the convent. When this was denied, she asked instead for her daughter to be left there, based on the suspicion that her stepson might take the girl away to another convent, far from her, and she could not trust him. While the destiny of the girl was under discussion and the suit open, she went to the convent in Pistoia, and “arbitrarily, and almost by force took her daughter away from her aunt without the knowledge of the Magistracy and her guardians, transferring her to the Convent of S. Pier Martire.”

Eleonora Cecchi’s own narrative, however, was slightly different. She stated that she had been forced to abandon the imposed cohabitation because the stepson and other appointed guardians had sold every piece of furniture, and had “arbitrarily” and “capriciously” sent the girl to the convent and the boy to live with a priest. As a consequence the widow had been forced to go to live in Florence, given that she had been separated from her children, and was constantly mistreated by her stepson.

The Pupilli and the Consulta ruled in favour of the widow, that is they took into consideration her accusations against her stepson and other appointed guardians of mismanaging the patrimony, their refusal to pay the proper dowry to the daughter, and their disregard for the children’s education. We know that between 1751 and 1753 the girl was allowed to live with her mother, but in 1753 the guardians petitioned again to send the girl to a Convent, obtaining this time a favourable response. On this occasion, the Consulta ordered the Pupilli to control Eleonora, who given her “fervido umore” might oppose the disposition to send the girl to a new convent.

Eleonora’s spirito inquietissimo had evolved into a fervido umore in the narratives of the officials of the Pupilli, complicating the picture of her turbulent disposition, and bringing

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506 “...mutato pensiere se ne tornò in Firenze seco conducendo il ragazzo per un tempo stranissimo di fitto inverno, e lasciollo in abbandono.” Petition of Andrea Avellino Giovacchini denouncing the improper behaviour of his stepmother, Eleonora Cecchi. ASF, MPAP, Memoriali, F. 2302, no. 275, 9 June 1751.
507 “portatasi a Pistoia arbitrariamente, e quasi per forza levò dalla zia la figlia senza saputa del Magistrato e dei tutori conducendola nel detto Convento de S. Pier Martire”. Idem.
508 The biglietto says: “e mente della Reggenza medesima, che atteso il fervido umore di detta sua madre, VS. Illma prenda nell’esecuzione del presente rescritto tutte quelle precauzioni, che stimerà necessarie, affinché il passaggio di detta fanciulla nel monastero, segua con quella quiete, proprietà, e convenienza, che si conviene...”. ASF, MPAP, Memoriali, F. 2303, no. 76, 24 February 1753.
her even closer to the features of insanity. **Fervido** came from **fervente**, meaning **bollente** (boiling) and **intenso, veemente** (intense, vehement). In other words, she had been characterized as a person of boiling temper, an image traditionally associated with the irrational effects of anger, combined with her passionate character. Her boiling, intense and unstable temper put her in urgent need of being controlled. Her boiling temper made her dangerous because her reactions could not be anticipated, and her past record of unexpected reactions made it necessary to prevent a new episode from happening.

The case reveals, for sure, the instrumental use of women’s emotional instability to secure determinate legal outcomes. As later chapters will argue, emotional instability was increasingly seen as a feature of mental incapacity, which allows me to safely presume that mentioning emotional instability was a way of discrediting a woman in terms of her mental capacities. The term **inquietudine** here is pivotal, as we will see. But let me first go to a slightly different realm where emotional instability and women’s uneasiness were also portrayed.

Being of a “spirito inquietissimo” or a “naturale inquieto” served not only to discredit a woman’s maternal qualities, but it is also commonly found in the descriptions given by husbands to argue their wife’s confinement in an institution such as the Conservatorio dei Mendicanti or the Malmaritate. In both cases, the resemblance with the common features of mental affliction, with its tones of extravagance, unruliness and instability comes to the fore. These conservatories of female virtue were useful depositaries of cases where sexual misconduct and mental derangement met, concealed between prostitution, adultery and donne pericolanti. When we direct especial attention to the vocabulary employed to describe these women’s disorder, we observe that the male evaluation of feminine normativity and their rejection to women’s defiance of decency and masculine authority were melded with appreciations of their state of mind.

The entry key to understanding this superposition can be found in the use of the word **inquietudine**, which we see appearing increasingly in descriptions of male mental incapacity. In the case of women it served as a basis for a petition to send them to the Mendicanti or the Malmaritate. As in the example of Anna Geltrude Modeni, a 74-year-old widow who

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510 On this argument, see Lombardi, Povertà Maschile, povertà Femminile, particularly “Da inutile seraglio dei mendici a conservatorio e casa di forza per le donne”, pp. 135-215. See also Chapter 5, section 5.3.
denounced her sons for expelling her from the paternal home and trying to send her to the Mendicanti, “as if she was a disturbed woman” (*come pretesa donna inquieta*).\(^{511}\) She was confined there for a while, but her sons were forced to take her out after the institution’s request, on account of her bad behaviour.\(^{512}\) As I will argue in the last chapter, *inquietudine* served to indicate a disordered disposition, characterized by the unrestrained rule of affliction and passions caused by mental affliction. In fact, according to the Pupilli officers, Anna Geltrude was an *inquietissima donna*, “poorly capable of adapting to any plan.”\(^{513}\)

*Inquietudine* indicated instability, and this in turn was held to be a sign of mental disturbance. Women of “uneasy spirits” would change their minds for no reason, as we already saw with Eleonora Cecchi who, according to her stepson, had first decided to abandon her offspring, and then unexpectedly decided that she could not live without them.\(^{514}\) Anna Geltrude shared this same characteristic according to her sons, because she had been the one requesting to live separately from them, and had then made a petition arguing the opposite, that she had in fact been kicked out by them. As we will see in the last chapter, agitation of spirit, anguish, uneasiness, and in general, emotional disturbances were considered by medical knowledge as serious triggers of mental affliction. Strong, uncontrolled and overwhelming passions affected the nervous system, triggering nervous conditions such as hysteria and hypochondria, and causing mental illness.

### 4. 4. Monasteries, a Place for Psychological Disturbance?

The monastery was still a common destination for many women in the eighteenth century, although the female conventual population was lower than in the previous century,

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512 The sons said that the Auditore Fiscale made the disposition of “riservarla nei Mendicanti per la sua gran cattiva lingua, ed io che feci in capo a diciotto mesi la ebbi a cavare dalle grande iniquità che faceva nel convento, e mi pregorno di lèvarla come feci, io la ritirai in casa con vivere assieme, e non trattarci male, e lei peggio, a svituperarci, io la volsi riconvenire, mi scappo di casa oltre alle due volte, e stiede tre giorni fuori, io non la rivolsi più in casa per stare con l’animo in pace e gli mandai tutta la sua roba che ne o la nota, e le solite lire dieci il mese.” Idem.

513 “... inquietissima donna, e poco capace di adattarsi ad’alcun progetto.” Ibid.

514 ASF, MPAP, *Memoriali*, F. 2302, no. 275, June 1751. The instrumental value of the narrative should be taken into account here, but it does not interfere with the analysis of the meanings and values ascribed to the choice of certain words over others. In other words, we are not committed here to the study of the “truth” behind the narratives, but of the meanings they disclose in terms of the construction of a language of madness.
and had dropped substantially towards the second half of the century.\textsuperscript{515} In the search of a female space where we can find traces of the lives of early modern women, the monastery is revealed as a space for a series of uncategorized emotional sufferings, most of them associated with monastic life. The psychological dangers of conventual life were not an unknown or new issue in the eighteenth century.

Female monasteries had been at the centre of discussions regarding the deviant mystical experiences that characterized baroque culture, eliciting careful theological differentiations between what could be asserted as a real mystical experience, what needed to be ascribed to the devil’s doing and what to mental or physical illnesses.\textsuperscript{516} The eighteenth century witnessed the decline in cases of diabolical possession, and the rigid campaigns commanded from the Holy Office tended to reduce and circumscribe sanctity and spirituality to features that progressively distanced mystical phenomena from the passionate and theatrical features that had characterized them before. According to Elena Brambilla, the religious campaigns against the excesses of baroque mysticism and the changes in theological and medical knowledge from the end of the seventeenth century were conflated so as to produce a change that was materialized in the reinterpretation of possession into uterine hysteria, and from there to mental illness. Very much adhering to the thesis of the medicalization of mystical phenomena, which was primarily tied to hysteria, Brambilla has suggested that there was “a mutazione che decretò, non solo nella scienza ma anche nella teologia, non solo nei medici ma anche nei sacerdoti, un progressivo rifiuto dell’interpretazione teologica della possessione e la sua sostituzione con una spiegazione medica…”\textsuperscript{517} This does not mean that a new univocal interpretation was produced but, rather, that theories ascribing as much of a role to the devil as to nerves to explain mystical reactions tied to hysteria, coexisted through the eighteenth century.\textsuperscript{518}

\begin{footnotesize}
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  \item \textsuperscript{515} Paola Vismara, \textit{Cattolicesimi. Itinerari sei-settecenteschi} (Milano: Edizioni Biblioteca Francescana, 2002), p. 171.
  \item \textsuperscript{516} The historiography on possession, deviated mysticism, sanctity and \textit{affettata santità} is too vast to be completely recounted here. I will limit myself to suggesting some titles that have examined in particular the relationship between deviated or dubious mysticism and mental perturbation, mostly centred on the seventeenth century. Brambilla, \textit{Corpi invasi}; Zarri, \textit{Finzione e Santità}; Schutte, \textit{Aspiring Saints}; Moshe Sluhovsky, \textit{Believe not every spirit. Possession, Mysticism, and Discernment in Early Modern Catholicism} (Chicago: The University of Chicago Press, 2007).
  \item \textsuperscript{517} Brambilla, \textit{Corpi invasi}, p. 16.
  \item \textsuperscript{518} See Ibid., pp. 187-242. See also Lindsay Wilson, \textit{Women and Medicine in the French Enlightenment. The debate over Maladies des Femmes} (Baltimore and London: Johns Hopkins University Press, 1993), particularly her study on the debate over the Convulsionaries of St. Médard, Paris, 1727-1765, pp. 17-33. The phenomena of the Convulsionaries of St. Médard illustrates the interplay between medicine, religion and madness in the
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By the beginning of the eighteenth century we can find various traces that the Italian culture made a connection between hysteria and monastic life, or between psychological afflictions, as we might prefer for the moment to catalogue them, and conventual enclosure. I do not aim here to enter the discussion on the negative or positive effects that monastic life had on women.519 But, it has to be acknowledged that, particularly during the eighteenth century, it is common to hear voices that ascribe a pernicious psychological effect to the enclosure of women.

Forced monachization was still a reality in the eighteenth century despite the efforts of the Church to reduce it,520 and rebellious women would often end up confined within the walls of a monastery. According to Paola Vismara, forced monachization constituted a significant proportion of the conventual population, and in the eighteenth century they could still constitute the majority of the nuns in a monastery.521 Unfortunately, records of women forced into convents do not abound, as Francesca Medioli points out; quite the contrary, “very few reluctant nuns left records of their unhappy experiences.”522 Recently Anne Jacobson Schutte has called into question the traditional assumption that forced monachization affected predominantly women. Her study has elaborated on the familial dynamics behind the phenomenon, suggesting that the dynamics of forced monachization during the century were eminently determined by economic motives and the shifts of inheritance. Forced enclosure, she argues, was the outcome of a lengthy “battle of wills between those exerting force and fear and those subjected to it.”523

eighteenth century. While the defenders of the Convulsionaries claim that convulsions had been miraculously produced, physicians looked for natural causes such as seeing them as a symptom of hysterical affections. “Naturalization did not, however, entail the suspension of individual responsibility for having entertained the convulsions. Although a physiological basis to the convulsions was acknowledged, it was thought to have its roots in an eroticism that many doctors believed could be – indeed, had to be – controlled by the will of the individual”; Ibid, p. 26. On the case of a nun-witch in eighteenth-century Tuscany whose symptoms were also examined in terms of hysteria, see Anne Jacobson Schutte, “Asmodena. A Nun-Witch in Eighteenth-Century Tuscany”, in Kathryn A. Edwards (ed.), Werewolves, Witches, and Wandering Spirits (Kirksville: Truman State University Press, 2002), pp. 119-135.

519 For an actualized review of this discussion, see Brambilla, Corpi invasi, pp. 23-25. See also Francesca Medioli, “The Dimensions of the Cloister. Enclosure, Constraint, and Protection in Seventeenth-Century Italy”, in Schutte, Kuehn, and Seidel Menchi (eds), Time, Space and Women’s lives, pp. 165-180, where she examines the female experience of enclosure in terms of a combination of both protection and constraint.

520 Vismara, Cattolicesimi, pp. 159-185.


522 Francesca Medioli, “To take or not to take the veil: selected Italian case histories, the Renaissance and after”, in Letizia Panizza (ed), Women in Italian Renaissance Culture and Society (Oxford: European Humanities Research Centre, 2000, p. 123.

It is well known but poorly documented that monasteries were the most common depository for mentally afflicted women whose wealthy families were willing to keep them from the indiscreet gaze of neighbours and elite society. It is true that most mad persons were kept at home in the early modern period, but many times diverse family situations meant that they had to be sent away. It is almost inevitable here that reference be made to Arcangela Tarabotti’s *Paternal Tyranny*. With her well-known eloquence, she denounced in 1654 the practice whereby fathers usually filled convents with their undesirable, disabled and feeble-minded daughters. “They do not offer as brides of Jesus their most beautiful and virtuous daughters, but the most repulsive and deformed: lame, hunchbacked, crippled, or simple-minded. They are blamed for whatever natural defect they are born with and condemned to lifelong prison.”

In fact, the rigours of monastic life and their effects on the delicate bodies and the easily influenced spirits of women were well known, and an acknowledged factor in the appearance of physical and mental disturbances. The Italian physician Bernardino Ramazzini identified “passions of the spirit” (*passioni di spirito*) as a typical disorder of nuns in his *De morbis artificum diatriba* (1700). According to Ramazzini, while writers and philosophers were thought to suffer typically from melancholy, nuns suffered typically from passions of the spirit that needed to be controlled if they wanted to maintain themselves sound in body and soul.

Nuns were thought to be subject to particular illnesses that were believed to be specific to the conditions of enclosure. As Ramazzini outlined, monasteries were usually places with an insane air, usually constructed at the margins of the cities, where all the city’s refuses was destined. The Italian physician also recalled the pernicious effects of drinking young wine (*vino nuovo*) instead of old wine, which was safer for the stomach, had better digestive properties, and lasted longer without decomposing. A major peril for the nun’s mental and physical soundness were the dietary restrictions imposed by monastic life, which would be maximized by periods of fasting. A balanced diet would keep the nuns “as healthy as possible”, so that “with joy of spirit” they would serve God. But nothing could damage the nun’s health more, continued Ramazzini, than their interrupted and insufficient sleep.

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525 Bernardino Ramazzini, *Le malattie dei lavoratori*, Milano, 1821. The first edition was published in Latin as *De morbis artificum diatriba* in 1700, and was first translated into Italian in 1745.
regime. The problem, according to the physician, was that although they were assigned a “determined time to sleep”, they could never manage to sleep those hours through. They slept all together “in a big and long space, called by them a dormitory, each one on her bed,” where their sleep would irremediably be disturbed by the noises each one made. During the night “some cough, others sigh, others doze off loudly (strepitosamente), others dream and talk in their sleep.”

To make things worse, nuns were not only unable to sleep during the necessary hours, but they were also bound to a sedentary life, which did not provide the body with the necessary movement to keep it healthy.

Ramazzini’s list of the perils besieging nuns’ health ended with the passions of spirit (passioni dell’animo), which produced “acute internal commotions especially in the female sex.” The passions of spirit needed to be at peace (in quiete) to keep nuns healthy, the physician pointed out. Although Ramazzini did not frame it explicitly like that, his line of argument leads us to the conclusion that the characteristics of monastic life enhanced women’s natural tendency to be overwhelmed by their passions. In other words, nuns not only had an interrupted sleep pattern, but they also showed the signs of a disturbed interior that was unable to sleep properly: they would sigh, they would talk in their sleep. And sleep disorders were already being seen by physicians as symptoms of perturbed states of mind.

Ramazzini’s diagnosis of the damaging effects that conventual life could exert on the bodies and spirits of women was not unique, and in fact the severe effects exerted on the nerves by monastic life were a recurring topic of medical discussion. The numerous consulti medici devoted to the sufferings of hysterical nuns published by diverse Italian physicians tend to support this point.

For instance, among the many tasks that the renowned Florentine naturalist and physician Giovanni Targioni Tozzetti performed for the Tuscan state (he was the medico fiscale in charge of medico-legal consultations for the Otto di Guardia e Balìa and Santa Dorotea, and was also the physician of the Florentine prison, the Stinche, to name a few), was

527 Ibid., p. 344.
528 Ibid., p. 349.
529 See, for example, Consulti Medici del Signor Dottore Giuseppe del Papa Archiatro della Corte di Toscana..., Vols. I-II (Rome: Giovanni Maria Salvioni, 1733); De’ Consulti italiani di Monsignor Giovanni Maria Lancisi Medico Segreto de’ Sommi Pontefici Innocenzo, e Clemente XI. Resi pubblichi, e dedicati all’Ilmo Signore Innocenzo Ghislieri Cavaliere Romano e della Guardia Pontificia da Filippo de Carolis di Ravenna, Vol. I (Rome, 1761); Consulti Medici di Vari professori spiegati con le migliori Dottrine Moderne, e co’ le Regole più esatte della Scienza Meccanica..., vols. 1 and 2 (Venice, Presso Giuseppe Corona, 1743-1745); Consulti Medici di Niccolò Cirillo professor primario di medicina nella reggia Università di Napoli ec., vols. I-II (Venice: Presso Francesco Pitteri, 1770) [1º Ed. 1734]. See also Chapter 7.
his role as appointed doctor of the Monastero della Crocetta, from where he was consulted for different ailments, as was usual at a time when physicians had no specialization in a particular area of medicine. But a note found in the section of his *Consulti medici* devoted to hysteria is particularly telling on the nature of the ailments that commonly afflicted nuns or, at least, on the kind of sufferings nuns thought it necessary to seek medical consultation for. A man asking for Targioni Tozzetti’s opinion on the hysterical sufferings of a certain nun said he had postponed his request moved by the concern that Targioni Tozzetti was already swamped with the numerous requests from the nuns of the Crocetta and from the entire Florence “who abundantly suffer from the same ailment.”\footnote{530}

Hence, joy of spirit was not necessarily the common factor in female conventual life in the Italian eighteenth century, and various voices testified that the monasteries were full of unhappy nuns. The perturbations of spirit identified by contemporary physicians as a common peril nuns had to face were seen from outside the walls of the convent as closely connected to the phenomenon of enforced enclosure. In the words of Angela Tarabotti, convents were “a living hell for those without vocation… the place where these unfortunate women dwell… can be likened to an inferno… Only Hell itself bears a likeness to the suffering of these enforced slaves of Christ.”\footnote{531}

Even from the religious world we hear voices that recognize the negative effects enclosure could exert on nuns, particularly when they were young and unsure of their vocation. The Jesuit Giuseppe Agnelli in 1703 wrote *Il verisimile finto nel vero*, in which he sought to give advice to the discontented nuns that “unfortunately” filled the monasteries of the time.\footnote{532} The major source of nuns’ misfortunes was identified by Agnelli in the fact that most of them entered the convents without being clear about their vocations, some were even forced to do so by their relatives or by their familial situation. Nuns were usually unhappy, he said, because they were in the monastery against their will or at least reluctantly (*contro il loro volere; o di malavoglia*).\footnote{533} The profound unhappiness that would overwhelm them once


\footnote{531} Tarabotti, *Paternal Tyranny*, p. 65.

\footnote{532} Giuseppe Agnelli, *Il verisimile finto nel vero. Pensieri suggeriti dal Direttore ad una Religiosa Novizia scontenta, Per disporla alla Solemn Professione. Raccolti per uso opportuno di Meditazioni nel Triduo, o altro maggior tempo precedente alla Sagra Operazione*, In Roma, 1703.

\footnote{533} Ibid., p. 26.
inside, would easily convert into a melancholy that would alter their judgement, affecting their performance of their monastic duties. Notwithstanding the “caring” help of the female relatives that usually accompanied in the cloister, they would be weighed down by the “tears that fall abundantly from their eyes.”  

From there, their immoderate passions (*passione sregolate*) would only increase the anguish (*angoscie di animo*) that corroded them, “increasing to such a point their apprehensions and fantasies of strange melancholies, that sometimes they lose their senses, or at least are consumed little by little, until they die, desperate.”

This same awareness of the psychological effects that monastic life could have on women can be observed in debates regarding girls schooled in convents. To the distress produced by being separated from their mothers at a young age we must add the strict rules of monastic life, which were thought to produce a negative effect on their temper and complexion. Monasteries would make the girls feel lonely, disturbed and anguish, while the rigours of monastic life forced them to repress those feelings and the “tristezze d’animo” (low spirits) that affected them. As was said in a medical consultation addressed to Giovanni Targioni Tozzetti in the second half of the eighteenth century, agitations, changes of mood and perturbations (*trasporti, mozioni* or *commozioni d’animo*), if not taken into account in time, could easily lead to the appearance of an hysterical affection later on.

Widows pleading to regain custody of their underage girls would, in fact, frequently make use of this argument, as in the case of Anna Felice Venturi, who petitioned to take her daughter out of the monastery she had been sent for her education, with the argument that “in the Convent she did not enjoy perfect health.” We even find cases where mothers had taken their daughters away from a convent without the authorities’ permission, as we saw in the case of Eleonora Cecchi. She later justified her action by explaining that she had received “pressing letters” (*lettere pressantissime*) from her daughter, where she said that she “wanted

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534 Ibid., p. 9.
535 “…accresce a tal segno alle Novizie le apprensioni, e le fantasie di strane malinconie, che talvolta perdono il Senno; o almeno consumandosi a poco a poco, muoion disperate”, Ibid., p. 29.
536 For example, the maternal kin of Maria Anna Paffetti petitioned to revert the decision to send her to the Monastery of S. Elisabetta in Pontadera, which they thought could affect her “gracile complessione.” ASF, MPAP, Memoriali, F. 2307, no. 124, April 1768. The petition was not granted.
537 BNCF, Manoscritti, GTT, N. 234, cart. 2, fasc. X, *Consulti per affezioni ipocondriache ed isteriche*, fol. 210, no date and not signed.
538 ASF, MPAP, Memoriali, F. 2304, no. 135, August 1757. Antonia Pagnini, around 12 years old, daughter of Anna Venturi.
to escape at any cost” from the convent. Eleonora Cecchi believed that there was no point in having “the said girl anguished against her will, as her guardians had done until now” and confined in the convent.

Other examples are abundant. The 11-year-old Agata Landucci suffered from homesickness in the Convent where she was sent after her mother Maria Maddalena Mauri had remarried. According to her mother (deprived of her daughter’s guardianship when the latter was aged eight), Agata started to suffer “an extreme affliction” because she had been separated from her mother and sent to the convent. Because she was languishing there, “assaulted by apoplectic accidents”, she decided to take her back home. In fact, mothers deprived of the guardianship of underage daughters would usually use the argument of the adverse psychological effects conventual life could exert on them to try to prevent them from being separated from them. As this same mother said regarding another of her daughters, in the convent they were deprived of the assistance and company of their loving mothers and their next of kin. Agata, according to her, had developed apoplectic accidents precisely because she suffered there. And particularly because they were girls, they were thought to be more psychologically influenced by the change.

Nonetheless, we have much more material regarding underage girls psychologically afflicted inside the convent than testimonies about adult women. Lay testimonies regarding the experience of adult women in monasteries are difficult to find, and when we have records of the disquieting psychological situation with which nuns could be confronted, it is through mediated discourses like the consulti medici. Unfortunately in the case of the latter, what was usually conserved and published was the medical response to the consultation, and in most cases we do not have the woman’s voice. Consequently, although we know many women developed different kinds of what were recognized as mental afflictions, we only know this through medical literature, the other narratives already discussed here, or accidentally, thorough, for example, the records of the affairs handled by the Auditore Fiscale.

539 ASF, MPAP, Memoriali, F. 2302, no. 275, July 1751, Eleonora Cecchi to the Pupilli regarding her 16-year-old daughter, Maria Francesca Giovacchini.
540 “non pareva, che meritasse la pena di dover’ tenere la detta fanciulla angustiata contro la di lei volontà, come fin’ ora anno fatto i tutori, nello Spedale di Pistoia”. Idem.
541 “ma postasi in un estrema afflizione d’aver lasciata la cara madre, sempre languente in detto Monastero, assalita da accidenti apoplettici, ricondotto alla propria casa”. Petition of Maria Maddalena Mauri to regain the guardianship of her younger daughter, after Agata had died. ASF, MPAP, Memoriali, F. 2301, no. 49, April 1739.
542 See Chapter 5.
4. 5. Conclusion

This chapter has explored female madness mostly through the silence left by female insanity in the eighteenth-century Tuscan records. Starting from female interdiction procedures, we examined the features of female incapacity, pointing out that, notwithstanding their limited number compared to male interdictions in the period, these procedures are nonetheless invaluable for reconstructing what female insanity meant according to the family gaze. Strongly marked by the female life cycle, female mental incapacity was constructed upon the breaching of traditional feminine roles, such as obedience, motherhood or virtue. But, notions of female mental incapacity also encompassed new cultural concerns regarding femininity, such as the apprehensions generated by the new sociability, which ascribed to women not only a new visibility, but also a new place and looser behaviour in relations between the sexes. Combined with this, we see the appearance of a debate regarding the values ascribed to motherhood under the ideal of domesticity, where manifestations of a \textit{fervido umore}, or a \textit{alienazione d’animo} against their children came to be of major concern.

In an effort to overcome the lack of records on female madness in the eighteenth century, this chapter has drawn on borderline cases of disordered women whose features, although not openly labelled as mad, recall those of the women interdicted or committed on account of their insanity.

However, the most interesting feature of the eighteenth-century records is not so much this connection between distorted femininity and the breaching of behavioural codes but, rather, the position held by women in relation to mentally incapacitated men. Contradicting the vision of the feminization of madness, and the perpetuation of the traditional view that considered women as naturally irrational and unstable (as the \textit{infirmitas sexus}),\textsuperscript{543} the Tuscan records placed women in a position of power and control. Both their male kin and the authorities considered them the most appropriate palliative to the disorder caused by male insanity. Furthermore, the possibility that men could re-emerge from their disordered state was very much based on their “feminine” capacities. Women recurrently appear as playing a pivotal role as disciplining agents in the family. Their petitions to interdict their husbands or sons, for instance, frequently recalled their previous efforts to emend and correct their

\textsuperscript{543} Lindsay Wilson highlighted, based on a serious of medical case histories and causes célèbres of the French eighteenth century featuring \textit{maladies des femmes}, “the influence that traditional values, largely prejudicial to women, continued to exert in early modern society”, demonstrating “that the ghost of the medieval synthesis of medicine, ethics, law, and theology… was not entirely laid to rest by the end of the eighteenth century”. Wilson, \textit{Women and Medicine}, p. 15.
husbands, all fruitless, forcing them to petition for the interdiction.\textsuperscript{544} We can thus consider that petitioning for an interdiction was a mechanism for women to be empowered to complete a task they had already been executing before the authorities’ intervention. I have said that interdiction often resulted in women being appointed administrators of their husbands’ or sons’ patrimonies. What is interesting to note here is that their intervention was not necessarily received negatively by the affected men. We have, for instance, the case of Marco Barni, who petitioned for his interdiction to be revoked arguing that “given that now he has a spouse and children, he is now released [spogliato] from all those passions that before moved him to spend unnecessarily.”\textsuperscript{545}

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\textsuperscript{544} Isabella Corbini, wife of the interdicted Cammillo Moresi. ASF, MS, \textit{Suppliche}, F. 1208, fol. 337, April 1761
\textsuperscript{545} “...stante che in oggi per aver moglie e figli si è spogliato di tutte quelli passioni, che prima lo portavano a fare spese superflue”. ASF, MPAP, \textit{Memoriali}, F. 2305, no. 92, Septiembre 1760.
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PART II. ITINERARIES OF MADNESS AND THE CIRCULATION OF LANGUAGES
During the eighteenth century, Tuscan families could turn to various mechanisms to deal with the difficulties posed by madness. In their battle to govern, curb, contain and cure their mentally suffering relatives, families could resort to the course of action that most suited their aims and needs, sometimes experimenting with various of them, other times holding only to one. Although scholars have convincingly argued that the mechanisms employed to control or deal with madness in early modern Europe were eminently temporary and flexible, specialized historiography has failed to delve into the connections between them. Studies on the history of madness generally centre their attention around one of the many scenarios in which madness left its record in the early modern world, whether the household, the hospital or prison, criminal and civil proceedings, or the more evocative realms of literature and culture. However, less attention has been paid to the connections between one arrangement or space of appearance and another. The mapping of madness onto the landscape of the mechanisms provided by the Ancien Régime still needs to be done. 

This chapter is intended as an attempt to expand the focus from the interdiction procedures to other spaces and mechanisms where madness makes an appearance in the eighteenth-century Tuscan records. It first examines criminal justice and insanity pleas, then gives a summary analysis on the admission procedure to Santa Dorotea, to finally examine the special and executive matters handled by the Auditore Fiscale (the chief of Police), and ends by elaborating on the itineraries of madness. The primary concern is to examine the multiplicity of available arrangements through which families, communities and authorities could respond to the problems exerted by madness. This approach allows me to demonstrate that the increasing concern for madness and its dramatic visibility was not confined to legal inquiries into mental capacity, but was present in many different fronts of social life. Madness

546 Scholars such as Roscioni, MacDonald or Porter, for instance, have centred their attention on the medical dimension of madness, even if from a socio-cultural approach. Conversely, scholars working on criminal insanity, such as Rabin or Eigen, have generally not connected their analysis with the medical or extra-criminal dimension. Likewise, the series of British studies that initiated the trend of a history of madness “outside the walls” of mental institutions, such as those followed by Rushton, Suzuki or Wright, has focused on the family as the primary “locus of care”, but has devoted less attention to following the itineraries of madness. Finally, studies on the cultural representations of madness tend to circumscribe their scope only to the realms of literature. The most salient works are: Roscioni, Il governo della follia; MacDonald, Mystical Bedlam; Porter, Mind-Forg’d Muncles; Rabin, Identity, Crime and Legal Responsibility; Eigen, Witnessing Insanity; Calabritto, “A Case of Melancholic Humors”; Rushton, “Lunatics and Idiots”; Suzuki, “The Household and the Care of Lunatics”; Wright and Digby, From Idiocy to Mental Deficiency; Ingram and Faubert, Cultural Constructions of Madness.
could also appear in criminal proceedings or hospital records, as the object of official reprimands or of executive measures like imprisonment or forced embarkation. Furthermore, these measures are to be interpreted as a combined effort to control the public and private effects of madness in which authorities and families worked hand in hand.

Mapping the itineraries of madness discloses a complicated net of possible destinies and available courses of action to deal with the problem of madness. Although each measure had a separate procedure with no standardized connections, we do have the possibility of following some individuals who make an appearance in more than one scenario. Following the alleged mad across different settings allows us to enrich significantly our view on the problem of how madness was perceived, understood, conceptualized and handled. Our settings and locus of madness here are no longer bound to the domestic environment and professional life, but are open to the city and the countryside, including hospitals, monasteries, prisons and vessels. Madness could assume the form of mental incapacity, justifying interdiction, or assume the form of raving mania that justified confinement. It could be used to argue impunity in a criminal procedure, or be used as an argument in an intergenerational or matrimonial dispute that is disclosed to the authorities in special petitions submitted to the Grand Duke. Madness could thus assume manifold forms, and even the same person could be depicted differently according to the context to which his or her mental disorder was disclosed.

This chapter is built upon the contention that understandings of madness were of a contextual and contingent nature. Madness in the early modern period was measured against patterns of normality that were conditioned by variables such as age, gender, social role and status. This evaluation was further shaped by the requirements of each of the spaces in which madness occurred and where madness was disclosed, conditioning its forms and meanings. As I have been suggesting, the identification and evaluation of deviant behaviours that were singled out as evidence of mental derangement was deeply entrenched in the context in which the said behaviour developed.

Rather than being generically shaped, the general features of deviant behaviour whose cause was connected to mental derangement were adapted and modelled according to the context of its appearance. Consequently, why the behaviour was denounced or why it received public attention and where, profoundly change the arguments that revealed its presence. Civil law, we saw in the previous chapters, conditioned the characteristics of mental incapacity as to fit the parameters set by interdiction procedures. The same happens with
criminal law, admission records of mental hospitals or special requests made directly to the central government or through the Auditore Fiscale.

5.1. Criminal Insanity

Criminal prosecution in Grand Ducal Tuscany, centralized in the tribunal of the Otto di Guardia e Balìa, aimed at establishing liability, which was contingent upon providing evidence of criminal intent and motivation for committing the crime.\(^{547}\) However, as Roman law had established, the very nature of madness supposed that the mentally afflicted lacked criminal intent and motivation, for they were taken to be devoid of judgement, intention and will. Following this classical principle, the Tuscan legal framework placed the criminally insane under the category of “exception of innocence” which released them from punishment.\(^{548}\) Madness was, after all, punishment enough.\(^{549}\)

Diminished responsibility by reason of madness could be established through two courses in early modern Tuscany: during trial, or alternatively through a supplica submitted after conviction and once the sentence had been pronounced. According to the famous summary of Tuscan legal practice compiled by Marc’Antonio Savelli, the criminally insane could adduce insanity through a procurator or a relative even if they were contumacious. As

\(^{547}\) The central criminal court of the Grand Ducal Tuscany was the Otto di Guardia e Balìa, which supervised all the other criminal courts of the territory. Criminal procedures could be initiated in three ways: through the denunciation of the civic authorities; through private accusation; or on the initiative of the judges (ex officio). The case started with the informatory process, during which the criminal courts had to gather as much evidence as possible and interrogate witnesses to determine if the accusation or suspicion of crime was grounded. When there were enough grounds to proceed, the accused was publicly notified to appear before the court, and was given a report of the informatory process that was to be used to build a defence with the help of a procuratore de’ poveri (procurator of the poor). Once summoned to court, the accused could decide to remain contumacious, fail to attend and disappear, respond to the summons and confess or plea his/her innocence, or appear later with a prepared line of defence, once they had managed to obtain peace with the offended party. Depending on the seriousness of the crime, the accused could be held in prison during the informatory process. The Tuscan criminal procedure in all its stages, possibilities and consequences can be seen in Savelli’s famous handbook of criminal practice. See Savelli, Pratica Universale, pp. 5-22, first published in 1665, with seven editions until 1748. See also John K. Brackett, Criminal Justice and Crime in Late Renaissance Florence, 1537-1609 (Cambridge: Cambridge University Press, 1992) and Trevor Dean, Crime and Justice in Late Medieval Italy (Cambridge: Cambridge University Press, 2007).

\(^{548}\) Savelli, Pratica Universale, p. 108.

\(^{549}\) “References to the insane in Justinian’s sixth-century Digest, the part of the corpus Juris Civilis intended for judges and magistrates and which included selections from classical jurists, noted that uncontrollable lunatics and murderers who were insane at the time of the crime, and not merely feigning, should be imprisoned or confined in their homes, but not punished; insanity was itself punishment enough.” Watson, Forensic Medicine in Western Society, p. 72. See also Robinson, Wild Beasts & Idle Humours. The Insanity Defence From Antiquity to the Present (Cambridge: Massachusetts and London: Harvard University Press, 1996), pp. 8-47.
Savelli warns his readers, this could turn in their favour, because if they were not found to be mad after all, they could continue without being punished.\footnote{Savelli, \textit{Pratica Universale}, p. 108. He recommended that such cases be avoided, and instead advocated for insanity defences in which the accused could be directly examined by the judges with the support of medical experts, and, although not necessarily imprisoned, he recommended that they be kept under proper custody. Normally, failure to appear before the court after being notified that criminal charges had been brought against them resulted in an “automatic sentence of guilt” accountable for full statutory penalty.}

Insanity pleas entered during trial are difficult to find in the eighteenth-century records of the Otto di Guardia, which is particularly striking compared to the high rate of interdiction decrees issued during the same period. Their scarcity is explained in part because, by definition, the insanity defence required that the accused plead that they were guilty but not responsible by reason of mental incapacity, which was hazardous and entailed the mastering of basic legal principles or, alternatively, the possibility of receiving legal advice. In this sense, it was safer either to attend trial alleging innocence, in the expectation that the evidence would exculpate them or be inconclusive, or remain contumacious to the Otto’s instruction to appear before court. The other explanation as to the scarcity of insanity pleas is connected to the characteristics of the archive of the Otto di Guardia itself. In particular, its massive size, combined with its frequent lacunae make it difficult to conduct a thorough search.\footnote{My survey of the Otto di Guardia aimed at grasping the criminal language of madness rather than at building a complete map of criminal insanity. Both the dimensions of the archive and the scope of this thesis made it impossible and at the same time unnecessary to perform an exhaustive search. This section is therefore based on an in-depth scrutiny made for roughly every three to five years between 1720 and 1770 of the different sections of the archive of the Otto di Guardia (namely Negozi, Negozi dei Rettori, Suppliche, Straordinarie). Depending on the size of the volumes (Filze) and the characteristics of the findings, my sounding out covered more than one consecutive year. For this reason, the results are not intended to be numerically representative, but qualitatively meaningful in terms of the understanding of madness in criminal justice.} Finally, it is possible that exemption from legal liability by reason of insanity was determined through informal pre-trial resolutions that left no trace.\footnote{The tendency to resolve insanity pleas through informal pre-trial resolutions was common in eighteenth-century England, for example. See Rabin, \textit{Identity, Crime and Legal Responsibility}, p. 42.}

Insanity pleas to a certain extent could be better argued after trial, once the accused had been convicted and the sentence pronounced, using the instrument of the \textit{supplica}. Supplications to obtain a \textit{grazia} from the Grand Duke in the form of a mitigated sentence or a full pardon were the only available mechanism to appeal a sentence. Supplications constituted a legal course of action in which personal and more emotional experiences, so necessary to sustain an insanity plea, could be received with more sympathy, contributing to a more favourable response. Accordingly, many insanity pleas in the eighteenth-century records come to light in the form of petitions sent after conviction.
Categories of Criminal Insanity and the Assessment of Diminished Liability

In terms of legal practice, the conviction and sentencing of criminals found mentally afflicted rested entirely on the judges’ power of arbitrio, which gave them liberty to decide without following the statutory law. Exemption from statutory penalty was not understood as automatically liberating the criminally insane from all kinds of punishment, but only as the possibility of diminishing the penalty at the judge’s discretion. Recourse to arbitrary penalties gave the Tuscan legal system the necessary flexibility to deal with criminal insanity, adjusting each penalty according to the varying levels of responsibility that could be found in the different forms of madness.

Exemption from punishment by reason of madness generated a complicated dilemma for the practice of law, particularly regarding the identification of the different kinds and degrees of madness, the assessment of how each kind affected the person’s legal responsibility, and the decision of what, in accordance, to do with the criminally insane. As we can see in Savelli’s Pratica Universale, legal theory was still largely based on the principles stated in the famous work of Paolo Zacchia, who had established different levels of legal responsibility according to the various categories of madness. Referencing Zacchia’s work, Savelli recalled that there were different kinds of “pazzia, furore o demenzia”, which were differentiated according to origins and degrees of mental alteration. Whereas Savelli used the categories of pazzia, furore and demenza as equivalent, Zacchia in his Quaestiones medico legales had proposed the use of dementia as a generic term comprising all kinds of mental afflictions. Focusing on the various signs and manifesta\-tions of madness, he classified them according to the degree in which the rational faculties were compromised: fatuitas (with diminished mental faculties), delirium (altered mental faculties) and mania (where mental faculties were completely lost). After classifying the kinds of dementia, Zacchia thoroughly examined the different signs of madness (codified in specific behaviours

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553 Arbitrio meant that the penalty was decided at the discretion of the judges, and was generally used to give a lenient sentence to a crime that, according to the statutes, deserved a harsher one. The Otto di Guardia e Balìa were given arbitrary power in 1478, which granted them independence to judge without reference to the statutes. Giovanni Antonelli, “La magistratura degli Otto di Guardia a Firenze”, Archivio storico Italiano XCII (1954), pp. 3-40 and Brackett, Criminal Justice and Crime, p. 4.

554 Savelli, Pratica Universale, p. 107.

555 The comprehensive classification of the different variations of madness appearing in Zacchia’s Quaestiones medico legales (1621-1635) proved to have long-lasting effects in the legal practice of the Italian peninsula. Calling into question the actual novelty of Zacchia’s work, scholars during the past decade have challenged the once indisputable position of Paolo Zacchia as the founder of forensic medicine, placing his work in a larger development that stretches at least two centuries back. See Mellyn, Mad Tuscans and Their Families, particularly Chapter 5; Pastore and Rossi, Paolo Zacchia, and Boari, Qui venit contra iura.
but also in physical signs) so that judges could carefully assess the level of mental impairment they were faced with, and establish a penalty in accordance with the level of responsibility it entailed.556

As shown in the previous chapters, legal inquiries into mental capacity that eventually led to interdiction were largely built upon the category of dementia as the generic term for legal mental incapacity. Criminal records, on the contrary, appear less definitive in this matter. In fact, it is difficult to find a pattern in the use of categories of criminal insanity in criminal procedures. While the types of insanity covered appear to be somehow broader than in civil procedures, the scope of the descriptions giving meaning to them is much more limited. The categories are generally bound to a basic legal language, such as the generic demente and mentecatta/o, or terms denoting intellectual impairment, such as stolidezza, mellessagine or fatuità. The employment of these categories demonstrates that the Roman legacy was still entrenched, having incorporated minor Italian variations after the vernacular was introduced as the official court language in the early sixteenth century. Although there is some evidence of the use of specific medico-legal terms, such as lucid intervals, melancholy or frenzy, what prevails is the recurrent use of the less specialized pazzia (both legally and medically speaking). The evidence examined suggests that insanity pleas employed mostly simple, non-specialized categories of insanity. Different variants of stupidity, foolishness or even undefined unsoundness of mind are common to find. The legal category of demente, so vital for assessing mental incapacity in interdiction procedures is here even further diluted into a plain denomination of pazzo or matto.557

The recurrent use of simple categories of madness and the cursory descriptions of the behaviours that accompanied them are contrasted profoundly with the complex nuances exposed in Zachia’s Quaestiones medico-legales or in early modern Italian Consilia.558 Even if the influential work of Zachia had organized and categorized a series of possible variants for criminal madness, with its corresponding legal implications, the criminal proceedings of the eighteenth century had diluted its employment to routine quotes to the author with no

556 Colombero, “Un contributo alla formazione della nozione di malattia mentale” in De Bernardi, Follia, psichiatria e società.
557 This finding contradicts previous studies that suggest that the term pazzo progressively fell into disuse towards the seventeenth century. See Ibid, p. 127.
558 See, for instance, Monica Calabritto, “Medicina practica, consilia and the illnesses of the head in Girolamo Mercuriale and Giulio Cesare Claudini. Similarities and differences of the Sexes”, Medicina e storia 11 (2006), pp. 63-83; Calabritto, “A Case of Melancholic Humors”; Mellyn, Mellyn, Mad Tuscans and Their Families, chapter 5.
further disquisition. But, in general, the characteristics of the records made it unnecessary to provide specific categories of criminal insanity. Interestingly, records of pre-trial or executive resolutions regarding criminal insanity utilise a vocabulary decisively more attuned to jurisprudential language, such as references to “lucid intervals” (lucidi intervalli), “furore of madness” (furore di pazzia) and “melancholy” (malinconia). Institutional eighteenth-century records consistently demonstrate that the use of specialized language was highly dependant on the requirements of each procedural space in which madness makes its public appearance. This landscape, combined with the particularities of the Tuscan way of keeping criminal records explains the absence of more straightforward categories of criminal insanity.

Interdiction procedures show that the category employed was not what mattered for assessing mental incapacity, but rather the events and circumstances surrounding the alleged insanity. It was the context, much more than the category, which gave government officials the clue to determine if the person (and the patrimony) needed the interdiction. Likewise, criminal insanity was also assessed in close examination with the events surrounding the crime, with particular attention to the biography of the accused and his or her behaviour after the crime was perpetrated. Nonetheless, whereas interdiction procedures scrutinized current and subsequent consequences of insanity, criminal procedures were concerned with its past.

Criminal proceedings for suspected suicide are particularly useful for examining the principles used to assert soundness of mind and liability, so long as in these cases defensive efforts were directed to rebut the suspicion of madness. Absence of wrongful intent was not paired here with a lack of discernment, but with fortuity and accident. This demonstrated that although the suspects had dangerously injured themselves, it had been accidental or out of mere bad fortune, instead of “out of desperation.” The context surrounding the events was the key elements used to complete the puzzle, together with expert medical opinion on the self-inflicted wounds. It could happen that testimonies identified a motive to commit suicide, declaring that the injury had been committed “out of desperation because he was litigating with his brother Carlo by cause of their paternal inheritance,” or that after a serious fall suffered some months before, the accused had given signs “that he was of imperfect mental sanity.” Nonetheless, even in these cases if the physical evidence was inconclusive,

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559 See ASF, Consiglio di Reggenza (hereafter CR), Fiscale, F. 756, no. 7, 1760-61 and F. 758, no. 61, 1754.
560 “...il Lorenzi si ferì nella gola dalla disperazione, perché litigava con Carlo suo fratello per causa dell’eredità paterna...” and “…affermando la madre, la sorella ed una compigionale, che costui fin dallo scorso dicembre doppo che cadde da un barbero mostrava di essere di non perfetta sanità di mente...” Respectively, ASF, OGB, Giornale di Negozi, F. 1071, August 1765, f. 262 and Ibid., September 1765, f. 282 and f. 283.
conviction would not be reached. In the two cases cited here, charges were dropped with the argument that the injuries had not been lethal, and that the evidence was not enough to sustain that the injury had been self-inflicted.

Two elements were carefully assessed by the judges: the physical evidence and the mental state of the injured prior to the alleged attempted suicide. The first consideration was in the charge of medical experts, while the second was largely based on hearsay testimonies. Although in the cases cited above the self-offenders were at the end acquitted, the testimonies gathered regarding their state of mind are all the same interesting. A clear connection was made between desperation or unmanageable emotional turmoil and suicide, on the one hand, and between mental impairment and suicide, on the other. In other words, suicide was clearly considered as a sign of insanity, placing Tuscany in the wider European scenario of the secularization of suicide.561

Another case of attempted suicide, this time with fatal consequences, gives further insight into the logic employed to assess the state of mind in which the man found himself before and as he committed his desperate action. The case is disclosed in an extrajudicial inquiry developed by the Auditore Fiscale to ascertain if murder could be ruled out in a reported case of suicide. The information was that a fratello converso serving in the Jesuit college of San Giovannino had jumped off a terrace, “oppressed by a furore of madness” (soppresso da furore di pazzia) and was in mortal danger.562 The inquiry revealed that the fratello had a known tendency to suffer similar episodes of madness, and in fact had been “oppressed by a similar fury” in the past, on account of which he had been sent to Rome where he had managed to heal and had been consequently sent to serve in the college in Florence. The Auditore Fiscale was informed:

“that he had not given other signs of mental confusion [sconcerto di mente], but that a few days before the accident occurred he had demonstrated [some] melancholy [dimostrata della malinconia], and that the same morning, while he was doing his service in the cell of father Niccolai, all of a sudden threw himself at his feet, asking

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561 For instance, before the eighteenth century English judges could still consider suicide as the outcome of rational behaviour. The problem of how to explain and punish suicide was a matter particularly intertwined with the religious sanction of the suicidal act. The issue at stake was that suicide could have been rationally planned, contradicting the principle of criminal intent and liability that necessarily needed to be ruled out in order to declare a criminal non compos mentis. See MacDonald, Mystical Bedlam, p. 137.

562 Domenico Brichieri Colombi to the Council of Regency, ASF, CR, Fiscale, F. 758, no. 61, December 1754. A fratello converso was a lay member of a religious order.
for forgiveness for all his faults, and that this [behaviour] had confirmed the suspicion of some new perturbation.”

The members of the congregation were so aware of the possible consequences of this new melancholy and perturbation that, just before the fatal accident occurred, they had arranged for his transfer to a place where he could be held under custody. Consequently, according to the Auditore Fiscale there was no need for a further inquiry into the “unfortunate accident”, given that it was evident that “he had exposed himself to the danger in which he died oppressed by a fit of frenzy [assalto di frenesia].”

That he acted motivated by the mental confusion caused by melancholy was therefore proven by his biography and previous behaviour. It was clear to the legally trained Auditore Fiscale that responsibility for the crime could only be assigned to the poor converso, and that his perturbed state of mind had led him to the fatal end. Moreover, the situation was so clear to the authorities that it was decided not to follow regular criminal proceedings, revealing yet another possible hint as to why it is so difficult to find insanity pleas in the Tuscan criminal records. Although we cannot identify any expression that indicates that the suicidal act was morally condemned or that it was regarded as a sin, it was clearly better left concealed than publicised through the proceedings of a regular trial.

Which actions denoted awareness of one’s doings, which were the product of a deranged mind, was highly dependent not only on the context and events surrounding the crimes, but also on the behaviour of the defendant during trial. It was vital to assess if they understood the consequences of their actions, if they remembered them, if they felt any remorse, or how they explained what had happened. Here the supervision exerted by the Otto di Guardia over local criminal courts could result in a harsher sentence for someone whose insanity defence had been considered plausible in the first place. This was the case for Santa Venturini, tried for infanticide in 1730, who pleaded innocent claiming that she had not

563 “Che non aveva dato altro segno di sconcerto di mente; ma che pochi giorni prima del seguito accidente aveva dimostrato della malinconia, e che in quella stessa mattina, facendo il suo servizio nella stanza del padre Niccolai, a un tratto se gli era gettato a piedi, chiedendoli perdoni de suoi mancamenti, e che questa cosa aveva confermato il sospetto di qualche sua nuova turbazione”, Ibid.

564 “A me non sembra che sia luogo a far di vantaggio in questo disgraziato accidente, vedendosi manifestamente che sorpreso da un’assalto di frenesia il povero religioso si espose al pericolo, in cui peri”, Ibid.

565 The Otto di Guardia was at the centre of the criminal system, and supervised local courts. The Otto’s decisions were in turn supervised by the Auditore Fiscale, in the name of the Grand Duke. For an overview, see Antonelli, “La magistratura degli Otto di Guardia”; Brackett, Criminal Justice and Crime and Floriana Colao, “La giustizia criminale come momento di identità dello stato toscano”, in Ascheri and Contini La Toscana in età moderna, pp. 129-175.
been aware of her pregnancy and that she had suffered a natural abortion.\footnote{\textit{Che la medesima è tenuta innocente di detto fatto, e creduto, che l’aborto si a seguito naturalmente, e che non si sia accorta della gravidanza per essersi supposta idropica..."}. ASF, OGB, \textit{Negozi dei Rettori}, F. 2134, \textit{Negozio} 7275, no. 1, June 1730. A similar line of defence was used by Maria Angiola Comanducci, in ASF, OGB, \textit{Suppliche}, F. 2499, no. 74, November 1720. Pleading innocent to the charges of infanticide was a recurrent strategy by women in early modern Italy as a last, and many times useless effort to conceal the shame of the illegitimate child. See Adriano Prosperi, \textit{Dare l’anima. Storia di un infanticidio} (Turin: Einaudi, 2005).} To uphold her innocence, she argued that her actions were the result of her “simplicity and foolishness” (\textit{semplicità e stolidezza}), which made her behave “like a mad person without a brain” (\textit{come una pazzerella, e senza cervello}).\footnote{\textit{...precedente operato procedesse da malizia, e non da semplicità..."}, Idem.} She had let herself be deflowered only due to her simplicity and naivety (\textit{dabbenaggine}), she explained to the authorities. Nonetheless, her simplicity and foolishness could not be proven according to the Otto officials and, quite the contrary, her depositions demonstrated that she possessed sufficient intelligence to have realized she was pregnant and understood the consequence of her actions. Particularly since she had confessed her crime several times during the proceedings, although had afterwards retracted. Thus, her actions were held “to come from malice and not from simplicity”, causing her to be sentenced to seven years at the Stinche (the Florentine prison) instead of the two years of internal exile (\textit{confino}) originally proposed by the regional court.\footnote{On the classification of evidence to prove insanity in early modern Italian legal procedures, see Boari, \textit{Qui venit contra iura}, pp. 35-50; Calabritto “‘Furor’ Melanconico”, p.123.} She had avoided death penalty, however.

The crucial point in an insanity defence was to demonstrate that the accused was indeed devoid of will and intention. According to the legal principles, absence of will and intention implied lack of malice and premeditation, which were the fundamental elements to determine liability. For this reason, criminals resorting to the insanity defence strived to convince the judges that they lacked malice, and that the crime, particularly if murder, had been the result of an accident or the effect of their diminished comprehension of reality.\footnote{ASF, OGB, \textit{Negozi dei Rettori}, F. 2134, \textit{Negozio} 7275, no. 1, June 1730.} At the base of insanity defences, therefore, was the argument that there was no motive for the crime. Nothing could have predicted it and nothing in the previous behaviour of the accused, except from the fact that they were deemed mad, anticipated the crime.

The case of Natale Righini from Firenzuola, tried in 1730 for attempted parricide, illustrates how insanity defences were considered by Tuscan criminal justice. Although testimonies argued on his behalf, including from Righini’s father and brother, stated that he was \textit{matto}, the judges questioned the level of mental disturbance he suffered from and,
particularly, the legal consequences derived from it. The facts surrounding the crime were that Righini was a young man who refused to work and insisted on wandering about in complete idleness, as did many other disorderly young men of the time. He had shot his father when the latter was reproving him for his refusal to stay at home and work as he was supposed to. Although the officials of the Otto di Guardia in Florence conceded that a motive for the crime could not be identified, given the father had been only “lovingly” reprimanding his son when the so-called matto had pulled the trigger, Righini’s alleged dementia (se sia o non sia veramente demente) needed further proof. Four new witnesses were examined to assert his mental condition, of whom we are given no information regarding their identities. The inquiry revealed, according to the Florentine officials, that he:

“is not mad [pazzo] but only slightly diminished of the brain [scemo di cervello], which is not in a degree that deprives him the cognition of what he does, since both before and after the crime under inquiry, he could manage his affairs [fare i fatti suoi] as any man. Although sometimes he went wandering here and there without working, he received his sacraments, attended mass and stayed at Church composed as the other men...”

The magistrates, therefore, considered him to be an ordinary man who neither gave motive to be laughed at nor to be admired. They conceded, nonetheless, that “maybe” he occasionally manifested some “inconsistences in his speech”, and sometimes walked decidedly towards a certain destination only to suddenly change his course for no reason, “which gave motive to those watching him to call him pazzo.” However, the fact that after the crime he fled from the paternal residence stood against him, for it was taken to reveal his awareness of the significance of his actions. Consequently, on account of the evidence gathered, the magistrates considered that “such a foolishness” (melensaggine), which only partially estranged him from reason, could “excuse him” only to a certain extent, but not completely.

As a consequence, although he was spared the death sentence, he was sentenced to the arbitrary penalty (pena arbitraria) of 10 years in the galleys plus a pecuniary penalty for illegal possession of weapons.

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570 “...si ricava che l’Inquisito non sia pazzo, ma solamente alquanto scemo di cervello, il che per altro sia in maniera che non gli tolga la cognizione di ciò, che opera, essendo che tanto avanti il delitto del quale si tratta, quanto dopo faceva i fatti suoi come gli altri uomini, benche tal’ ora, andasse vagando in qua, e in la, senza lavorare, che si sacramentava, andava alla messa e stava nelle Chiese composto, come gli altri uomini...”, ASF, OGB, Negozi dei Rettori, F. 2134, Negozi 7254, no. 1, April 1730.

571 “...che non dava materia di riso, ne d’ammirazione, ma solo che tal’ ora s’incaminava alla rassegna, e giunto a mezza strada, senza alcun motivo tornava indietro, il che dava motivo, a chi lo vedeva di tacciarlo di pazzo, ricavandosi di più che forse tal ora potesse avere qualche incostanza nel discorso...” Idem.

572 Idem.
The degree into which the legal foundations of insanity pleas permeated through Tuscan society is hard to assess. When mental incapacity was argued during the trial, the records give only shallow glimpses into the characteristics and meanings of the alleged mental incapacity, and we often have no way of knowing how the defence was conducted or by whom. It has to be taken into account that eighteenth-century records of the crimes judged by the Otto di Guardia present mostly the summary of proceedings. Although it is possible to find records of the complete proceedings, it is difficult to come across an insanity defence in the hundreds of crimes recorded in no order. For this reason, the language of madness that we can access here is even more mediated than the one examined in interdiction procedures. We barely have occasion to glimpse the judges’ reasoning, and even less can we access the language of the accused and their relatives. Against this scenario, supplications provide a valuable counterpart, as their records tend to incorporate a wider variety of voices, although authorship is anyways a controversial matter.573

If we follow the scholars who have examined Tuscan civil and criminal justice in the previous centuries, we can assume that legal arguments were fairly entrenched in society. Studies on criminal justice in medieval and early modern Italy have disclosed the population’s capacity to appropriate legal knowledge and judicial machinery, enabling them to make use of defensive strategies, and manage an instrumental use of justice.574 Centuries of appropriation and maturation of legal principles and judicial mechanisms provide the context of interdiction procedures in the eighteenth century. We know that the higher up on the social scale people were, the deeper and more influential was their relationship with public institutions. Here, again, language comes as a helpful tool to elucidate in part the problem. The evidence gathered suggests that there was a widespread social awareness regarding the implications of madness in legal responsibility. Petitioners repeatedly alleged that they were or that the accused was mentecatto, pazzo, unable to understand what they were doing, unable to act with premeditation, as we saw in the case of Righini and Venturini. The basic principle commanded was that their intellectual impairment and altered mental state prevented them from both commanding their actions and understanding their surroundings. However, I am

573 Some of these petitions were signed by the avvocato dei poveri, others were directly written by relatives or by the convicted felons themselves. Who wrote the petition, and the ability to argue exculpatory circumstances was directly related to the social origin of the petitioners. Poorer prisoners made use of the public lawyers, richer ones could write directly themselves, and could even afford the costs of private legal advice.

574 The extent of the instrumentalization, and the space of manoeuvre given by Italian legal frameworks is a matter of debate. For an overview of the discussion, see Dean, Crime and Justice, 17-28. See also Bellabarba, Schwerhoff and Zorzi, Criminalità e giustizia in Germania e in Italia.
more cautions regarding the social permeation of more specialized medico-legal concepts, such as lack of malice or impunity or notions about the different gradations of criminal intent and diminished accountability derived from madness. The appearance of these specialized legal notions can be interpreted, we can safely assume, as the sign of the involvement of legal advice. At a social, non-specialized level, there was a well-established awareness of the effects of pleading insane, but the arguments and resources of knowledge to do it varied greatly according to wealth and education.

In 1743, Lorenzo Buonriposi was convicted of sodomy, and sentenced arbitrarily to 10 years in the galleys. Shortly after the sentence had been issued, his parents petitioned the Grand Duke to obtain the grazia of a full pardon or, at least, a reduction of the sentence, declaring that it was invalid and needed revision. The criminal proceedings reported that Buonriposi had confessed voluntarily not only that he had sodomized the other suspect, but also to have been sodomized by him and others several times, and to have masturbated “almost every day” for the last “seven or eight years.” Using terms which suggest they had received legal advice, the plaintiffs claimed that the criminal prosecution had been “irregularly fabricated”, inasmuch as there was no record of the insanity plea that had been entered in Lorenzo’s defence and, furthermore, there was no evidence against him. Above all, his “fatuity and foolishness” (fatuità, e stolidezza) rendered him “incapable of malice”, making him “non punishable” (sarebbe impunibile).575

The reasoning behind this petition in many aspects escapes the norms of similar requests to mitigate sentences on the grounds of insanity. Direct reference to eminently legal arguments such as that the legal proceedings were to be declared null, or that the accused was incapable of malice and deserved impunity, were not the norm. Even less frequent was the use of the Latin terms that appeared in this petition (nullo iuris ordine servato) to refer to the breach of legal norms denounced in the proceedings. Even the lay testimonies supporting the petition suggest direct legal counselling, for they were crafted in close compliance with the

575 “…rappresentano essere stato detto Lorenzo nel Tribunale del Potestà di Detto luogo ingiustamente processato per supposta sodomia, e successivamente essere stato per resoluzione del Magistrato degli’Otto ordinato doversi condannare arbitrariamente nella pena vituperosa della galera per anni dieci, ma perche detta resoluzione è destituita d’ogni fondamento di ragione per le manifeste nullità del processo sopra di ciò fabbricato irregolarmente, et nullo iuris ordine servato contro detto Lorenzo che attesa la sua fatuità, e stolidezza, come incapace di malizia, sarebbe impunibile, sebbene nulla costi in processo, anzi escluso resti il preteso delitto, per cui non ostante senza riguardo alcuno alle ragioni addotte, e militanti a sua difesa, è stato così precipitosamente risoluto in gravissimo pregiudizio del proprio interesse, e della salute, non meno che della buona fama della famiglia, e del parentado tutto, che resta aggravato da pena così infame…” ASF, OGB, Suppliche, F. 2523, no. 14, August 1743.
basic legal signs used to define a lack of discernment by reason of mental impairment: behaviour and cognition similar to that of a child and imperfections in his speaking.\textsuperscript{576}

Finally, the petitioners presented the text of his legal defence (which, although it was not signed, was clearly written in the vocabulary of the legal profession), where it was argued that his confession needed to be interpreted as the product of insanity and stupidity (\textit{confessione insensata, e da stolto}), and that it had been extorted through illegal means. Lorenzo had invented the facts of his confession and, furthermore, the medical exams had determined him as being in “the perfect state of his virginal innocence.” Thus, not only was there no physical proof of his sodomitical practices, but he also lacked the “virile and robust complexion” of those who were prone to masturbation. He finally stressed Lorenzo’s impunity on account of his fatuity and dementia.

According to the Otto officials, and taking into account the facts reported by the defence, Buonriposi’s confession in fact not only seemed implausible, but was contradicted by the medical exam. As a result, the initial sentence was cancelled, and he was temporarily “imprisoned” in his own house, from where he had fled. At the end, clearly favouring the hypothesis of his impunity, his sentence was commuted to prison (we are not told the number of years) provided the family would pay his maintenance.

\textbf{Attenuating Circumstances}

The assessment of liability, motivation and criminal intent considered not only mental impairment and madness as exculpatory, but also other circumstances such as drunkenness, and justified angry reactions. Crimes committed while heavily inebriated or seriously influenced by a strong and justified rage were considered as attenuating circumstances deserving a lenient sentence, provided the accused had appeared before court. If contumacious, on the contrary, any attenuating circumstance was insufficient argument against the presumption of guilt derived from being a fugitive.

Drunkenness appears to be particularly connected to crimes of violence and assault, although it surpasses violent crimes to become a sort of immanent presence of criminal behaviour in general. Crimes committed while “altered by wine” (\textit{alterato dal vino}), or while

“not being in a perfect cognition” (*non era in perfetta cognizione*) by reason of drunkenness could also be taken to deserve mitigated sentences, provided that drunkenness could be corroborated and had been so evident as to give recognizable signs, such as staggering.\(^{577}\) Additionally, it helped the cause if the accused could prove that the crime had been unpremeditated and fortuitous, so that motive and wrongful intent could be discarded.

Alleging drunkenness at the moment of the crime served both to demonstrate that the crime had been unintentional and to diminish liability. The effects of alcohol and the instrumental use of the plea of drunkenness appear to have been known throughout all segments of society. The frequency by which drunkenness was used to explain why a crime had been committed suggests that the notion of intoxication as a factor that diminished culpability was widely accepted. The effects of inebriation on the mind were discussed in civil and criminal procedures, and drunkenness constituted a recurrent line of defence in criminal prosecution or in petitions for a reduction of sentence. Many crimes, particularly street brawls and different levels of assault took place in the environs of taverns and were attributed to heavy drinking, explained as a state of being “overheated with wine” (*riscaldati dal vino*), “almost drunk” (*quasi imbriacato*) or even so “drunk” that he “staggered due to the wine he had drunk.”\(^{578}\) The many crimes committed in a state of inebriation that were reported in the seventeenth-century *Casi Tragici* attest to the wide acknowledgement of the ill effects of alcohol and its capacity to create a temporary lack of full discernment.\(^{579}\)

Drunkenness appears almost invariably associated with male criminality. Although it is possible to find inebriated women involved in criminal acts, it is mostly tied to prostitution and to raving madness. Bearing a more straightforward moral condemnation in the case of women, alcohol’s power to obscure the human mind is generally portrayed as equally damaging for both sexes.\(^{580}\) Male drunkenness generated a more ambivalent response, eliciting both moral condemnation and pity. As a man who had been insulted while severely inebriated framed it, he had been abused at a time when “he was not in a rational state”, and


\(^{578}\) Respectively, ASF, OGB, *Suppliche*, F. 2537, no. 173, August 1761, Ibid., F. 2499, no. 28, December 1720 and Ibid., F. 2531, no. 54, September 1751.

\(^{579}\) ASF, *Manoscritti*, N. 165, “*Casi Tragici*”.

\(^{580}\) Regarding two prostitutes, for example, it was said that when they were drunk, “they have less respect than when they are in their brain, although they are always dissolute [*scorrette*] and impertinent.” OGB, *Straordinarie*, F. 2661, no. 49, c. July 1720. For a case that exemplifies the association between female madness and recurrent inebriation, see my discussion regarding the case of Maria Francesca Paoli del Feo whose mental state led her to be interdicted twice and committed to the Malmaritate in Chapters 4 and 6.
“merited to be shown compassion, not insulted.”\textsuperscript{581} In fact, according to the testimonies, on the night of the offence he “was drunk and out of himself, and did not know what he did or said, to the point that he fell into the Arno, and had rendered himself ridiculous to the whole town of Brozzi for the strambottoli [love songs] he uttered.”\textsuperscript{582} The fact that drunkenness diminished liability did not imply that severe drunkenness was not generally condemned, particularly if the inebriated man demonstrated that he was unable to hold his liquor.

Pleas of drunkenness evidently did not always result in a lenient sentence. Precisely because of its popularity and association with male criminality, judges were particularly cautious in examining the level of inebriation, a delicate matter to prove. Additionally, diminished responsibility by reason of inebriation produced a moral dilemma for the authorities, only magnified by its permutation throughout all social levels. In this sense, the need to pass exemplary and deterrent sentences was a particular concern regarding drunkenness, for it was too easy to allege total intoxication at the moment the crime had been committed and thus escape punishment. For this reason, pleas of drunkenness in Tuscany resulted in mitigated sentences which in the case of homicide or theft served to commute from the death penalty or a lifetime sentence in the galleys to relegation (confino) for life. For less serious crimes, such as brawls with no injuries, arbitrary penalties were less severe and could even result in no penalty provided the accused could present a peace settlement with the injured parties.

Drunkenness fell under the category of exculpatory circumstances because the temporary mental obfuscation derived from inebriation was held to produce a total loss of control. If a drunkard had no control over himself when committing the crime, he could not be held responsible for it; he could not have avoided it, had not planned it and was not conscious when committing it. Provided the person had not planned the crime before getting drunk, once inebriated it was not anymore in their hand to avoid it and, furthermore, they had not been in a state of consciousness while committing it. The same argument applied to other temporal derangements, such as strong passions, similarly believed to have the power of obfuscating the person’s mental faculties. However, as Savelli warned his readers, to escape

\textsuperscript{581} “...come da gran tempo astemio per cagione di povertà, essendogli stato dato dagli amici il conforto di un poco di vino, restò inebriato; e tornandosene a casa senza dar fastidio a nessuno, che ne pure era capace di darlo, fu insultato per ischerzo...allorche fu ingiuriato non era in istato ragionevole... supplica voler degnarsi di renderlo esente dalla spesa dell'offese, perché tratteggi da quello, che lo ha ingiuriato in un tempo, che meritava di essere compassionato, e non insultato...”. ASF, OGB, Straordinarie, F. 2679, no. 265, september 1757.

\textsuperscript{582} “...era umbriaco [sic], e fori di sè, e che non sapia quello che si faceva e diceva, a segno tale che cade in Arno, e si era reso ridicolo a tutto il popolo di Brozzi dagli strambottoli che il medesimo diceva...”. Idem.
from ordinary penalty the crime must have been committed under “just rage, anger, or pain caused by offences, provocation or other just causes.”\textsuperscript{583} To be given a lighter punishment, the offender needed to prove both that his or her rage had been justified, and that it had been such as to temporarily obfuscate his or her judgement. This was the case for a man charged with the attempted murder of his brother, who was spared the death sentence on account of a temporal mental perturbation caused by anger. Although the accused had been caught violently beating his wife, which had prompted his brother to intervene, the judges argued on his behalf that it had to be acknowledged that his reaction “revealed a disturbed mind derived from his wife’s provocation”, because she had insulted him as “bestiaccia” when he remonstrated her over some household duties.\textsuperscript{584} His mental disturbance had been further aggravated, in the eyes of the judges, when his brother sided with his disobedient wife. On account of this he was “only” given 10 years in the galleys. To mitigate his penalty, the judges had also taken into account that the bullet had not been found, so it was uncertain whether he had loaded the weapon with mortal ammunition.

\textit{Possible Destinies for the Criminally Insane}

When judges considered that there was enough evidence to establish that the accused was not liable for his or her actions by reason of madness, the legal proceedings were likely to be abbreviated and end with a lighter penalty than what was usually imposed for the given crime. It could even happen that the “mania” suffered by the accused prevented the criminal court from initiating normal criminal proceedings, forcing the central government to come up with an alternative solution to deal with the case.\textsuperscript{585} In any case, criminal insanity posed not

\textsuperscript{583} “Delitti commessi per iracondia, ira, o giusto dolore causato da ingiurie, provocazioni, o altre giuste cause non si puniscono di pena ordinaria, ma d’altra arbitraria più mite secondo la qualità dell’eccesso, e persone, mentre che il delinquente non perseverasse nella mala volontà ratificando anco doppo il delitto, o che la causa dell’ira, o provocazione fusse ingiusta, come se egli fusse stato il primo a provocare, o in altra maniera facendo cosa illecita, e proibita, o che l’ira e causa di essa fusse stata molto leggiera, e non si provasse, perché in questi casi potrebbe essere lungo anco alla pena ordinaria...” Savelli, \textit{Pratica Universale}, “Delitti”, p. 111.

\textsuperscript{584} “...non può negarsi, che nell’Inquisito si scorga turbata la ragione della provocazione della moglie, qual turbazione è altresì certa, che sarà a misura cresciuta dato che l’accapigliasse col fratello...”. ASF, OGB, \textit{Negozii}, F. 2134, Negozio 7249, March 1730.

\textsuperscript{585} In January 1760 Giovanni del Panaio from Lucignano was received in Santa Dorotea as \textit{pazzo furioso}. He had been periodically subject to episodes of frenzy, which came to be associated with the fits of epilepsy he had suffered since early youth. During one of these episodes he managed to loosen the bonds which secured him to his bed, and ultimately managed to beat his wife to death. According to the Audiore Fiscale, Brichieri Colombi, Giovanni’s delirium made it impossible to cross-examine him, and so the criminal proceedings were interrupted and he was asked to intervene. Given that the local prison could not hold the “maniac” safely, the only available solution was found to be Santa Dorotea. This case also reveals that pre-trial resolutions were an alternative for
only the problem of how to identify madness and determine liability but, furthermore, it created the dilemma of what to do with the criminally insane. The pressing matters were where to send them and who could be held responsible for their subsequent behaviour.

According to Mellyn, until the seventeenth century the issue of criminal insanity amounted to a problem of guardianship. Before the foundation of Santa Dorotea in 1643 there was no official place for the custody of the insane, while prisons were designed to be only a temporary measure. Therefore, a sentence of life imprisonment generated a problem of resources that was difficult to overcome, since the prisoners’ maintenance had to be covered by the families. Nonetheless, if the solution was not confinement, the criminally insane had to be taken care of by their families, which in turn was a difficulty not always easily resolved. As a consequence, the problem of what to do with the criminally insane was addressed through collaborative efforts between families, communities and courts. Until the seventeenth century, Mellyn stresses, the tendency was to send the criminally insane home, which made the family the primary custodial institution.586

In my view, Mellyn and other scholars with similar positions overestimate the impact of the foundation of Santa Dorotea in the fate of the criminally insane. I will explain the admission procedure to Santa Dorotea in the next section, but for now let me say that since its foundation until the mid-eighteenth century, the hospital only accepted patients who could pay for their maintenance. Although since 1750 charity maintenance was assured for every mad person who was in need of admission to Santa Dorotea, this change did not produce a considerable impact on the situation of the criminally insane. When criminals were found to suffer a kind of madness that justified their committal to Santa Dorotea, their transfer would be ordered, but this would only last while the disorder proved to be of a dangerous kind. In some of these cases, the episode of madness was triggered while they were in prison and after they had been sentenced; in others, they were found to be mad during the trial, and thus transferred immediately to the hospital. Given that Santa Dorotea was generally overcrowded,

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dealing with these cases of serious and evidently dangerous madness, explaining to some extent the relative scarcity of these kind of cases in the records of the Otto di Guardia. ASF, Nove Conservatori del Dominio, Memoriali Spediti, F. 1295, no. 160, January-February 1760.

586 Mellyn, Mad Tuscans and Their Families, chapter 2. Mellyn builds her argument by challenging previous studies claiming that criminal reforms made by the duchy had disastrous results for the insane. See Magherini and Biotti, L’isola delle Stinche.
its administrative board took especial care to ensure that patients were not kept there longer than was strictly necessary.\textsuperscript{587}

Clearly, then, the problem of how to decide the destiny of the criminally insane was only temporarily solved with Santa Dorotea, for once the patient was released the decision had to be taken again. Their fate was determined by taking into consideration factors such as economic resources, if the person had family networks who could assume their custody, their physical and mental health and that of their families, among other factors. When the kind of madness ceased to be dangerous or if it had never been of a dangerous kind, then they could be sent to prison for a period of time. After this, provided they had relatives who could assume their custody, then they could be sent home. Otherwise, they could be sent into exile if they had no family networks and had the physical health to provide for their own maintenance. For instance, Antonio Razzuoli, convicted of theft and sentenced to five years of relegation (\textit{confino}) to Grosseto, was caught breaching his sentence. But, because he was found to be demented, he was sent to Santa Dorotea and his sentence suspended. Nine months later he was dismissed because his madness ceased to be dangerous. Given that he also suffered some physical indispositions, it was not considered suitable for him to return to his relegation at Grosseto so the Auditore Fiscale Domenico Brichieri Colombi instead suggested that he be entrusted to the care of his father, who would be in charge of his custody and responsible for any actions he might commit.\textsuperscript{588}

Criminal responsibility was a highly delicate matter, not only because it depended on the contextual nature of insanity but also because it posed the problem of coming up with a sentence that was both fair and exemplary. As Rabin has put it, “The history of the insanity plea documents a tension between a belief in the just exculpation of crimes committed by the

\textsuperscript{587} For instance, in 1753 Benedetto Sezzatini was charged for assault in a brawl, but during the legal enquiries carried out in the informatory process the judges came to the conclusion that he was pazzo furioso, and so he was transferred to Santa Dorotea. ASF, SD, \textit{Motupropri, Rescritti...}, F. 1, no. 27, September 1753. For other examples of mad criminals transferred from prison to Santa Dorotea see ASF, SD, \textit{Motupropri, Rescritti...}, F. 2, no. 25, August 1756; Ibid, F. 3, no.3, December 1757 and no. 9, April 1758; Ibid., F. 8, no. 17, April 1770; ASF, OGB, \textit{Suppliche}, F. 2542, no. 34, October 1767. Given the unconnected nature of the registers of the Otto di Guardia with those of Santa Dorotea, the records of the latter are not necessarily informative about the nature of the crime or the sentence given to the transferred criminals. However, it seems clear that only people convicted of minor crimes were released from S. Dorotea and sent back home, and in cases of a more severe mental impairment their release depended on their familial situation. On this see also the next section.

\textsuperscript{588} ASF, OGB, \textit{Suppliche}, F. 2542, no. 27, September 1767. Permuting prison for exile solved the problem of financing through the felon’s own capacity to work. For example, a certain Domenico Sorcini, convicted of pimping, petitioned to change his sentence from the galleys to internal exile (\textit{confino}) by reason of his being mentecatto. He was granted the grazia, but on the condition that he had the capacity to maintain himself there. ASF, OGB, \textit{Suppliche}, F. 2511, no. 260, December 1730.
insane and the fear of unpunished dissemblers and dangerous lunatics." When dealing with insanity pleas, Tuscan judges tended to favor the strategy of giving mitigated sentences that could be further remitted through a supplication rather than resorting to open acquittal. Evidence suggests that the preferred path for dealing with criminal insanity was remission through grace, which left intact the deterrent effect without contradicting the principle of impunity by reason of madness.

The criminally insane were usually spared the death sentence and the galleys, but not necessarily prison. Criminal insanity, although not deserving punishment, needed confinement both for security reasons and for exemplary purposes. However, the tendency that can be observed is that imprisonment generally was not for life, given the financial constraints it inevitably carried. Even when criminals were sentenced to prison for life, they were likely to be able to supplicate for their release years later, or be accountable for a ducal pardon. As the Auditore Fiscale explained to the Regency in 1747, it was advisable for the Grand Duke to demonstrate his mercy every once in a while by giving general pardons to criminals who had been imprisoned in the Stinche for a long time and whose crime, preferably of a minor nature, had been expiated through the “vexations of imprisonment” [gravità della prigionia]. At the same time it demonstrated the duke’s compassion and pity, it served to offload the fiscal burden of maintaining those prisoners whose families could not finance their imprisonment. Some restrictions applied to the potential beneficiaries of the pardon, among them mad prisoners who lacked family networks that could assume their care. Thus, liberation or confinement of the criminally mad was tied to their family or social situation. If they had nobody to take care of them, they could not be left alone to wander the streets.

As the cases of Righini, Venturini and Buonriposi disclose, the solution to criminal insanity, and to madness in general, was highly dependent on the social and economic

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590 A certain Francesco Giani, tried for illegal possession of weapons, was given a mitigated, pecuniary sentence with a term of one month to supplicate for a full pardon because he was 85 years old, and “suffered in the brain” [avesse patito nel cervello]. Accordingly, he was given the grazie of his penalty after he petitioned as he had been told. ASF, OGB, Suppliche, F. 2505, no. 73, August 1725. Although it was a minor crime, it is nonetheless telling regarding the strategy of avoiding a full acquittal from the beginning. On the laws against the possession of arms, see Brackett, *Criminal Justice and Crime*, p. 103.
591 Giovanni Brichieri Colombi, ASF, Consiglio di Reggenza (hereafter CR), Fiscale, F. 755, no. 27, July 1747. On the practice of official pardons given to prisoners on important holy days or special occasions in previous centuries, see Brackett, *Criminal Justice and Crime*, p. 54. “Those not eligible for pardon were private debtors (8.42), the insane (3.42), those held for disobedience to their parents (0.71), those transferred into the prison hospital (2.28), and those who died (4.42 per year)”, p. 54.
situation of the accused. Families who could afford the necessary maintenance of their relatives in prison or in Santa Dorotea were more likely to obtain from the government the response they expected. The higher the families’ financial resources were, the more mechanisms they could count on to address the problem of their mad relatives, from space and personnel to keep them at home, to legal advice and access to the necessary knowledge to manoeuvre between the different offices and the judicial structure of the ducal government. In contrast, the situation of poorer people, like Righini and Venturini, left less space for negotiation. The collaborative model proposed by Mellyn appears, thus, to be still in force in the eighteenth century.

Imprisonment was sometimes specifically requested by relatives, both as a security measure, and as a way to conceal the crimes committed by the deranged from the view of the rest of society. It was in fact routinely employed as a disciplining measure to reform unruly relatives throughout Europe. However, it should be taken into account here that the disciplining of the unruly members of society was seen as the shared responsibility of families and governments during the Ancien Régime. The destiny of mad people was the result of a series of negotiations between the authorities and their families, which took into consideration issues such as the family’s resources, the person’s current and chronicled behaviour, their level of dangerousness and capacity to disturb, and the need to defend the family honour, among other concerns. The next case illustrates particularly well the private and public concerns that had to be combined when determining a suitable solution for the problem of madness.

In July 1760 the officials of the Council of Regency had to deal with a case of an allegedly demented man, Domenico Chelli, who had been involved in the serious crime of the abduction of a nun eleven years before. The crime, committed in Pisa, had created a scandal that was still remembered by the population of Pisa and Livorno, where Chelli was from. Chelli had fled from Tuscany, having only recently returned “completely demented”, and recklessly exposing himself to arrest. While he was in a prison of Livorno, his brothers requested his transfer to a place where he could be under the proper care and custody that his

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present condition demanded. Although there was no sentence for his crime, the brothers argued, they did not intend to keep him at liberty after his “scandalous behaviour”.

The problem for the authorities was twofold. On the one hand, the man, if indeed found to be insane, was unaccountable for his actions. But the crime was too serious not to be clearly and publicly condemned and punished. On the other hand, the crime could no longer be prosecuted given that more than 10 years had elapsed since it had been committed. As the Otto di Guardia could no longer prosecute him using the ordinary proceedings the matter was taken directly to the Council of Regency.

According to the governor of Livorno, after the crime Chelli had demonstrated a behaviour “full of irregularity and extravagances [pieno d’irregolarità, e stravaganza]”, so even if more than ten years had elapsed since he committed the abduction, and the legal period for its prosecution had been exceeded, the crime had been too notorious and too serious not to be punished. “It would seem monstrous, particularly to this ignorant people [of Livorno] to see at liberty a man of such character.”

Therefore, despite deeming Chelli to be mad, the governor considered it better if he were to be taken away from the city so as to give a clear sign to the population that his crime was extremely reprehensible. The concern for setting a clear public example in the management of Chelli’s crime was shared by the officials of the Consulta. Accordingly, they specifically requested that a medical specialist (perito fiscale) be heard on the matter of Chelli’s madness, with the scope of determining if his madness were “true, continual and complete [vera, continua, e totale].” If this were the case, then “the confinement of Chelli in a place for mad people [pazzi] would suffice, [for] in that case to the eyes of everyone he would be sufficiently punished by his infelicitous state.”

On the contrary, if his madness was found to be feigned, or not complete and continual, confinement in a place for the custody of the mad was not enough to punish him.

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593 Petition signed by Liborio and Luigi Chelli, ASF, CR, Fiscale, F. 756, no. 7, July 1760.
594 “…dopo un fatto si notorio parebbe mostruoso particolarmente a questa ignorante popolazione il vedersi in libertà un uomo di tal carattere”. ASF, CR, Fiscale, F. 756, no. 7, Letter from the Governatore di Livorno to the Consiglio di Reggenza, November 1760.
595 “…il chiudere il Chelli in un luogo da pazzi poteva bastare a qualunque effetto, rimanendo egli agli’occhi di tutti in tal caso punito abbastanza dall’infelicità del suo stato.” Report given by the Consulta about the Chelli case, ASF, CR, Fiscale, F. 756, no. 7, January 1761. The Consulta (High Court of Appeals) was integrated by three Auditori, Girolamo Finetti, Marco Filippo Bonfini and Domenico Brichieri Colombi (Auditore Fiscale).
596 That it was relatively simple to argue an insanity defence had been the incubus of criminal jurisprudence since ancient Rome. The dangers of feigned insanity both in ecclesiastical and criminal procedures had also come to the attention of Paolo Zacchia in his Quaestiones medico legales. See my comments on this in Chapter 3, section 4.
The consulted physician indicated that Chelli suffered from “lucid intervals and fixations”, in a testimony the dullness and brevity of which contrasts with the generous information given by the Governor of Livorno.

“I do not believe, [the latter said], that the Dottore [Lawyer] Domenico Eusebio Chelli has ever given up the old maxims of his frenetic vanity that have directed him into such fatal accidents, and I think that if he were to be left master of his own liberty his sort of madness would lead him to other situations of foul consequence.”

Chelli’s past behaviour was a clear proof both of his derangement and of the extent of its consequences, the governor considered. In 1759, for example, he had been in London, where on account of some violent reactions and some serious offences against the Princess of Wales he had been committed to a madhouse. But he would not stop there. His altered imagination made him delusional to the point of pretending to be a noble who had supposedly been betrothed to the Princess, using a different name and fake noble title, and not recognizing his family. Although at first glance he seemed perfectly normal, the type of “frenetic ailment” (male frenetico) and “inconstancy” (levità) that affected him pervaded his “spirit” and each of his actions and ideas. To make matters worse, he gave no sign of repentance or of understanding the gravity of the crime he had committed in Pisa so many years ago. Based on this information, the Consulta agreed he was “mad, and irrevocably mad [pazzo, e pazzo irremediabile]”, suffering a “special frenzy” that “floods his whole spirit, influences his ideas and commands his actions,” despite at first glance seeming perfectly normal, and a “devotee of literature, sober, modest and without other vices.”

The decision of what to do with him was not simple, given the considerations involved when the future of a criminally insane was decided. Authorities and relatives debated not only

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599 “...nella specie del suo male frenetico, e della sua levità che inonda tutto il di lui spirito, e colla quale anima e regola tutte le sue idee, i suoi movimenti, e le sue azioni; si palesa il detto Chelli per vero demente, e tutto il detto Chelli reputa lecito alla sua pazzia grandezza, e potenza, e credo sarebbe pronto a ricadere negl’eccessi possibili se diventasse libero signore de suoi arbitri.” Ibid.

600 Said to be a “...vero pazzo senza rimedio nella specie di quella frenesia, che in esso inonda tutto lo spirito, muove le idee, e regola le operazioni, ancorché nel resto egli apparisca amante della letteratura, sobrio, modesto, e senz’altre vizi.” Report issued by the Consulta on the Chelli case, ASF, CR, Fiscale, F. 756, no. 7, January 1761.
about criminal responsibility, but also negotiated the deterrent effect of the sentence. Sentences had to consider safety issues and at the same time allow for the humanitarian response madness was unanimously considered to deserve. Chelli was initially sent to the hospital of Santa Dorotea, but a note sent a few days later from the Regency declared that Chelli’s crime was too serious for him to be sent to Santa Dorotea, advocating instead for his confinement at home. Given that his relatives and the authorities of Livorno had requested the possibility of having him secluded at the Fortezza of Portoferraio, he was finally confined there. The three alternative destinies were conceived starting from the evidence that Chelli’s brothers were able to finance his maintenance in either of the places. In fact, imprisonment “at request” was not possible if this condition was not met.

The detailed information provided by the government authorities had been complemented by specialized medical opinion to give further certainty of the “reality” of Chelli’s mental derangement. Theoretically, the Tuscan legal system established that criminal madness always had to be asserted through medical opinion. Nonetheless, evidence suggests that madness was generally asserted from lay testimonies corroborated by the direct observation of the judges. None of the criminal proceedings examined until now, save the Chelli case, suggest that medical practitioners were involved to assess the mental state of the accused. In the case of Chelli, in contrast, we have access to the complete medical testimony, only to discover that the medico-legal category of “lucid intervals and fixations” is largely inexpressive until we combine it with the much more meaningful report given by the local authority.

The scarcity of medical testimonies in criminal procedures, also characteristic of the previous centuries in Tuscany, and of other early modern European scenarios, is not necessarily an expression of how medical knowledge on madness was valued in the eighteenth century. In legal practice, it was simply not necessary to medically certify madness to assess liability. Medical opinion was becoming increasingly important in Tuscany in order to determine proper punishment, which had to combine the need to convey that crimes were not treated with impunity with other considerations such as health and resources. These complementary considerations were generally faced after conviction, when not only

602 For an in-depth examination on the role and characteristics of medical expert opinion in the criminal and civil courts of Tuscany when assessing madness, see Chapter 6.
economic constrains but also the convicted’s medical situation moved the authorities to mitigate a sentence or grant a pardon.

Not only physical ailments, but also mental afflictions were adduced by medical practitioners on behalf of convicted felons. This happened, for instance, with criminals said to suffer from epileptic fits or apoplectic “accidents”, in which cases the physicians argued that imprisonment or time in the galleys was detrimental to their health. Medical testimonies served in these cases to obtain a reduction or a permutation of sentence, which could be from forced labour to internal exile or prison, from the galleys to prison, from prison to exile, depending on the health condition of the convicted felon. The outcome of a petition was not dependant, however, upon the presentation or not of a medical testimony, as the next chapter will show.

5. 2. Confinement in Mental Hospitals: Santa Dorotea and the Pazzeria of Santa Maria Nuova

Since the ground-breaking work of Michel Foucault, madhouses or mental institutions have been considered the prototypical spaces of madness. Even if later studies, particularly in the last two decades, have demonstrated that madness was largely kept at home, mental institutions continue to be the cultural locus of madness. The Italian peninsula, and Tuscany in particular constitute no exceptions, with studies that have been primarily focused on the institutional dimension of madness. However, to my view we should approach the segregation of the mentally ill in Early Modern societies from a wider perspective, one that not only illuminates the relationship between families and institutionalization, as recent studies have done, but also has in mind the larger landscape in which madness made its appearance. When we examine confinement as only one of the many existing spaces where madness made an appearance in public life, the development of mental institutions acquires new meanings. Confinement was neither an isolated measure nor a definitive one, and the boundaries between society, authorities and institutions of confinement (both medical and purely custodial) were more fluid than what was originally thought. The model of the

603 See, for instance, ASF, OGB, Suppliche, F. 2530, no. 132, July 1750; Ibid., F 2532, no. 15, August 1752 or Ibid., F. 2537, no. 14, July 1762.

604 For the respective works, see the beginning of this chapter and the Introduction.

605 Here the studies of Suzuki have proved invaluable. See, for instance “The Household and the Care of Lunatics” and Madness at Home.
itineraries of madness provides the possibility of following the shapes adopted by madness through its different spaces of appearance, enriching its meanings and enlarging the scope of analysis.

Calling for a more complex and flexible approach to the medicalization of madness, Lisa Roscioni has argued that Italian seventeenth- and eighteenth-centuries mental institutions were at the same time spaces of confinement and exclusion, and spaces for the cure and treatment of the insane.\textsuperscript{606} In the case of early modern Tuscany, the birth of custodial and “increasingly” medicalized institutions especially destined for the mentally ill dates back to the mid-seventeenth century, when the \textit{Pia Casa di Santa Dorotea dei Pazzerelli} was founded.\textsuperscript{607} Active since 1647, admissions were managed by the administration of the institution, composed of a group of “distinguished” lay Florentines, and was contingent upon the ability of the patient’s family to pay the maintenance fee. For this reason, and particularly in response to the problem of the insane kept at the Stinche prison, a special ward for the insane (the \textit{pazzeria}) was opened in the general Tuscan hospital of Santa Maria Nuova in 1688.\textsuperscript{608} The space destined for the mentally ill of Santa Maria Nuova was thus created to receive the poor patients who could not pay the fees of Santa Dorotea, although there is evidence that wealthier patients were also among its inmates from time to time.\textsuperscript{609} Until 1750, therefore, less wealthy families had to acquiesce in order for their mad relatives to be admitted to the \textit{pazzeria} of Santa Maria Nuova at the discretion of the \textit{spedalingo} (the hospital prefect).

The criteria of admission until 1750 were fairly vague. Medical certification of the alleged madness was not required, and little clarification was made regarding the notion of \textit{pazzo/a} that defined the category of confinement.\textsuperscript{610} Closer to jurisprudential than to medical notions of madness, patients were admitted because they were \textit{mentecatti, matterelli, matti, pazzi} or \textit{furiosi}, terms that were used “in complete synonymity.”\textsuperscript{611} Even if admission was

\textsuperscript{607} See Roscioni, \textit{Il governo della follia}, pp. 57-153; Magherini and Biotti, \textit{L’isola delle Stinche}, pp. 147-181; and of the same authors, “Un luogo della città per custodia de’pazzi”.
\textsuperscript{608} On the Stinche as a place of reclusion for the insane following special requests, see Magherini and Biotti, \textit{L’isola delle Stinche}, pp. 25-59.
\textsuperscript{609} In fact, the records of the Magistrato dei Pupilli attest that Santa Maria Nuova was as common a destiny as Santa Dorotea for the mentally incompetent whose patrimonies were interdicted and their relative put under curatorship until 1750. See Chapter 6.
\textsuperscript{610} ASF, SD, \textit{Memorie, Documenti}, F. 23, no. 11, particularly “Del modo di ricevere i Mentecatti”.
\textsuperscript{611} Magherini and Biotti, “Un luogo della città per custodia de’pazzi”, p. 28.
decided by the administrative structure of Santa Dorotea, the institution provided medical treatment for those who “could be brought back to a sound intellect.” In this sense, although admission was a bureaucratic procedure, based on lay definitions of insanity and dependant upon the families’ ability to pay, scholars have nonetheless approached the period as marking the initial steps towards the medicalization of insanity. To give an idea about the limited extent of the institutionalization of madness during this first period, between 1682 and 1714 Santa Dorotea held an average of twelve patients per year, and fifteen between 1715 and 1750. Although the first decades of the eighteenth century witnessed an increasing number of requests for committal, confinement still was an extreme solution. As Roscioni pointed out, madness continued to be largely a family matter during the century.

The mid-eighteenth century proved to be a turning point for the history of the institutionalization of the insane in Tuscany. In 1750, the pazzeria of Santa Maria Nuova was closed, and the Pia Casa di Santa Dorotea was transformed into a new, bigger institution, acquiring the status of Grand Ducal hospital “for the cure of all the diseases comprised in mania and the custody of those that are incurable.” The aim of the reform, as stated by the Motuproprio that enacted it, was “to provide for the many inconveniences innocently caused to the Public by the furious mad, abandoned and wandering through the public streets.” The ordinance stated that from there on patients could be received at public expense to be paid by Santa Maria Nuova and other charitable institutions if the person was from Florence, or by the community of origin if they were from the rest of the grand ducal territory. As a consequence, between 1751 and 1788 around half of the patients were admitted at public expense, and only a quarter of the total patients were Florentine. If between 1647 and 1750 there were 429 admissions to Santa Dorotea, the number between 1751 and 1788 rose to 2411.

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612 Only months after Santa Dorotea received its first “mentecatto”, the administrative congregation determined that a physician, Niccolò Buonaiuti, was to provide a medical cure to those patients who could benefit from it. “Determinorno, che il dottore Niccolò Buonaiuti ogni volta intraprenda la cura di quei matterelli, che da esso saranno giudicati potersi per mezzo de mendicanti ridursi a sanità d’intelletto, e parimenti ancora di quelli che stesse in ambiguo della reduzione del medesimo stato, tralasciando solo di curare quei tali, che stimerà onnivamente vano il potere loro restituire il discorso razionale”. ASF, SD, F. 42, Istrumenti e ricordi 1642 al 1740, September 1747, in Magherini and Biotti, “Un luogo della città per custodia de’pazzi”, p. 79.

613 Roscioni, Il governo della follia, p. 124. The data is taken from ibid., pp. 116-120.

614 “...che la Casa di Santa Dorotea di questa città di Firenze si eriga in Spedale con l’intero titolo, sotto l’immediata sua Regia Protezione; idoneo generalmente per curarvi tutte le malattie comprese nella mania; e per custodirvi quelli, che sono incurabili”. “Copia di Motuproprio di S.M.I. per l’erazione del nuovo Conservatorio di S. Dorotea de 16 novembre 1750”, ASF, SD, Memorie, Documenti, F. 23, no. 5.

615 Idem.

616 Data from Roscioni, Il governo della follia, p. 117 and p. 138-139.
The procedure of admission was a matter of intense discussion between 1740 and 1760. Of particular concern were the mechanisms to certify madness, but also the strategies for resolving the problem of financing the entry of those patients who could not pay. The 1750 reform established that only people whose madness was certified by medical opinion would be admitted, preferably, by a physician and, in his absence, by a surgeon. Additionally, requests of committal were to be corroborated by the testimony “of the parish priest and [other] representatives attesting the inconveniences caused” by the alleged insane.617

The new provisions to a large extent aimed to provide a solution for the problem of the vagrant and poor mad who could not afford the fees of Santa Dorotea, but who nonetheless generated a severe problem for the life of the cities. Dangerousness and “disturbance” of “public quietness and honesty” were major criteria for committal, particularly when caused by the “wandering” and “abandoned” mad. The dispositions adopted in the motuproprio of 1750 were the corollary of a long discussion between government officials regarding responsibility for the problem of the mentally ill. Particularly during the first three decades of the eighteenth century, Santa Dorotea and the Pazzi of Santa Maria Nuova captured the attention of the governmental administration. The key issue under discussion was under whose competence the custody and cure of the mentally disturbed came, especially of those who could not pay Santa Dorotea. It was a financial problem but also a discussion that concerned ideological standpoints on public involvement in the provision of assistance, and the balance between charity, social and family responsibility.618

The problem concerned not only the management and financing of the two institutions that received mad patients, but also involved police measures to address the problem of the vagrant and abandoned insane who were disturbing the city’s social life. For instance, in April 1722, the Auditore Fiscale, in his capacity as chief of police, ordered the banishment from Florence of a certain Maria Laura Maioli, known to be “half mad [mezza pazzarella] with a very mordacious tongue, impertinent and temerarious.”619 A native of Pisa, Maria Laura had been caught wandering through the streets of Florence and imprisoned, while an order was sent to her only relative, a paternal uncle, which gave him a term of 8 days to send for his

617 “Copia di Motuproprio di S.M.I. per l’erezione del nuovo Conservatorio”.
618 The discussion about welfare provisions for the insane in the first half of the eighteenth century in Tuscany resembles the negotiations between state policies and family strategies to provide assistance for the elderly in eighteenth-century Rome studied by Groppi in Il welfare prima del welfare.
619 “...Maria Laura è tenuta in concetto di mezza pazzarella con lingua assai mordace, impertinentezza, e temeraria...” ASF, OGB, Struordinarie, F. 2661, no. 221, April 1722.
niece and undertake or provide for her custody. The uncle, “a poor and miserable painter”,
was finally exempted from his “duty” as the closest family member to assume her custody,
given his “extreme poverty” and his “fair motives for not desiring her proximity.”

Situations in which family members were either non-existent or unable to assume
responsibility for a mad relative put the administrative structure of the duchy under
considerable strain, as we have seen. Close evaluation had to be made of the economic and
familial circumstances that surrounded the patient to come up with the most suitable solution,
carefully combining private and public interests. Actually, prefiguring later official
dispositions, Maria Laura was not sent to the pazzeria of Santa Maria Nuova nor left at the
Stinche because she did not qualify for the category of pazzia furiosa to justify confinement at
the expense of the state. The problem, as historians working in the previous periods of the
history of Tuscany have revealed, was not new. The novelty provided by the eighteenth
century is to be identified in the new interpretations of the problem and in the new measures
adopted to respond to it, as exemplified in the reform introduced by the Motuproprio of 1750.

The organs in charge of the enquiries to assess the petitions for confinement after 1750
were the Auditore Fiscale for the Florentine inhabitants and the Magistrato dei Nove for the
inhabitants of the rest of the dominium. The investigation conducted by the Auditore
Fiscale and the Magistrato dei Nove comprised the collection of at least one medical
testimony asserting the mental condition of the patient, and the testimony of priests and
neighbours confirming his or her level of dangerousness. Upon confirmation of madness they
had to rigorously investigate the economic situation of the afflicted, to determine if they
deserved to be admitted at public expense (pubbliche spese). Finally, every admission had to
be ratified by royal command (real rescritto). In this sense, although the admission
procedure continued to be designed as an administrative one, categorized as a police matter

620 Idem. For a similar case regarding a pazza furiosa who despite being “molesta e molestissima”, could not be
received in Santa Dorotea because she was unable to pay the fee, and could not be admitted to the pazzeria of
Santa Maria Nuova either, allegedly because there was no space, see ASF, CR, Fiscale, F. 755, no. 37,
September 1747.
621 See Mellyn, *Mad Tuscans and Their Families* and Magherini and Biotti, *L’isola delle Stinche*.
622 The Nove conservatori del dominio was the magistracy in charge of the governmental management of most
of the dominions of the Grand Duchy of Tuscany, and coordinated the relations between the capital and the
provinces. On the Magistrato dei Nove in the eighteenth century, and relations between the centre and the
provinces, see Mannori, *Il Sovrano Tutore*.
supplication (supplica or istanza di internamento), a public inquiry carried out either by the Magistrato dei Nove
or the Auditore Fiscale, and royal command (rescritto).
and under the direct control of the state, the novelty provided by the reforms of 1750 was the requirement of medical certification.\textsuperscript{624}

The admission procedures generated particular concerns regarding the kind and degree of madness accountable for committal given the high costs of interment at public expense. The \textit{motuproprio} had stated the government’s intention to provide for abandoned \textit{furiosi} who caused serious trouble to public life. But the first decade after the \textit{motuproprio} was issued demonstrated that the degrees of mental affliction had to be further specified in order to avoid “abuses”. Particularly in the case of patients admitted at public expense, dangerousness was to be the primary criterion. The degrees of madness were officially measured in terms of the seriousness of the threat insanity posed to society. The admission procedure progressively came to equate madness \textit{[pazzia]} with furious madness \textit{[pazzia furiosa]}, excluding its harmless forms – the \textit{melensi} and \textit{mentecatti} that were so common in the other juridical spaces we have examined. And, thus, a criterion for determining discharge from Santa Dorotea was that the patients were only \textit{melensi}, who “have not given any manifest sign of madness [pazzia]” during their time at the hospital, and the administrators considered them unable “to disturb either the public quietness or the public honesty.”\textsuperscript{625}

Discussion regarding why the \textit{melensi} or \textit{mentecatti} were not considered in need of being committed, while the \textit{pazzi furiosi} were, not only centred on the level of dangerousness shown by the alleged mad. Moreover, the matter generated sometimes divergent views, as we will see. The administration of Santa Dorotea approached the problem merely from a practical perspective, considering that admission of the passive and harmless mad used up the available beds and public funds, when their fee was not privately paid. The target was focused, therefore, on guaranteeing a place for the really dangerous mad, as can be seen in the regular discharges of non-paying patients as soon as they would stop showing signs of dangerousness.

The politico-practical differentiation between \textit{melenso} and \textit{pazzo furioso}, nonetheless, concealed a larger problem affecting not only private life, but also social life which had not been tackled by the \textit{motuproprio}. The perception of some government officials and family

\textsuperscript{624} On the development of notions of state responsibility over welfare provisions during the Regency, with the consolidation of “the social character of assistance that substitutes private charity”, see Sandro Boccadoro and Anna Zandri, “L’opera riformatrice di Pietro Leopoldo nell’ordinamento giuridico dell’ospedale S. Maria Nuova di Firenze”, in Zeffiro Ciuffoletti and Leonardo Rombai (coord.), \textit{La Toscana dei Lorena: riforme, territorio, società} (Florence: L. S. Olschki, 1989), p. 279.

\textsuperscript{625} The administrative board of Santa Dorotea to the Auditore Fiscale. ASF, SD, \textit{Motupropri, Rescritti...}, F. 2, no. 42, December 1756. On the same \textit{fิča}, see also no. 28.
members was that sometimes non-violent types of madness required special measures, ranging from custody, personal care or medical cure. Measures that families were not always able or, sometimes, willing to take. Not only the raving mad were left alone to their destinies, abandoned to wander the streets, as the 1750 declaration had stated. Madness was, after all, “the most solitary of afflictions.”

Home-care was at times unfeasible and economically impossible. Pauperisation, household composition and even an absence of available relatives conspired to make public the life of the mentally afflicted. The wealthier mentally afflicted did not necessarily have an easier situation. Their families had certainly more resources to cope with them, but wealthy and poorer families alike recurrently turned to the authorities seeking reinforcement to tame their unruly relatives or convince them of behaving properly. All types of families turned to the Grand Duke, requesting to obtain the “grazia” of having a person interned in the hospital even if they did not fit the pattern of the pazzo furioso.

This situation is vividly illustrated in the case of Lorenzo Baldinotti, which opened Chapter Three of this thesis. He had been deranged for most of his life – his first appearance in the records was in 1725 –, was interned both in Santa Maria Nuova and in Santa Dorotea hospitals several times and constituted a recurring problem for his relatives. Over the years he was portrayed as a mad person whose mental derangement made him unruly, scandalous, dissolute and utterly extravagant. And yet, when his relatives requested his committal once more in 1755, the petition was not granted, regardless of the fact that it was to be an interment that was privately affordable. The physician of Santa Dorotea determined that Baldinotti was not “in a state of furious dementia”, arguing that “notwithstanding his prattling [garrulo], vehement and disordered discourse, he is not capable of falling into furious acts.” As such, he was “far from the need of being enclosed in the Hospital of S. Dorotea.” Strikingly, only a

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626 The quote refers to the famous beginning of MacDonald’s Mystical Bedlam, “Madness is the most solitary of afflictions to the people who experience it; but it is the most social of maladies to those who observe its effects.” MacDonald, Mystical Bedlam, p. 1.
627 Attesting for the long-lasting problem stemming from the practical division between pazzia furiosa and the non-violent types of madness, we find the case of an abandoned 14-year-old melensa from the community of Greve who was sent to Santa Dorotea in 1769 after being caught wandering in the streets. Although the medical and civil authorities were well aware that her type of madness did not fit the parameters of pazzia furiosa, she was left in the hospital for about a year while the authorities endeavoured to find a long-term solution to her situation. See ASF, SD, Motupropri, Rescritti..., F. 8, no. 64, September-October 1770.
628 See Chapter 3, section 3.1, “Lorenzo Baldinotti”.
629 “...attesto come il di la detto Lorenzo Baldinotti non è in stato di demenza furiosa, anzi per più visite fatte al medesimo asserir posso che non ostante il di lui garrulo, focoso, e disordinato discorso non è capace di pervenir...
year before his brother had described him as “of an extravagant, furious and uneasy nature, and sick in his mind.”

The problem of how to determine if petitions for committal corresponded to *pazzia furiosa* was first tackled by the appointment of Antonio Lulli as the official physician of Santa Dorotea in 1756. Together with the cure of Santa Dorotea’s patients, he was entrusted with the special commission of assessing whether prospective or current patients qualified to be kept in the hospital. Attesting to the growing conflict aroused by the typification of the kind of madness accountable for committal, in 1757 the hospital administrators requested that the Consulta appoint two physicians to certify that the requests of admission indeed referred to people who were either maniacs or raving mad (*pazzo furioso*, or *maniaco*), to avoid what were called “abuses” by the families. The physicians elected were Giovanni Targioni Tozzetti and Lodovico Scutellari, chosen due to their experience as *medici fiscali*. The scope of this new addition to the admission procedure was to ensure that those who were allegedly *pazzi furiosi* were visited by more than one physician to verify the truth behind the requests for committal. Scutellari and Targioni Tozzetti were commissioned to this task after Antonio Lulli had repeatedly protested his overwhelming workload. He had to divide his time between the care of the hospital patients and the many visits he had to pay to those persons whose families had requested their committal. These visits had to be repeated, as the physicians were required to visit the patients more than once to verify the truth behind the petitions.

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631 Before 1756, Antonio Lulli had been performing occasional visits to the patients of Santa Dorotea, and usually gave his medical testimony to assess *pazzia furiosa*. He was the *medico ordinario* of Santa Dorotea until 1788. Roscioni, *Il governo della follia*, p. 268.

632 Giovanni Targioni Tozzetti (1712-1783), renowned Florentine physician and naturalist, had been sporadically involved with madness due to his assistance to the Otto di Guardia as *medico fiscale* and his position as official physician of the Stinche prison. Through his involvement with Santa Dorotea Targioni Tozzetti developed a special concern for mental afflictions which can be observed both in his reports (*perizie*) as *medico fiscale* and in the reports he periodically had to make regarding patients in Santa Dorotea or the mentally afflicted under the care of the Pupilli. This special concern leaves a final mark in his *Consulti Medici*, which included a section exclusively devoted to hypochondriac and hysterical affections, to epilepsy, and to delirium, among others. Aside from the commentaries of Roscioni, Stumpo and Brambilla, the work of Targioni Tozzetti on madness remains largely unexplored. His role as an “authority” on madness in the second half of the eighteenth century is examined in Chapter 6. BNCF, Manoscritti, *Le carte di Giovanni Targioni Tozzetti* (henceforth, GTT), N. 234, “Consultationes medicae”, cart.2, and N. 235, *Relazioni forensi*. See Roscioni, *Il governo della follia*, passim, Enrico Stumpo, “Un uomo per tutte le stagioni: Giovanni Targioni Tozzetti e la polizia sanitaria nella Firenze dei Lorena”, in Giovanni Targioni Tozzetti, *Relazioni forensi. Ambiente, igiene e sanità nella Firenze dei Lorena* (coord. S. Pelle) (Florence: Le Lettere, 1998), pp.7-24, Brambilla, *Corpi invasi*, pp. 238-241.

633 Lodovico Scutellari was *medico fiscale* between 1756 and 1758.
provveditore Niccolò Martelli informed, “in order to assert, if they really are in a state [that requires for them] to be guarded [custoditi] and cured in the hospital destined for the maniac, and not attacked by some accidental delirium, or by other illness.” Although the appointments of Targioni Tozzetti and Scutellari to support the admission procedures officially established that a medical certification of madness was compulsory, in 1759 a biglietto from the Council of Regency still warned about the “easiness” by which relatives could request and obtain the admission of a relative.

A medical certification of madness did not secure admission to Santa Dorotea, particularly for the miserable and abandoned mad. The case of a poor prisoner whose madness became an “intolerable annoyance” to her fellow inmates at the Stinche, is illustrative of the problem of interning madness at public expense. It was in March 1759 when a petition from some female prisoners at the Stinche requested the transfer of a certain Lucrezia Gambassi to Santa Dorotea because she was “in a demented state”, of the kind that “disturbs night and day with howls the [other] prisoners.” A medical note had been included, signed by Antonio Lulli and Giovanni Targioni Tozzetti, establishing that the woman was indeed demented and, as such, was found “worthy of being confined [riserrata] and cured in the Conservatory of Santa Dorotea.” Even the Auditore Fiscale Domenico Brichieri Colombi expressed his agreement for the suggested decision of transferring her, adducing that the Stinche was not “a proper place for the custody of the mad [pazzarelli].” To this administrative reason he added a moral one, revealing that “the disease of the said woman has turned out to be burdensome to the petitioning prisoners, which to a certain extent increases their punishment given the annoyance that the said woman generates.”

634 “...affine di assicurarsi, se veramente sieno in stato da esser custoditi, e curati nello spedale destinato per i maniac, o piuttosto attaccati da qualche accidental delirio, o da altra infermità”. The problem was, as the provveditore Niccolò Martelli informed the Auditore Fiscale, that families sometimes petitioned for the committal of patients who were only foolish (melensi) instead of insane (pazzi), or who had become stupid from a stroke. Letter from Niccolò Martelli to the Consulta. ASF, Santa Dorotea, Motupropri, Rescritti..., F. 2, no. 56, 29 March, 1757 and ASF, CR, F. 426, no. 3, 24 march 1757.

635 Biglietto of Roberto Pandolfini to the administrative board of Santa Dorotea. ASF, SD, Motupropri, Rescritti..., F. 3, no. 58, 28 June 1759. The Council of Regency proposed then that after patients were admitted, they were to be further examined by physicians who had not been involved in the initial assessment to corroborate the diagnosis, and that patients were visited once a month by an external physician.

636 “...una tal Lucrezia Gambassi in stato demente, che inquieta notte, e giorno con’ urlì le carceri...” Petition sent from the Stinche, signed by Michel’Angelo Mugnaini in the name of the female prisoners, ASF, CR, Fiscale, F. 760, no. 21, March 1769.

637 Medical testimony of Giovanni Targioni Tozzetti and Antonio Lulli, Ibid.

638 “Non essendo certamente le carceri delle Sti...
The problem was, however, that the woman was from the Tuscan locality of Montevarchi, and thus her admission to Santa Dorotea, if decided, was to be at the expense of that local community, which was under the jurisdiction of the Magistrato dei Nove. Never during the proceedings was her pauperism put into doubt, only the seriousness of her mental condition. Suggesting a careful study of public resources and a clear intention of limiting its expenditure to the minimum possible, the head official of the Nove considered Gambassi to be suffering a madness that was not of the “furious kind”, given her madness “consists only in howling.” As such, he continued, she could not fall into the category of furious madness (pazzia furiosa) that was accountable for committal in Santa Dorotea at public expense. She posed no serious threat to public quietness and public honesty, and so they were not willing to pay for her confinement.

The line of argument exposed in this case is revealing. Administrative criteria were placed against medical knowledge, and the victory went to the former. Any welfare provision for the mentally-ill poor was tightly dependent upon the availability of resources, an availability that in this case was entrenched in matters that had more to do with the administrative issues of the Tuscan dominion in its relation to Florence than with a determined approach to the problem of madness. Since Gambassi had already been convicted and was serving time in the Stinche at public expense (that is, covered by the central administration), it is comprehensible that the officials of the Nove put their best effort to avoid transferring that weight to the provinces. In fact, they could resolve the matter easily on this occasion precisely because she was already in a public facility under custody, was under the category of convicted criminal fallen into madness, and was not a furious abandoned vagrant.

One further consideration can be drawn from the Gambassi case. The Gambassi episode illustrates particularly well the nature of the medical involvement in the institutionalization of madness in the eighteenth century. The category of the pazzo furioso was not a medical one, in the sense that it related firstly to the public consequences of mad behaviour, and was only secondarily intended to constitute a medical diagnosis of a disease. The predominance of legal (and political) criteria observed in the category of pazzo furioso

thief, sentenced to 10 years in the Stinche in 1755, where she had been kept at public expense. We have no information regarding her mental state at the moment of the trial, so we should not assume that an insanity plea was put forward in her defence. On the contrary, some suggestions made by the Auditore Fiscale regarding the years after her conviction suggest that her mental affliction developed afterwards or, at least, that it was identified afterwards.

639 Ibid.
cannot be interpreted, nonetheless, as evidence of a deliberate exclusion of medical opinion in matters of the mind. Languages of madness had to adapt to each institutional space, and in eighteenth-century Tuscany, the admission procedure to the mental hospital, even if it required medical certification, contained much more of the legal and political languages we have been observing in criminal and civil procedures than the language common to medical literature. But, medical knowledge was developed in a parallel path to their involvement with legal practice, and this development can be only clearly observed in the court records toward the end of the century, as the next chapter will argue. For most of the century, physicians moved between the legal and medical worlds, adapting their language to the requirements of each space (and the same can be said regarding the domestic space). Eighteenth-century medical notions of madness were not constrained by the category of mania or pazzia furiosa, chosen as the template against which madness was to be measured to ground confinement. Likewise, medical considerations regarding the best environment for mad people to achieve the best custodial and therapeutic results were not only dictated by legal and governmental commands of the kind issued by the Motuproprio. This is proved by the fact that Giovanni Targioni Tozzetti, who had been involved with criminal medicine for at least a decade, recommended for Gambassi’s internment in Santa Dorotea even if he also acknowledged that she was not a pazzia furiosa. The omission of the category in his testimony cited above (he had only declared she was demente) should not be taken as a fortuitous lapse but as the conscious choice of a man long familiar with legal procedures and administrative concerns. He could have said melensa, or mentecatta (the categories that we know were contentious in the discussion about the admission procedure to Santa Dorotea), but he chose the still legal, but less definitive demente.

Although Gambassi’s mental condition had been ratified by the two physicians specifically appointed for certifying madness and accountable for committal, her transfer to the hospital was not permitted. Medical knowledge, governmental concerns, legal requirements and familial preferences were in continual negotiation among each other in an

640 Cf. Michel Foucault, History of Madness, particularly pp. 122-131. Foucault’s assertions regarding the lack of involvement of medicine in madness before the nineteenth century have been challenged by numerous historians. For studies regarding Tuscany, see Roscioni, Magherini and Biotti, Mellyn, but except for the latter less attention has been paid to ways in which the legal requirements shaped medical knowledge of madness. Roscioni, Il governo della follia; Magherini and Biotti, L’isola delle Stinche and Mellyn in Mad Tuscans and Their Families.

641 In fact, the examination of his medical perizie between 1750 and 1788 shows him more than once assuming a position of defence in the interests of prisoners, criminals and the interdicted against the otherwise inexorable force of the law. See the next chapter for further discussion.
ebb and flow that marked the foundation of welfare provision. To understand this negotiation, this chapter has proposed the model of the itineraries of madness, to underline the extent to which families and authorities resorted to more than one mechanism in their mutual quest to address the problems of madness, accommodating languages and interests in a careful, but unstable, balance. To understand this model better a closer study of the role of the office of the Auditore Fiscale is required, which is the purpose of the next section.

5.3. Madness as a Police Matter: Special Requests “Per porre freno a detti disordini”

The experience and identification of and reactions to madness were not limited to interdiction procedures, criminal insanity or confinement. Interdiction, criminal prosecution and confinement, we have seen, were temporary measures and should be considered as a last resort, or a desperate measure to address situations that many times had taken place long before, and had long been part of the family’s experience. Responses to madness were the result of a concerted effort between family members, society and government authorities, and could take many forms according to the spaces provided by the ducal system. A valuable source for examining madness in a different context than the one provided by interdictions, criminal prosecution and hospital records are the matters handled by the office of the Auditore Fiscale, where many special requests (suppliche) and summary measures affecting people openly labelled as mad or with features closely resembling madness were directed.

The records of these special matters handled by the Auditore Fiscale are filed in the archive of the Consiglio di Reggenza, covering 1737 to 1765, which corresponds to the periods of Filippo Luci, Giovanni Brichieri Colombi and his son Domenico Brichieri Colombi as Auditori Fiscali. Evidence gathered from the records of the Magistrato dei Pupilli reveal that the office’s intervention in the public and private problems caused by madness dates from before the period covered by the records held in the Consiglio di Reggenza archive. There are numerous allusions to biglietti sent by the Auditore Fiscale regarding people who were under the curatorship of the Magistrato dei Pupilli in the previous years, of which we otherwise have no records.

The Auditore Fiscale supervised criminal sentences, participated in the Consulta and the Council of State, and as head of police administered the orders of confinement to Santa

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642 ASF, CR, Fiscale, F. 758-761.

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Dorotea. His executive power allowed him to order other forms of confinement that could escape the ordinary legal proceedings. But, his sphere of manœuvre was not limited to confinement. The evidence reveals how the Auditori Fiscali exerted wide array of corrective and persuasive mechanisms in their efforts to curve deviant behaviours without having to resort to confinement. Counting on their legal training, they could artfully combine legal reasoning with police concerns and medical arguments, as we will see.

The powers of the Auditore Fiscale grew stronger during the Regency and were intensified after 1765. This progressive involvement with Florentine police matters and his increasing supervision over the criminal matters of the rest of the Tuscan territory dates back to before the arrival of Peter Leopold, nonetheless. During the Regency the Auditore Fiscale progressively handled matters of preventive policing, boosting his executive powers. From 1768 on, the Fiscale directly managed all Florentine matters relating to public order coming into the Otto di Guardia, which he handled using his power of arbitrio. His dual position as supervisor of criminal justice and head of police came to be seen with suspicion by Peter Leopold himself, which eventually lead to the suppression of the office in 1784.

In terms of social profile, these cases were not restricted to the aristocracy nor to Florence. They involve wealthy and privileged people who were particularly cautious so as to avoid the shame of having to use the ordinary legal channels, but also families from different social backgrounds who sought the government’s direct intervention as a desperate resource. Lastly, we find police matters involving poor individuals, many times abandoned by society and their families, who in their marginality had become a matter of police and public concern.

In this sense, these records illuminate the picture of the forging of notions of madness from a

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643 The office of the Auditore Fiscale was initially created in 1543 to supervise the interests of the fisc in the administration of justice. With time the Auditore Fiscale increasingly gained importance, acting as the guarantor of the interests of the Grand Duke in front of the Otto di Guardia e Balìa, whose independence was thus progressively limited. Around 1558, the Otto di Guardia, and every other tribunal of Florence or the dominion had to send a copy of their sentences to the Auditore Fiscale, who had the power of veto over them. Antonelli, “La magistratura degli Otto”, pp. 33-36.

644 As noted by Alessandra Contini, there was a “remarkable intensification of the activities of political and social control exerted by the Auditore” after the arrival of Peter Leopold in 1765. Alessandra Contini, “La città regolata: polizia e amministrazione nella Firenze leopoldina (1777-1782)”, in Istituzioni e società in Toscana nell’età moderna. Atti delle giornate di studio dedicate a G. Pansini (Firenze 4-5 dicembre 1992), Vol. 1 (Rome: Ministero per i beni culturali e ambientali, Ufficio centrale per i beni archivistici, 1994), p. 456, my translation. See also Carlo Mangio, La polizia toscana. Organizzazione e criteri d’intervento (1765-1808) (Milan: Giuffrè, 1988).


broad perspective, including a wide social spectrum, and presenting a more balanced picture in terms of gender.

Very much entrenched in the tradition of negotiated public intervention in private life, supplications to the Grand Duke, centralized in the Consulta, could also concern matters that were not intended to follow any of the traditional legal channels provided by the judicial structure. The problems that deviant or openly mad behaviour exerted on the lives of Tuscan families sometimes required abbreviated, but also discreet, measures. Echoing what we have seen in interdiction petitions, families disclosed to the authorities these cases of deviant behaviour primarily “to impose restraint to the said disorders” (*per porre freno a detti disordini*). 647

These special requests, filed in the archive of the *Consiglio di Reggenza*, were directly handled by the Auditore Fiscale, who acted under the attentive inspection of the members of the Council of Regency and the Consulta. In conjunction with supplications we also find special police matters relating to madness and general deviance. Starting from the identification of deviant behaviours and the negotiation of possible ways to correct them, the boundaries of normality were continuously discussed and reshaped. Thus these sources provide an interesting opportunity to examine the conjunction of different gazes, interests and expertise in a space whose mediating purpose enriches the discussion. The evidence examined suggests that the office of the Auditore Fiscale came to have a key role in the handling of delicate and special matters regarding the insane. We already know that the Auditore Fiscale was the ducal authority that coordinated committal of the *pazzi furiosi* in Santa Dorotea. But the involvement with mental deviance of this powerful office did not end there.

A close scrutiny of matters directly handled by the Auditore Fiscale further broadens the picture of the shaping of lay understandings of madness and the range of measures and reactions taken to address its familial and social consequences. The realm of what was categorized as product or symptom of mental distress was not exhausted in the legal categories of mental incapacity, nor in the legal, but increasingly medical category of *pazzia furiosa*. Madness was constituted by a broad set of symptoms, recognized in certain deviant behaviours that were categorized and interpreted in manifold ways.

Madness could be shaped so as to fit into the legal category of mental incapacity, cast with gestures and actions that were carefully selected to prove that one was a prodigal or

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647 Petition signed by the wife of the deranged Francesco del Mazza, reputed to be extravagant and mad, vicious, licentious and obscene (*sboccato*). ASF, CR, *Fiscale*, F. 758, no. 20, October 1748.
demented and in need of interdiction. Deviance could be moulded so that a person was a criminally insane \textit{pazza} or a \textit{matto}, hence not accountable for their actions and thus deserving of a mitigated penalty. Alternatively, it could also be cast with the necessary features of \textit{pazzia furiosa} in order to secure admission to a mental institution. But madness could also be identified in behaviours that would not lead to any of these legal outcomes. Interdiction, criminal insanity and confinement capture the moments in which madness was enclosed within specific categories that conditioned its shape. The special cases dealt with by the Auditore Fiscale, in contrast, disclose situations and behaviours that were not (yet) constrained by the requirement of legal categories. Some involve behaviours and mental states that, if aggravated, could eventually lead to interdiction, conviction or confinement. Others concern cases of madness framed in terms of the juridical categories that we have been examining, but which for one reason or another were dealt with by resorting to the summary measures provided by the Auditore Fiscale. In this sense, recourse to the Auditore Fiscale directly or via the Consulta could be both a preventive and a contingent measure.

If we were to classify the deviations appearing in the files of the Auditore Fiscale, we would see that there are at least four categories that recurrently appear: disobedient behaviour; violent behaviour; sexual misconduct; and extravagances in various forms. The latter pervaded most of the cases – extravagance was, indeed, at the root of the understanding of madness, while disobedience and violence are better exemplified by the figure of the young \textit{discoli}. Sexual misconduct was a concern that evidently preoccupied eighteenth-century society, demonstrating the appearance of new forms of social relations between the sexes that breached the codes of traditionally expected roles.\textsuperscript{648} They are all behavioural tendencies that we have seen present in the interdiction narratives and criminal records. Moreover, they all correspond to characteristics that, when aggravated, could constitute a felony or be accountable for committal, and correspond to behaviour that was not necessarily attributed to insanity. The interest arises, in my view, when exploring when and why the connection with insanity was made, and with what results.

Disobedience and defiance to established behavioural norms were at the root of the reasons leading to the identification of deviant behaviour in early modern Europe.\textsuperscript{649} Tuscany was not an exception, as we have seen in the previous chapters. Unruliness (\textit{indocibilità}) was a

\textsuperscript{648} This contrast between conflicting views on gender relations, affections and sexual desire has been beautifully examined by Roberto Bizzocchi. To understand the figure of the cicisbei, he examines private letters, contrasting them with a wide variety of sources, from travel literature to the theatre of Goldoni. See Bizzocchi, Cicisbei.

\textsuperscript{649} Lis and Soly, \textit{Disordered Lives}; Spierenburg, “Imprisonment and the Family.”
major concern of the eighteenth century, and efforts to prevent it are to be understood as a coordinated effort that was attempted from various fronts. In a society that was challenged by ground-breaking political changes and economic challenges, defiance to expected social identity came to be seen as particularly threatening. The scandalous disorders that had accompanied the last decades of the Medici rule and the destabilizing changes promoted by the Lorraine had pervading effects for Tuscan society, particularly the aristocracy. Nonetheless, social position and political involvement were not the only realms at stake. The study of madness and deviance casts light on how this context of changing social hierarchies put the family under particular pressure. The breaching of codes of behaviour in the social and domestic spheres needs to be understood through this lens, for the debate, reactions to and repression of deviance respond to a context where the aristocracy, and one’s position in society generally, was under debate.

The eighteenth century has been identified as a turning point for the history of the family, as is well known. The new sociability described by Bizzocchi is only one side of the situation of the family during the enlightenment, when new forms of understanding gender roles, personal liberty, affections and rationality were under discussion. These new perspectives produced virulent and even violent intergenerational conflicts, and introduced a new component to matrimonial litigation, as the rich scholarship on the history of the family has shown. Changes in models of the family, conflicts of co-habitation, new conceptions of gender roles, parenting and matrimony can be also examined through the debates surrounding mental deviance. During the eighteenth century, family members debated each other’s conflicting views of their roles and mutual expectations. The configuration of prodigality and dementia, as we have seen, demonstrated that family roles and gender identities were under public scrutiny during the eighteenth century. At the root of interdiction procedures we find the clash of conflicting views about family roles. Interdictions, regardless of the category classifying the denunciation, served as a mechanism to debate proper parenthood or the expected behaviour of a spouse, a son or a father, all framed under the overarching discussion of economic management. But these discussions are also reflected in the special requests managed by the Auditore Fiscale directly or via the Otto di Guardia. Families from all social

650 The Medici bureaucracy of patricians was replaced by middle-class functionaries in the Lorrain administration, which was accompanied by reforms that proposed new definition of nobility. See Litchfield, Emergence of a bureaucracy and Verga, Da “cittadini” a “nobili”.
651 Many of these works have been cited in this thesis. Let me here make reference to Bizzocchi, Cisicbei; Phillips, The Profligate Son; Lombardi, Matrimonio di antico regime; Fazio and Lombardi, Generazioni.
backgrounds repeatedly resorted to government authorities for help in controlling unruly and deviant relatives. By request of the families, government officials, judicial structures and public institutions played a decisive role in enforcing respect for traditional family hierarchies and gender roles. Social discipline appears here as a joint effort of families and authorities to settle a rational, productive and emotionally regulated family model. A model which – judging from the rising numbers of interdiction petitions, requests for admission to a mental hospital or a prison, and petitions for the arbitration of ever-growing family conflicts – was anything but settled.

Disobedience and Violent Behaviours

Many of the cases filed in the office of the Auditore Fiscale relate to parental requests to incarcerate or, more frequently, embark disobedient young men, labelled discoli, in a ship. Closely resembling the features of prodigals interdicted and placed under guardianship, a discolo was sometimes a less wealthy version of the prodigal and other times his forerunner. In other respects the discolo can be seen as a sort of criminal counterpart of the prodigal, so long as their cases were handled as a police matter, either through the Otto di Guardia e Balia or directly through the office of the Auditore Fiscale. Because a discolo’s behaviour was part of the prehistory of the prodigal, the narratives of these unruly and dissolute young men illuminate the initial steps of what could develop into prodigal behaviour, presenting tendencies that could eventually lead to criminal activities, and strongly marked by the association between moral degradation and mental derangement.

In general terms, a discolo was a disobedient young man who refused to work or study, was frequently violent and lived a life of debauchery. Accusations ranged from

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652 We are here close to the approach of the uses of justice that have been at the root of discussions regarding matrimonial litigation, but also related to notions of negotiated or bottom up processes of social discipline. See Daniela Lombardi, “Giustizia ecclesiastica e composizione dei conflitti matrimoniali (Firenze, secoli XVI-XVIII)”, Seidel Menchi and Quaglioni, I tribunali del matrimonio, pp. 577-607; Dinges, “Usi della giustizia.”

653 The Dizionario della Crusca defined the discolo firstly as one who is in constant opposition to everything and cares for nobody else than themselves, secondly as an idiot or illiterate and thirdly as man of disreputable customs, riotous and intolerable. See Vocabolario degli accademici della Crusca (4th ed, 1729-1738), s.v. “discolo”, http://www.lessicograﬁa.it/discolo, accessed May 13, 2014.

654 These cases can be found throughout the eighteenth century in the Suppliche and Filze Straordinarie of the Otto di Guardia e Balia archive, and in the section corresponding to the affairs of the Auditore Fiscale in the Consiglio di Reggenza archive (CR), F. 758 to F. 761.
“impertinences and disrespect for their parents”, to different degrees of unreasonable and often violent reactions against household members that could even assume the form of death threats. As prodigals, they were the object of widespread moral condemnation, with their disruptive breach of social norms, their unruly characters, their obstinate idleness and strong refusal to work or do “useful” things.

A discolo was a dissipater par excellence, as were prodigals. His dissipation, nonetheless, would not necessarily lead to interdiction. Some of these young men were denounced before the age of 18 and were interdicted afterwards when they came of age, or when they eventually inherited. But the great majority of discoli do not appear in the records of the Magistrato dei Pupilli. Mostly, a discolo was a second-born son with no inheritance rights, or a firstborn with a patrimony that was not considerable enough as to justify (and finance) interdiction. They were aged between fourteen and their early twenties, and came from a varied social spectrum, including nobles, professionals, merchants and artisans. Closely resembling the prodigal, as I have said, we can find three major differences: the discoli came from varied social origins, they were mostly denounced by their fathers, and their disorder was entrenched to a greater extent in criminality.

Given that in the majority of the cases the discoli were not direct holders of a family patrimony, their greatest offence against property was committed through domestic stealing (furti domestici). They were usually pictured as compulsive stealers of household goods of all sorts, which they would afterwards sell in order to finance their debauchery. The degree of compulsiveness varied from case to case, but in many of them we see the same component that could be observed in the descriptions of compulsive selling of household goods carried out by the interdicted prodigals and demented. It was as if a driving force compelled them to steal, in this case, and afterwards sell the household goods to finance their vices, which

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655 A certain Angel’ Santi Caponi describing his son when requesting his incarceration, ASF, OGB, Suppliche, F. 2530, no. 45, June 1750.
656 As stated in regard to the discolo Filippo Laghi, “se ne vive ozioso con strapazzare e percuotere i supplicanti, minacciando ancora di volerli uccidere”. ASF, CR, Fiscare, F. 759, no. 77, October 1758.
657 This is also explainable due to the judicial arena in which they appear. The Magistrato dei Pupilli posed different requirements and used a different language from the much more criminalized contexts of the office of the Auditore Fiscare and the Otto di Guardia. When they were denounced by their mothers, as happened with prodigals, the issue of the absence of paternal authority was considered decisive for explaining their misdemeanour and vices. See, for example, ASF, OGB, Straordinarie, F. 2679, no. 132, July 1756, where a mother denounced her son because he refused to work, spent his days in Florence gambling, and resorted to strategies such as selling the family’s goods and resources to finance his vices.
658 Lorenzo Bini said of his son Zanobi that he had “…portato via dalla propria casa quantità di mobili, abiti, argenti, gioie, denari, grano, olio, et altre cose, con avere a tale effetto sfondato usci, armadi, cassettoni, ed altri luoghi dove si trovava detta roba…” ASF, OGB, Suppliche, F. 2523, no. 107, December 1743.
denoted both viciousness and lack of will power. The inability to control one’s impulses, and the tendency to be overcome by irrational need were indicative, as we have seen, of the absence of normal reasoning faculties.\footnote{As with Panfilo Fabbri, a young man who would sell anything that came into his hands, from the money his father gave him to finance his studies in Pisa, to clothes, household goods and even his own bed. ASF, CR, Fiscale, F. 761, no. 12, July 1763. See also, for example, the case of Matteo Panicacci, denounced by his paternal uncles a decade earlier. ASF, CR, Fiscale, F. 756, no. 39, July 1750.}

In accordance with the preventive nature of the measures exerted by the Auditore Fiscale, many of these accusations were sustained by the supposition that if the conduct were to continue, they would become a serious threat to themselves and their families’ honour. As expressed in a particular case, because he “fears neither God nor men, if he were to continue living every day in the taverns without any expected revenue and without earnings, it can be justly feared that he in little time will precipitate into some mistake that will cause serious dishonour to the whole family.”\footnote{“...n’avendo timore ne di Dio, ne degl’uomini, continuando a vivere tutto giorno per le Bische senza assegnamenti, e senza guadagni, si può giustamente temere, che egli in poco tempo ne precipiti in qualche trascorso da cagionare alla famiglia tutta un qualche grave disonore”, said Giovan Battista Cinnati about his brother. ASF, OGB, Suppliche, F. 2531, no. 53, September 1751.} Unruliness and persistent economic and sexual debauchery were widely feared by eighteenth-century European societies, identified as a clear path towards future degeneration and criminality.\footnote{Phillips, The Profligate Son, Lis and Soly, Disordered lives.} Even during early youth an uncontrolled discolo could expose himself to irreversible damage, such as a 13-year-old boy found hanged in the cellar by his mother after weeks of disobedience, disrespectful behaviour and refusal to engage in any productive activity. The inquiry conducted by the Auditore Fiscale to determine if his death had indeed been self-inflicted demonstrated that the boy fitted the usual parameters of a discolo, with his “nature predominantly unruly and impertinent”, his refusal to work, escapes from home, and disturbed disposition (the day of his death his mother “observed him confused and with a disturbed face.”)\footnote{“...naturale più tosto impertinente e disco...”, “...la madre l’osservo confuso, e torbo in viso”. Report of Domenico Brichieri Colombi, ASF, CR, Fiscale, F. 758, no. 64, December 1754. Brichieri Colombi’s inquiry determined that the boy had provoked his own death, and although the attitude of the mother was found rather negligent for she had not been able to tame him in time, she was considered punished enough by her son’s death and did not receive further punishment.}

Prodigals and discoli shared the same vice and committed the same offence against property. A discolo, nonetheless, was closer to criminality than his counterpart, with the main indicator of deviance being displaced from dissipation to unruliness and incorrigibility. This served the purpose of justifying the need for the intervention of the Auditore Fiscale, who would order their embarkation in a vessel only when it could be established that they were
“reduced to the most extreme degree of incorrigibility.” Establishing these men’s stubbornness and incorrigibility was part of the judicial script required to justify the involvement of the Auditore Fiscale. So, the interest for us here does not lie in the descriptions of unruliness and violent reactions per se, but in the extent to which these reactions were taken to be signs of a perturbed mind.

Their mental state comes to the fore sometimes through marginal but straightforward comments, other times only through hints suggesting the perception that a deranged mind was involved in the disorder. There are also cases in which a disturbed mental state is placed at the very foundation of the accusation, established as the dominating cause of the disorder. Although the primary purpose of these petitions was to convince the authorities about the seriousness of the case, these petitions all the same denote a profound reflexion about what it meant to be sane, and which were the signs indicating that the line had been crossed. In some cases allusions to a disordered mind are reduced to timid hints in the midst of descriptions centred on descriptions of dissoluteness, disobedience and proto-criminal activities, at other times registered in more straightforward comments. Of this latter type, descriptions of the violent reactions that often characterized a discolo’s behaviour, often leading to seriously danger situations, are particularly meaningful.

The notion of incorrigibility, and its kinship with madness, is best elucidated by the ways in which family members described the exacerbated levels of violence reached by the discoli. Domestic theft was often combined with attempts on the lives of family members that could escalate to levels that closely resembled the furious fits that often overcame a pazzo furioso. Zanobi Bini, for instance, although he had been “kindly admonished [ammonito amorevolmente]” on various occasions by his parents for his uncontrollable stealing and unruly behaviour, had anyway “revolted against them, by attempting to kill them and having mistreated them in facts and words.” Once the attacks had been so fierce that his parents had been forced to escape and leave the house to save themselves. With no results, they had tried to curb him before by imprisoning him or enrolling him in the ducal army. Given that he

664 “...essendo stato più volte ammonito amorevolmente da suoi genitori, e parenti, si è rivoltato contro de’ medesimi con aver tentato di uccidergli, e con avergli maltrattati con fatti, e parole, avendo i detti suoi genitori dovuto in varie congiunture difendersi, o colla fuga, o in altra forma.” ASF, OGB, Supplike, F. 2523, no. 107, December 1743. For a similar cases, see also ASF, Consiglio di Reggenza, F. 754, ins. “Consegna di rei”, case of Niccolò Maria Gentili, July 1746; Ibid, F. 759, no. 77, October 1758.
had lately made an attempt against the life of his mother, they were petitioning again, this
time requesting forced embarkation as crew member in any vessel that would take him.

The events leading to Bini’s embarkation are substantially similar to many of the
situations that forced family members to petition for committal in Santa Dorotea. Accusations
of life-threatening domestic violence were at the core of causes of separatio thori argued
before the ecclesiastical courts of the period, and life-threatening violence in criminal courts
was not considered per se a sign of mental derangement. But when we examine how
petitions of committal to Santa Dorotea framed deranged violence we can better grasp what
made violence, or violent reactions, an indicator of madness, and even more clearly, how
these same indicators could be shaped and labelled with different terms according to the
institutional space of its disclosure. A wife, for instance, petitioned for her husband’s
committal arguing he had ceased to be a “good and diligent” head of family, neglecting his
duties and becoming a “disordered [man] and a dissipater, no different than a maniac and mad.”
The family had tried to curb his disorder through imprisonment, but it had proved to be insufficient, for even if at first he gave some “signs of correction and of being liberated
from his fixations and madness,” shortly after his release he resumed his past mad behaviour.
Given that he made an attempt against the life of his wife and children, he was again imprisoned while the petition for his committal was being processed. Whilst this man’s
disordered and violent behaviour was medically categorized as pazzia furiosa in 1770, Zanobi
Bini had been only labelled as discolo in 1743 with no recourse to medical opinion.

This situation and the assessment of its consequences were extraordinarily similar, the
discolo being the younger version of the married pazzo furioso, in this case. There are
evidently many circumstances that explain why a violent individual was labelled as discolo, prodigal, demente or pazzo furioso. For once, the institutional space to which they were
disclosed dramatically shaped the narratives and language employed. But the question should
rather be why families resorted to hospital, prison or interdiction. The particularities of each
family group, their past history and their previous involvement with deviance are certainly

665 In order to obtain ecclesiastical separation of bed and board, litigants, mostly women, had to prove that the
violence exerted by their husbands was repetitive and life threatening. Although there were other just causes of
separation (like adultery, heresy or contagious diseases), the most cited cause was physical abuse (sevzie). On
this, see La Rocca, Tra moglie e marito, pp. 245-282.
666 “...Mattia Labardi di lei marito fino nell’anno 1767 fece passaggio dal essere un buono, e diligente padre di
famiglia, buon economo, savio, ed accurato nelle cose sue, e nei suoi lavori; con esser divenuto trascurato...
sregolato, e dissipatore, nulla diverso da un maniac, e pazzo...”, said Labardi’s wife in her petition. ASF, SD,
Motiepropri, Rescritti..., F. 8, no. 75, August 1770.
variables to take into account, although we generally have to rely on suppositions to reconstruct them. What seems clear is that age, gender and social backgrounds were the most definitive elements conditioning the appearance in one or other space, shaping in turn the narratives and the labels employed to describe them. But both behaviours were essentially perceived in a similar manner; dissipation and disordered or uncontrolled behaviour combined with escalating violence against family members or against themselves were undoubtedly perceived as the effects of a deranged mind by eighteenth-century lay society. To obstinately go against the agreed norms of behaviour was considered a sign of mental disturbance. For, who in his right mind would make an attempt against the life of his own mother?

The previous attempts of the families to induce a discolo to change his behaviour are always highlighted in the narratives, to give a clear sign that the disorder was inveterate and immune to any reprimand or coercive measure taken hitherto. The issue is significant for us so long as it presents the key that connects incorrigibility with madness. The accusations brought against discoi, at first sight connecting them solely to matters of police and preventive disciplining, reveal an interesting presence of notions of madness at a social level that are interesting to examine. It is in the evaluation of the recklessness or the violence shown by the discolo where we find the most interesting hints. The key to the connection with madness can be found in the frequency of the denounced violent outbursts, who their victims were and what were the circumstances.667 For instance, the fact that they repeatedly released their anger against their parents was considered a revealing detail. It was distorted and abnormal to try to kill one’s own mother, even more so if the episode became a tendency. For centuries, Tuscan families had demonstrated an ability to appropriate notions of madness that precisely circumscribed the presence of mental derangement to these types of behaviour.668 However, to request the embarkation of a discolo did not require the actual use of the legal labels of madness that were required in criminal prosecution of civil litigation. It was not a matter of defining civil capacity or determining liability for a crime (which, if anything, was intended to be prevented), but rather a matter for the police.

667 Chiara La Rocca, for instance, examines how male domestic violence could be codified as corrective and deserved by the wife, and thus, be considered a rational act, provided the correction (generally in the form of bastonate) had been controlled and the husband had not let himself be governed by passion. La Rocca, Tra moglie e marito, 275-278. See also Foyster, “Male Honour, Social Control and Wife Beating”, Bailey, Unquiet lives.

668 See, for example, the cases examined by Mellyn in Mad Tuscans and Their Families, Chapter 2.
There are clues suggesting that the connection with insanity was in many times made, although not always verbalized. The proof is found in the use of certain concepts that we have seen profusely used in the other institutional spaces that I have examined so far. We have expressions such as “extravagant brain” (cervello stravagante), or references to their “irregular” and “unruly” characters, their disturbed or troubled humour (umore troppo torbido), or their being of a “difficult, disturbed and uneasy disposition” (animo difficile, torbido e inquieto), which we know were seen as symptoms of altered states of mind.

For instance, a former discolo who had been troublesome since his early youth and had been alternatively incarcerated, exiled and incarcerated again for decades, was defined in a manner that increasingly resembled the features of a madman. Although he was not openly categorized as such, he was described recurring to terms we have seen present in the narratives of madness both in interdiction petitions and in criminal records. When this troublesome noble was 62 years old, the Auditore Fiscale Domenico Brichieri Colombi described him as “incorrigible, being a gambler, blasphemer, inclined to drunkenness and to every other vice, particularly to those of stealing, attacking in brawls and creating scandals.”

To prevent his release when he was 67 years old, his relatives categorized his behaviour as utterly extravagant, describing him as “a brutish man [uomo bestiale, used here in the sense of out of his senses], and of bad inclinations.”

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669 Anton Gaetano Mori Ubaldini, said to have shown a bad inclination (cattiva inclinazione) since early childhood, maintained a “idle and libertine life”, was insolent, unruly and a “standard” dissipater, identified by his relatives for his “cervello stravagante”. This denomination, used in the petition signed by his mother, was not repeated in the authorities’ report. In other words, the element was not considered to add further relevant information to the features of his disordered behaviour. ASF, CR, Fiscale, F. 760, no. 53, 1760.

670 A young man who would not sleep at home but in a public inn, “e conduce i suoi giorni in una maniera molto irregolare.” He was arrogant and had an unruly (indocile) humour, said the mother. ASF, OGB, Suppliche, F. 2540, no. 58, November 1764.

671 Filippo Laghi was a discolo who had threatened the life of his mother and brothers too many times, was stubbornly idle, intended to marry a woman whom he had gotten pregnant although he was engaged in a previous matrimonial contract with a different woman. His actions revealed what the Auditore Fiscale framed as his “disturbed humour” (umor suo troppo torbido). ASF, CR, Fiscale, F. 759, no. 77, October 1758.

672 Brichieri Colombi regarding Pietro Maria Genovini when the latter requested his release from the incarceration requested by his father. He denied the request on the basis that “...essendomi più volte convenuto di farlo passare dalle carceri delle Stinche a quelle de gli otto, e dalla pubblica alle segrete anco con i ferri a piedi, avendo non ostante dimostrato sempre con animo difficile, torbido, e inquieto il predetto Genovini.” ASF, CR, Fiscale, F. 759, no. 62, January 1760. His troubled mental state led him to being interdicted 10 years later, after his father died and while he was still imprisoned. ASF, MPAP, Memoriali, F. 2308, no. 11, March 1770.

673 For a comprehensive examination of these concepts, see Chapter 7.

674 “...incorreggibile, come giocatore, bestemmiatore, dedito alle ubriachezze e a tutti i vizi, e particolarmente a quelli di rubare, di attaccar risse e mettere scandali.” Report of Domenico Brichieri Colombi regarding a certain Giulio Gherardi, noble from Pistoia. ASF, CR, Fiscale, F. 759, no. 37, April 1754.

675 He committed the “...maggiori stravaganze del mondo, si nell’onore, come nella persona: perché essendo uomo bestiale, e di pessima inclinazione, giache ha tenuto, fino da bambino, inquieto un mondo intero, a segno,
Juvenile disobedience and unruliness were certainly not the only disorder disclosed to the Auditore Fiscale in order to be curbed or restrained. The feature of disobedience was not only present in young men, but also in middle-aged, married men and young or married women, mirroring the scenario we have elaborated through interdiction procedures. The disruption caused by married men had similar features, but was conflated with their failure as heads of family and their matrimonial conflicts. The violence exerted by discoli assumed different targets in the case of married men, and gave occasion to their wives to request for temporary separations to escape from them. We witness the same refusal to work and death threats to household members, only the latter were especially directed against the wife, and aggravated by drunkenness.  

Women’s disobedience, on the contrary, is usually portrayed through more passive behaviour, although cases of violent or even murderous women can also be found. Female deviance was frequently represented in their defiance to masculine power, and a certain desire to live with “too much liberty.” We have seen them portrayed in the records of the Magistrato dei Pupilli in open defiance of masculine authority, whether their father’s, husband’s or men of the government administration. Many of these cases of unruliness were connected to certain degrees of mental disturbance, recognized in a constitutional incapacity to follow rules and submit to the world’s order. This characteristic is particularly illustrated by the case of a woman sentenced to home restraint because she had failed to offer due respect to the Commissario of Prato, a distant relative of hers. The Commissario was so offended by her lack of good manners that he initially requested her confinement in a convent in order to give her the necessary environment to help her repent from her actions [rientrare in se stessa]. However, because she was known to be of a “head not that well governed” [persona di capo non troppo ben regolato], her fault was ultimately condoned. The

che se meritato le esilio da tutta l’Italia, e da altri paesi esteri.” Petition of Gherardi’s relatives, Ibid., September 1759.  

676 See, for instance, the case of a man who according to his wife had never contributed to the family’s maintenance, demonstrated “no willingness to work”, usually returned home “full of wine [ripieno di vino]” and blasphemed in front of his daughters. The wife requested that her husband be employed outside Florence, alleging he was frequently violent and had declared his intention to murder her, which had forced her on many occasions to sleep outside their home to protect herself. ASF, OGB, Straordinarie, F. 2679, no. 9, circa May 1755. For similar cases see, for instance, ASF, OGB, Straordinarie, F. 2675, no. 18, November 1749; ASF, CR, Fiscale, F. 756, no. 38, July 1750 and F. 757, no. 15, July 1751.  

677 These characteristics are also commonly found in the accusations (or defence) of husbands in marriage litigation. See, for instance, La Rocca, Tra moglie e marito.
Commissario yielded to the suggestions of the Auditore Fiscale, and finally decided that the matter was not worth pursuing considering her public reputation as a “loose” head.  

**Sexual Misconduct**

Also related to disobedience and defiance to behavioural norms, sexual misconduct is revealed as a ubiquitous characteristic ascribed to disordered men and women denounced to the Tuscan authorities. There were different levels to the categorization of sexual misconduct, from the libertine and dissolute tendencies of single men, through the adulterous relationships of men and women to homosexual practices. The connection of these behaviours with madness may be tricky, particularly if we aim to avoid falling into the trap of equating what was perceived as sexual depravation to madness. For this reason, my intention here is to identify connections between certain behaviours and madness, in the sense of examining the way in which sexual misconduct was found to be indicative of certain degrees of mental derangement, which is not to say that sexual misconduct *per se* was equated to madness.

Idleness, vices and debauchery usually come together with sexual misconduct in the narratives that denounced disordered men. We have seen it regarding prodigals and demented taken under the authority of the Magistrato dei Pupilli, and we can recognize it in the young men falling into the category of *discoli* and in disordered middle-aged married men. Libertine tendencies were the common territory of prodigals and *discoli*, leaving the dishonourable mark of the French disease (syphilis). Sexual disorders became a characteristic of disordered men under the form of illicit and improper affairs with women usually of a lower social status. Women in these cases are invariably presented as the instigators of men’s vices, who in their weakness fall into the schemes of these dissolute and depraved, diverting them from the path of obedience, decorum, labour and virtue. This tendency was generally controlled through police measures like formal precepts prohibiting the union or decreeing the woman’s exile. But, some of these cases represented a step further towards abnormal male behaviour. The issue was, nonetheless, that many of these men made a habit of their weakness

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678 Case of Maria Maddalena Buonamici. ASF, CR, *Fiscale*, F. 758, no. 1, April 1753.
680 See, for example, the case of a young man and his relationship with a woman with whom he spent “almost all the hours of the day, and all those of the night”, who “seduced” him not to marry the woman proposed by his father. ASF, OGB, *Straordinarie*, F. 2679, no. 180, January 1757. For a similar case, see Ibid., no. 141, August 1756.
for licentious practices, even making a total fool of themselves by proclaiming publicly their “passion” for a woman and their intention to marry her even if he was already married, to be caught later under dubious circumstances that gave space to accusations of sodomy.  

The vision of the female power of seduction, which had pervaded religious writings in their campaign against pre-marital relations and, particularly, against unequal marriages between elite men and low-born women since the late seventeenth century, acquire interesting meanings in relation to notions of masculinity and the kind of mental state expected in a man. The significant element of the cases handled by the Auditore Fiscale can be found in the way male weakness was portrayed, and how it was used to reflect poor rational faculties. Rather than pointing towards the traditional view of the malice and seductive arts of women, the narratives highlighted these men’s lack of rational powers to respond to “female” schemes. The fact that these men were repeatedly involved in these kinds of situations, in the same degree that the disorder of a discolo was found to be inveterate, lead us to the same conclusion.

A disordered mind was indicated by certain forms of a deliberate breaching of behavioural codes. Thus, the circumstances and events that surrounded the act of deviation constitute the key to its interpretation. For instance, a man was first denounced when he intended to marry a servant, again when he eloped with another woman taking away valuable household goods, and a last time when involved in a shooting by reason of a promise of marriage to a third woman. The tendency of falling into the “trap” of women was combined with a complete weakness on men’s part to defend themselves from the greediness of these women and their families, pictured invariably as conspiring to take away from them as many resources as possible. That love under the form of a strong passion could dangerously obscure men’s mental faculties was also observed by the “moral rigour” that characterized the eighteenth-century religious understanding of the dangers of love. But the suggestions regarding altered, or weakened mental faculties caused by passionate affection and heightened

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681 I am referring here to a particular case affecting a Marquis Baldinucci, involved in a scandal with a peasant girl for whom he declared a hopeless passion and his intention to marry her, even if he was already married. He was involved 6 years later in rumours of sodomitical practices and “other filthiness” (altre laidezze). ASF, CR, Fiscale, F. 759, no. 28, March 1756 and 1762.

682 On the religious campaign against pre-marital relations, and against mismatched marriages, which during the eighteenth century enjoyed the practical aid of law and the police, see Lombardi, Matrimonio di antico regime, p. 359-375.

683 ASF, CR, Fiscale, F. 758, no. 24, no. 27 and no. 62, 1754.

684 See ASF, CR, Fiscale, F. 756, no. 32, April 1750, or Idem, no. 41, August 1750.

685 Lombardi, Matrimonio di antico regime, p. 364.
by schemes of women served here, interestingly, to diminish these men’s responsibility for their wrongdoings. In fact, the common provision against these kinds of disorder was to ensure the woman’s banishment from the surroundings of the helpless man, so that he could return to the good path. Either because of their “fickleness” (leggerezze) or their excessive “volubility”, they let themselves be “persuaded” by these women into committing actions that were detrimental to them.686 What was only hinted at in some cases was openly expressed in others, such as when a father explicitly referred to his son’s “weakness”, and “little and no judgement” (poco e niente giudizio) to explain his involvement with three different women and his engagement in two parallel marriage promises. The same weakness and little judgement that led this man to be interdicted some years later.687

Sexual depravation appears connected to madness more than once, present in the different spaces where madness could make a public appearance in the eighteenth century. Interdiction petitions, criminal insanity, hospital and medical records all mention at a certain point the presence of wrongly oriented passions and deviant sexual practices. The explicitness of the connection with mental derangement varies, though, depending on the context in which sexual deprivation appears. Men under the curatorship of the Pupilli were commonly involved in accusations of lecherous behaviour, as were some of the women. For instance, Lorenzo Baldinotti, whose madness was disclosed through the four interdictions that affected him between 1725 and 1755, caused repeated trouble for his family and the authorities on account of his disordered sexual behaviour.688 He faced rape charges in 1729 and in 1755 was still creating trouble due to his “dissolute” behaviour, “illicit pleasures” and “public sensuality.”689 In the case of Baldinotti’s son, said to have inherited the “brain and character” of a father

686 This was said regarding Bindo Maria Peruzzi, who eloped with a woman while involved in matrimonial negotiations with another one. Attesting to the perception that he suffered some sort of mental derangement, he was interdicted 10 years later. See, ASF, CR, Fiscale, F. 759, no. 41, July 1754 and ASF, MPAP, Memoriali, F. 2306, no. 128, October 1764.

687 Report of the Auditore Fiscale referring the words of Orazio Pennetti’s father. ASF, CR, Fiscale, F. 755, no. 72, July-August 1747. In 1751 he was prosecuted of stupro against a third woman, and was finally interdicted in 1754. In the following years the case continues to appear with regards to Pennetti’s difficult personality, involving alternatively the Pupilli officials and the Auditore Fiscale. See respectively ASF, OGB, Suppliche, F. 2531, no. 55, September 1751; ASF, MPAP, Memoriali, F. 2303, no. 179, May 1754; ASF, OGB, Suppliche, F. 2537, no. 162, 23 July 1761. The interdiction can be seen in ASF, MPAP, Memoriali, F. 2303, no. 179, May 1754.

688 See Chapter 3, section 1.

689 ASF, OGB, Negozi dei Rettori, F. 1729, Negozi 7067, no.4, 3-8 March 1729 and ASF, CR, Fiscale, F. 759, no. 11, July 1755 respectively. The connection between sexual crimes and interdiction sentences could be further developed in the future. The fact that I have found “by chance” so many cases of interdicted men involved in diverse criminal activities, broadens the picture of how problematic the interdicted could become for public life. A more thorough search in the archives of the Otto di Guardia could eventually shed clearer light on the connection between sexual crimes and insanity, or between madness and deviance more generally.
“whose extreme extravagance was notorious”, his lecherousness assumed the form of sodomitic tendencies. Having shown early signs of extravagance and a behaviour close to that of a *discolo*, Antonio Baldinotti faced criminal charges of sodomy in his early twenties, which fortunately for him and his family were left open due to lack of evidence.\(^690\) All the same there were once again rumours about him, this time saying he had developed an “irrational passion” (*irragionevoile passione*) for a man he kept living with him as a lackey in the same countryside villa that had witnessed his father’s scandals.\(^691\) After a request by his relatives, Antonio was sent back to Florence under direct order of the Auditore Fiscale, to be kept under direct surveillance while his interdiction was being approved. Antonio’s next of kin not only requested the interdiction, but also solicited his banishment in Volterra or Portoferraio.\(^692\)

The discreet and expedited action of the authorities to conceal a behaviour that had by then achieved too much publicity speaks not only of Antonio’s privileges before the law. Aristocratic privileges in this case constitute only the first and most evident layer of a much more complex problem when we take into account the whole context. The Baldinotti family had been exposed to the consequences of mad behaviour and had made use of the mechanisms available to control it for half the century at least. At the same time, this provided them with the necessary ability to make convenient use of mechanisms such as incarceration, home restraint, banishment, interdiction and criminal prosecution. The characteristics of the mental derangement that allegedly affected father and son are sufficiently recurrent and consistent so as to interpret their cases as the result of mere machination and abuse. Without having to settle clear boundaries between reality and fiction, what the Baldinotti case underpins is a social awareness of the characteristics of madness and how certain behaviours and emotional reactions were its most definitive tokens. In the case of Antonio’s sodomitic tendencies, his weakness for same-sex relationships were unanimously singled out as caused by the mental disturbance he inherited from his father, being as he was, “a young man of little brain and little conduct.”\(^693\)

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A similar approach had been taken by the relatives of a man convicted of sodomy when they argued his impunity on account of his “fatuity and foolishness.” We have seen how the criminally insane were held unaccountable for their actions. By the same token, insanity diminished the responsibility of the individual for indulging vices and moral corruptions such as sodomitical practices. Madness explained their “vicious” tendencies at the same time as it exculpated them for indulging them. But, I have found no evidence suggesting that sodomy on its own was considered to be a kind of madness. In the cases where sodomy appears connected to the argument of diminished responsibility by reason of insanity, there is nothing to suggest that sodomitical practices were considered to be the symptom of madness. On the contrary, the argument was that, because the suspect was considered to be mad, he could not restrain himself from committing the crime. As pointed out by critics of Foucault’s contention that homosexuality was included in the categories of madness in the eighteenth century, we must bear in mind that homosexuality was “fiercely punished” by law, while madness exculpated the individuals on account of their diminished responsibility.

So long as madness presupposed the incapacity to perform rational actions and take rational decisions, mad people were considered as particularly prone to sexual deviances such as the ones performed by the Baldinotti. For instance, a man committed to Santa Dorotea, whose sentence had been suspended on account of his insanity, was released from the hospital when his pazzia furiosa turned into a “mixture of stupidity and dementia.” To illustrate his current mental condition, the hospital’s physician said he “is not furious, and neither disturbs the peace of those around him nor falls into lascivious acts, but has simply become a little imbecile of mind and foolish [stoliduccio].”

The configuration of mental deviance can thus be read as part of a more general campaign to control sexual behaviour and discipline moral behaviours which began at the end of the seventeenth century with a strong religious mark but which became progressively secularized during the eighteenth century and materialized, among other things, in the

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694 I am referring here to Lorenzo Buonriposi, convicted of sodomy in 1743, whose case was examined in the section “Criminal Insanity” at the beginning of this chapter. ASF, OGB, Suppliche, F. 2523, no. 14, August 1743.
696 “...non è furioso, ne turba la quiete di chi li stà d’intorno ne tampoco da in atti lascivi ma semplicemente è restato un poco imbecille di mente e stoliduccio, et in grado di non dovere più stare nel suddetto spedale.” Antonio Lulli to the Consiglio di Reggenza regarding Antonio Razzuoli, ASF, OGB, Suppliche, F. 2542, no. 27, September 1767.
enforcement of the office of the Auditore Fiscale.\textsuperscript{697} Measures taken to ensure the maintenance of the \textit{buon governo} and guard the inhabitants’ good morals were easily conflated with mechanisms to neutralize the consequences of madness. Nonetheless, even if madness and moral depravation produced similar consequences, we must be cautious. Evidently, not every morally reprehensible act was considered to be the expression of a deranged mind. For instance, female prostitution and male engagement in same-sex lascivious acts were not \textit{per se} categorized as mad behaviour. Quite the contrary, they were well defined crimes, punishable by law. But, the fact is that insanity constituted a disruption of the public peace and morality, which is to say that the insane behaviour that caught public attention was precisely the kind that was disclosed through violent or indecent acts, as we have seen. Therefore, it was not sodomy, adultery, debauchery or lecherousness by themselves what constituted madness, but the way in which these behaviours were enacted by some of the men and women whose cases were brought before the Auditore Fiscale.

Attesting for an eighteenth century particularly preoccupied with sexual behaviour, and placing Tuscany in the larger scenario of the European enlightenment, women were also involved in these sexual scandals, giving occasion to a different set of measures to control the problem, but to not so different arguments to condemn it. Again, the primary division is given by property and women’s exclusion from it. In the case of men, the common resolution taken to prevent the consequences of libertine practices was to banish the woman in question. But when women were the protagonists of the scandal they were confined, usually in either of the two Florentine Conservatories that held women of bad living, the Mendicanti and the Malmaritate. It seems clear that such conservatories served the purpose of secluding women of bad reputation to protect their honour. They were either women lacking family networks to protect them, or married women accused of adulterous behaviour. The Mendicanti in particular, according to the study by Daniela Lombardi, was used as a temporal solution to matrimonial conflicts that prevented the need to turn to more definitive solutions through the ecclesiastical justice.\textsuperscript{698} We have seen that female insanity was hidden in monasteries and conservatories, leaving a trace that is hard to follow, and was often conflated with the female disorders that traditionally dominated masculine anxieties. Here again, the involvement of the


Auditore Fiscale served as an abbreviated and discreet measure to silence the dishonour
married women allegedly provoked for their husbands.

As in other cases, the interesting aspect for us here lies not in the delineation of
categories of female disorder connected to sexual behaviour, but rather in the recourse to
descriptors of madness. Denunciations of female libertinage and female unruliness,
particularly concerning aristocratic women, recurred to categories echoing the words and lines
of argument employed to argue for mental incapacity. Dissolute and lecherous tendencies in
women were blended with concerns over their husband’s honour and tied to concerns over
patrimony, so the moral economy is still in the background of these descriptions. This is
finely illustrated by the case of Chiara Maria Fondora, a noblewoman from Lucca confined at
request of her husband in the Mendicanti in 1747. She was said to have a “most wicked
character” (*pessimo carattere*), which earned her “universal scorn.” Among her faults, we are
told of her multiple adventures with different men, her intimate attitude towards her *cicisbei*,
the growing debts she incurred to keep them, and her habit of receiving visitors in her bed.
She frequented men with “improper liberty” and “illicit confidence”, spending outrageous
amounts of money on her illicit friendships, allowing for her intimate friends to spend the
night in the house and giving them expensive gifts, because, “to the one I have given my
heart, she said, I can also give gold and silver.” She was seen in the company of men of
diverse origins, from tailors to priests, strolling around the city with them until late at night.
She shamelessly pursued her affection, and what was seen as even worse, she revealed her
state using words of “foolish love [*sciocco amore*]”, which revealed her carnal impulses.

Enlightened sociability had brought new conceptions of social relations and
affectionate bonds between the sexes. According to Bizzocchi, the practise of *cicisbei* was
widely spread among the Italian aristocracy, creating an interesting triangle between the two
spouses and the *cicisbeo*. The latter not only counted on the approval of the husband, but
often played a crucial role in the marriage, mediating between the spouses and acting as an

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699 “Un attestato d’una persona fiorentina del di primo settembre 1747 che asserisce avere la detta Sig. Chiara
Maria Fondora ne Catani detto, che dette a Monfù Sullè suo caro Amico un sacchettino di Ruspi [zecchini, that
is, gold coins], quando ebbe a partire di Firenze, e che niente gli dolsero, perché a chi ho donato il cuore, potevo,
diceva ella, donarli anche l’oro, e l’argento”. “Estratto dei Documenti, e Recapiti riguardanti il contegno della
vita e costumi praticati tanto per il passato, che di presente dalla Signora Chiara Maria Fondora, moglie del Sig.

700 “...dopo esser’ partita per Lucca disigillata d’un frate d’Ognissanti, nella quella palesavagli il suo
grand’affetto con sommo dispiacere d’aver lasciato i suoi begl’occhi risplendenti, ma quando fosse ritornato,
gl’averebbe goduto di più con altre parole di sciocco amore.” Ibid.
outlet of energies that worked for both husband and wife. But a careful examination of the case of Chiara Maria Fondora suggests that she practiced a particular variant of cicisbeismo in stark opposition to social parity, and included more escorts in the equation than what was appropriate. But there is more to it, for although the narratives place her disorder around her behaviour with her cicisbei, taking into account how her mental and emotional state are portrayed introduces an interesting aspect to consider. Having in mind how the case was argued, one could suggest that Chiara Maria Fondora’s breaching of behavioural norms was not her practice of having cicisbei, but how she behaved with them and, most of all, the extent to which her behaviour was taken to denote her inner (mental and/or emotional) instability. For although having a cicisbeo was accepted in aristocratic society, there were certain rules that both women and their escorts (cavalieri serventi) had to comply. The lady’s escort was suppose to finance and provide for her needs, according to the rules of gallant society, but not the other way around. The husband’s resources were not supposed to be openly wasted on the cicisbeo, let alone could she openly admit to have lost her mind over him (them in this case).

In a context where love affections were thought to inflict a damaging effect on people’s minds, these women aggravated their conduct with their demonstrations of “foolish love”, and the “immoderate passion [sregolata passione]” that “blinded” them. The line separating accepted and improper behaviour was a matter of debate, and so was the border between sanity and insanity. This debate, illuminated through the denunciations brought to the Auditore Fiscale, bears witness to conflicting visions about the limits of liberty and how a person, particularly a woman in this case, was expected to “navigate” across her affections (and not necessarily repress them).

Let me examine a case where we find a direct association between persistent libertine behaviour and madness. Angiola della Renna, married to a cavaliere and noble herself, was first confined at her villa in Pelago (in the vicinity of Pontassieve), and later sent to the Mendicanti, on account of her persistent and scandalous libertinage. The usual features are present here as well: excessive liberty in her treatment with men, their staying overnight at her residence, the public scandal her behaviour caused in the surrounding population. Angiola’s

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701 Bizzocchi, Cicisbei.
702 The widow Margherita Roselli fell under the effects of an immoderate passion for a surgeon, which blinded her, obscuring her judgement. The man was accused of taking advantage of her and her economic situation, and was consequently sent to exile far away from her. ASF, CR, Fiscale, F. 758, no. 64, August 1757.
704 ASF, CR, Fiscale, F. 760, no. 26, June 1759-May 1763.
high rank demanded a special treatment, recognized in the discreteness by which her behaviour was treated and through the fact that the Auditore Fiscale attended her case by direct command of the Consulta, and not by the usual mechanism of a request sent by the offended husband.\textsuperscript{705} Even if the senator Giulio Rucellai, close collaborator of the Council of Regency, and the administration of the Mendicanti had manifested their reluctance in admitting such a highly ranked and disordered woman, she was transferred there in June of 1759. Her public performance was concluded with a final scandal, featuring an attempt to escape from the authorities sent to restrain her across the roofs of Pelago in the company of a younger and lower-ranked man.

Throughout the four years Angiola della Rena was confined in the Mendicanti, Giulio Rucellai acted as the mediator between her, the government, the Auditore Fiscale and her husband. From the beginning he had been reluctant to admit her into the Conservatory, adducing that “the wicked manner of this woman is by a great extent the consequence of a kind of madness that makes her trespass every obligation.” When five months later she requested her release so that she could give birth in “the house of her own husband”, Rucellai not only denied the request, but called into doubt the alleged pregnancy.\textsuperscript{707} He nonetheless called attention to the inappropriate situation in which she had been left in the Conservatory, where “except for the food, she lacks almost everything.” He considered that her situation needed to be improved, given that “the extravagance mingled with the foolishness [stoltizia] that agitates the heart of this woman” were not reason enough to deprive her of the treatment a lady deserved.\textsuperscript{708}

Angiola della Renna’s extravagance, wicked manners and the foolishness that disturbed her heart, as Rucellai had put it, continued to hamper her release, despite the fact

\textsuperscript{705} Her case in fact posed a particular problem for the ducal administration, given that her high rank demanded special treatment at the Mendicanti, particularly an individual room, putting a strain on the institution. Before commanding her confinement in the Mendicanti, the Council of Regency requested a special survey to find out if there was a precedent in sending highly ranked women to the institution, and a list of 7 women received between 1739 and 1759 was produced.

\textsuperscript{706} “...il cattivo costume di questa donna, è in gran parte conseguenza d’una specie di follia, che la fa passar sopra a ogni dovere.” Giulio Rucellai to the Consulta, 30 June 1759, ASF, CR, Fiscale, F. 760, no. 26.

\textsuperscript{707} A surgeon certified her grown abdomen, but could recognize no movement of the fetus, which for the 7 months pregnancy she claimed to have, was fundamental to assess the veracity of her claim. No further allusion was made to the pregnancy, but years later she made reference to a damaged state of health due to bad humours. The whole issue of the pregnancy is certainly very interesting, probably pointing towards a physical illness that caused the skipping of her period and the swollen abdomen. However, we cannot dismiss the possibility that she was in fact pregnant only because there are no further records on the matter.

\textsuperscript{708} “...la stravaganza mescolata alla stoltizia ch’agita il cuore di questa donna, non mi sembra un titolo sufficiente per farle mancare un necessario che corrisponda alla maschera di dama, ch’ella ha rappresentato fin’ora, benche sempre con poco plauso.” Giulio Rucellai to the Council of Regency, 30 January 1760, Ibid.
that she sent various subsequent petitions with eloquent promises of amendment, attributing her past disorders to her “juvenile fickleness” (*leggerezze*).\(^{709}\) With no results, she promised in the future to live subject to the authority of her husband. Nonetheless, facts proved to undermine her promises, given that in August 1762 the Auditore Fiscale informed that Angiola “either not understanding reason or not intending to follow it, seems to be obstinate in her strange way of thinking.”\(^{710}\) She was finally released after four years with serious admonitions on the part of Rucellai and Brichieri Colombi, being threatened with further punishment if she were not to keep her promise of acting “with the wisdom and decorum convenient to her state and condition.”\(^{711}\)

We know that the office of the Auditore Fiscale provided the secrecy to deal with these kinds of matters in a discrete and quick way that ensured preservation of honour and prevented the need to resort to more definitive measures like requesting a *separatio thori* before the ecclesiastical court. The interesting thing is that implicit or direct references to altered states of mind in these disordered women can be seen as serving the same purpose: it both diminished their guilt and preserved their husbands’ honour. Suggesting their mind was compromised secured a favourable response from the authorities and at the same time activated the mechanisms to resolve the problem, inflicting less damage to the husband’s honour than if he had to recognize his own failure. The inability to keep a disordered wife whose mind was not in the right state under control left, at least, the husband’s manliness intact.

**Notions of Mental Disturbance in Family Litigation**

Many of the private conflicts that the office of the Auditore Fiscale had to attend to were related to family conflicts, as we have seen, among which matrimonial disputes take a leading part. Accusations of licentious behaviour and a lax sense of matrimonial fidelity worked many times as crossfire between spouses. In the matrimonial contentions disclosed

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\(^{709}\) In her petitions to be released from the Mendicanti, Angiola also made reference to the mortification the confinement produced in her, the deep vexation it caused her to be separated from her “numerous and very young children”, and various physical ailments caused by a “wicked disposition of humours.” Petitions of Angiola della Renna, 1761, Ibid.

\(^{710}\) “...la stessa o non intendo ragione, o non volendo abbracciare, pare che si sia ostinata nella strana sua maniera di pensare...” Domenico Brichieri Colombi to the Council of Regency, August 1762, Ibid.

\(^{711}\) “...l’avverta seriamente a condursi in avvenire colla quella saviezza e decoro che conviene al di lei stato e condizione per non sottoporsi in caso diverso a qualche più sensibile mortificazione”. Council of Regency to Brichieri Colombi, May 1763, Ibid.
before the authorities, patrimonial concerns were blended into denunciations of behaviours that were supposed to reveal a disordered state of mind. These disputes demonstrate particularly well how litigants resorted to the vocabulary of madness to illustrate their accusations against each other and based the need for the authorities’ intervention. The instrumental use of labels of madness at a lay level suggests a social awareness of the causes and symptoms of mental derangement, broadening our comprehension of the ways in which madness was identified, perceived, and explained.

As is common to find in the narratives of deviant behaviour, mental disturbance appears in close connection with notions of virtue, morality and family roles. Disordered women, we have seen, were usually portrayed in open defiance to their husband’s authority. However, the obstinacy they showed in keeping their disordered behaviour and, particularly, their reluctance to yield to their husband’s authority was only the edge of a more complicated understanding of what their disorder was. The connection with mental disturbance can be found once we cross that edge. It was not unruliness or libertinage in itself which indicated that the mind was compromised, but their disordered disposition (animo sregolato), their “utterly extravagant declarations”, their caprices. That is, the demonstrations of their inner disposition accompanying those acts of unruliness.

Immoderate emotions – whether violent reactions, extreme sadness or passionate affections – could be the cause of different forms of mental affliction, contemporaneous medical knowledge was establishing. What was becoming widely accepted in medical knowledge is reflected in the narratives of disordered behaviour and the ways in which relatives and authorities interpreted them. These women’s amorous affections were defined as “foolish” and their passion “immoderate”, their mind and soul were said to be disordered (animo sregolato), or extravagant. If we consider that these connections were neither random nor casual, we can assert that husbands made use of a shared knowledge that connected immoderate emotions to mental disturbance as a mechanism to support their pleas against their disordered wives. The fact that they showed a “disordered disposition” (animo

712 Margherita del Tira’s husband resorted to the Auditore Fiscale because she refused to abandon her enclosure at the Malmaritate: “si è costantemente dichiarata di non voler ritornare presso del marito, ne di voler passare in altro ritiro, ma bensi di volere andare a suo capriccio, e contro la di sua volontà ove più le piacerà, e così vivere come se ella fosse sua Iuris, e non dovesse in cosa di tanto rilievo dipendere in alcuna maniera dal marito. Ma perche l’esecuzione di tali stravagantissime dichiarazioni, specialmente in una donna giovine, sembrano diametralmente opposta alle disposizioni delle Leggi Divine, e Umane, alla pubblica onestà, e al decoro del supplicante, e di sua famiglia.” ASF, CR, Fiscale, F. 758, no. 69, March-July 1755.

713 See Chapter 6.
sregolato) served to justify the need, as the Auditore Fiscale framed it, to be restrained (sia tenuta a freno) and persuaded to recognize her duties.\footnote{According to Brichieri Colombi’s analysis, the conflict between Margherita del Tira and her husband resulted from a mixture of the husband’s lack of ability in controlling his wife, and the wife’s refusal to assume her subjection to him, her preference for a “life in liberty” (preferendo più tosto la stessa di vivere con libertà, e senza soggezione del marito), and her disordered and uncontrolled state of mind (animo affatto sregolato). ASF, CR, Fiscale, F. 758, no. 69, March-July 1755.}

For instance, the noblewoman from Lucca confined in the Mendicanti for her wicked character, her behaviour towards her cicisbei and, particularly, her shameless manifestations of affection towards her foolish love, tried to counter her husband’s accusations by attacking him with recourse to similar arguments. Relying on the principle that a deranged mind was manifested through odd economic behaviour, she accused her husband of “extravagancy”, explaining that she had been impelled to live separately from him for over 14 years due to his failure to feed her and their children to the extent that one of them died from hunger.\footnote{Petition of Chiara Maria Fondora requesting her release from the Mendicanti. ASF, CR, Fiscale, F. 755, no. 35, 1747.}

However, in the marital dispute between Chiara Maria Fondora and her husband, her fame as a licentious and libertine woman proved to be stronger than her accusations against her husband. Her husband’s extravagancy was considered less serious in the eyes of the Fiscale compared to her repeated demonstrations of “foolish love” (sciocco amore) and scandalous libertinage.

If in this case the husband’s allegations against his wife were favoured over the latter’s, there are plenty of cases with the opposite outcome. Interdiction procedures, largely portraying disordered men through women’s accusations, are a clear proof. Extravagancy and the different forms madness could assume were not constrained to one gender. Accusations of male extravagancy also served to describe their altered minds and disordered dispositions, but this time in close connection to economic behaviour. Although these factors were taken to indicate both male and female mental disorders, economic behaviour was at the very foundation of the model against which male sanity was measured. Male extravagancy related to economic behaviour was recognized in any behaviour that went against the wellbeing of the household, being it dissipation, or hoarding to the point of withholding the necessary means of maintenance to the family.

Prodigality had an antithesis that was as revealing as its counterpart of the presence of male mental derangement. For instance, a nobleman from Montepulciano, involved in a bitter matrimonial dispute, was described as a miserly head of family who “moved by violent
passions of sordid avarice” (*guidato da violente passione di sordidissima avarizia*), refused to spend on his family’s most basic needs, banishing salt and spices for being too expensive, and withholding from them food, clothing and medical attention, leaving his children to scream with hunger. All these signs, combined with the fact that he insulted and beat his wife in the most indecorous and unfounded way, denoted his “disturbed humour” (*torbido umore*) and that he was “disordered in his thinking” (*stravolto nel pensare*), all indicators of an “extravagant head” (*capo stravagante*). Although the local authorities and the wife’s kin proposed that the man be interdicted and placed under guardianship, the Auditore Fiscale considered that this was not to be recommended in this case as it would only lead to further disturbance in the couple’s life.\(^{716}\)

The familial disputes placed under the authority of the Auditore Fiscale for arbitration made use of the features of madness as arguments to base opposed accusations. Violence, dilapidation, sexual misconduct, extravagance, and in general, behaviours that denoted an absence of self-control were mechanisms to accuse a family member of deviances that could only be explained by some sort of mental derangement. Furthermore, these deviations, more or less explicitly defined as forms of insanity, were used to win the dispute and convince the Auditore Fiscale of one’s position. Interestingly, then, the arbitration practiced by the Auditore Fiscale served as a space for the discussion of the boundaries of normal behaviour, and the shaping of insanity.

It might be important to note here that evidently not every family dispute handled by the Auditore Fiscale, or the Magistrato dei Pupilli and Otto di Guardia e Balia, for that matter, made use of the language of madness, or interpreted every deviant behaviour as sign of madness. However, the evidence suggests that the eighteenth-century awareness of the dangers and problems of madness made it a common, if not winning argument. The increasing attention paid to madness during the eighteenth century in Europe also has this other, less evident variable, usually neglected by the specialized scholarship.

5. 4. The Itineraries of Madness

The Auditore Fiscale’s authority over madness was definitively established during the Regency, and officially sealed by the 1750 reforms of Santa Dorotea. But, as we have seen,\(^{716}\) Various testimonies, and report of Brichieri Colombi regarding the nobleman Giulio Cocconi. ASF, CR, *Fiscale*, F. 760, no. 69, February 1763.
the involvement of the office in matters related to deviance in general, and with madness specifically, surpassed the responsibility stated by the Motuproprio of 1750. In its quality of head of police and supervisor of the criminal justice, the Auditore Fiscale dealt with madness within the scope of controlling the consequences posed by deviant behaviour in social life, both in terms of security and morality. This explains why the office handled not only requests for the institutionalization or incarceration of deviant relatives, but also requests soliciting its direct involvement through face-to-face conversations, official reprimands and other types of admonishments.

The Auditori Fiscali could count on various mechanisms to resolve the familial conflicts and at the same time control the public disorders they generated. The mechanisms ranged from persuasive measures to confinement and exile, all with the goal of restoring social and family order. A close examination of the pattern behind the office’s usual course of action shows that there were a series of graduated stages of public intervention. The ultimate aim was to control and hopefully overturn the disordered behaviour, disclosing an underlying belief that deviant behaviours could be controlled, disciplined and thus changed. Even if in the form of mental derangement, human will was to be held victorious in its fight against unreason.

Denunciations of male disobedience and unruliness usually aimed to request incarceration or forced embarkation as a way to curb or tame the disorder. The latter was requested usually when the former had proven to be innocuous, even if these men had been subjected to harsh regimes of “bread and water” and daily whipping to induce them to submit to the rational norms of social life. Incarceration was considered a measure of force aimed at curbing unruliness and, at the same time, it protected the rest of the household from the individual’s extravagances and violence. Incarceration on request served as a disciplining measure “to attempt with this remedy to induce him back to the due course from his past irregularities.” It aimed to “mortify” the unruly individual, and worked in combination with the admonishments of the Auditore Fiscale in describing the harsher punishments that would be inflicted on them if they were to continue on the same path. Forced embarkation in a vessel

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717 As it was said regarding the Vincenzio Malesci, “...non essendo serviti i gastighi di averlo tenuto in carcere, con il gastigo di poco cibo, e frustate il giorno, ma niente è giovato...”. ASF, OGB, Suppliche, F. 2532, no. 44, October 1752.
718 “per tentare con questo rimedio di ridurlo a dovere dalle passate sue irregolarità”, said the Auditore Fiscale Filippo Luci regarding a young man confined in the fortress of Volterra. ASF, CR, Fiscale, F. 754, no. 48, March 1743/44

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was the only solution left when incarceration had been ineffective, and when families could not keep financing (or had never been able to) their confinement. Forced embarkation, which inevitably recalls the Foucauldian ship of fools, rested upon the principle that the rigours and discipline of maritime life might help curb these men’s un governable desires and passions.\footnote{Coercive measures varied according to social origin and family situation. Embarkation, for example, was not considered suitable for the privileged, in whose case confinement in a fortress was preferred (see the case of Anton Gaetano Mori Ubaldini. ASF, CR, \textit{Fiscale}, F. 760, no. 53, December 1760). Similarly, embarkation was intended only for young single men, while imprisonment or internal exile were the preferred mechanisms to control married men with underage children (See for example ASF, OGB, \textit{Suppliche}, F. 2537, no. 16, July 1760 and ASF, OGB, \textit{Suppliche}, F. 2540, no. 3, January 1764).}

Incarceration and forced embarkation were both intended as a punishment that had the scope of taming (\textit{domare}) them through punishment,\footnote{ASF, CR, \textit{Fiscale}, F. 759, no. 77, October 1758.} “correct” them of their mistakes,\footnote{ASF, CR, \textit{Fiscale}, F. 754, no. 56, March 1742.} “moderate” their disobedience,\footnote{ASF, CR, \textit{Fiscale}, F. 755, no. 11, January 1746/47.} and hopefully keep them away from the predestined future of crime determined by their bad “inclination” and tendency to vices.\footnote{Attesting for the preventive nature of the punishment, the Auditore Fiscale explained it was intended “…per togliere l’occasioni al medesimo di commettere errori, e delitto grave, a i quali è proclive nella pessima sua inclinazione…”. ASF, OGB, \textit{Suppliche}, F. 2530, no. 60, June 1750, case of Gaetano Giorgi.} Similar principles guided the practice of confining disordered and disreputable women in monasteries or conservatories for the protection of female virtue. Although confinement of deviance behind monastic walls was not a solution exerted exclusively against women, it is more visible in their case.\footnote{There is evidence that monasteries were considered as suitable environments for deranged men, particularly when pertaining to the aristocracy. See ASF, CR, \textit{Fiscale}, F. 758, no. 60, 1755 and F. 755, no. 25, 1747.} Fully endorsing the principles that sustained the patriarchal family, authorities understood “taming” or the process of correction as subjugation to behavioural norms and an acknowledgment of family hierarchies. Sons and daughters were supposed to respect their fathers, married women their husbands, married men were supposed to follow their “natural” role as heads of family.

Confine\mbox{ment in a vessel, in prison, in a fortress, in a monastery or in a hospital inevitably appears as a desperate measure taken to control mental deviance. Confinement was often decided upon in combination with other measures, such as official admonitions, home-restraint, or interdiction, sometimes simultaneously and other times as an escalating effort to tame the behaviour and control its consequences. The records of the Pupilli, when combined with the kinds of records under examination here demonstrate that people could be interdicted while they were being held prisoners in a fortress, or be episodically imprisoned after they were interdicted. However, important considerations need to be taken into account to put into place of treatment, and only then was the measure considered as the best solution.\footnote{Incarceration and forced embarkation were both intended as a punishment that had the scope of taming (\textit{domare}) them through punishment, “correct” them of their mistakes, “moderate” their disobedience, and hopefully keep them away from the predestined future of crime determined by their bad “inclination” and tendency to vices. Similar principles guided the practice of confining disordered and disreputable women in monasteries or conservatories for the protection of female virtue. Although confinement of deviance behind monastic walls was not a solution exerted exclusively against women, it is more visible in their case. Fully endorsing the principles that sustained the patriarchal family, authorities understood “taming” or the process of correction as subjugation to behavioural norms and an acknowledgment of family hierarchies. Sons and daughters were supposed to respect their fathers, married women their husbands, married men were supposed to follow their “natural” role as heads of family. Confinement in a vessel, in prison, in a fortress, in a monastery or in a hospital inevitably appears as a desperate measure taken to control mental deviance. Confinement was often decided upon in combination with other measures, such as official admonitions, home-restraint, or interdiction, sometimes simultaneously and other times as an escalating effort to tame the behaviour and control its consequences. The records of the Pupilli, when combined with the kinds of records under examination here demonstrate that people could be interdicted while they were being held prisoners in a fortress, or be episodically imprisoned after they were interdicted. However, important considerations need to be taken into account to put into place of treatment, and only then was the measure considered as the best solution.}
perspective the notion of the great confinement. Historiography has established that confinement in its various forms was a desperate measure, and never worked as a permanent solution. The major characteristic found throughout early modern Europe is that confinement, regardless of whether it was in a hospital, prison or monastery, was temporary, and constituted only the tip of a much more nuanced process.\footnote{Much has been written to discuss and counterbalance Foucault’s main contribution to the history of madness. For an overview, see Porter, Mind-Forg’d Manacles; Roscioni, Il governo della follia; Roudinesco, Pensar la locura.} For this reason I have chosen to use the model of the itineraries of madness to suggest mobility through the different courses of action available to families in their quest to deal with the problems posed by madness. This approach to deviance explains from an interesting angle the lack of definitive measures adopted against criminal insanity and mental incapacity.

Many cases reveal how mad people were moved from one place to another. We observe them being moved from their domestic care to a paid private residence, from their confinement in a countryside villa to a fortress, from incarceration to a hospital, and from hospital to home custody again. As we have seen, the periods of confinement in Santa Dorotea and Santa Maria Nuova were generally short, even if this meant the same person was admitted behind its walls several times. Evidently, these temporary solutions to the custodial problem of the insane were directly dependant upon the economic resources of each family, but evidence suggests that even poor families moved their mentally afflicted members from one place to the other.

Madness became the concern of the Auditore Fiscale the moment it affected public life. From this office, families, magistrates, government authorities and physicians coordinated the series of joint measures for the management of madness and the control of its consequences. Thus we see the Fiscale taking part in the attempts of families strained by the presence of troublesome forms of madness. The case of the cavaliere Francesco del Sera, who was first ordered to be transferred to a countryside villa and afterwards compelled by force to receive medical treatment to cure his persistent madness, is telling. He was so “obstinately unruly” that he violently rejected any cure or help, on account of which his curator requested military help to restrain him and thus force him to receive the cure.\footnote{Cavaliere Francesco del Sera, said to be pazzo affatto and imbecille di mente. ASF, CR, Fiscale, F. 755, no. 10, 1746 and 1754.} His behaviour was so utterly difficult to manage that government officials declared he could not be allowed to live in society, for he had persistently disturbed public life with his extravagancies, frenzies and his
“not ordinary alteration of spirit.” Drawing on the undisputed fact that his “dementia” had aggravated over the years, the debate between his distinguished relatives, the Auditore Fiscale and the members of the Council of Regency was centred on the difficulties of having him secured at home versus the advantages of transferring him to a monastery. Likewise, male and female pazzi furiosi were often held incarcerated while their admission to Santa Dorotea was settled. The residential situation of the mentally disordered was a burden that families were often unable to resolve without the intervention of the public authorities, who, in the many cases where family cohabitation proved to be unbearable, had to provide alternative measures.

An interdiction sentence was not sufficient to put an end to the difficulties generated by madness. Even if following the interdiction the Pupilli officials were permanently involved in every situation or conflict surrounding their wards, the involvement of the Fiscale was often required. The Auditore Fiscale often participated in the attempts of the Pupilli to provide for the wellbeing of both the families and the interdicted, ordering temporary incarcerations or coordinating the availability of places where they could be taken care of. Interdiction, as with any other measure to cope with madness, constituted an option in a network of connected measures. In some cases the interdicted had been incarcerated for short periods by request of their relatives before the interdiction, and some continued to be so afterwards. In other cases the Auditore Fiscale was called to intervene in defence of the administrator who had to suffer the interdicted’s surges of anger when they saw their disempowerment. Growing mistreatments on the part of the mentally afflicted were a common trigger to request the authorities intervention, as in the case of Francesca Paoli del Feo. As we saw in the previous chapter, her unbearable personality obliged her relatives to make recurrent requests to the Auditore Fiscale and to the Pupilli officials to try to find a

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728 The debate about his destiny in 1755 arrives at the point when the authorities decided to keep him under house arrest until a more suitable place, like the proposed monastery, was found. We have further notice of his life in 1770 when he appears married to a younger woman, still subjected to serious periods of crises, but now said to enjoy lucid intervals. ASF, MPAP, Memoriali, F. 2308, no. 47, August 1770 and no. 333, December 1772.
729 The daily accounts of the resolutions and matters affecting each of the minors and incapacitated adults under the authority of the Pupilli attest to this coordination. ASF, MPAP, Campione di deliberazioni e partiti, F. 112, 1717 to F. 165, 1770.
730 See, for example, Cosimo Casacci, interdicted as demente in July 1722, and afterwards alternatively incarcerated for short periods and held under home restraint for many years before he was definitively sent to Santa Dorotea where he died in 1743. See ASF, MPAP, Campione di deliberazioni e partiti, F. 112-138 and ASF, SD, F. 23, no. 3.
suitable solution for her custody. She was interdicted twice, first in 1751 by reason of
dementia, and then in 1755 by reason of prodigality. In 1764 she was confined in the
Malmaritate, for she was not mad (pazza) enough as to be committed to Santa Dorotea, but
neither was she sufficiently “wise” as to be left “free in the streets.”731 Dressing indecently
and permanently drunk, she tormented her daughter near the monastery where she was
promised as a nun.

Intergenerational and matrimonial conflicts abounded in the tensions aroused by a
cohabitation with madness. Temporary marital separation was granted by the authorities in
cases of confirmed dangerous madness, to which a series of coordinated attempts to reunite
the couple would follow. Confinement in the Malmaritate or the Mendicanti was used as a
temporary measure to contain the effects of a marital conflict in need of being concealed from
public sight. But it also served the purpose of providing a temporary solution to the problem
of female deviance in cases in which no other residential provision could be found. Female
deviance, particularly when presented in the form of extravagance and imprudence, often
melded with matrimonial disputes in which both spouses were singled out as disordered, one
ending up committed, the other sent to the Malmaritate to avoid further scandal stemming
from their frequent, nearly fatal, quarrels.732

The Auditore Fiscale and the Pupilli officials, with the help of other eminent
government and regional authorities, arbitrated in marital disputes, dealt with the enlarged
conflicts that often confronted the spouse’s kin, and designed strategies of mutual
compromise that could secure a peaceful reunion.733 Conflicts of cohabitation were conflated
with the problem of the special care the mentally afflicted often required. Not only because
familial responsibility over weak members of the family often had to be enforced by law, but
also because the problematic characters that usually accompanied mental afflictions made it
difficult to provide permanent solutions.

731 ASF, CR, Fiscale, F. 762, no. 2, August 1765.
732 Case of the interdicted Domenico degl’Albizzi and his wife Maria Caterina Fioravanti. ASF, CR, F. 746, no.
12, March 1751.
733 The connection between matrimonial disputes and madness is an understudied aspect of marital life in early
modern Tuscany. For examples, see the dispute between Caterina Angeloni and her husband Franco Giorgi,
ASF, CR, Fiscale, F. 760, no. 43, June 1760, and the dispute between Maria Caterina Inghirami and Ferdinando
Ginori in ASF, CR, Fiscale, F. 754, N. 5, July 1738- December 1739. For similar cases involving interdicted
men and their wives, see for example the disputes between Maria Caterina Fioravanti and Alfiero Domenico
degli Albizi, ASF, CR, Pupilli, F. 746, no. 12, 1750-51; Rosa Caterina Pandolfini and Adimaro Adimari, ASF,
MPAP, Memoriali, F. 2300, nos. 216, 379 and 397, 1727-1732; Giuseppe Rossi and Francesca Arcangeli in
ASF, MPAP, Memoriali, F. 2300, N. 195, 1726; Antonio Becciani and Maddalena Palloni in ASF, MPAP,
Memoriali, F. 2308, nos. 79 and 108, 1771 and F. 2309, nos. 147 and 280, 1773.
The destiny of the insane became a matter of public concern not only when they had transgressed the limits of law, but primarily on the direct request of family members. The itineraries of madness, between home, institutional confinement, incarceration and several private places where they were kept in return for payment were coordinated between the Auditore Fiscale and the Magistrato dei Pupilli. The “insufferable frenzies” (frenesie insoffribili) that episodically overcame Lorenzo Maestrini, a wealthy Florentine who had been Cancelliere of Empoli, are particularly illustrative. They forced his wife and daughter to request his internment in Santa Dorotea several times, but because he was never held there too long, they had to resort to any other available measure to prevent his return home. In 1730 his wife submitted a petition declaring that his madness had long been an issue to the family life with irreparable economic and emotional consequences, on account of which she requested not only the interdiction but also his committal to Santa Dorotea. Both requests were granted given there were several signs that proved his derangement, including his past committal to the hospital. Nonetheless, Maestrini’s episodic madness (“he sometimes enjoys lucid intervals”, it was said) sealed his fate, making it impossible to find a permanent solution for his situation.

After he was released from Santa Dorotea while experiencing a period of lucidity, he relapsed into “greater madnesses” (maggiori pazzie), forcing the Auditore Fiscale to keep him under close custody in the fortress of San Martino. His episodes of madness always alternated with periods of lucidity, which resulted in further itinerancy. He was kept under the custody of one person after another, never lasting long at one place. In 1735 the Auditore Fiscale voiced the appreciation, shared by Maestrini’s relatives and the Pupilli officials, that his liberty could simply not be granted, not even during the episodes of sanity he enjoyed, considering that liberty to move around freely and socialize could be particularly harmful for his madness, for “too much discourse is precisely what can be prejudicial to him.” Thus motivated by this concern, the Auditore Fiscale Filippo Luci turned to the “preventive

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734 ASF, MPAP, Memoriali, F. 2300, no. 471, February-March 1734/35 and no. 492, November 1735.
735 ASF, MPAP, Memoriali, F. 2300, no. 311, June 1730, the order to arrest him and send him to Santa Dorotea can be found in ASF, MPAP, Atti, F. 1193, June 1730, f. 435.
737 “Benché presentemente il supplicante non mostri segni di pazzia, è però in stato molto pericoloso di tornare nell’antica infermità, ed ho stimato rimedio di prevenzione di tenerlo, per quanto sia stato possibile, lontano da praticare con quella libertà, che egli desiderrebbe, giacché il troppo discorrere è quello appunto che può pregiudicargli”, Auditore Fiscale Filippo Luci to the Magistrato dei Pupilli, Ibid., April 1735.
remedy” of depriving him of his liberty, albeit unsuccessfully.\textsuperscript{738} It was never possible to “have him steadily in one place”, and he constantly contravened the Fiscale’s authority, whether managing to be ejected from the places he was kept “due to his madness, wretched behaviour and mistreatments,” or “escaping brutally” from them.\textsuperscript{739}

5. 5. Conclusion

This chapter has examined the understandings of madness in other spaces of its appearance, such as the criminal courts, mental hospitals and special requests to the central authorities. Madness captured the attention of families, judges and authorities, producing a lively debate to devise the most suitable solution to the problems posed by madness. This chapter has argued that the public response to madness should be understood as the effect of a collective effort, resulting from a careful negotiation between families, judges and authorities regarding what it meant to be mentally afflicted and what could be done to cure and/or discipline it, and to address its most pressing consequences.

The itineraries of severely deranged wealthy men and women like Lorenzo Maestrini, Lorenzo Baldinotti and Francesca Paoli del Feo were not unusual in Tuscany during the eighteenth century, as we have seen. Interestingly, the perception of their mental derangement drifted and changed according to the requirements of each new space of appearance and the phase which their mental derangement was in. The flexible language we observe employed in private requests to control deviant behaviour is at variance with the plainness of criminal language and the accurate but not necessarily more expressive medical language employed in the admission procedure to Santa Dorotea. For this reason, the picture of the perception of madness and the measures taken to manage it are further nuanced when we bear in mind the different places where madness appears. Hospital committal is only one of the stations in

\textsuperscript{738} Ibid.
\textsuperscript{739} “mediante la sua pazzia, e pessimi portamenti, e strapazzi, che faceva è stato cacciato da quei luoghi ove s’era posto”, Report of the Magistrato dei Pupilli, MPAP, F. 2300, no 492, November 1735; and “è scappato brutalmente dalla casa del Sig. Dottor Lami suo congiunto... vedendo io che per tenerlo a dovere è necessario usar con esso del rigore...” Biglietto of Filippo Luci, MPAP, F. 2300, no. 483, August 1735. In November 1735 the Pupilli informed that there was no other solution left but to confine him in a fortress again, given that even the Santa Maria Nuova hospital had declined to take him into their custody. His trace disappears after this until 1739, when his relatives initiated a long suit for his inheritance. We are told that he died in 1736. See ASF, MPAP, Memoriali, F. 2301, no. 56, August 1739; Ibid., Atti, F. 1240, f. 1022, April 1742 and ASF, MS, Suppliche, F. 1188, fols. 1091-1112, December 1743.
which madness is recorded, and should be considered neither as the end nor as the beginning of the process of identification and handling madness.

Thus, instead of an image pointing to a Foucauldian “great confinement”, we observe temporary and flexible measures. The model of the itineraries of madness serves to give the idea of a series of stages, that did not follow linear or pre-conceived courses, but responded and adapted to the dynamics and necessities of each case. In some cases these measures were taken simultaneously, in others in succession and, above all, the cases suggest that eighteenth-century Tuscans were well aware of the characteristics and consequences of each space, and resorted to one or the other seeking particular aims. The chapter has shed light on the process of private, lay and family-based identification of madness, and how, after this primary definition of madness, the authorities were involved, to what extent and with what outcomes, and how the dialogue between authorities and families regarding the handling of madness developed.

The chapter has also demonstrated that the characteristics of mental incapacity appearing in interdiction records are echoed in broader social scenarios covered by the criminal records and the office of the Auditore Fiscale. Requests received directly by the latter or through the Otto di Guardia portraying cases of deviance that made use of the argument of mental instability to differentiate the case from “normal” criminal behaviour display the pervasiveness of a language of madness through different social groups. Deviant behaviour caused by different levels of mental disturbance was a present experience in early modern Tuscany, pervading different social groups, and suggesting that notions of mental incapacity were not only held by the wealthy families who could finance interdiction. The matters ending up in the files of the Auditore Fiscale suggest that more or less similar notions of madness were present in different scenarios, presenting flexible vocabularies that nonetheless enclosed a similar conception about what it meant to be mentally afflicted.

With definitions that were strongly contextual and relational, notions of madness adapted to each space of appearance. However, although each procedural space conditioned the way madness was portrayed: in all of the institutional spaces where madness made a public appearance, the official categories were very few and simple. The role of legal categories of mental incapacity and insanity in the different procedural spaces examined in this chapter proved to be flexible and sufficiently vague as to enclose culturally meaningful understandings. Recourse to one or other of the institutional spaces available for managing the problems posed by madness reveals a wide understanding of each of its particular rules,
which in turn underscores that the involved parties knew how to manoeuvre through the legal structure in order to obtain favourable outcomes. In this situation, as we have seen, there were no fixed weaker or victimized parties, for we recurrently see the alleged insane successfully arguing their case in their favour on the one hand, and women assuming the leading and stronger voice against abusive husbands on the other.
Chapter 6: Experts and Authorities on Madness

As stated by the jurist Marc’Antonio Savelli, in civil law prodigality and insanity could be proven by the oath of close relatives and the supporting testimonies of two reliable witnesses. In contrast, Savelli reported that exemption from punishment on the basis of insanity (furiosi, dementi or pazzi) was strictly dependent upon the judgment of medical practitioners. However, both criminal and civil procedures carried out in Tuscany during the eighteenth-century to determine soundness of mind reveal the relatively reduced role played by medical opinion. Although legal theory had long called for the introduction of medical opinion as expert witnesses to identify insanity in court, Tuscan legal practice still largely relied on lay testimonies.

Tuscan judicial practice privileged the family gaze in the assessment of madness and responses to its consequences, and only secondarily resorted to external opinion. In the civil and criminal procedures involving madness, the ultimate authorities on madness were the families. The identification of madness, as is well known, first occurred in the domestic space, and was discussed among family members. Only when families had reached a conclusion regarding their relative’s behaviour, usually resulting in conflicting views about what to do with it, was the case made known to the authorities.

During the early modern period, the family was the primary locus of care for the mentally afflicted. For this reason, given that any public provision devised to address the problem of madness followed the primary purpose of serving as a subsidiary help for the families, it seems obvious that they remained the primary authorities on the matter. Given the purposes of the provisions devised to help families cope with the problems posed by madness, the assessment of madness necessarily had to rely first and foremost on the opinion of those who knew the mentally afflicted. Long-term views and discussions based on familiarity with the defendant were preferred in order to determine the extent to which madness had provoked the kind of disorder that required public intervention. In general terms, the authorities’ deliberations in order to assess soundness of mind do not show a direct resort to medical

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740 “Che la prodigalità, e furore si provi per l’asserzione de’ congiunti... vedi detto Statuto [Statuto Fiorentino lib.2 Rub.118], che ricerca il giuramento de’ congiunti, e due testimoni di fama.” Savelli, Pratica Universale, p. 264.
742 Bartlett and Wright, Outside the Walls of the Asylum, p. 4.
opinion, and the language used tends to be unspecific and non-medicalized. Although legal theory recommended the opposite, eighteenth-century legal practice reveals that medical opinion was not a requirement. Furthermore, medical practitioners were neither the only nor the most decisive experts involved in the assessment of mental incapacity.

This chapter elaborates on the involvement of opinion “external” to the families and their supporting neighbourhoods, with especial attention to the uses of language, its circulation and meanings. It first examines the involvement of medical opinion in the assessment of criminal insanity and mental incapacity, to then study the participation of clergymen and the involvement of the Auditore Fiscale. The chapter elaborates on the weight of medical knowledge in civil and criminal procedures, with a close examination of the language employed by medical practitioners in their testimonies. It aims to explore how and when they introduced precise medical categories, and to what extent these categories circulated among the different agents participating in a suit. The chapter argues that medical practitioners disputed their secondary place as authorities over matters of the mind (behind the families) equally with members of the cloth and government authorities, among which the Auditore Fiscale assumed an increasingly leading role. The language of madness appears this way as largely built upon lay notions of mental deviance that were negotiated with the government authorities and ratified by “mind specialists”, a category that comprised medical practitioners and priests in equal terms.

6.1. Separated Spheres? Use of Medical Opinion to Assert Mental Incapacity

To understand the involvement of medical opinion in legal inquiries into mental capacity we must bear in mind that interdiction procedures were based on the Florentine Statutes, which in its 2nd book, 118th rubric stated that interdiction requests adducing the incapacity to manage one’s affairs needed to be submitted by a close relative and supported by the testimony of two witnesses “of good reputation”. These republican statutes were still in use in the eighteenth century, and were recurrently recalled by the Pupilli officials in the first period after the 1717 statute reform of the Pupilli office that endorsed its jurisdiction over interdictions and adult curatorship.743

743 See, for instance, ASF, MPAP, Memoriali, F. 2300, no. 249, July 1728, no. 399, October 1732 and no. 457, November 1734. As stated above, the statutes were also cited by Savelli with regards to the requirements of civil procedures in matters relating to the insane.
Although the foundational statutes regulating the procedure to interdict a mentally incapacitated person stated by omission that medical expertise was unnecessary to assess mental incapacity, there was a wide acknowledgement of the place of medical authority in the diagnosis of any kind of disease, including madness. In fact, Italian courts had developed a long tradition of forensics during the early modern period, accompanied by the abundant medico-juridical literature of the time that praised its importance. Physicians gained public recognition in legal proceedings insofar as they could play a valuable role in the examination of criminal evidence. Both in legal theory and in legal practice medical experts were considered the ultimate experts on the body, and the *perito fiscale* was a permanent presence at trials in order to assess the quality of wounds, their seriousness, possible causes and consequences. Nonetheless, scholars agree on the fact that “of all the various medico-legal specialties, forensic psychiatry is the one where medical authority has met with most resistance.”

The legal assessment of insanity in criminal and civil courts during the eighteenth century continued to be a matter of common sense largely throughout Europe. Despite the relatively high value ascribed to medical experts in the criminal courts of continental Europe, they continued to play a minor role in the assessment of madness both in civil and criminal courts until the nineteenth century. A similar scenario is identified in the English and Scottish courts. As Houston has put it, expert medical opinion was not necessary because “the aim in a civil or criminal court was not to arrive at ‘the truth’, but to pick through fragmented, tendentious and ambiguous evidence in search of a conclusion.” This would explain, according to him, the predominance of hearsay testimony throughout the long eighteenth century in most of Europe.

The progressive involvement of medical knowledge in the management and perception of madness in early modern Tuscany has been, with some exceptions, generally overrated. Magherini and Biotti, for instance, have stated that towards the end of the sixteenth century “greater attention came to be paid to the medical approach in the offices and courts...”

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744 The development of legal medicine and the growing importance acquired by medical practitioners as expert authorities on the body in Italian early modern courts has been the subject of the studies carried out by Alessandro Pastore and Silvia de Renzi. See Pastore, *Il medico in tribunale: La perizia medica nella procedura penale d’antico regime (secoli XVI-XVIII)* (Bellinzona: Casagrande, 1998); Silvia De Renzi, “Medical Expertise, Bodies and the Law in Early Modern Courts”, *Isis* 98, no. 2 (2007), pp. 315-322.


when establishing a subject’s mental condition. The physician came to assume responsibility both for ascertaining the presence or absence of insanity and evaluating the evidence gathered by judges.” They argue that the judicial changes brought in by the Duchy, particularly the introduction of the vernacular, allowed for the infiltration of “new” medical concepts to the legal arena, such as mania and melancholy.

Zacchia’s call for the importance of medical opinion in the legal assessment of insanity is sufficiently known, seconded in Tuscany by jurists like Savelli, whose *Pratica Universale* recommended criminal insanity be directly scrutinized by judges and further certified by medical opinion. In turn, the practice of civil law over the years had also demanded the more regular involvement of medical opinion in order to provide expert witnesses of insanity. In 1734, for instance, a report of the Magistrato Supremo voiced the concern that mental incapacity should be assessed by medical practitioners, and not be based exclusively upon the opinion of petitioners and lay testimonies. The latter, so the magistrates considered, could only describe the signs that enabled them to deduce someone’s incapacity, but they could not judge if these signs were enough to declare the person incapable.

Nevertheless, in practice legal proceedings in which a mental condition was under scrutiny proved not to be in need of medical certification. Evidence shows that medical opinion was not necessary to determine mental incapacity, and that it was only required in contested cases, or in cases where the defendant had contacted medical practitioners in the past in order to consult or treat their mental condition (notably, those who had roamed over most of the different destinations in the itineraries of madness). Evidence also shows that medical testimonies were used to a greater degree to attest physical ailments with damaging mental consequences, such as apoplexy and epilepsy. By and large medical opinion was used at the petitioners’ discretion, only rarely being a direct requirement of the authorities.

Although it is possible to find voices calling for medical expertise to assess madness, the signs of a change only became discernible in the second half of the eighteenth century. Contradicting what has been previously asserted, an examination of the use of medical testimonies in civil and criminal procedures gives no evidence of a clear evolution towards

747 Magherini and Biotti, “Madness in Florence”, p. 362. As I commented in the previous chapter, Elizabeth Mellyn has also challenged the notion of the leading role played by medical knowledge and medico-legal treatises like Zacchia’s in the shaping of lay notions of insanity. See, Mellyn, *Mad Tuscans and Their Families*, Chapter 5.


749 Report of the Magistrato Supremo regarding the petition to interdict Diacinto Cicci, not granted. ASF, MS, *Suppliche*, F. 1185, fol. 375v and fol. 388, June 1734.
the medicalization of madness in legal practice. We can neither find a clear increase in the recourse to medical opinion, nor observe a progressive infiltration of medical terminology in the language of judges, petitioners or witnesses. We do find a cautious change from 1750 onwards, coinciding with the obligation to medically certify the *pazzo furioso* in order to determine committal to Santa Dorotea. The appointment of a *medico fiscale* to certify madness for committal in the name of the state also presupposed the development of the practical expertise of physicians such as Giovanni Targioni Tozzetti and Francesco Antonio Viligiardi, whose involvement in the assessment of cases of insanity progressively surpassed their connection to Santa Dorotea. Nonetheless, this change is, to my view, profoundly slow, and markedly shared by the rise of other “experts” on madness, such as the Auditore Fiscale. By and large, throughout the century authority over madness continued to be in the hands of those who had traditionally held it, that is families and priests.

The absence of direct medical opinion in criminal trials leaves us with plain, non-medical categories of insanity, such as *pazzo, matto, mentecatto, demente, stolido* or *scemo*. These denominations are usually accompanied by more factual descriptions, still lay in origin, such as “suffer in the brain” (*patire nel cervello*), “without brain” (*senza cervello*) or “diminished in the brain” (*scemo di cervello*), “imbecile and unsound mind” (*imbecille e mente non sana*), “imperfect cognition” or “devoid of judgement” (*non perfetta cognizione* and *mancanza di giudizio*), “foolishness” or “simplicity” (*sciocchezza* and *semplicità*). Some recurrence to more specific concepts such as lucid intervals, melancholy or frenzy (*frenesia*) can be found in some records that were particularly generous in their descriptions, but they nonetheless correspond to concepts that had been largely present in the medico-legal language introduced by Renaissance jurists.

Although the absence of medical opinion in the records of criminal insanity reflects more the way in which criminal records were kept rather than an actual exclusion of medical opinion, there are many signs suggesting their limited weight in legal proceedings in general. When compared to the legal procedures that did directly record medical opinion, their limited influence appears as deliberately constant. Interdiction records reveal a limited recourse to medical opinion between 1720 and 1775. Of a total of 192 interdictions for dementia, only 50

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750 This is similar to what characterized other European courts during the eighteenth century. According to Houston “the medical men who gave evidence in civil courts generally did not use medical classifications, and lay people almost never did. If members of either group did deploy such terms it is far from clear that they did so either consistently or ‘correctly’.” Houston, Madness and Society, p. 25.

751 See Chapter 5, section 2.
procedures, amounting to 26%, presented expert medical opinion in order to certify the alleged mental incapacity. The number increases slightly if we also take into account those cases in which either the plaintiffs or the magistrates made reference to a past or current committal in one of the *pazzerie* (Santa Maria Nuova or Santa Dorotea). In 7% of interdictions for dementia we find a reference to one of the *pazzerie*, which aggregated with the 26% that resorted to expert medical opinion to certify the alleged dementia amounts to 33% (see Table 3 and Figure 4). If we were to measure the incidence of medical opinion (taking the reference to the *pazzerie* as a kind of medical certification) against the whole sample of interdictions decreed between 1720 and 1775, we find that the 33% decreases to 11%, with a total of only 63 procedures involving recourse to medical opinion against 526 interdictions decreed without the involvement of medical expertise.

Table 3: Recourse to expert medical opinion to assess mental incapacity in interdiction procedures between 1720 and 1775

<table>
<thead>
<tr>
<th>Interdictions for Dementia</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference to past or current committal in a mental institution</td>
<td>13</td>
<td>6.8%</td>
</tr>
<tr>
<td>Recourse to medical opinion</td>
<td>50</td>
<td>26.0%</td>
</tr>
<tr>
<td>No recourse to medical opinion</td>
<td>129</td>
<td>67.2%</td>
</tr>
<tr>
<td><strong>Total of interdictions for dementia</strong></td>
<td>192</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interdictions for dementia, prodigality, undefined incapacity</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference to past or current committal in a mental institution</td>
<td>13</td>
<td>2.2%</td>
</tr>
<tr>
<td>Recourse to medical opinion</td>
<td>50</td>
<td>8.5%</td>
</tr>
<tr>
<td>No recourse to medical opinion</td>
<td>526</td>
<td>89.3%</td>
</tr>
<tr>
<td><strong>Total of interdictions</strong></td>
<td>589</td>
<td>100%</td>
</tr>
</tbody>
</table>

Note: The category of “reference to past or current committal” includes those interdiction procedures in which either the supplicants or the magistrates mention that the defendant was or had been in Santa Dorotea or the *pazzeria* of Santa Maria Nuova, without cross-examining with the mental institutions to corroborate the information. In contrast, when a current or past committal is attested to by the medical authorities of the institutions it is included under the category of “recourse to medical opinion.”
We should take into account the fact that medical experts were probably involved in the identification of insanity in a larger proportion than is revealed by the records. Given that the aims of interdiction were directed towards the economic consequences of insanity, proving that the alleged economic mismanagement was a consequence of mental incapacity signified more than presenting a medical diagnosis for it. Even so, interdictions were decreed on the basis of a mixture of written testimonies and official enquiries carried out in the field that often involved consultation with medical experts which, we can assume, was not necessarily recorded on paper. We know this because in some cases although the interdiction proceedings present no record of the involvement of medical assessment, later proceedings relating to the management of the guardianship reveal that it was otherwise. For instance, it can happen that medical practitioners had treated the defendant’s mental affliction before the interdiction, or that the interdicted had been committed in Santa Maria Nuova or Santa Dorotea, but nothing of the sort was revealed in the interdiction proceedings. This is particularly the case when we only have access to the decrees of interdiction but not to its reason, or when the lawsuit was initiated directly before the court and not through written petitions, thus leaving less information.\textsuperscript{752} Nonetheless, through the cases that do leave

\textsuperscript{752} As I explained in the first chapter, there were two ways to initiate an interdiction procedure: one was to request it as a grazia via a supplication to the Grand Duke, the other was to appear directly in front of the court of the Magistrato Supremo (and less often to that of the Pupilli) to initiate the law suit with its supporting testimonies. The officials of the Supremo would then consider the case, carry out the necessary enquiries, and
records we know that medical opinion was generally requested in contested cases, which happen to coincide with those that leave records. As a result, we can safely assume that a significant proportion of medical opinion is not concealed within the cases of unknown categories of incapacity. On the other hand, the high number of interdictions where the declared reason is dementia but where we fail to find any indication of the permeation of medical language, particularly in the first half of the century, suggests that even if we were to take into account that medical practitioners were consulted but their testimonies not recorded, the fact remains that medical language had a low incidence in the shaping of narratives and perceptions of mental incapacity.

We do find indirect recourse to medical opinion through the second-hand transmission of oral medical testimonies, particularly in cases from the provinces of the Florentine Dominion. In these cases, inquiries were conducted via the local administrative authorities, who when requested to investigate the mental condition of a defendant generally responded by making reference to medical opinion but without presenting it directly. Local authorities were always asked to make further enquiries regarding denunciations of mental incapacity, even when petitioners had already provided the two statutory testimonies. The Podestà, Commissari and Governatori generally made a summary of their investigation that indicated how they had interrogated several credible witnesses (degne di fede) to corroborate the denunciation, in a narrative that, as usual, blended economic and public behaviour with signs of mental or psychological distemper, along with the employment of one or more of the common categories of mental incapacity. In some cases they specified that medical practitioners (generally the physician and surgeon condotti) had been interrogated as one of the trustworthy people questioned regarding the case, although at other times there is no specification as to who provided the credible testimonies. In any case, the inquiries conducted by the provincial authorities generally compared the information gathered against present their judgement to the Consulta. The Consulta could ask (or not) the position of the officials of the Pupilli before deciding on the matter. Only once the defendant had been interdicted did the case pass to the Pupilli, from where all the matters regarding the appointment of the guardian and the administration of the patrimony were managed. When the procedures were opened before the Magistrato Supremo, the “justifications” of the case are often lost in the massive archive of this Magistracy. On this see my comments in Chapter 1.

This was the case, for example, with the interdiction of Giuseppe Pasqui from Castiglion Fiorentino, decreed based on the information gathered by the Podestà. The Podestà had come to the conclusion that Pasqui was “completely weak of mind, and mentecatto, and certainly incapable of administering his patrimony” based on his questioning of the local physician and surgeon (both condotti), the parish priest (curato) and other respectable members of the local society. Interestingly, Pasqui’s interdiction was revoked a few months later after his brother petitioned alleging his soundness of mind. A new inquiry followed which ended with the Pupilli’s admission that the interdiction had been decreed based on insincere information. See, respectively, ASF, MPAP, Memoriali, F. 2305, no. 35, January 1760 and no. 71, June 1760.
their own acquaintance with the defendant and their families, regardless of whether medical practitioners had been consulted.

Inquiries to ascertain the veracity behind accusations of mental incapacity conducted in Florence and its surroundings were less likely to leave the same records than the cases on the provinces, given that in the former the investigation was carried out directly by the Supremo or the Pupilli officials, which often resulted in the absence of written records. However, testimonies provided by medical practitioners from Florence tend, conversely, to be more precise in their medical language, and increasingly more specialized towards the end of the century. This tendency is enhanced by the fact that towards the end of 1760, interdictions for dementia increasingly came to be certified directly by the medical authorities of Santa Dorotea.

Overall we can observe that the mid-eighteenth century appears as a turning point for the use of medical opinion in interdiction procedures. Of the 50 interdiction procedures for dementia with the use of medical opinion, 33 were decreed after 1750. A modest specialization of language can also be observed, as I will show. Similarly, after the reforms of the administration and scope of Santa Dorotea, the involvement of medical practitioners in the assessment of mental incapacity and madness in general was institutionalized, supplying medical experts especially commissioned by the ducal administration to assess madness. However, given the very small numbers of medical opinion given when compared to the massive amount of interdictions decreed without recourse to expert testimonies, we find that quality and function are more interesting features to examine than quantity.

The Function of Medical Testimonies

It is far more revealing to investigate how medical opinion became involved and with what consequences than the frequency in which medical opinion was invoked. The evaluation of the weight and involvement of medical knowledge in the shaping of legal categories of insanity requires a close examination of the cases where we do find recourse to medical opinion, with particular attention being paid to the vocabulary employed by medical experts themselves. This should then be contrasted with the other narratives that constitute the interdiction procedure.

Following the precepts established by the legal practice of interdictions in Tuscany, it was the plaintiffs’ responsibility to provide evidence for the alleged incapacity. For this
reason, medical experts were summoned in the majority of the cases by family members in the form of written testimonies that were added to the compiled testimonies supporting the petition of interdiction. We can identify four types of medical testimonies during the century: 1) those signed by both a doctor and a surgeon who had been for some time in charge of the health of the defendant; 2) those signed by doctors or surgeons who had been called with the sole purpose of assessing the individual’s mental state in order to proceed with an interdiction petition; 3) those signed by medici and cerusici condotti, doctors and surgeons from the provinces officially appointed and paid by the town’s administration; and finally 4) those signed by the surgeons or physicians of either of the existing mental institutions.

The vocabulary employed in these testimonies appears again conditioned by the aims of the legal procedure they were produced for. Marked by the need to demonstrate that the alleged mental incapacity resulted in a kind of economic mismanagement that posed a serious threat to the family patrimony, medical testimonies generally employed non-medicalized terms that were closer to legal language than to medical practice. In this sense, an important proportion of medical testimonies employed categories such as mentecatto and demente in combination to more descriptive expressions such as illness of the mind (infermità di mente), illness of madness (infermo di pazzia), devoid of cognition, judgement, brain or intellect (privo di cognizione, di senno, di cervello, d’intelletto), and imbecility of mind (imbecillità di mente), to name a few. As I will argue later, the appointment of medici fiscali to certify pazzia furiosa in the Santa Dorotea admission procedures resulted in a gradual change, with the appearance of new experts who by the 1760s and the 1770s can be differentiated from the rest of the medical witnesses.

Rather than giving a concise medical diagnosis, the aim of a medical testimony in interdiction petitions was to attest for the connection between the alleged mental incapacity and the likelihood of financial ruin. Medical practitioners were supposed to give their expert opinion regarding the consequences of the alleged mental derangement on the quotidian life of the afflicted, customarily framed in terms of a mental ailment that had rendered them

754 The practice of appointing a medical practitioner from the community (condotto) was designed to provide a medical cure for those who could not pay for it privately. According to the studies of Cipolla, inquiries carried out by the Grand Duchy in times of epidemics suggest that the distribution of medical practitioners throughout the territory was surprisingly high. See Carlo Cipolla, Contro un nemico invisibile. Epidemie e strutture sanitarie nell’Italia del Rinascimento (Bologna: Il Mulino, 1985), p. 287.

755 See Chapter 3 for the analysis on the use of these categories.
“incapable of managing his interests.” The precise characteristics of the mental ailment, its symptoms or treatment were secondary in comparison to how the condition affected the individual’s life, or for how long.

As a consequence, there are many cases in which the difference between a medical testimony and the rest of the testimonies supporting the interdiction petition is not really marked. The main categories in these cases are the same, and the expertise contributed by medical practitioners is not necessarily discernible in terms of language. For instance, Maria Maddalena Scardigli from Empoli was interdicted in 1749 on the request of her nephews, who claimed she suffered from “dementia and madness” (demenza e pazzia). The interdiction petition was accompanied by two testimonies, one signed by various persons and the other by a priest and the medico condotto. While the former made reference to Maria Maddalena’s poor economic situation, boosted by her solitude and “incapacity to make a living for she is deprived of reason and mad”, the latter declared that she “is devoid of reasoning and almost completely impotens sui since many years ago and especially now, and is incapable of reason, and on account of her madness she has reduced herself to misery” after having consumed all she possessed.

As proves to be the case in the majority of the testimonies signed by medical practitioners, nothing particularly medical was revealed in this testimony. Not only was the medical testimony signed by a priest, but it was also written using the conventional non-specialized terms to testify for mental incapacity. At first glance, therefore, the signature of a medical practitioner is equated with that of a priest, their occupations being valued as equally pertinent for the assessment of madness. In procedures of interdiction, the authority of priests and medical practitioners was founded on their overarching acquaintance with the individual’s life rather than in a medical knowledge of mental diseases. In fact, medical practitioners, particularly when medici condotti, as in this case, framed their testimonies by

756 Giovanni Gualberto Bechi, declared a Florentine physician, “si ritrova guardando il letto per cagione d’un accidente d’Applessia quale lo ha tolta la favella, e lo ha reso demente, et incapace d’agire nei suoi interessi.” His testimony was also signed by a priest. ASF, MPAP, Memoriali, F. 2302, no. 137, July 1749. For similar testimonies, see ASF, MS, Atti, F. 1914, fol.1000, December 1730, interdiction of Benedetto Meozzi; ASF, MPAP, Memoriali, F. 2300, no. 559, August 1737 and ASF, MS, Atti, F. 1986, fol. 388, August 1737, Interdiction of Maria Maddalena Bianchi; ASF, MPAP, Memoriali, F. 2303, no. 50, June 1752, interdiction of Domenic Cugi; ASF, MPAP, Memoriali, F. 2304, no. 85, December 1756, interdiction of Niccolò Sinibaldo Reali, among others.

757 Respectively, “è sola e miserabile, senza avere modo da potersi sostentare, et incapace di guadagnarsi il vitto per essere priva di ragione e pazzia...” and “...è mancante di raziocinio, et è quasi affatto impotens sui da molti anni in qua, et ora massime, e non capace di ragione, et è per la sua pazzia ridotta miserabile, avendo dato fine tutti i suoi mobili, e non ha da potersi sostentare...” ASF, MPAP, Memoriali, F. 2302, no. 129, July 1749.
alluding to their long-term knowledge of their patients’ behaviour, whom they claimed to have treated on several occasions. For even if the medico condotto had only treated them for physical complaints, they were able to assess their patients’ current and past mental condition based on their privileged long-term observation. Indeed, medical practitioners often illustrated their testimonies with observations on their patient’s biography, with expressions such as “he has always been”, or has “never been” demented.

Bearing witness to the role played by medical testimonies in the identification of mental incapacity, many medical practitioners not only shared their place with priests as key witnesses, but even their signature was sometimes inserted between the names that signed the collective testimonies of mental incapacity. Testimonies supporting an interdiction petition generally consisted of the narrative of the person’s misdeeds and economic mismanagement, some with descriptions of their deviant behaviour, others with straightforward references to their allegedly disturbed mental state. The amount of detail varies greatly from one case to another, and some are even clearly statements written by the petitioners themselves or their procurators, and were only given to the deponents to sign. Thus, a testimony of mental incapacity could be signed by many people, with the medical practitioners inserted in between as one more name, the difference being that their profession was recorded. In these cases, medical practitioners sometimes signed and added a further comment next to their name, but it was only slightly different from the main text of the testimony, and was written using the same legal, non-medically specific terms.

Medical testimonies were used to assert both mental incapacity and soundness of mind. Medical opinion was sometimes directly sought by the authorities to corroborate the petitioners’ claims, only to find in some cases that the defendant was “not demented but rather too calm (quietone) and fairly cold.” In one of the rare direct references to the principles of the humoral doctrine, the intentions of this young man’s paternal uncle to place him under curatorship were thus truncated by the “secret and sincere information” about the defendant’s mental condition requested by the Florentine magistrates, who explicitly asked

758 Although customary practice dictated that two credible testimonies supporting a petition for interdiction were sufficient, many of these testimonies were signed by more than ten people. Among the names, servants, kin, authorities, priests and medical practitioners were mingled in no clear order. When the witness could not write his or her name, a comment was added stating that the testimony had been signed by another in the witness’s presence, at his or her request, and after its content had been read to them. Some of these names had an individual comment added to the signature.

759 See, for instance the interdiction of Orazio Penci, ASF, MPAP, Memoriali, F. 2303, no. 50, August 1752.

760 “...non è demente ma bensi quietone, e assai freddo...”, petition to interdict Michel Arcangelo Fini, not granted. ASF, MPAP, Memoriali, F. 2303, no. 280, September 1755.
for the opinion of the “physician or surgeon of the place.” Nonetheless, rather than the reference to his personality and mental condition, what moved the magistrates not to concede the interdiction was that the report proved that the man behaved in accordance to what was expected of a *pater familias* and, although he did not administer his patrimony directly, it was in good hands and in a perfect state. Hence, even if it was demonstrated that he did not have the most brilliant of minds, the authorities considered that his patrimony was better protected as things stood than by placing him under interdiction, which would subsequently mean that the greedy uncle, whose personal qualities were dubious, would be able to takeover the administration.

Medical opinion was also introduced to prove a defendant’s soundness of mind in petitions for the interdiction to be lifted. In some of these cases medical testimonies asserted that the person’s mental disturbance had abated and they were no longer suffering from any kind of mental disturbance. This is particularly the case with individuals subject to periods of episodic madness who were recurrently interdicted and even periodically committed to one of the *pazzerie*, but who nonetheless strived to live “normal” lives, marrying, having offspring, and managing their affairs whenever they were (considered to be) mentally fit to do so. Interdiction, we must keep in mind, was a transitory solution that sought to control the effects of madness and prodigality, as transitory as any of the other available measures.

Occasionally, medical testimonies were included to support petitions for the revocation of interdictions that had been decreed with no recourse to medical opinion. Eight out of the 50 interdiction procedures with recourse to medical opinion correspond to these cases. Petitions to regain full legal capacity and to be released from curatorship were fairly common. In some cases they were sent only once for a favourable outcome, while in other cases a petition needed to be sent several times before there was a positive response. The role played by medical practitioners in these kinds of petitions is slightly different than when they acted as proof of incapacity, for declaring someone’s soundness of mind was even less medically specific than attesting for someone’s mental incapacity. Assertions such as “he has never been demented nor deprived of proper cognition, and I have always found him to be of a perfectly healthy mind, though indisposed in body”, are not rare to find. To a greater

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761 Ibid., June 1755.
762 One year after being interdicted by reason of dementia, Lorenzo Galli petitioned for the revocation of his interdiction by presenting two supporting testimonies. Both stated in general terms that he had always been known to be “of perfect and purged mind [*mente perfetissima, e purgata*], able to rightly distinguish everything” and in such a way that he was absolutely capable of managing “every interest concerning both his
degree than when attesting for mental incapacity, medical practitioners supporting petitions for an interdiction to be revoked centred their arguments on their patient’s capacities to perform daily tasks, the impeccable management of their affairs and, particularly in cases concerning old men, their general fitness. After all, mental disturbance, when measured in terms of mental incapacity or criminal insanity, had different levels according to social performance. Men and women could be considered able to manage their affairs even though they presented some degree of mental disability, just as they could also be considered liable in order to be punished for a crime.

But, even more interestingly, in some cases a medical category was only provided in this last stage of the interdiction, exclusively to assert that the individual was no longer suffering from it. Someone who had been interdicted through legal proceedings that employed the usual non-specific references to dissipation and economic mismanagement, with no recourse to either medical opinion or medical categories, could have his or her civil rights restored on the basis of a medical testimony that asserted they were “presently sound of mind and of the whole body, not troubled by any frenzy, and thus capable of dealing and managing any of his most important interests.” Implicitly, therefore, the proceedings to end the interdiction and guardianship could reveal that an interdiction had really been decreed for a suspected dementia in cases that had been based solely on narratives suggesting economic mismanagement and classic prodigality.

Proving the flexible function ascribed to medical opinion, a medical testimony asserting someone’s mental incapacity could be introduced only when the defendant petitioned for the interdiction to be revoked, and not when it had originally been decreed. The 70-year-old Gaetano Migliorini, for instance, was interdicted in 1767 for a dementia he had allegedly suffered since the age of 24. The petition was made by his daughter-in-law with the

soul and his body.” The testimony was signed by four people, three priests and one physician. The latter added further, personal testimony to his name (cited in English above): “non è mai stato demente, ne privo di ogni dovuta cognizione, et l’ho sempre trovato sanissima di mente, benche indisposto di corpo.” ASF, MPAP, Memoriale, F. 2300, no. 235, January 1727/28.

763 See, for example, the testimony of the surgeon Leonardo Berti from San Gaudenzio attesting for Gaspero Pratesi’s fitness and capacity to administer his affairs. The surgeon specified that, despite his advanced age, Gaspero was in possession of a healthy body, and was consequently still successfully active in the public world. Pratesi had been interdicted for being allegedly rimbambito, but when he petitioned immediately afterwards, the magistrates considered that his successful businesses and the testimonies he provided proved that he was neither prodigal nor imbecile. ASF, MPAP, Memoriale, F. 2306, no. 262 and no. 284, August 1766.

764 “...lo riconosco al presente sano di mente, e di tutto il corpo, ne occupato da alcuna frenesia, è pero capace a trattare, e maneggiare qualsisia suo più premuroso interesse...” Testimony of the physician Francesco Arrighi supporting Giovan Battista Barsi’s petition for his interdiction to be lifted. ASF, MPAP, Memoriale, F. 2302, no. 113, June 1749.
support of a collective testimony stating that he “is not and has never been able to administer his possessions, not only because he is demented and has no rational understanding, but also because he is unable to distinguish his interests, and is prodigal...”\(^{765}\) No further proof of his mental incapacity was required by the authorities to declare him interdicted, and at this stage we find no record of medical involvement of any kind. However, when Gaetano himself petitioned for the interdiction to be lifted, his daughter-in-law argued against his petition and produced a note from Santa Dorotea declaring Gaetano Migliorini had been committed there.\(^{766}\) The testimony just about declared that his name could be found in the records of the hospital and made no reference to Migliorini’s past or current mental condition. Even so, the fact of his past committal was considered grounds enough not to revoke the interdiction.

Even if the reference to Santa Dorotea was indisputably considered as proof of mental incapacity, it was not necessary to make reference to a past committal to secure an interdiction sentence. As we have seen on many occasions, lay witnesses attesting for past or current mental disturbances were proof enough, particularly so long as these testimonies made the connection between mental state and daily performance in the different fronts of public, professional and family life. This was something a testimony from Santa Dorotea or Santa Maria Nuova was simply not able to do. In fact, for most of the period under study here, testimonies from either of the mental hospitals are limited to attesting for someone’s committal, only occasionally giving fuller versions of the reason for such interment. Towards the 1760s, nonetheless, categories such as “demented”, “deprived of brain” and “ill of madness” progressively give space to more precise categories such as “continual delirium”, “lucid intervals”, “perturbation” or “alteration of fantasy”, “melancholic delirium” or “furious mania” (\textit{mania furiosa}).\(^{767}\) But the use of such categories works more as anecdotal detail than as a necessary component of a certification, the primary purpose of which was to attest that the individual was or had been committed to the mental institution, regardless of how medical knowledge understood the specific mental suffering.

\(^{765}\) “...non è ne è stato mai capace di amministrare i suoi beni non solo per essere stato demente, e non avere intendimento di ragione quanochè per essere persona non capace di distinguere il suo interesse, e prodigo...” ASF, MPAP, \textit{Memoriali}, F. 2307, no. 2, March 1767.

\(^{766}\) ASF, MPAP, \textit{Memoriali}, F. 2307, no. 22, April 1767.

Surprisingly, there are several cases of men and women interdicted without reference to their committal to the mental institutions, who nonetheless appear in the records of Santa Dorotea in complete isolation from the proceedings recorded in the Pupilli. Interdiction and confinement in a mental institution were two completely unrelated legal procedures, with different language requirements and no necessary references to each other. Further revealing of the malleability and contextual nature of categories is the fact that some people whose interdiction was decreed without stating the cause of incapacity, or with no mention of a past or current committal, appear in the records of Santa Dorotea or Santa Maria Nuova. Most notably is the case of a man who was interdicted for prodigality and who appears in the records of both hospitals in Florence. Thus, although being committed to Santa Dorotea or the pazzeria of Santa Maria Nuova was considered as legal confirmation of dementia, the judicial practice made it neither mandatory nor necessary.

Although recourse to medical opinion was not the general practice in civil or criminal procedures, when medical opinion was involved it was generally taken as indisputable proof. It is rare to find occasions when the medical testimonies were contradicted by the government authorities. There are two situations that led the magistrates to go against medical opinion. The most common was when medical testimonies asserting someone’s soundness of mind were not considered grounds enough for the interdiction to be lifted. But, there are a few cases in which the information first gathered to decree an interdiction was later considered to have been wrong, either through new inquiries carried out by the Pupilli, or because the medical practitioner himself reconsidered his first assessment. Finally, there are also cases in which

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768 This is the case of Geri Gori, interdicted for prodigality in 1750. See ASF, MPAP, Memoriali, F. 2302, no. 198, July 1750; ASF, Santa Maria Nuova (SMN), F. 206, fol. 808, when he was transferred to Santa Dorotea in 1754; ASF, SD, Motupropri, Rescritti..., F. 1, no. 67 and no. 74, 1755, when he was released from S. Dorotea and interned again months later. See also Niccolò Mannucci, ASF, MPAP, Memoriali, F. 2300, no. 490, January 1735/36 and ASF, SD, F. 23, no. 3, 1741; Margherita Bellini, ASF, MPAP, Memoriali, F. 2304, no. 131, August 1757 and ASF, SD, Motupropri, Rescritti..., F. 1, no. 6, December 1751. However, the majority of patients committed in Santa Dorotea do not appear in the records of the Pupilli, attesting for the complete dissociation between interdiction and confinement. After the changes to the legal framework in Tuscany at the end of the eighteenth century, interdiction and confinement came to be united in the same procedure.

769 The Pupilli officials stated, regarding Antonio Corsini, that “per la sua incapacità in agire, e per trovarsi ristretto, e riservato in detto Spedale non solo è necessario interdirgli l’amministrazione il che anche segue per opera della legge istesa essendo la sua demenza resa notoria.” ASF, MPAP, Memoriali, F. 2304, no. 87, March 1757.

770 Girolamo Cocci, interdicted for the second time in 1756 for his advanced age and alleged dementia caused by epileptic fits, tried to have the interdiction rejected by petitioning for its revocation, supported by medical testimony asserting that he was presently in “optimal health, and during his past [physical] illnesses has never given any sign of being mentecatto, so that he is in perfect wits and has good cognition to manage his interests.” According to the inquiry carried out by the Pupilli officers, however, the medical testimony had been signed by the practitioner without him having first read what it contained. In fact the physician later declared to the
the same medical practitioner attested first for someone’s unsoundness of mind only to later declare that this person’s mind works fine and he is (and has always been) consequently perfectly capable of managing his affairs.\footnote{See, for instance, the proceedings regarding Gaspero Maria Pratesi, ASF, MPAP, Memoriali, F. 2306, no. 262 and no. 284, August 1766, where the same surgeon attests first to his mental incapacity and later declares that although he is of advanced age, has a healthy body and is perfectly capable to manage his affairs. The interesting thing here is that the physician did not actually contradict his first statement, for his second testimony is centred on the fact of Pratesi’s healthy body and practical capacity to attend to his affairs. For other examples, see ASF, MPAP, Memoriali, F. 2305, no. 35, January 1760 and no. 71, June 1760; ASF, MPAP, Memoriali, F. 2303, nos. 8 and 48, November 1751-March 1752.} Notwithstanding these few exceptions, it is generally rare to find medical opinion openly contradicted by judges, magistrates, petitioners or defendants. In other words, even if medical opinion was not concomitant with the legal identification of mental incapacity, medical knowledge of physical and mental distempers was largely accepted and uncontested.

\textit{Contents of Medical Testimonies and the Use of Precise Medical Categories}

Overall, the medical testimonies we find in the legal proceedings of the eighteenth century tend to be medically unspecific, although towards the second half of the century we can observe a mild change. By 1750 we increasingly encounter medical testimonies that were more straightforward in their use of medical categories, such as epilepsy, apoplexy, \textit{delirio melanconico}, \textit{alterazione di fantasia}, or \textit{fissazioni di mente}. Nonetheless, when medical diagnostic categories were incorporated into Tuscan legal practice, it was invariably followed by the traditional formula aimed at establishing the defendant’s level of estrangement from reason. In this sense eighteenth-century medical testimonies are striking for their unchanged entrenchment in the medico-legal tradition that had been established since the introduction of the vernacular in the sixteenth century.\footnote{The evidence studied by Elizabeth Mellyn, mostly corresponding to the fifteenth and sixteenth centuries, is striking for its similarity in many aspects with the eighteenth-century lexicon. Part of the terminology, particularly that most deeply entrenched in the Roman legal tradition, was falling into disuse. But, by and large, reference to the effects of madness in terms of making the individual devoid of reason, alienated from reason, taking them out of their senses (lo cavano del cervello, lo cava del sentimento), which formed the basis of the juridical treatment of madness in the previous centuries, is still at the core of the medical argumentation in the eighteenth century. Mellyn, \textit{Mad Tuscans and Their Families}.} Medical labels were meaningful so long as they established that the episode of derangement, accident or long-term disease had left the individual estranged from reason, deprived of cognition or out of his or her wits (privo di intelletto or di cervello, privo di cognizione, sbalordito, uscito fuori di se, tolta la favela,
alienato dalla ragione), thus rendering them mentecatti or dementi. In other words, even when medical testimonies provide a diagnostic category, it is anyhow accompanied by the usual lexicon employed by lay witnesses and supplicants to legitimize the assessment of mental incapacity. Furthermore, medical testimonies tend to be repetitive, with a deliberate tendency to simplify medical references, hardly ever delving into the causalities behind the diagnostic category and sometimes not even making reference to its defining features.773

With medicine of the mind in its early stages, there is nothing particularly strange in the lack of specificity observed in judicial medical testimonies. The notion of mental disorder as an organic disease and, as such, as a problem pertaining to medicine had started to prevail in Early Modern Europe, with an increasing proliferation of medical literature devoted to the problems of mental diseases. Towards the end of the seventeenth century, madness was experiencing the general secularization that pervaded different areas of knowledge at the dawn of the enlightenment and, for instance, theological conceptions were opened to medical understandings of mental disease to explain phenomena such as demonic possession.774

However, although madness was progressively entering the realm of medicine, the causes and explanations of mental diseases were still highly exploratory in the medical profession itself. After all, “before the mid-eighteenth century, hardly anyone specialized exclusively in mental disorders.”775 The medical understanding of mental afflictions was built upon observation and empirical knowledge of medical practitioners who encountered madness in the course of their general practice of medicine. Although new theories were developing that pointed towards the mind, nerves and passions as the primary concerns in the aetiology of mental diseases, most of the medical reflection was still trapped in the dilemma of how mental disturbances could be assessed and treated using only the evidence obtained through the observation of the body and the accumulation of somatic symptoms.776

773 The same argument is made by Lisa Roscioni regarding the medical perizie that preceded committal to Santa Dorotea. See Roscioni, Il governo della follia, p. 269.
775 Porter, Mind-Forg’d Manacles, p. 174.
776 Allan Ingram, The Madhouse of Language. Writing and Reading Madness in the Eighteenth Century (London and New York: Routledge, 1991), p. 23. See, for example, the clinical description given by Giuseppe del Papa (1648-1735) for a medical consultation involving a “universal emaciation and weakness with some stupidity of mind”: the patient suffered “...dolori di capo or più, or meno pungiti vi, or più, or meno impetuosi, ai quali di mano in mano con la debita proporzione si sono uniti la stracchezza, ed il lenguare della mente, l’afflizione, e la malinconia dello spirito, la debolezza, ed una certa stupidità delle gambe, e del braccio sinistro,
Akihito Suzuki has argued that, for most of the early modern period, medical literature on mental afflictions deliberately highlighted the corporeal dimension of insanity in order to escape the dilemma of conceiving a diseased mind (understood here as the incorporeal dimension of the soul). A diseased mind would have implied that the soul could be corrupted, affecting the principle of its immortality. As a result, the body and its manifestations continued largely to be the centre of attention, to the detriment of the mind and its manifestations, with melancholy, mania and frenzy regarded as organic diseases of the brain, caused by a complex network of physiological distempers.

Expertise over mental afflictions was not even settled within the sanitary profession, and at least until the first half of the eighteenth century both physicians and surgeons were considered as experts on the matter. The patients of Santa Dorotea were under the custody of a surgeon until 1756, when the hospital was assigned its first permanent physician with the appointment of Antonio Lulli. Still, physicians and surgeons equally disputed their role as medical authorities in forensic affairs, including the assessment of madness. For most of the eighteenth century it is not possible to determine a qualitative difference between testimonies signed by doctors and those signed by surgeons (cerusici). Most of the time, doctors and surgeons signed either two different testimonies that were, however, written using similar terms, or only one testimony signed by both. Hence, during the whole period not only did


777 Primarily based on British medical writings of the seventeenth and eighteenth centuries, Akihito Suzuki has argued that, “madness constructed within the dominant medical systems was not conceived as a disease of the mind until the latter half of the eighteenth century. Earlier medical writers conceptualized madness exclusively as a bodily disease, locating the problem in what the body represented to the mind and maintaining that the soul and the higher mental faculties of the patient remained intact. With the shift of emphasis from what the mind received to what the mind did, madness became the disease of the mind per se.” Akihito Suzuki, “Dualism and the Transformation of Psychiatric Language in the Seventeenth and Eighteenth Centuries”, History of Science 33 no. 4 (1995), p. 437.


779 Doctors had a university education and were from the upper classes. On the contrary, surgeons were generally of lower status, and started to receive practical training in hospitals only in around the seventeenth century. Considered as artisans, surgeons theoretically could only work on the external surface of the body. See Brambilla, “La medicina del Settecento: dal monopolio dogmatico alla professione scientifica”, pp. 5-81 and Cipolla, Contro un nemico invisibile, pp. 270-324.
medical practitioners share their status alongside the clergy as the best suitable experts for assessing madness, but the medical profession itself remained insecure and highly contradictory regarding their expertise in the field.

It is well known that early modern medical experts in madness made their appearance hand in hand with the development of specialized institutional spaces for the treatment and, increasingly, the cure of the mentally afflicted. The institutional changes brought by the Regency, particularly the dispositions that changed the admission procedure for Santa Dorotea were, nonetheless, the signs of an initial shift in the balance between surgeons and doctors. As explained in the previous chapter, since 1750 *pazzia furiosa* had to be certified by a doctor (not a surgeon), while since 1756 Santa Dorotea had a permanent physician in charge of admissions, treatments and the discharging of patients. Moreover, the increasing numbers of petitions for committal made it necessary to appoint two additional physicians as the official public experts (*periti fiscali*) to determine the cases worthy of committal.

These changes, in combination with the increasing number of petitions for interdiction and committal towards the mid-eighteenth century, contributed to the appearance of new medical experts in madness. Figures such as Giovanni Targioni Tozzetti, Antonio Lulli and Francesco Antonio Viligiardi developed their expertise on mental diseases through their practical contact with and treatment of patients in Santa Dorotea, and their roles of *periti fiscali* in the civil and criminal courts of the duchy. The names of these physicians start to become differentiated from the rest of the medical testimonies in the records of the Pupilli, appearing with increasing recurrence and being those that used more specific medical terminology.

However, despite these official gestures that placed medicine and particularly physicians in charge of the realm of mental afflictions, judicial practice remained ambivalent towards the role of medical knowledge in matters of the mind. The difficulty of providing evidence for mental derangement except through behaviour and gestures was what made it so

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781 Antonio Lulli was the physician of Santa Dorotea between 1756 and 1788. Lodovico Scutellari was *medico fiscale* between 1756 and 1758, Giovanni Targioni Tozzetti was first the physician of the Stinche prison, and then appointed *medico fiscale* in 1758. In 1757 he was in charge of the official assessment of *pazzia furiosa* in the admission procedure of S. Dorotea together with Scutellari. Francesco Antonio Viligiardi was appointed substitute *medico fiscale* in 1758. Their involvement in the treatment and assessment of madness has been studied by Roscioni, *Il governo della follia*, pp. 265-292 and *passim*. An interesting sample of Targioni Tozzetti’s expert reports in cases of madness requested by the Otto di Guardia, the Auditor Fiscale, Santa Dorotea and the Magistrato dei Pupilli can be found in BNCF, Manoscritti, GTT, N. 235, vol. III, “Relazioni in casi di demenza”, fols. 202-260.
difficult for medical professionals to be recognised as the most suitable expert authorities over matters of the mind in civil and criminal courts. Given that “the ‘facts’ of insanity were the common property of laymen and doctors alike,” medical testimonies were not really distinguishable from the rest of the testimonies that built a judicial process. Most of the time they made allusion to some physical distempers, often avoiding the outer limits of the mental disease under question. As argued by Eigen, medical testimonies played only a “legitimating function” in the legal assessment of madness before the nineteenth century, not only in Tuscany but throughout Europe. As he puts it, medical testimonies during the long eighteenth century are characterized by their “utter lack of technical terms, esoteric jargon, or physicalist imagery... After several neighbours testified that the accused exhibited bizarre behaviour, the physician was sworn and simply stated that the defendant was indeed deranged. No ‘diagnosis’ as such was given beyond the usual statement, ‘I have looked upon him as a man insane’.”

_Epilepsy and Apoplexy_

In this scenario, the visibility of epileptic and apoplectic “accidents”, as they were called, is hardly surprising. Epilepsy and apoplexy are the diagnostic categories that appear in most of the medical testimonies that I have found in the records of the Magistrato dei Pupilli. This incidence is paralleled in the records of the Otto di Guardia, particularly towards the second half of the century, when we increasingly observe Giovanni Targioni Tozzetti providing his medical expert opinion on the mental and physical effects of epilepsy and apoplexy, which entitled convicted prisoners to a remission of their sentence for health reasons. In other words, most medical practitioners were called to testify in those cases where madness left clearer physical signs. However, precisely given its clear physical signs, epilepsy and apoplexy were recurrently employed by petitioners both in criminal and civil courts to craft a petition for interdiction or reduction of sentence without resorting to medical opinion.

Both conditions were somehow intertwined and not really differentiated, although apoplexy was particularly associated with old age, and singled out as the mark of inevitable physical and mental decay. Situated at the interstices between bodily and mental ailments, the

Clark and Crawford, “Introduction” to _Legal medicine in history_, p. 10.

Eigen, “Intentionality and insanity”, p. 43.

Nine of the 49 interdiction procedures that use medical testimony declare the cause of dementia to be epilepsy or apoplexy. The other 40 cases either employ undefined medical categories, or, less frequently, the increasingly specific _delirio melanconico_, _fissazioni_, or suchlike.
aetiolog of epilepsy and apoplexy may not have been completely clear to non-specialists, but their bodily signs and effects on intellectual faculties were indisputable even to a lay observer. The typical events that signalled the presence of epilepsy and apoplexy, such as convulsive seizures, partial or complete paralysis, loss of speech and/or vision, and severe mental confusion, among the most commonly cited, appear to have been widely known to lay petitioners in the criminal and civil courts.\footnote{For example, according to Stolberg, “The dangers of a stroke appear to have been widely known among the general population, and the more technical synonym ‘apoplexy’ was commonly used”, and even more, “It seems that laypeople thought about apoplexy and its causes in much the same way as physicians”. Similarly, epilepsy, he states, was not only widely known but especially feared. Michael Stolberg, \textit{Experiencing Illness and the Sick Body in Early Modern Europe} (Basingstoke: Palgrave Macmillan, 2011), p. 92-93 and p. 52, respectively. For an overview of the development of apoplexy and epilepsy as diseases pertaining to the sphere of psychiatry, although mostly centred on the modern period, see Malcolm Nicolson, \textit{“Stroke and other Vascular Disorders”}, in Berrios and Porter, \textit{A History of Clinical Psychiatry}, 86-94 and Roy Porter, \textit{“Epilepsy”}, Ibid., pp. 164-173.}

The narratives of epilepsy and apoplexy assume a slightly different tone depending on the context and in accordance with the requisites of each legal space. Epilepsy, still widely known as \textit{“mal caduco”}, and strokes resulting in various levels of paralysis were commonly employed by prisoners to justify petitions for the reduction of a sentence, as we have seen. These petitions were generally accompanied by medical testimonies from the \textit{medico fiscale}, or \textit{medico condotto} if they were not held in the Stinche but serving a sentence of public labour or internal exile (\textit{confino}). Intended to demonstrate that the convicted felon deserved a lenient sentence, medical testimonies in these cases were almost invariably dominated by the physical consequences of both conditions. The person’s mental state was, consequently, left in the background. Following the principles of criminal law, these medical testimonies had to convince the authorities of the condition of the felon’s physical health, which had to be severe enough as to prevent him from performing hard labour or to require a better environment and special treatment.\footnote{See, for instance, ASF, OGB, \textit{Straordinarie}, F. 2664, no. 69, 1728; ASF, OGB, \textit{Suppliche}, F. 2530, no. 132, July 1750 or ASF, OGB, \textit{Suppliche}, 2540, no. 41, September 1764.}

Medical testimonies that argued for the seriousness of an apoplectic or epileptic condition affecting a convicted felon were not necessarily more generous in their descriptions than the medical testimonies presented in interdiction procedures. As Targioni Tozzetti explained to the Otto di Guardia in 1768, the argument generally was that the convulsive seizures of epilepsy, when presented frequently and within short intervals, could easily give rise to apoplexy and ultimately result in death.\footnote{Giovanni Targioni Tozzetti on the prisoner Giuseppe Martini, charged with murder and convicted arbitrarily to 10 years of prison at the Stinche. His original penalty had already been commuted to a lighter one on account} The formula could vary, but the quantity of
information was equally scant. However, although the stress had to be placed on the physical risks, issues such as the emotional distress caused by prison life were progressively brought to the fore by physicians such as Targioni Tozzetti. The life threat posed by epilepsy was aggravated, he stated on more than one occasion, by the negative conditions experienced in prison, and even further worsened by “every perturbation of the mind.”

Allusions to epilepsy and apoplexy in interdiction procedures were primarily argued as evidence of mental incapacity, even if as a mental incapacity that possessed the most evident physical evidence possible. To understand this connection between physical and mental incapacity we should keep in mind that interdictions were thought to mitigate the consequences of dementia, prodigality and deafness or muteness, so at the very core of its conception we find the conflation of physical and mental disability. The narratives of interdiction in fact suggest that mental incapacity in its various forms was in many occasions conflated with different levels of physical impairment, as we have seen. In the particular case of apoplexy and epilepsy, intensifying physical impairment was indisputably correlated with increasing mental impairment. The purpose of interdiction procedures made it important to highlight the latter, while the criminal context made it pivotal to highlight the former.

Interdiction procedures demonstrate particularly well how, notwithstanding the fact that the basic characteristics of epilepsy and apoplexy were known to lay society, families argued for it in a different way from medical practitioners. Medical testimonies generally presented apoplexy and epilepsy as illustrations of the physiological damage produced in the person’s mental faculties. For instance, Francesco Antonio Viligiardi declared his patient had suffered “fierce epilepsy”, a “serious and incurable illness” that had rendered him “mente”, which together with his advanced age dramatically reduced his possibilities of recovery. Medical testimonies of apoplectic or epileptic accidents would sometimes go a little further, contextualizing the circumstances in which the person found herself, in terms of movement,
care, and the kind of treatment they had received. In contrast, lay petitioners tended to skip the part of the medical diagnosis (which was sometimes even referred to simply as “accidents”790) and went straight to the mental incapacity caused by a convulsive episode or stroke, on account of which “he has gone so out of himself [uscito talmente fuori di se] that he has become mentecatto”,791 or that it had left the afflicted “subject to an almost continual dementia”,792 “weak of mind”,793 or “reduced to the level of imbecility of forces and mind.”794

The sick bodies of the allegedly mentally incapable were a matter of concern generally after the interdiction, once the Pupilli had to figure out the best measures to ensure that they were properly taken care of. Here, more accurate accounts regarding their mental and bodily health could be useful. For instance, Xaverio Valloni, a Florentine of advanced age and with no offspring, was interdicted in 1748 on the request of his caretakers, who simply declared he had become “demented”, without presenting any medical testimony.795 Along with the interdiction, the petitioners requested that they be appointed as administrators and be put in charge of Valloni’s custody and assistance. However, later proceedings inform us that his condition was understood as “melancholy and fixations” further aggravated by an apoplectic stroke which left him severely physically impaired. Close scrutiny of the labels used, the voices involved and the situations that prompted the use of one or another term is valuable in examining the principles regulating the configuration of languages of madness.

Xaverio Valloni’s case resurfaces two years later when his two sisters, both consecrated nuns, initiated a litigation against his caretakers over his assistance and custody. The sisters accused the caretakers, a mother and her son, of misappropriation, opportunistic motives and ill treatment of the defenceless Valloni, who “had fallen little by little into a

790 See, for instance, the interdiction of Maria Maddalena Panfi, ASF, MPAP, Memoriali, F. 2301, no. 201, September 1743.
791 Interdiction of Cessare Maghini, who suffered an “apoplectic accident.” ASF, MPAP, Memoriali, F. 2304, no. 54, July 1756.
792 Interdiction of Rinaldo Tedaldi, subject to “frequent epileptic insults.” ASF, MPAP, Memoriali, F. 2305, no. 150, August 1761.
793 Interdiction of Francesco Albertini, who had suffered a “strong apoplectic fit” (tocco di apoplessia). ASF, MPAP, Memoriali, F. 2304, no. 71, January 1757.
794 Interdiction of Girolamo Cocci, subject to recurring epileptic accidents; no medical testimony added in this case. ASF, MPAP, Memoriali, F. 2304, no. 59, October 1756.
795 The interdiction decree only stated that he had become “demented” based on the “testimonies and justifications” presented in court. When the justifications to support a petition for interdiction were made in person, they were usually recorded in the Atti of the Magistrato Supremo, which for the months in question unfortunately is not available for consultation. A copy of these testimonies, nonetheless, was provided in 1750 in ASF, MPAP, Memoriali, F. 2302, no. 202, June 1750, and thus we know that Valloni’s mental incapacity was assessed without recourse to medical opinion. The interdiction decree can be found in ASF, MPAP, Memoriali, F. 2302, no. 29, May 1748.
fierce melancholy and fixations.” The Pupilli’s report informs us that on top of the melancholy and fixations afflicting him since many years before “rendering him stupid and melenso”, Valloni was suffering severe physical complications due to a more recent apoplectic stroke. Medical and lay testimonies were included to demonstrate Valloni’s physical complications, to argue both that he needed constant care and that he was already receiving it.

This case is interesting because it highlights the use and function of medical testimonies. Whilst it had not been necessary to medically certify Valloni’s alleged melancholy and fixations (they were not even recorded), his apoplexy and its consequences were. When the interdiction proceedings began, the caretakers not only had been informally in charge of managing the affairs of Valloni for some time, but had also assumed his custody and the attendance of his domestic needs. The assertion regarding his mental incapacity was in fact not under discussion until the two sisters intervened. And when they did, what was contested was not the nature of Valloni’s mental affliction, but instead who was to be in charge of his custody and assistance, given that his sisters were unable to provide this themselves as they were consecrated nuns, and what was to happen to his property. The two nuns claimed that their brother’s caretakers, also appointed administrators of his patrimony, had come to “dominate him completely”, seizing upon his weakness to take advantage of him and consume his patrimony. To make matters worse, Valloni made a donation to the woman who had assisted him over the years, which his heirs – the two sisters and their Monastery – tried to impugn on the grounds of his alleged mental incapacity.

A doctor and a surgeon signed a testimony declaring that they had treated Valloni for the past five months, and that he was “sick with an apoplectic malady, an indisposition which requires, beyond our cure, the continual assistance of a person day and night to custody the said infirm.” Still not completely convinced of the actual situation of their ward, the Pupilli officers resolved to send an informant, most probably a medical practitioner, to directly

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796 “...per aver dato a poco, a poco in una fiera malinconia, e fissazione si ritrova da qualche anno in qua senza spirito di operare, e di ben dirigere il governo di sue stanze...” ASF, MPAP, Memoriali, F. 2302, no. 178, March 1750.
797 “... sendo [sic] divenuto per una fiera malinconia, e fissazione, stupido, e melenso...” Ibid.
798 “...questi lo dominano totalmente, godendo tutto il di lui patrimonio...” Ibid.
799 ASF, MPAP, Memoriali, F. 2302, no. 202, June and July 1750.
800 “...infermo d’un male Apopletico, per la quale indisposizione è necessaria, oltre la nostra cura una continua assistenza di persone giorno, e notte per custodire detto infermo et ad ogni sua occorrenza, a ciò possiamo dire, et attestare per le continue visite fatte al medesimo e che continuamente lì fanno...” ASF, MPAP, Memoriali, F. 2302, no. 178, February 1750.
observe Valloni’s state and his caretakers’ behaviour. The testimony that the informer wrote for the Pupilli is particularly telling, and striking for its accurate description of the old man’s body and mental state. He described that he had found Valloni “lying on a resting chair [sedia da riposo], stupid, astonished, pusillanimous, taciturn and incapable of reasonable discourse”, to the extent that he only was able to respond with small and insignificant words to the informant’s questioning. He could not recall any past events, and continuously answered “I do not remember.” When he was asked to stand up, he could hardly get on his feet, showing a “considerable weakness” (debolezza non lieve) and loss of energy in his body to the extent that he could not move his legs without help. The informant explained that all these signs indicated that “for some time apoplexy has resided in this imbecile head, and as a fatal and malign guest has left, as its probably indelible print, the organ of the brain defected, inefficacious and weak”, affecting not only his wits, but also preventing his animal spirits from distributing movement to his extremities.

These kinds of descriptions, so common in the eighteenth-century Consulti Medici, for example, are undeniably atypical in court records, particularly for their insights into the workings of the brain vessels and the interconnection between body and mind through the animal spirits. The testimony just quoted made explicit reference to apoplexy as producing irreparable damage to the brain, which in turn affected bodily motion by immobilizing the animal spirits. In the medical testimonies of interdiction procedures, the word brain is not usually employed to mean the organ that sends impulses to the rest of the body to command its functioning (whether through animal spirits or electric impulses), but rather to name the

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801 The informant signed only with his name, but was referred to as dottore by the Pupilli officials. In general, physicians used the titles of “medico fisico”, “dottore in medicina”, or “membro del Collegio dei Medici”, however, the accurate medical details provided by this report suggest that he was a doctor in medicine.
802 “...giacente su una sedia [d]a riposo, stupido, attonito, pusillanime, taciturno, ed incapace di discorso sensato; a talche non altro potei estorcer da lui con più interrogazioni fattegli, che poche, tronche, ed insignificanti parole.” ASF, MPAP, Atti e sentenze, F. 1280, June 1750, fol. 994.
803 “...Interrogatolo sopra l’epoca del suo male, mostrò di non ricordarsene, e da altre richieste pure si sbrigò coll’istesma ripetizione non me ne ricordo.” Ibid. Emphasis in the original.
804 “essersi [da] un tempo domiciliata in questo capo imbecille l’Apoplessia, la quale, comecechè ospite funesta, e maligna, vi ha lasciato come per impronta forse indelebile, difettoso, inefficace, e languido l’organo del cervello il quale oltre al non lavorar più ne’ mirabili suoi separatori spiriti brillanti e vivaci, gli somministra eziandio poveri, e scarsi alle parti, e a quelle massimamente, che, come sono le gambe, più son lontane dal capo.” Ibid.
source of the faculty of reason. But again, given that the primary aim of the inquiry was to assess Valloni’s physical state, the description delves into the kinds of organic details that were usually left outside such medical testimonies.

We find a similar situation regarding a troublesome interdicted man who had been confined in the fortress of Volterra, when he requested permission from the Council of Regency to be allowed to return to Florence due to the violent epileptic fits he was suffering. His petition was supported by an exceptionally elaborate medical testimony. It declared that he was “frequently subjected to stretching [stiramenti] of the nerves and convulsions, and especially during the month of July last year he was afflicted by an inflammatory fever accompanied by grave and dangerous epileptic accidents, on account of which he was on the brink of losing his life.” Nerves, convulsions, fevers and other precise indications of physical sufferings are not usually integrated in medical testimonies, however. Furthermore, in this case the core of the physician’s argument in favour of transferring the interdicted back to Florence was that the weather in Volterra was especially harmful to the patient’s health. Once again, the core of the discussion was placed on the interdicted’s physical condition, and not on his troubled mind, although we know he had been interdicted for being a riotous, extravagant and uneasy (inquieto) mad man (pazzo).

Due to their variety and regularity across the evidence under scrutiny here, petitions claiming epilepsy or apoplexy in order to argue for mental incapacity with the support of medical opinion are highly valuable for studying the circulation of languages madness. On the one hand, the very conflation between the physical and mental symptomatology accompanying both conditions explains why petitioners were so at ease with its characteristics. Yet, on the other hand, this same conflation suggests the involvement of medical opinion. Given its recurrence and highly disabling physical consequences, we must assume that medical practitioners were consulted more frequently for ailments related to

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806 The spirits according to the Hippocratic-Galenic explanatory framework were the connectors between the body and the soul, and the animal spirits were the “messengers” between the brain and the cognitive functions and the body. Mechanistic explanations gradually conceptualized the movement of animal spirits as commanded by the brain through a network of fibres, which was to become the nervous system. For an overview, see Elena Carrera, “Anger and the Mind-Body connection in Medieval and Early Modern Medicine”, in Elena Carrera, Emotions and Health. 1200-1700 (Leiden, Boston: Brill, 2013), pp. 112-116 and Roy Porter, Flesh in the Age of Reason. The Modern Foundations of Body and Soul (New York and London: W.W. Norton & Company, 2004, pp. 44-61.

807 "...essendo spessissimo soggetto a stiramenti di nervi, e convulsioni, e specialmente nel mese di luglio dell’anno passato fù soppresso da una febbre infiammatoria accompagnata da gravi, e pericolosi accidenti epilettici, per cui si ridusse presso che a perdere la vita...", Testimony of Girolamo Ricci, “first physician” of Volterra, ASF, CR, F. 758, no. 20, May 1753. No medical testimony had been required to assess Francesco del Mazza’s madness when he was interdicted and confined in the Fortezza five years before.
epilepsy and apoplexy, than for other mental afflictions. Especially when the latter were manifested in forms that were not physically harmful either to the patient or to others, as was the case with many of the interdicted.

Bearing witness to the permeation of medical discourse regarding epilepsy and apoplexy, legal practice by the eighteenth century had widely accepted the precepts of health and disease that dictated, for example, better air and diet, a change of climate and ideally avoiding situations that generated emotional distress (the so called passioni di animo). All these conditions, according to the principles of the six non-naturals, were to be carefully managed if one intended to preserve or be restored to health.808 Epilepsy and apoplexy were no exceptions. As explained by the Italian physician Andrea Pasta (1706-1782) regarding epilepsy, it was “not always derived from humoral causes”, and when it was, “it is undeniable that the scosse d’animo frequently can control and make it disappear.”809 This explains why the authorities considered the argument of epileptic or apoplectic felons who requested their penalties be mitigated or pardoned valid. Similarly, the Pupilli officials frequently supported requests for a “change of air”, better living conditions or change of diet. The principles of the six non naturals, still strongly present as the primary preventive mechanism for health preservation, apply, evidently, not only to apoplexy and epilepsy, but in general to all physical or mental distempers.

Other Medical Categories: Delirio, Turbazioni di Fantasia and Fissazioni

When we leave the context provided by epilepsy and apoplexy, the sample of medical categories employed becomes less definitive and much more explorative. The more medical knowledge left the realm of the body and its physical evidence to explore the signs of mental derangement, the more references to altered emotional states were placed at the centre. When medical testimonies left the secure frames provided by medico-legal terminology, it was to introduce concepts that invariably refer to the realm of alterations of judgement and emotional disruptions. Modestly throughout the eighteenth century – with some acceleration towards the

808 According to the Hippocratic-Galenic system, there were six non-natural factors commanding health and disease: air, sleep and waking, food and drink, excretion and retention, movement and rest, and passions or accidents of the soul. For two examples of how this theory marked the experience of health and the body, see Cavallo and Storey, Healthy Living and Séverine Pilloud and Micheline Louis-Courvoisier, “The Intimate Experience of the Body in the Eighteenth Century: Between Interiority and Exteriority”, Medical History 47 (2003), pp. 451-472.
second half – medical testimonies started to attach to the traditional frenesie and the old-fashioned melancholy new concepts such as delirio, fissazioni and alterazioni or turbazioni di fantasia. Contrasting with the plain, unspecialized and generic medical testimonies of the first part of the century, Lulli and Targioni Tozzetti explained their patient’s mental incapacity by making reference to their perturbed fantasies, their deliriums and their mental fixations. The Tuscan physicians thus appear immersed in the eighteenth-century transformation of the conceptual model of madness, manifested by the adoption of a new psychologized language.  

This shift in the understanding of madness is particularly clear in the changes suffered by the term melancholy. Scholars have engaged in vast discussions about the European fascination for this mental affliction, regarded at the same time as a fashionable disease and as a pitiable malady, associated with artistic geniality, intellectual occupations and the elite, but also with deep suffering and suicide. With religious, political and cultural meanings that alternatively shaped its form, melancholy was probably the most employed term to classify mental affliction between the sixteenth and seventeenth centuries. Its characteristics, meanings and explanations were widely available and pervaded a wide spectrum of early modern European society. Tuscany, according to Elizabeth Mellyn, was no exception. Melancholy was the preferred term for madness in the civil and criminal court records of Tuscany towards the seventeenth century, and lay society demonstrated the capacity to argue for its signs and characteristics without the direct help of medical practitioners.

However, compared to its previous success as a flexible and overarching category, melancholy by the eighteenth century makes only a modest appearance in the Tuscan records. From being the most used category to define mental incapacity in the previous centuries, melancholy had now been dissolved into the even more generic dementia as the preferred category of mental incapacity in non-medical narratives. The category is likewise predominantly uncommon in medical testimonies, and when we do find the term, we see it

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810 Suzuki, “Dualism and the Transformation of Psychiatric Language”.
812 Mellyn, Mad Tuscans and Their Families.
accompanied by a second indicator that transfers the major source of the disease from the body to the mind. Melancholy during the eighteenth century appears in medical testimonies as descriptor or qualifier of the concepts *fissazioni* and *delirio*, and it hardly ever appears alone. The same happens in the records of Santa Dorotea, where we find the term only as melancholic delirium or melancholic fixation. That the delirium or the fixation was melancholic indicated, on the one hand, the proximity between melancholy and frenzy, and on the other, that suicidal thoughts were involved. The presence of an altered fantasy, a fixation or a delirium served to differentiate the melancholy conceived as an emotional disposition from the melancholy entailing serious mental derangement, which could easily turn into frenzy or which could lead its victim to making an attempt against his or her own life.\(^\text{813}\)

We need to consider that these observations are conditioned by the sources under study here, which give a partial vision that by no means can be taken as the medical approach to and understanding of mental afflictions. Melancholy, in fact, had always been at the intersection between sanity and insanity, for it did not necessarily imply loss of cognition or the complete compromising of one’s mental faculties. Thus, with the normalization of interdiction procedures over the centuries, melancholy by itself ceased to be a category accountable for interdiction, even less for criminal insanity, for the compromising of the mental faculties was arguable. Taking into account the standardization of judicial procedures in terms of how mental incapacity and criminal insanity were supposed to be argued, the relative decline in the use of melancholy assumes a more complicated form. In fact it can be interpreted as the result of the requirements of judicial practice rather than as a reflection of its actual disuse as a diagnostic category to frame and explain mental disturbance at a social level. Nonetheless, even if it responds to changes in judicial practice, the fact is that while Mellyn identifies melancholy as the preferred category to frame the mental incapacity of a relative during the sixteenth and seventeenth centuries, by the eighteenth it no longer prevailed.

\(^{813}\) See for instance the *delirio malinconico* suffered by Girolamo Gozzini. ASF, CR, Santa Dorotea, F. 426, Ins. 7, March 1759 or the admissions of Lorenzo Colleschi, “aggravato da delirio malinconico, e da una fiera mania” in ASF, SD, *Motupropri, Recritti…*, F. 1, no. 45, January 1754 and Giovanni Belmonte, admitted because he suffered “quel genere di demenza, che i medici chiamano Delirio Malanconico, negli accessi più forti del quale, egli frequentemente diventa furioso quasi quanto i Maniaci,” in BNCF, Manoscritti, GTT, N. 235, vol. III, “Relazioni in casi di demenza”, fol. 208. However, cases of suicidal or murderous behaviour were generally framed simply as *pazza furiosa* by the authorities in the admission procedures to Santa Dorotea. On the medical use of *delirio, fissazioni, fantasia alterata* as symptoms of eighteenth-century Tuscan madness see Roscioni, *Il governo della follia*, pp. 171-276.
Throughout Europe, the “making of psychiatry” during the eighteenth century entailed the introduction of “mentalist” or psychologized explanations for mental disturbances. To conceptualize a diseased mind, medical knowledge created a new language that could express a new form of addressing the dualism between mind and body.\textsuperscript{814} Let’s take, again, the conceptualization of melancholy, which exemplifies particularly well the reluctance of early modern medicine to enter into matters of the mind/soul. During its moment of glory, melancholy was like a chameleon that could assume manifold forms, but whose predominant characteristics were delusions, fearfulness and sadness.\textsuperscript{815} However, even if it supposed the presence of a corrupted imagination and altered intellectual faculties, it was configured pre-eminent as an organic disease, understood to be the effect of humoral imbalance caused by the excess of black bile. Furthermore, the hydraulic model of humoral theory allowed for the rational will to remain intact, for “the whole process of the representation of false image and the subsequent involuntary motion did not involve any damage to the soul/mind.”\textsuperscript{816} Only when rational will was involved in the conceptualization of madness, could the traditional body-mind relationship be inverted.

Mental fixations (fissazioni) or alterations of fantasy (alterazione di fantasia) had been part of the previous conceptions of melancholy, but by the eighteenth century they served to highlight the role of ideas and emotions as triggers of mental disturbance. While the delirium that characterized melancholy in the previous centuries was marked by its physiological basis and ruled by humoral imbalance, the melancholic delirium of eighteenth century was based in the mind and increasingly responded solely to it. Delirium, which progressively came to be equated to madness, was understood as being originated on the mind, and not dependant on the exterior, nor on physical perception. Originated in the mind and responding solely to it, insanity by the end of the eighteenth century came to be conceived as an alteration of judgement recognized in delusions, false imaginations, fixations or a distorted perception of reality.\textsuperscript{817}

\textsuperscript{814} Porter, \textit{Mind-Forg’d Manacles}, pp. 169-228 and Suzuki, “Dualism and the Transformation of Psychiatric Language”. This new language was largely fed by the contemporary philosophy of the mind.


\textsuperscript{817} On delirium and delusion, see Berrios, \textit{The History of Mental Symptoms}, pp. 85-104; Andrews and Scull, \textit{Customers and Patrons}, p. 60-66; Dini, \textit{Il medico e la follia}. 
Although the relationship between body and mind continued to be an unresolved
dilemma, and the causality of mental afflictions was still a highly controversial matter, during
the eighteenth century new approaches tended to favour explanations that increasingly
pointed towards the predominance of the mind over the body. This process progressively
shifted medical attention from the standardized patterns of physical reaction predicted by
humoral theory towards the patients’ biographies, their individuality and their emotional
disruptions.818

Passions were not a new factor in the aetiology of madness. As the last of the six non-
natural factors that could affect a person’s health – together with air, bodily excretions, diet,
sleep and exercise – passions of the soul could alter the humoral balance and produce serious
maladies and even death. As will be discussed in the next chapter, by the eighteenth century,
with the introduction of the theory of the nerves, angustie d’animo or mind perturbations were
held to have the power to “mutate and correct the structure of the brain and of the nerves.”819
Causalities such as strong emotional experiences or life changing events were discussed as
triggers of mental affliction producing aetiologies that increasingly positioned emotions and
the brain as the predominant sources of mental disease. The intricate debate over the
connections between mind and body that took place during the eighteenth century would
ultimately lead to emotional disturbances being conceived as originating in the brain.820

The change observed in the Tuscan medical testimonies towards the mid-eighteenth
century, thus, needs to be interpreted in a larger framework, even if the depths of their
preoccupation appear circumscribed to the requisites of the legal procedures. What seems
particularly remarkable is the introduction of specific terms to depict altered mental or
emotional states in medical testimonies that had predominantly been built around economic
performance and deviance from behavioural norms. Despite their being accompanied by the
indispensable demente, melenso and mentecatto, the terms fissazioni di mente, turbazioni di
mente/fantasia or alterazioni di mente/fantasia were introduced to describe the individual’s

818 However, we should be cautious regarding the extent to which humoral medical theories standardized the
physiological reactions to each emotion. According to Elena Carrera, we should not draw a direct line between
temperament and passion, so as to thus acknowledge the varied and personal ways in which different people
responded to different emotions. See Carrera, “Anger and the Mind-Body Connection”, in Carrera, Emotions
and Health.

819 Pasta, Dei mali senza materia, p. 18.

820 As Fay Alberti has warned us, this process was “neither linear nor straightforward”. Fay Bound Alberti,
“Emotions in the Early Modern Medical Tradition”, in Fay Bound Alberti (ed.) Medicine, Emotion and Disease,
1700-1950 (Basingstoke: Palgrave, 2006), p. 2. The role of emotions in the conceptualization of madness is
examined further in Chapter 7.
state of mind as proof of mental incapacity. This change is closely connected to the identification of emotional anguish or emotional perturbations (*angustie d’animo* or *turbazione d’animo*) as triggers of mental derangement.

Medical practitioners generally did not disclose the contents of their patients’ mental fixations or the images produced by their altered fantasies. Most times we are left only with the declaration that the person was subjected to a “melancholic delirium that seriously affected his fantasy”, or that he had “fallen into some mind fixations.” But sometimes they slip in certain comments regarding the object of the delusional symptoms and mind fixations of their patients. One was prone “to conceive false ideas of a suspicion of being poisoned”, another suffered “false persecutory ideas” and yet another was “subject to many extravagancies of fantasy, expressed with impious and obscene words.” Delusion (*fissazione*) led one to believe that he owned a house he in fact had rented for many years, and in another case it made him believe that he was a nobleman who had been promised in marriage to the Princess of Wales. “Alterations of mind” could also be present in the form of an “amorous passion” in which the “delirious intellect” of the patient would be “fixed in the object of her madness.” Delusions and hallucinations were not new to the medical understanding of madness, but historians have identified a shift towards the secularization of the imagination in the increasing importance attributed to delusions as a symptom of serious cases of derangement. From earlier conceptions of fantasy that saw it as potential object of demonic possession, medical understanding opened up to conceive of the altered fantasy as the effect of the imagination fixated in a wrong or “unreal” idea, which could assume the

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821 Respectively, Girolamo Gozzini in ASF, CR, F. 426, no. 7, March 1759 and Giuseppe Casini in ASF, MPAP, Memoriali, F. 2303, no. 245, February 1755.

822 “...ha concepite delle false idee di sospetto di veleno...”, “...false idee di persecuzioni...” and “...è stato soggetto a molte stravaganze di fantasia, espresse con parole impie, ed oscen...” Respectively, ASF, SD, Motupropri, Rescritti..., F. 3, no. 41, December 1758 and no. 39, October 1758, and Ibid., F. 8, no. 72, January 1771.

823 Respectively, ASF, SD, Motupropri, Rescritti..., F. 8, no. 90, April 1771 and ASF, CR, Fiscale, F. 756, no. 7, July 1760.

824 “...per riconoscere con sicurezza in che stato oggi giorno si trovi l’alterazione della sua mente, sono in obbligo d’attestare per la verità quell’istesso appunto, che altre volte mi son dato l’onore di rappresentare, e che è orami nato alla più infima plebe, cioè che la medesima persiste tuttavia ciecamente, nell’antica sua fortissima passione amorosa, e tal segno, che non è capace su quest’articolo di dar luogo a persuasiva, o minaccia veruna, comparendo al delirante suo intelletto giustissime le più mal consigliate, ed inique pretensioni, opposte alle leggi umane, e divine, fissata torno a ripetere, nell’oggetto della sua follia, non comprendendo, che è stato l’origine della presente sua irreparabile [sic] rovina, ed abiezione”, Testimony of Gio Francesco Viligiardi regarding Antonia Perini. ASF, MPAP, Memoriali, F. 2309, no. 114, July 1773. Antonia Perini was confined and interdicted on account of her “*furore erotico*” and “*pazzione amorosa*”. Her case has been examined by Lisa Roscioni, *Il governo della follia*, pp. 3-18. See also Chapter 4.

form of ungrounded fears, “erotic furore”, or even the creation of a whole false, imaginary world. Furthermore, it was increasingly approached as brain damage, with expressions such as “altered mind” and “delirious intellect”, progressively understood as the epitome of madness.

Two final medical categories deserve further examination here, both because of their rare appearance. The eighteenth century has been singled out as the century that witnessed the shift from medical explanations of mental afflictions based on the humoral theory to explanations resorting to the framework provided by the new theories of the nervous system. Nonetheless, “nervous affections” and their paramount diseases, the male hypochondria and the female hysteria, are striking for their absence in the Tuscan court records. For instance, when we take into account the range of diseases covered by any volume of medical consultations published in the eighteenth century, it appears clear that mental afflictions are predominantly represented by hysterical and hypochondriac affections. Second in the list of the most recurrent mental afflictions in medical consultations are epileptic or apoplectic fits. Other types of mental disorders, such as melancholic delirium or some unspecified “mental perturbations” appear in a clear minority compared to the other three.826

Nervous diseases assumed a new fashionable tone in European elite societies and, judging from the Italian medical consultations, Italy seems to have been no exception. However, as Jonathan Andrews has warned us, the configuration of nervous complaints was a matter of contention among the medical profession during the eighteenth century, particularly regarding the boundaries between sanity and insanity, and whether nervous diseases could be considered as sufficient cause, for instance, to determine the necessity of someone’s confinement.827 Against this context, it is not particularly strange that nervous complaints were not used to argue mental incapacity or an insanity defence. Nervous complaints were too exclusive and undetermined categories to be raised before a court of law. In fact, when they do appear, they are camouflaged, framed as “hypochondriac dementia”, as if to dismiss any


827 Jonathan Andrews, “‘In Her Vapours... [or] Indeed in Her Madness’? Mrs Clerke’s Case: An Early Eighteenth-Century Psychiatric Controversy”, *History of Psychiatry* 1, no. 1 (1990), pp. 125-143.
doubts regarding their reality and damaging mental effects, or argued in later proceedings to highlight physical impairment.\textsuperscript{828}

\textbf{Circulation of Medical Languages}

The representation of the mental sufferings of Antonio Corsini, interdicted and committed at least twice to Santa Dorotea, is particularly salient when examining the flexibility of these medical categories, and the evolution they underwent during the second half of the eighteenth century.\textsuperscript{829} In December 1756 Giuseppe Nardi, a distant cousin of Antonio Corsini, made two parallel requests to the Grand Duke, one to interdict and the other one to confine Antonio Corsini in Santa Dorotea. The vocabulary used in both petitions was remarkably plain: one spoke of Corsini’s dementia, the other of his \textit{pazzia}.\textsuperscript{830} Nonetheless, the supporting testimonies and further enquiries undertaken to respond to the interdiction petition reveal the use of a broader range of categories. Although he was admitted to Santa Dorotea in early December, his interdiction was only decreed at the beginning of April 1757. As the Pupilli officials reported, Corsini’s “unhealthy state of mind” (\textit{poco sano stato di mente}) was not doubted by the authorities, but its consequences, and who was to be entrusted with the administration of his patrimony generated months of discussion. The Pupilli advocated that they have jurisdiction for overseeing the guardianship (instead of the Magistrato Supremo, as the petitioner requested), and at the same time they strongly opposed the appointment of Nardi as administrator.

Three physicians were involved in Corsini’s interdiction, which was decreed in April 1757: a local physician from Prato; Antonio Lulli from Santa Dorotea in Florence; and Giovanni Targioni Tozzetti in his role as \textit{medico fiscale} and consultant physician of the mental hospital. The first diagnosis that we know of was made by the physician of Prato, who

\textsuperscript{828} See, respectively, the interdiction of Francesco Galantini in ASF, MPAP, \textit{Memoriali}, F. 2303, no. 67, December 1752 and the case of Lorenzo Buonaccorsi Perini who, notwithstanding his interdiction, was facing the prospect of incarceration for his unpaid debts. To save him from prison his sons petitioned by claiming a serious of physical indispositions that were framed under the overarching category of “nervous complaints” by the doctor Giovanni Francesco Viligiardi. ASF, MPAP, \textit{Memoriali}, F. 2306, no. 140, December 1764.

\textsuperscript{829} As a result of their different nature, the records of his committal are far more mundane than the records of the interdiction procedure, which contain exceptionally vivid accounts of Corsini’s mental affliction. See, ASF, MPAP, \textit{Memoriali}, F. 2304, n. 87, December 1756-April 1757 and no. 223, January 1759, compared to ASF, SD, \textit{Motupropri, Rescritti...}, F. 2, no. 40, December 1756 and Ibid, F. 3, no. 11, April 1758 and no. 44 February 1759.

\textsuperscript{830} See, respectively, ASF, MPAP, \textit{Memoriali}, F. 2304, no. 87, December 1756 and ASF, SD, \textit{Motupropri, Rescritti...}, F. 2, no. 40, December 1756.
reported in November 1756 that for six months he had seen Corsini affected by “a melancholic delirium without fever” accompanied “by a grave fear and a profound sadness caused by mournful [funesti] thoughts and the imaginary dangers that his altered fantasy represents in his mind, which with obstinate fixation, become his spirit’s continual occupation.” With the intention of proving the necessity of his interdiction to the government authorities, the physician recounted that Corsini had strongly refused any kind of treatment or care and rejected medical advice. Contravening direct medical indications, Corsini refused to practice the physical activities that were usually recommended for the improvement of mental and physical health, such as riding or maintaining an active social life. On the contrary, he preferred solitude, had slept dressed for weeks, and had even refused to eat to the extent that it had been necessary “to make him eat by force, so that he would not perish.”

Still attuned to the humoral principle of the six non-naturals, the local physician spoke of Corsini’s altered state of mind as manifested through bodily signs that were presented as proof of mental derangement. However, his testimony was not concerned with physical humoral imbalance, but with Corsini’s behaviour and distorted imagination as the ultimate way of accessing the patient’s state of mind. He defied the expected codes of behaviour by living deprived of amusements, by refusing to take care of his health, and by being indifferent to his domestic affairs. But the testimony identified the definitive key to the patient’s mental state in his delusions and “altered fantasy”, which subjected him to suicidal thoughts and imaginary fears.

From Santa Dorotea, Antonio Lulli declared that Antonio Corsini was subject to a “considerable corruption [depravazione] of the mind,” on account of which he was indeed admitted to the hospital when Nardi had made the request. However, Corsini’s madness was intersected with lucid intervals, so that after only a couple of months at Santa Dorotea Lulli wrote a report claiming that “although he has suffered in the past from mental alienations and disturbances of his fantasy originated by angustie d’animo, for some time now

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831 “...l’ho sempre riconosciuto, e giudicato ammalato di delirio melanconico senza febbre congiunto ora più ora meno ad un grave timore, et ad una profonda tristezza cagionatale da funestì pensieri, e dagli imaginari pericoli, che le rappresenta alla mente la fantastia alterata, e di quali con ostitata fissazione fa la sua continua occupazione il suo spirito.” Testimony of the physician Giovanni Torello Leoni, ASF, MPAP, Memoriali, F. 2304, no. 87, November 1756.

832 Idem. According to the principles of the six non-naturals, attention to physical and social activities, diet and sleep were considered paramount elements to preserve health or counteract disease.

833 ASF, MPAP, Memoriali, F. 2304, no. 87, December 1756.
he has nevertheless become greatly recovered, and enjoys continuous lucid intervals for most of the day”, on account of which a promising recovery could be expected.\footnote{“...benche abbia per il passato sofferto delle alienazioni di mente, e turbazioni di sua fantasia originate da angustie d’animo, tuttavolta da qualche tempo in qua, è rimasto molto migliorato, e gode per la maggiore parte dei giorni di continuati luci d’intervalli, nei quali da segno di buona regressione, di modo che più sperarsi il di lui totale ristabilimento”. Testimony signed by Antonio Lulli and Antonio Sani, respectively physician and surgeon of Santa Dorotea, ASF, MPAP, Memoriali, F. 2304, no. 87, March 1757.}

The prospect of lucid intervals posed a delicate problem for the legal management of insanity, as their episodic nature put any standardized response into question. However, this issue was more relevant for determining the level of liability of the criminally insane than in assessing mental incapacity. Compared to the difficulty of determining if the person had been having a lucid interval when a crime had been committed, given that interdiction was a temporary measure, the likelihood of lucid intervals only entailed that the person could more easily be released from curatorship. Antonio Corsini himself utilized the reference to his lucid intervals to ground his plea for protection against his ill-intentioned relatives. Writing while still confined in Santa Dorotea, the employment of the notion of lucid intervals allowed him to argue that he was lucid enough so as to have a say in the choosing of a suitable administrator. But, at the same time, he sought to blame his mental affliction on the iniquities of his relatives, for which it served him better to highlight the depth of his affliction rather than its episodic nature. And so, instead of denying his mental incapacity, he declared that he suffered from mental disturbances (turbazione di mente) but these were interrupted by lucid intervals, which placed him, all the same, in need of an “expert and honest administrator” who could protect his patrimony and defend him against his relatives.\footnote{ASF, MPAP, Memoriali, F. 2304, no. 87, March 1757. In fact, following Corsini’s request, the administration of his patrimony was entrusted to a third party.}

To illustrate the depth of his fear of his relatives, he dwelt upon the particularities of his mental disorder, disclosing how he conceived and made sense of it, in which his biography and his family played a major part. His petition can thus be taken as a re-elaboration of the medical diagnosis to support his claim against his relatives. Giuseppe Nardi was the son of Corsini’s former tutor, a man whom he did not trust and probably feared. Having become an orphan while underage, Antonio’s guardianship had been entrusted to Domenico Nardi following his father’s testamentary dispositions. Married to his paternal aunt, the Nardis were the only family left to Antonio and, as such, they had intervened in his
economic affairs even after he had come of age. Although it seems that Antonio lived alone in Florence for a while, by the time Giuseppe Nardi made both requests Antonio resided with them in Prato, where he had been affected by the delirio melanconico, as the local physician framed it. However, Antonio Corsini, whose primary interest was to keep the Nardis as far away from his affairs and his patrimony as possible, chose the labels employed by the Santa Dorotea physicians to explain his mental sufferings, but ascribed them new meaning. Building upon his biography, Corsini enumerated to the authorities the series of situations that had led to the animo angustiato that ultimately produced the “fixation, and perturbations of mind and fantasy” (fissazione, e turbazione di mente, e fantasia) that had affected him. Corsini decided to frame his “mental perturbation” as being triggered by the anguish his adverse familial situation generated on him. As he saw it, he had not only been left in the authority of a greedy and dishonest uncle while underage, but the man had extended his authority after he had come of age, first withholding from him his patrimony and refusing to give accounts of his administration, to afterwards persuading him to engage in dubious contracts, which caused Corsini to incur considerable debts that he did not know how to settle.

Antonio Corsini framed his mental illness as caused by the angustie d’animo that these concrete adverse circumstances produced in him, as did many other interdicted persons and prisoners. It is not rare to find eighteenth-century defendants and patients signalling wrong or inexpert economic performance and potential bankruptcy as sources of anguish leading to mental derangement. Together with on-going family conflicts, marriage disputes and love affairs, these causes were frequently cited not only by the Tuscan sufferers, but also, for instance, by the patients recorded in the casebook of the British mad-doctor John Monro (1715-1791). Furthermore, family, social life and economic setbacks were also identified as

836 According to Antonio Corsini’s recounting, Domenico Nardi was his testamentary tutor for four years, in which position he continued unofficially for a further nine years. He was, then, at least 27 years old when interdicted and confined to Santa Dorotea.


838 On the uses of the term angustia or angustiato, see Chapter 7 section 3.

839 Andrews and Scull, Customers and Patrons.
sources of stress and anxiety in the previous centuries, as evidenced by Napier’s casebook.\textsuperscript{840} The novelty here, then, is not so much the connection between these sources of anxiety and madness, but the vocabulary employed and the legal context of its appearance. Antonio Corsini was able to intersect his personal agenda and experience with the possibilities of interdiction procedures and the contemporary medical terminology, for he did not stop at the anguish he felt by these events, but he presented them only as the antecedents of his subsequent “fixation” and “disturbance of mind and fantasy.” Furthermore, he was able to employ these medical categories on his own behalf, for the evidence suggests that he actually managed to keep the Nardis at a desired distance from himself and his patrimony.

As in many other interdiction procedures, the narratives of Corsini’s mental affliction acquired more precise tones as the family conflict behind the interdiction petition was unravelled, evolving from the unspecific \textit{demente} and \textit{pazzo} to the more defined \textit{delirio melanconico}, \textit{turbazione di fantasia} and \textit{ostinata fissaione}. This case demonstrates particularly well that the introduction of a more precise terminology of mental disturbance responded to a complex series of events that not always were strictly connected to the actual mental condition they were supposed to describe, or to its evolution, but much more to the agency of the involved parties. Categories were not only flexible, but their use was also carefully studied. Antonio Corsini understood that he could build a better case if he presented himself as the victim of the abusive schemes of his relatives, which had even caused him to fall into the “fixations, and perturbations of mind and fantasy” that led him into the hospital. In contrast, his uncle, who had been acquainted with the different doctors who had assessed Corsini’s state of mind when he made the interdiction petition, decided not to include any of the precise medical categories that they used to describe his sufferings.

The incorporation of precise medical categories seems to have been strongly bound to the frequency by which those employing them had been exposed to medical notions, which went hand in hand with the perceived seriousness of the mental condition under examination. However, the incorporation of medical terminology was not only determined by the involvement or not of medical practitioners in order to treat or to legally assert a given mental disturbance. In many cases, lay narratives demonstrate an appropriation of traditional medical understandings of the workings of the mind and the signs of insanity where we have no record of direct medical involvement.

\textsuperscript{840} MacDonald, \textit{Mystical Bedlam}. 329
The characteristics of the narratives when there is no direct involvement of medical opinion suggest that litigants and authorities had a background of their own to turn to when they wanted to define and characterize mental disturbance. This background was built upon centuries of litigation that required the exercise of reflecting what constituted mental incapacity, how mental disturbance could be identified and which were its most defining indicators. This knowledge transmitted across generations was also influenced by the increasing circulation of books of medical advice destined for a lay public. Additionally, the context and biography of the sufferer strongly conditioned the articulation of a mental condition and the words chosen to describe it. For once, recurrent private resort to medical practitioners to treat mental ailments was a luxury which only the privileged could afford. But, the characteristics of the family group or the household composition, among other circumstances, also played their part. The narratives of madness coming out of judicial records are in this way a re-elaboration of the personal and family biography using the setting provided by public provision, legal framework and medical knowledge.

Categories were actively chosen to secure determinate outcomes, in close accordance with the context and circumstances that surrounded the denounced deviant behaviour. The actual problem of assessing the level of permeation of medical notions regarding madness in lay society lies precisely in the contextual nature of the languages of madness, their malleability and the ability demonstrated by petitioners to adapt their language according to the required circumstances. However, this by contrast reveals the agency of petitioners, and underpins their capacity to move the strings of the institutional apparatus to achieve their aims. When petitioners needed to make a strong argument regarding the nature of mental afflictions, they almost invariably demonstrated their ability to delve into its foundations. The evidence provided by criminal records but, particularly, also by civil law inquiries into mental capacity and other forms of disclosing mental deviance allows me to suggest that the language of madness was culturally embedded and consisted in a combination of lay understandings, legal requirements and medical knowledge.


842 It may be important to bear in mind here that interdiction petitions cannot be reduced to being interpreted simply as a decision stemming exclusively from abusive or greedy relatives. This was discussed in Chapter 3.
Medical practitioners introduced their categories in accordance with the purposes of each legal procedure. Their language, instead of acting as fair mirror of the actual mental condition they were supposed to describe, responded to the contextual nature that characterized the disclosure of madness, as we have seen. Not because the choice was utterly arbitrary or the mental condition had been invented by the witness in complete disconnection from the behaviour they were supposed to be labelling. Rather, as in the case of lay testimonies, medical practitioners decided how much they would reveal and in what way, precisely in accordance with the purposes and aims they were supposed to serve. Whether to support a petition for interdiction, to support a defendant’s contention of sanity, or a criminal’s claim of insanity, the vocabulary with which testimonies were composed was the outcome of careful considerations.

In July 1752 the wife and brother of Domenico Cugi requested his interdiction, claiming that for a long time he had been “bereft of cognition, and as a demented [person], he is unable to attend to his own interests.” In support of Cugi’s relatives, we find a testimony signed by the medico condotto and the local priest, which repeated the same formula and was as equally unspecific, save for the physician’s signature. Building the veracity of his testimony upon his long-term knowledge of the patient’s medical history, the doctor added to his name the specification that he was the “physician of the city of Prato and attending physician of the household of the Signori Cugi.” The petition was thus crafted by recourse to the usual terms and was found to be enough to prove Cugi’s “defect of unsound mind” (difetto di sana mente), and that he had become “stupido e melenso.”

Strikingly, only six months after the interdiction was decreed, the original supplicants turned again to the authorities, but this time to request that Cugi’s interdiction be revoked. The petition was supported by a testimony of the same physician, but this time he attested for Cugi’s sanity of mind employing a completely different set of categories. The state of “being completely bereft of cognition”, on account of which the doctor declared Cugi could not “distinguish what he does or says”, was now revealed to had been caused by a “continual fixation.” While the first testimony had been framed following the formula that placed the

843 “…da molto tempo in qua e privo di cognizione, e come demente, è senza potere accudire ai propri interessi…” ASF, MPAP, Memoriali, F. 2303, no. 50, July 1752
844 Ibid., June 1752.
845 Ibid., August 1752.
accent on the person’s long term incapacity as revealed by his daily performance, the second testimony was framed in much more precise medical terms. The physician explained that Cugi “had been for a long time in a state of not being able to attend his own interests due to a continual fixation that had him alienated from reason, [but] it can now be said that he has cleared [sgombrata] his mind from the said fixation.”

Not only was he declared sound of mind by the same medical practitioner who only a few months earlier declared he had been bereft of cognition for eight years, but also that state of severe mental impairment had changed into a mind fixation. That is, from being a characteristic not likely to change (a “defect”, as the Pupilli officers framed it), Cugi’s mental condition was transformed into a phase from which he had been able to emerge. How could such a serious and apparently permanent condition have abated in just months?

As in many other cases, the choice of terms here responds more to the desired outcome they were intended to produce rather than as accurate descriptions of a precise mental condition. The interdiction had been secured by the assertion that he suffered a mental incapacity that was framed as a long-term intellectual impairment, giving the impression it was irreversible. Conversely, for the interdiction to be revoked, the implication that it was irreversible had to be changed so as to suggest instead that it had been a temporary state. To his end, the term fixation was especially suggestive. Notwithstanding the fact that the physician chose the expression of “continual fixation”, references to mental fixations were usually employed to describe episodic madness rather than permanent intellectual impairment. Furthermore, mind fixations gave space to lucid intervals, which were considered grounds enough for the Pupilli to lift, even if temporarily, an interdiction, regardless of whether it meant that it would have to be re-established once the individual fell again into madness.

Given that the case disappears from the records after the interdiction was lifted in March 1753, we can only speculate on what might have happened. Probably what changed in the six months that elapsed since the interdiction was decreed had less to do with Cugi’s mental condition and more to do with the household dynamics, particularly the relationship between the two brothers and the role played by Cugi’s wife. Drawing on the evidence of other cases, we can also assume that the first description had been simplified in order to fit the

846 “...il Sig. Domenico Cugi essendo stato molto tempo in stato di non potere agire i propri interessi per una fissazione continua, che lo teneva alienato dalla ragione, si può dire adesso, che il medesimo abbia sgombrata la mente da quella predetta fissazione e possa trattare liberamente, e con serietà d’ogni suo interesse...” ASF, MPAP, Memoriali, F. 2303, no. 84, December 1752.
conventions. Many interdiction procedures were argued by using simple labels, concentrating the debate on more practical matters, such as the individual’s economic performance, his or her deviation from the behavioural norms and their general resemblance to the stereotypes of mental incapacity. It is only in the cases that were contested by the defendants, or those disclosing complicated family tensions that would not abate once the interdiction was decreed, that we are given further details on how the given mental affliction was perceived, framed and explained.

The change in the configuration of Cugi’s mental affliction reveals the strong agency of litigants behind interdiction procedures, but it also suggests that the categories employed were carefully and collectively chosen. By and large, court records show that medical practitioners had to adapt their language both to the constraints imposed by the judicial system, and to the requirements set out by the litigants. How much a doctor would elaborate regarding the characteristics of a given mental affliction depends not only on the requirements of the institutional space, but also on the specific circumstances surrounding each case. In a feature that applies in general to the specification of the language of madness, the more complex the familial situation, the greater the need for more precise explanations for the disorder.

This partly explains why medical testimonies were generally repetitive and non-medicalized. It also explains the absence of nervous diseases among the categories employed by medical practitioners in their testimonies of mental incapacity, despite the fact that we know they were in vogue at the time. More precise medical terms were often simply not required. However, the lack of specialization in the terms used and, above all, the malleability of the categories employed by medical practitioners also attest to the exploratory nature that characterized medical knowledge of mental afflictions during the early modern period. Furthermore, the definition of mental disorders and the measures taken to deal with them were inserted in wider social developments, such as the negotiation over power relations, behavioural norms and the authority of medical knowledge. 847 Medical practitioners had to

847 The appearance of mad-doctors and the development of expert medical knowledge on madness, together with the definitions of what was to be understood by mental afflictions, how nervous complaints widened the picture, and how actors dealt with them has been explored by Jonathan Andrews starting from the public and medical controversy aroused by a case of unlawful confinement in London at the beginning of the eighteenth century. The case enables him to argue that what was understood as insanity and what to make of the increasingly fashionable nervous afflictions were a matter of contention and even sometimes ambiguous medical response. Andrews, “‘In Her Vapours… [or] Indeed in Her Madness’?”, pp. 125-143. The issue is also explored in Andrews and Scull, Customers and Patrons.
serve the interests of their patients, and at the same time they had to make themselves necessary by pointing out new areas where they held exclusive expertise.

The capacity to adapt to the context and shape testimonies in accordance with the circumstances can be observed even in the writings of eminent physicians such as Giovanni Targioni Tozzetti, whose narratives and lines of argument tend to change according to the audience (and institutional space) to which they were directed. His testimonies in the Otto di Guardia were highly physical, responding to the necessity to demonstrate that, for example, the life of a prisoner was at serious risk if he was not transferred to a better environment. As we have seen, he managed to intercept some observations regarding the world of emotions and the connections between mind and body but, in general, he failed to elaborate on the nature of the mental afflictions he had identified. Furthermore, categories such as delirio melancionico or fissazioni di mente are, to my knowledge, generally absent in Targioni Tozzetti’s testimonies to support supplications for the reduction of penalties. On the contrary, his “Relazioni in casi di demenza”, which comprised his expert opinion for the admission procedure to Santa Dorotea and several assessments on the mental condition of people held in prison (not necessarily convicted felons), are framed in much more precise medical terms, and blend precise information on their mental condition with its physical effects. By the same token, the categories he used to attest mental incapacity before the Magistrato dei Pupilli are also generally different from the ones he employed to frame pazzia furiosa in the admission procedures to Santa Dorotea. While in the case of the former categories point towards the degree to which the cognitive faculties of the person were involved, in the case of the latter categories stressed the person’s level of dangerousness. Similarly, categories that were frequently used by him to frame mental disturbance in his Consulti Medici are virtually absent from his legal assessments. Significantly, affezioni isteriche and affezioni ipocondriache, the two overarching categories of mental affliction that became the new fashionable frameworks

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848 For instance, a prisoner who was held in the “secret prison” of the Otto di Guardia (which only tells us that he had not been convicted, although it does not reveal whether he was about to be tried, or if his imprisonment had been done on an executive measure) was said to demonstrate “fixations [under the form] of distorted ideas” [fissazioni di idee stravolte], and was subsumed in “a total dementia of the category of melancholic delirium”, which made him “want to be always naked like a beast, even in the present cold, surrounded by filth, feeding disorderly and always making improper gestures and discourses, like a mad man.” [una totale demenza, della categoria dei deliri melancolici, nella quale persiste fino al presente giorno, volendo stare sempre nudo come una bestia, anche nei presenti freschi, in mezzo a immondizie, nutrendosi sregolatamente, e sempre facendo gesti e discorsi impropri, e da pazzo] This particular testimony, however, which so evidently meets the traditional image of madness, is not so common in Targioni Tozzetti’s writings. Accompanying this description we find comments regarding the origin of the person’s ailment, which he found to be the exhaustion from a long journey and a great fear, which caused in him a fever that later resulted in the melancholic delirium. BNCF, Manoscritti, GTT, N. 235, fols. 209-210.
of mental disease in the eighteenth century, appear very rarely in the court records of the period, as mentioned before.\textsuperscript{849}

The interesting issue for us here is to elaborate on how the use of certain categories over others is indicative or not of how the people employing them conceived mental disturbance. The over-repetitive use of basic categories of mental incapacity such as \textit{demente, pazzo/a, melensa/o} or \textit{mentecatto/a} by no means implies that mental disturbance was conceived in such basic terms, and only in connection to patrimony. The requirements of the institutional space in which the mental disturbance was disclosed are one thing, and how the mental disturbance was perceived and framed something else. The same argument may be used to understand the problem of the circulation of languages, and the permeation of medical categories. As in the case of Cugi cited above, the use of medical categories often seems circumstantial rather than deliberative, as if the concept had slipped into the testimony almost by error. Furthermore, these more precise medical categories that gradually infiltrated the courts came to name phenomena and realities that were not new, and which had been explained in lay terms for most of the century. Rather than “colonizing” the realm of the mind, medical discourse was ascribing names to realities that had been first brought to the attention of medical professionals by the sufferers and their families.\textsuperscript{850}

\section*{6. 2. Experts of the Soul}

Even though medical opinion was hardly ever openly contradicted, most legal procedures to determine mental incapacity or criminal insanity were argued without the involvement of medical practitioners. In the debate over the boundaries between sane and insane behaviour in order to ascertain civil capacity, medical practitioners, members of the clergy and lay society were experts on equal grounds. However, if we were to assign a hierarchy of experts, the primacy would be tightly contested between the next of kin and members of the clergy. Parish priests in particular held not only an undisputable authority over matters of the soul and, thus, over psychological and mental states, but were also responsible for the morality of their parish. In early modern cultures, morality and madness were the two indissoluble sides of the same realm. Although in the eighteenth century

\textsuperscript{849} BNCF, Manoscritti, GTT, N. 234, “Consultationes medicae”, cart.2, fasc. X, \textit{Consulti per affezioni ipocondriache ed isteriche”}.

\textsuperscript{850} Chapter 7 provides further clues to elucidate this problem through an in-depth examination of the use of lay categories such as extravagance, irregular character and uneasiness.
madness came to be conceived as a disease that was progressively connected to the mind, it was a disease whose primary manifestation was through moral behaviour.

The involvement of religion in matters of the mind and moral behaviour inevitably recalls the disciplining strategies of confessionalization developed after the Protestant and Catholic Reformations. Any examination into the long-lasting role of the Catholic Church as the ultimate authority over moral behaviour should take into account the penetration of the campaigns of the Post-Tridentine Church to discipline spirituality, religious conscience and introspection. The renewal of the divided Church entailed new strategies to normalize behaviour and scrutinize interiority, devising patterns of expected behaviour and spiritual life, which in the Catholic areas was entrusted to the supervision of the clergy. Efforts to enforce compliance with the precepts of confession and communion made priests the direct recipients of the hidden secrets of moral life. As a result, during the sixteenth and seventeenth centuries the concern for the inner world and the powers of fantasy had mostly been a competence of the Church. Theological discussions had carefully mapped the workings of the mind in order to detect any religious transgression, and thus be able to explain and differentiate true from false sanctity, demonic possession from mental disease.

Historians have generally considered the secularization of madness as one of the crucial moments of inflection in the history of madness, generally identified as taking place between the seventeenth and the eighteenth centuries. For instance, Elena Brambilla has examined this development through the transition in the perception of the phenomenon of possession from diabolic invasion to hysteria. She argues that towards the end of the seventeenth century, theological explanations progressively gave space to the medical

854 The study of the relationship between madness and religion in the early modern period has mostly focused on the Protestant territories, centred particularly on the seventeenth-century vogue for melancholy and the religious significance of that mental condition. To my knowledge, less attention has been paid to this issue in Catholic areas, where madness and religion have been examined in the context of the spirituality of the Counter-Reformation, with its excesses, deviances and cases of false sanctity (particularly through inquisitorial processes), but the lay conception of the religious significance of mental disturbance still needs to be explored. For a discussion of this, see Gowland, *The Worlds of Renaissance Melancholy*.
language that framed the phenomenon in terms of a nervous disease.\footnote{See Brambilla, Corpi invasi e viaggi dell’anima. See also Porter, Mind-Forg’d Manacles; MacDonald, Mystical Bedlam or Jonathan Andrews and Andrew Scull, Undertaker of the Mind. John Monro and Mad-Doctoring in Eighteenth-Century England (Berkeley: University of California Press, 2001).} Scholarship has nonetheless warned against overstressing the process of secularization as the only factor explaining the rise of psychiatry. To this we might add that it is one thing to take into account that madness was progressively understood as an organic disease whose aetiology was shifting from humoral imbalance to a malfunctioning in the brain and a disorder in the nerves. But it is something else to interpret this as a sign suggesting that mental deviance had ceased to be the concern of religion. The brain might have been understood as the location of the mind and as the source of madness, but behaviour was still largely measured against the Christian precepts regulating behaviour.

Bearing witness to this, during the eighteenth century petitioners still largely relied on testimonies of the clergy to support denunciations of mental incapacity. These testimonies were generally centred around the defendants’ social performance and their compliance with the Christian precepts. In their testimonies, priests mostly commented on the moral qualities of the person and their observance of Catholic precepts. Madness was revealed through the defendant’s reluctance to attend to Church on a weekly basis, in his or her failure to follow the rules regarding confession and Holy Communion, and even in their refusal to pay the tithe. But, this served more to demonstrate that the person’s general behaviour was at odds with normativity than to suggest that un-Catholic behaviour was madness per se.

In addition to Christian behaviour, priests evaluated the defendant’s social performance in accordance with the established gender roles.\footnote{Chavarria, “Ideologia e comportamenti familiari”, p. 704-705.} Men were assessed in their capacity of heads of family, based on whether they acted as virtuous educators, if they set a moral and rational example to their children, if they demonstrated the capacity to control themselves, and if they complied with family hierarchies and exerted the proper amount of power (i.e. they were not ordered around by their wives). Women’s mental capacity was assessed in terms of how they performed their maternal or wifely duties, the fame of their virtue or the ways in which they raised their children.

So long as the evaluation of insane behaviour was tied to conceptions about morality and Christianity, it was still believed that members of the clergy were the most qualified “external” authorities (after the family) to ascertain a deviation from the norm. This both because they were the authorities over matters of the soul and spiritual life, and because they
acted as witnesses whose credibility was widely considered indisputable. Testimonies signed by members of the clergy were not only invariably considered essential to corroborate interdiction petitions, but were also preferred by the interdicted to demonstrate their soundness of mind. These testimonies, thus, shed light on the extent to which Church efforts to discipline the family and promote certain values were negotiated alongside lay notions and family demands, such as those disclosed by interdiction procedures.

The clergy’s authority on mental incapacity can also be explained by taking into account their prerogatives over family life. Priests acted as guardians of the institution of the family, they were the undisputable mediators in family conflicts, and were the first source of aid to turn to in times of trouble. This role, at the forefront of matrimonial litigation, for instance, but also of “infra-judicial” negotiations to resolve conflicts at community levels, also comes to the fore in the social and familial management of mental deviance. Priests were the first external actor to be called to mediate between a family and a troublesome relative. As petitioners repeatedly stated, they resorted to the interdiction once all other strategies to convince the defendants to change their behaviour had failed, among which they generally recalled how local priests or personal confessors had unsuccessfully tried to exert their influence. In this context, when priests offered proof of evidence to certify incapacity or certify soundness of mind, it was because they were considered the most qualified “external” agents to do so. In comparison with medical opinion, the testimony of priests was validated by their long-term knowledge of the defendant and their family circumstances.

When defendants in an interdiction procedure had to choose their witnesses, they almost invariably turned to members of the clergy to certify their mental capacities and undisputed moral standards. In the legal context posed by interdiction procedures, priests acted through their status as men of good faith capable of providing a truthful testimony on the perturbed state of mind of the defendant. Priests enjoyed such universal approval that petitioners and defendants alike turned to them for support. When matters were contentious and the interdicted had everything to lose if he or she were declared mentally incapacitated, they trusted priests first and foremost. The inclusion of a testimony signed by a member of the clergy did not automatically result in a favourable response, particularly when there were

857 For instance, Chiara La Rocca has demonstrated that priests were at the background of strategies to solve matrimonial crises before a couple would resort to the separatio thori. La Rocca, Tra moglie e marito, p. 315. The role of priests as mediators between social actors and governmental institutions in the administration of justice is at the core of Ottavia Niccoli’s study on the meanings of forgiveness in judicial practice. See Niccoli, Perdonare.
conflicting testimonies. But, in general, the testimony of a priest counted as proof of truth, with the assertion being cast in the tones of a moral authority that was difficult to contradict. This is why someone who had been interdicted for a medically-certified mental incapacity could later succeed in obtaining its revocation based solely on the defendant’s and a clergymen’s assertion of his or her soundness of mind. Furthermore, on such occasions the initial medical testimony was openly contradicted in practice.

Maria Maddalena Panfi, for instance, was interdicted in 1743 on the request of her two sons. The petition claimed that not only was she the victim of certain “corporal indispositions”, but that she had lately “suffered many accidents,” which rendered her in a state of “mental obfuscation and deprived of memory.” Her sons’ contention was supported by a medical testimony which explained Maddalena had suffered an “epileptic accident, which proved to be very serious, and rendered her confused of mind [imbarazzata di testa] the whole day, as happens on most occasions with these accidents.”

In other words, the case was built upon a medical language that identified very precise organic consequences to demonstrate the defendant’s inability to manage her affairs. For even if the medical testimony only referred to her past epileptic fit, according to the supplicants she was still prone to suffering them, which accounted for a condition that was likely to be maintained over time. Based on what was asserted by witnesses at the viva voce on her dissipation, and especially taking into account the fact that the medical testimony demonstrated that she “suffers from epileptic accidents that cause her great heaviness [molta gravezza] and mental obfuscations”, the officials of the Pupilli considered Maddalena Panfi liable for interdiction.

Two years later Maddalena petitioned for her interdiction to be lifted alleging it was completely false that she was, or had ever been, of unsound mind. To prove her claim, she presented the testimony of various priests attesting she had always been of sound body and

858 “…quale per le sue indisposizioni corporali, et in specie per avere il di 28 Agosto 1743 prossimo passato sofferto più accidenti, si ritrova con qualche offuscazione di mente, e priva di memoria.” ASF, MPAP, Memoriali, F. 2301, no. 201, September 1743.
859 Idem.
861 “…lo che essendo onestamente falso, mentre ritrovasi l'oratrice per la Dio grazia sanissima di corpo e di mente, come chiaramente si può conoscere, non solo dalle fedi giù annesse, fra quali ve n'è una d'un proprio suo figlio, ma da cent'altre ancora se si desiderassero...”. ASF, MPAP, Memoriali, F. 2301, no. 164(2°), May 1745.
mind, which was considered enough to prove her claim and thus achieve her request. The interesting issue, in my view, lies in the fact that Maddalena Panfi’s argument for revocation was not that she had been cured from her previous ailment, but instead that she had never suffered from a disease that affected her mind. Furthermore, she chose to support her claim with the clergymen’s testimony, without recourse to medical opinion. The evidence provided by the clergymen regarding her soundness of mind was proof enough for the Pupilli to revoke the interdiction, as if there had never been a medical testimony involved in the initial assessment. The Pupilli’s decision here demonstrates once more that the criteria that predominated in these matters was always a practical one. If the clergymen could confirm that Maddalena was of right mind, and provided the patrimony was of modest proportions and she herself demonstrated the necessary will to resume her administration, they were likely to concede the petition.862

Although testimonies written by clergymen sometimes repeated the categories employed by petitioners or by other witnesses, they often made no reference to the defendant’s mental state. Clergymen assessed mental capacity with a different measure. A defendant who according to the medical testimony suffered from a melancholic delirium with epileptic fits, could be defined simply as a mentecatto who “is not capable of managing his own affairs, being indisposed in bed, and is neither capable of receiving the Holy Sacraments."863 Not only was the medical category completely unrelated to the cleric’s testimony, but the model against which the person’s mental incapacity was measured also differed. His state of mind, from the point of view of the priest, was so altered that he could no longer receive the Holy Communion, grounds enough to attest that he was indeed mentally incapacitated. How and based on what indicators the priest considered this person incapable of receiving Communion was not explained on this occasion. But, in other testimonies priests were more loquacious on the signs that led them to concluding that somebody was out of his or her mind.

862 The contention that the patrimony affected by the interdiction was not sufficient so as to be able to pay for long the fees of the interdiction and the involvement of the Pupilli was a common argument made by the interdicted when they petitioned to regain their civil rights. The Pupilli’s response varied according to the particularities of each case, but it was generally agreed that what mattered most was the conservation of the economic resources, so if the interdiction proved to be more detrimental than the allegedly poor administration of the interdicted, then the latter was considered the lesser evil.
863 “…è mentecatto, e non è capace di accudire a suoi interessi, ritrovandosi in letto indisposto siccome non è capace di ricevere i SS. Sacramenti…” ASF, MS, Atti, F. 1914, December 1730, fol.1000.
The usual line of argumentation in these cases is illustrated by the following example. In 1768, a priest testified on the extent to which a 65-year-old man, widely reputed as *pazzo*, prodigal, disturbed, violent and extravagant, deserved interdiction. The priest confirmed “he has always been a man whose behaviour is not only of little advantage for his house and family, but also of an unchristian character.” He continued by recounting that the man had ruined his family with his dissipation, litigations and robberies, which had led to his imprisonment on many occasions. But his “mad behaviour” had also caused him to be committed twice to the madhouse, at a time when the witness had been in charge of the parish. He concluded by declaring “he lives very badly, having no devotion for God, and during this present year of 1768 to this day he has not fulfilled his Easter precept”, or paid the fifth. Consequently, “it is clear [he said], that such a man is not good neither in his soul nor in his body.”

6.3. The Expertise of the Auditore Fiscale

During the eighteenth century, the mechanisms available to control the consequences of madness were essentially temporary, as we have seen. Thus, in the context of inherent changeability that characterized the itineraries of madness, public institutions such as the office of the Auditore Fiscale and the Magistrato dei Pupilli provided a sense of stability. There was a difference, however, in the way these two institutions exercised their steady involvement. While it is true that the officials of the Pupilli practised a close surveillance of the lives and interests of the mentally afflicted throughout extended periods, the task was generally undertaken by the Magistracy as a whole, without it being assigned to a particular magistrate. In contrast, the Auditori Fiscali engaged personally with the mentally afflicted and their families. Furthermore, given that the office was not subject to the continual changes experienced by the Tuscan magistracies, the Auditore Fiscale offered a permanency that the rest of the provisional measures lacked. During the period under scrutiny here, only three men held the office. Filippo Luci was Auditore Fiscale between 1737 and 1746, followed by

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864 “...è stato sempre un’ uomo per i suoi portamenti non solo di ni un vantaggio pella sua casa e famiglia, ma ancora di carattere poco cristiano. Questi ha gia rovinata la sua casa, e sempre attendendo a liti, a scipare, e contradizioni ha sciupate gran somme di danaro, e stato più volte in prigione, e per la sua paza condotta è stato fino a tempo di mio curato due volte nello Spedale dei mentecatti. Vive molto male, non avendo devozione, e timor di Dio, e in questo presente anno 1768 non ha ne pure fino al giorno presente soddisfatto al precetto pasquale, e nella passata raccolta non ha ne pure pagata la dovuta decima alla Chiesa. Onde ben vedesi, che un tal’uomo non è buon ne per l’Anima, ne per il corpo.” Interdiction procedure of Cosimo Cambellotti. ASF, MPAP, *Memoriali*, F. 2307, N. 147, June 1768. For the rest of the labels employed in the procedure, see below.
Giovanni Brichieri Colombi until 1753 and then by the latter’s son, Domenico, who held the office until 1784, when the office of the Auditore Fiscale was abolished.

The records suggest that the Auditori Fiscali developed a practical knowledge of madness through their repeated interventions to control its public consequences. They were in continual contact with families, physicians and other government officials to decide the destiny of the mentally afflicted. Furthermore, their role as mediators between family concerns, defence of the principles of the *buon governo* (the eighteenth-century principle behind police practice), and medical conceptions of insanity positioned them as a privileged point of convergence for the negotiation of the understandings of madness. The characteristics of the office and the detailed records kept by the Tuscan administrations allowed for a transmission of this practical knowledge from one Auditore Fiscale to the other, and across the governmental administration. This is particularly clear through the cases of markedly troublesome individuals whose cases were dealt with by two or three different Auditori Fiscali, most notably, Lorenzo Baldinotti, whose case was handled by the three Auditori Fiscali of the period under study (Filippo Luci, Giovanni and Domenico Brichieri Colombi). Between 1725 and 1755 Lorenzo Baldinotti had been alternatively imprisoned and under home arrest in Florence and in one of the properties the family possessed in the Tuscan territory. He had been committed to both Santa Maria Nuova and Santa Dorotea for short periods and had resided, with a struggle, in his brother’s parish and several public and private places.865

The role of the Auditore Fiscale as the authority that evaluated and authorized committal in the name of the Grand Duke is further elucidated when we bear in mind that his involvement with madness went further and beyond that. In fact, many of the people committed to Santa Dorotea were old acquaintances of the office. Furthermore, given that mad people were generally only accepted for short periods at a time, when they were released from the hospital, the Auditore Fiscale continued to exercise his authority over them on the request of family members or by direct command of the Council of Regency.

The criterion of the *pazzo furioso*, which differentiated those in need of being committed from those whose custody was a family responsibility, was certainly not enough to solve the problem madness posed for both private and public life. Even if the patient ceased to present signs of mania at Santa Dorotea, this was no guarantee that his or her problematic

865 See Chapter 3.
behaviour would come to an end. Recurrent episodes of raving madness followed by periods that according to the medical gaze entailed no danger to public life often contradicted the specific situations that accompanied madness. The criteria applied to deal with such cases were not univocal but, when public safety was concerned, the Auditore Fiscale held the final word. For instance, Lorenzo Maestrini had been released in 1735 from Santa Dorotea during a lucid interval, against the opinion of the Magistrato dei Pupilli. The Pupilli’s authority concerned only Maestrini’s guardianship and the administration of his patrimony, while his care, because it concerned public order, fell under the jurisdiction of the Fiscale.

Cases of episodic madness such as the kind that affected Lorenzo Maestrini and Lorenzo Baldinotti, both discussed in previous chapters, were usually triggers for the involvement of the Auditore Fiscale. The perpetual need to make space for new patients forced the medical administration of Santa Dorotea to release from their custody any “maniac” who gave proof of a “notable recovery.” This happened with Giorgio Jacquet, a French citizen who was released from Santa Dorotea in 1757 because he ceased to give “manifest signs of madness” once he had been committed. In the eyes of the hospital authorities, this proved that “the furious excesses committed against his own wife and children are the effect of inebriation.” However, this was precisely the difficulty with Jacquet’s madness, for he was repeatedly “subject to some melancholic delirium, that most of the times he foment with his immoderate habit of drinking wine and liquor.” As a consequence, although he was released from Santa Dorotea in 1757 with the special recommendation, entrusted to Domenico Brichieri Colombi, to instruct Jacquet’s father of the need to provide proper custody for his son and particularly to ensure he was “kept completely distant” from wine, Jacquet continued to seriously disturb the social life, forcing both his family and the authorities to resort to committal at various times. But neither Santa Dorotea nor the Fortezza da Basso were successful solutions for his problem. Wine, viewed as the sole

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866 ASF, MPAP, Memoriali, F. 2300, no. 471, February-March 1734/35.
867 Note of the Council of Regency to Brichieri Colombi referring to the situation as reported by the administrative board of Santa Dorotea, October 1757. ASF, CR, F. 426, Ins. 4, October 1757.
868 “...non avendo in quel luogo dato manifesti segni di pazzia, ha fatto chiaramente conoscere essere effetti di ubriachezza li eccessi furiosi commessi contro la propria moglie, e figli.” Ibid.
869 “...sottoposto a qualche delirio melanconico, che il più delle volte viene da lui fomentato coll’uso smodato di bere vino, e liquori.” Note of D. Brichieri Colombi to the Council of Regency, October 1758. ASF, CR, Fiscale, F. 759, no. 76.
870 Note of the Council of Regency to Brichieri Colombi referring to the situation as reported by the administrative board of Santa Dorotea, October 1757. ASF, CR, F. 426, Ins. 4.
source of all the inconveniences that his mental disturbance occasioned, continued to produce
the same results.

Demonstrating the depth of his role, Brichieri Colombi not only supervised Jacquet’s
committals to Santa Dorotea, but also mediated between him and his desperate wife, who
continuously protested the impossibility of cohabiting with her violent husband. In 1758, after
a second period in Santa Dorotea, Brichieri Colombi coordinated Jacquet’s arrest and
reclusion in the Fortress of Basso while he once more tried to convince his father to assume
responsibility for his son. All the same, the problem persisted and in 1761 we find him once
more in the hospital, where the administrative board intended to release him once he ceased to
give signs of his recurrent frenzies.⁸⁷¹

As on other occasions, Brichieri Colombi’s narratives are both a recapitulation of the
concepts used by petitioners, medical experts and magistrates to describe Jacquet’s mental
condition, and the point where new meanings were attached to them. The reports of the
Auditori Fiscali describing the characteristics and consequences of mad behaviour are to be
examined therefore as the act of synthesis and recreation, as the product of the accumulation
of different gazes and the result of their own interpretation. They voice the concerns and
perceptions of family members that were usually not expressed in written form but in oral
conversations, which they combined with the written reports of medical practitioners and
government officials. Although in the case of Jacquet we have access to the medical reports
from Santa Dorotea, the commands given by the Council of Regency and the petitions from
Jacquet’s father, it is in Domenico Brichieri Colombi’s narratives that we find the most telling
details. The medical category of delirio melanconico employed in his reports is combined
with descriptions of Jacquet’s frenzies, used by the Fiscale to explain to the grand ducal
authorities the real danger posed by his frantic behaviour. Jacquet’s melancholic delirium is
further revealed with reference to the “extravagances” he continually committed, and his habit
of walking around armed and attacking people indiscriminately, and even snatching food
from villagers with “sword in hand.”⁸⁷² His frenzy, Brichieri Colombi noted, was of a
“sensible kind”, so long as it was “fomented by his excessive drinking.” While the medical
authorities in charge of Santa Dorotea were concerned with the symptoms and possible cures

⁸⁷¹ In August 1761 the administrator of Santa Dorotea wrote to the Council of Regency informing them once
more of Jacquet’s on-going situation, who once he had been committed would cease to experience the frenzies
caused by excessive alcohol consumption, but who invariably, once released, would relapse into them. Niccolò
Martelli to the Council of Regency, August 1761. ASF, CR, F. 426, Ins. 4.
⁸⁷² D. Brichieri Colombi in ASF, SD, Motupropri, F. 3, no. 1, January 1758 and ASF, .
of madness, the Auditore Fiscale dealt directly with its consequences, utilising mechanisms of control and disciplining that were routinely employed in police matters.

In their management of madness, the Auditori Fiscali combined their legal training with more practical knowledge gathered in the exercise of their duties. In this sense, the demanding wealthy families who sought to involve the office aimed to address the problem of madness in a speedy and discreet way provide us with useful insight into the characteristics of madness that served to assess cases where less privileged people were involved. The circulation of language took place through the office of the Auditore Fiscale, where different social backgrounds and disciplines met.

The Auditori Fiscali developed a sort of practical specialized knowledge on madness due to their close management of the cases of episodic madness that most called for their intervention. For instance, in the case of Maestrini discussed above, the officials of the Pupilli consulted the expert opinion of the Auditore Fiscale Filippo Luci to expand on the particularities of the case. The Auditori Fiscali had become “authorities” on the characteristics and dangers of madness, and their view was considered crucial to devise the appropriate measures for handling it. Sometimes they were in contact with physicians and the medici fiscali, but many cases were handled without recourse to medical opinion. The authority of the Auditore Fiscale over madness was particularly expanded from the second half of the eighteenth century, in part due to the office’s involvement in the admission procedure to Santa Dorotea, as I have discussed. This increase in their involvement is accompanied by the rise in cases of deviant behaviour openly or obliquely connected to madness disclosed directly to the office of the Fiscale. By 1770, Domenico Brichieri Colombi, who had headed the office since 1753, officially had a reputation as an expert in madness among government authorities and magistrates, so it was only logical that he was consulted on the state of mind of people denounced for mental incapacity to the Magistrato dei Pupilli.

Madness was an object of police interest, regardless of whether it made its appearance in civil procedures, criminal prosecution or private requests that did not go to trial. Nonetheless, the involvement of the Fiscale was no longer limited merely to order and control, and he had begun to play a more decisive role as an expert of madness. His gradually accumulated expert opinion on madness was therefore integrated with his previous power to imprison and acquit individuals based on criteria of order and good government. In a characteristic more evident with Domenico Brichieri Colombi than his predecessors, we see the Fiscale skilfully resorting to categories and notions of madness gained through his
practical involvement with mental deviance, to the extent of providing precise categorizations of madness that closely resembled medical diagnosis. We thus observe him giving straightforward judgements regarding the mental state of people who had previously only been vaguely described in other testimonies.

A close examination of the evolution of the categories used to describe the mental incapacity of a certain Cosimo Cambellotti is indicative of the role that the Auditore Fiscale came to play in determining legal mental incapacity. Cambellotti was interdicted for the first time in 1768, at 65 years old, followed by a second interdiction seven years later, both times on the request of his son. The main focus of both petitions, as usual, was on Cosimo’s advanced age and economic mismanagement, whose inveterate lack of economy, negligent administration and compulsive selling of household goods had resulted in repeated incarcerations.873 The connection between his bad administration and mental derangement was made explicit in the supporting testimonies, which, as in other occasions, gave a more nuanced description of Cambellotti’s mental state. In the first interdiction, the son’s allegation was supported by two testimonies signed by two men of the cloth and several acquaintances, stating he was known to be “not only of weak head, but also half mad” (capo debole and mezzo pazzo), so that due to his “mad conduct” (pazza condotta) he had not only reduced himself to a miserable state, but had also been incarcerated several times, and even committed to hospital on two occasions.874

No further information was required to decree the interdiction in 1768. However, in 1775 Cambellotti was again denounced by his son, who now described the family’s precarious economic situation as a result of his father’s “advanced age”, “extravagances” and violent reactions. On this occasion, the authorities resorted the Auditore Fiscale to gather further information. Domenico Brichieri Colombi, who at that point had over two decades of practical experience with madness, gave a testimony that was not limited just to confirming the economic mismanagement and public disorder caused by the defendant. Testimonies had asserted that Cambellotti was a “disturbed, violent and uneasy man” (uomo torbido, violento ed inquieto) who lived “arbitrarily” and hampered the cultivation of his lands, “moved only

873 See, respectively, ASF, MPAP, Memoriali, F. 2307, no. 147, December 1767 and Ibid., F. 2310, no. 237, March 1775.
874 Testimonies I and II, signed by several names, dated in 15 April and 16 May 1768 respectively, ASF, MPAP, Memoriali, F. 2307, no. 147.
by his extravagant ideas and his uneasy spirit.” In the eyes of the Brichieri Colombi, the defendant’s behaviour, “given that it tended to the destruction of his own possessions and that of the petitioner’s, his son, seems to be that of a person who has an altered fantasy”, which combined with his “disturbed, violent and uneasy nature” and the four criminal prosecutions carried out against him hitherto, were more than enough to declare his mental incapacity and order the interdiction. The Fiscale’s testimony was both the synthesis of the different gazes involved in the case, and the creation of new diagnostic categories nurtured by his previous involvement in similar cases, as seen in the inclusion of the idea of an altered fantasy to explain Cambellotti’s wrongful behaviour.

6. 4. Conclusions

The examination of the languages of madness suggests that the eighteenth century witnessed the rise of two new experts on the mind, who came to contest a position that had traditionally been occupied by the families and priests. The study of the parties involved in the assessment of mental incapacity demonstrated the appearance of two new authorities on matters of the mind: medical practitioners and the Auditore Fiscale. Their success was not even, however. On the one hand, the evidence suggests that the introduction of medical knowledge in the Tuscan courts was as slow as in other European societies. Medical testimonies were neither necessary nor sufficient to assess mental incapacity or criminal insanity in the eighteenth-century courts of law. In contrast, the office of the Auditore Fiscale became more relevant to the legal assessment of mental affliction. The records show them exerting increasing influence on the decisions of the authorities and in the resolution of conflicts involving madness.

Physicians and priests adjusted their vocabulary to the needs and concerns of petitioners, resulting in a language that was predominantly simple and concentrated on practical indicators of deviant performance. Thus, not only did the lexicon of petitioners and lay witnesses change but so did that of medical practitioners and priests, according to the

875 “...uomo torbido, violento, ed inquieto, ed anche malzioso in maniera da sapere regolarsi con dei pretesti a scarso dell’ordini della giustizia, e comechè è sempre vissuto con modo arbitrario...” and “...mosso unicamente dalle sue stravaganti idee, e dal suo spirito inqueto...” ASF, MPAP, Memoriali, F. 2310, no. 237, testimony dated the 22 of March, 1775.
context in which they appeared. This careful choice of the contextual lexicon is paralleled by the authorities, who similarly employed their categories according to each context, adapting their languages to the requirements of each space. This is particularly clear in the vocabulary of the Auditori Fiscali, who through their increasing involvement with madness were able to construct a language of their own that adapted according to whether they were acting in their capacity as chief of police, as regulators of the admission procedure to the mental hospital, as supervisors of criminal justice, or as mediators between the families, the central administration, and the mentally afflicted.

Any assessment on who were the recognized authorities and experts on madness, and on how their insight was valued must take the agency of the petitioners into account. The introduction of testimonies signed by priests or medical practitioners, or recourse to the authority of the Auditore Fiscale underscore the agency of the parties involved, and the strategies employed by family members to resolve their private conflicts. Even the figure of the Auditore Fiscale, who apparently personifies the progressive concentration of executive power of the Ancien Régime, can be seen negotiating with family members, intervening in private conflicts and being called as an expert on matters of the family and the mind by the Magistrato dei Pupilli. Medical practitioners and priests played the role requested by family members, whether to prove someone’s sanity or assert his or her insanity. For this reason, in my view the involvement of medical testimonies in the legal assessment of mental disturbance reflects more the strategies adopted by families to litigate their cases than to the absence of a recognized authority over matters of the mind.

That said, although medical practitioners had little impact in the Tuscan institutional and legal management of madness, there is sufficient evidence in the records to assert that a specialized medicine of the mind had started to develop (and be recognized as such). This change is observed in the growing technicality assumed by the lexicon of medical practitioners towards the second half of the century, which coincides with the fact that certain names start to reappear in the testimonies. In the second half of the century, Tuscan judicial practice did begin to ascribe a certain place to medical practitioners as the new experts of the mind, which we can see in the roles assumed by Antonio Lulli and Giovanni Targioni Tozzetti.

The relatively low impact of medical testimonies in interdiction procedures and criminal justice should not be taken as proof of the lack of weight of the medical profession in Tuscan society. The prerogative of medicine over diseases of the mind was tied to other
developments, such as the lack of specialization of the profession in the field, the lack of available resources to cure them and, especially, the fact that the mind could still be approached through physical therapeutics adhering to the principle of the six non-naturals, which were widely socially embedded. Furthermore, it could also happen that the family of a defendant who had sought medical treatment for a mental affliction would argue its case in an interdiction petition using simple unmedicalized vocabulary, making no reference to medical opinion. Judicial practice simply did not require the involvement of medicine and, furthermore, socially meaningful descriptions were preferred to medical diagnostic categories.

In other words, when assessing the involvement of medical knowledge in the shaping of notions of insanity we must bear in mind that litigation and the public management of madness constitutes a source that gives only a partial view of the phenomenon. The fact that in some cases, after years of litigation, we are informed that medical practitioners had been in contact with both the litigants and the authorities is particularly revealing. The institutional spaces of madness, accessed through legal records and supplication narratives, simply did not require the direct involvement of medical knowledge.
Chapter 7: Emotions in the Eighteenth-Century Cultural Understandings of Madness

Scholars generally concur that emotions acquired a new visibility during the eighteenth century. Although there is less agreement on whether this defines the eighteenth century as the century of sensibility, scholarly opinions agree that the century witnessed a renewed debate on the role of emotions in social life, family relationships, religious practice, and in economics and politics. William Reddy has argued that in Revolutionary France, “for a few decades, emotions were deemed to be as important as reason in the foundation of states and the conduct of politics. After 1794, not only was this idea rejected, even its memory was extinguished.” In contrast, and taking issue with the approach to the period as the age of sentimentalism, Thomas Dixon has claimed that it “was not merely an ‘Age of Reason’, but nor was it merely an ‘Age of Passions’. It was an age of reason, conscience, self-love, interests, passions, sentiments, affections, feeling and sensibility.” In turn, scholarship on the medical understandings of madness has identified the century as the period in which emotions entered the spectrum of both the conceptualization of mental disturbance and the approach to therapies for it, preparing what was to become moral treatment. From the point of view of medical thinking, the emotional world also made an appearance as a crucial factor in aetiologies and explanations of madness. However, the connections and interplay between medical knowledge and lay understandings in this development remains an open field of study.

This chapter has a twofold purpose. Firstly, it aims to provide an account of how displays of emotional distress were increasingly posited as evidence of mental disturbance. Secondly, it seeks to examine the correlations that can be found between medical, legal and lay understandings of madness and the role each ascribed to emotions. Drawing from judicial records and medical consultations, I suggest that during the eighteenth century emotional disturbances increasingly come to the fore in the languages of madness. Towards the second half of the century, disturbed emotions were ascribed a crucial role in the identification of mental afflictions, considered as both a cause and symptom of madness. From narratives that

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879 See, for instance, Roscioni, Il governo della follia or Porter, Mind-Forg’d Manacles.
at the beginning of the century were primarily focused on economic performance and practical behaviour, towards the second half of the century we increasingly encounter narratives that delve into the realm of emotional disturbances as a way to prove, describe or illustrate mental affliction, whether one’s own or that of another.

The chapter attempts to chart the connection between madness and emotional disruptions by studying the concepts of distressed emotional states that were singled out as evidence of mental disturbance. Following the approach taken by Thomas Dixon, William Reddy and Barbara Rosenwein in the particular attention they pay to the appearance of certain words as a means to examine emotions, the chapter examines the use and meanings of expressions denoting emotional displays that were thought to indicate mental disturbance. It pays particular attention to the context accompanying these expressions, adopting the idea that the context that surrounds the employment of a term affects, shapes and conditions its meaning.\textsuperscript{880}

Medical, legal and lay narratives of madness tended to ascribe increasing importance to manifestations of disturbed emotions, in a process that placed madness in the broader discussion of acceptable emotional reactions. For this reason, the language of madness, and the new role ascribed to emotional disturbances as its most determinant indicator are the reverse of the debate about acceptable emotional life. In this sense, I suggest that the eighteenth-century Tuscan provisions for the problem of madness served as a space to debate the limits of acceptable emotional displays and the implications of disturbed emotions. Furthermore, that lay society transferred to this debate wider concerns about changing values of family life, intergenerational conflicts and gender relations, all framed under the overarching concern about economic behaviour. The language of madness thus illuminates a debate about what were the accepted outward emotional displays according to age, gender and social position. We could thus consider that this debate is linked to what Barbara Rosenwein has called “emotional communities.”\textsuperscript{881} Emotional displays were evaluated according to each particular context, but there were wider notions that were supposed to be respected according to each space: the domestic space, the street, the space of economic transactions, the space of sociability. We see the Tuscan aristocracy preoccupied about the emotional instability that

\textsuperscript{880} Reddy, The Navigation of Feeling; Dixon, From Passions to Emotions; Barbara Rosenwein, Emotional Communities in the Early Middle Ages (Ithaca and London: Cornell University Press, 2006) and Carrera, Emotions and Health.

\textsuperscript{881} Rosenwein, “Worrying about Emotions in History”, p. 842.
prevented a man from taking economic decisions, or the uneasiness of an old father who had unsettled the household, and the extravagance of another who spent above his means.

The negotiation of proper and improper emotional reactions entailed the configuration of new understandings about madness in close connection to the formulation of behavioural norms, within a collective process that was highly contingent upon each circumstance. I suggest that the evaluation of emotional displays, and their categorization as acceptable or as deviant, was therefore a contextual process. The labelling of a certain emotion as deviant was deeply entrenched in the circumstances and space in which it was displayed. The evaluation was dependent upon gender, social status and age, how and where the emotion was displayed, and, furthermore, it was contingent upon the institutional space and the purpose of its disclosure. Depending on these circumstances, an emotional reaction could be considered evidence of blameless mental incapacity or of guilty criminality.

I employ the terms emotions and emotional disturbances being well aware that they are extemporaneous to the eighteenth-century Italian language. The word *emozione* was not in use during the century, but the terms sentiment, and passion are not more fruitful. The word *sentimento* continued to be largely used to mean rational opinion, in the manner of a belief, commonly employed by authorities when they gave their final position on a particular matter. The *Vocabolario degli accademici della Crusca* published in 1729-1738 defined “sentimento” as “sense, intellect, judgement” (*senso, intelletto, senno*), and alternatively as “significance, excellence and beauty of a conception”, and “concept, thought, opinion”. In fact, expressions such as “uscir del sentimento” and “esser fuor del sentimento” were still used to mean “lose one’s senses, grow mad, be mad” (*perdere il senno, impazzare, esser pazzo*). Neither *senno* (which meant intellect, wisdom, knowledge and judgement) nor the derivations from *sentimento* (*sensibilità, sensibile*) had a connection to emotions at the beginning of the eighteenth century in the Italian language. The word passion was critical for medical language and criminal records during the period, but it hardly appears in the interdiction records. Thus, framing emotional disturbances under the medical “passions of the soul” was also deemed inadequate.

References to emotional displays appear grouped in the lay sources around concepts such as *animo* and *spirito*. Neither of the two terms were disentangled from traditional

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882 Thomas Dixon traces the appearance of the term emotion in English language of psychological thought back to between 1800 and 1850. Dixon, *From Passions to Emotions*.

religious and humoral notions of the soul, but were increasingly employed to mean the psychological disposition or “emotional” state. To reflect the estrangement from reason in which the person found him or herself, these terms were coupled with passione, stravagante, inquieto, volubile or irregolare to name the same thing. It is by thinking with these terms that I employ the concept of “emotional disturbances”, to convey the idea that lay, medical and legal languages considered the manifestations of a disturbed, irregular, changeable or unstable disposition the key to a disordered mind.

The forms of emotional disturbance under examination here shed light on how individuals, their families, the authorities and medical or legal professionals reflected on, interpreted, valued or condemned certain forms of emotional expression. Given that I am interested in the evaluation and interpretation of certain emotions, the problem of how they were felt or even whether they were actually felt is not of relevance here. This is not to say that the narratives under study constitute fictions that were completely detached from the reality they were supposed to be describing – in fact, the characteristics of the negotiation between authorities and families sometimes entailed that some denunciations were indeed considered to be deliberate lies, or simply exaggerations, misinterpretations or partial truths, to the same extent that others were judged to be accurate descriptions. But the focus here is different. For the purpose of elaborating on the shaping of the understanding of madness, and how certain forms of emotional display were increasingly assumed to provide evidence of mental disturbance, the mere allusion to indicators of these types of emotional display proves the point, regardless of its veracity. In this sense, the scope of this chapter is to assess the instrumental value of denouncing a person for manifesting indicators of emotional disturbance, which simultaneously attests to how emotions were regarded and how certain types of deviant forms of emotional reaction came to be connected with madness. Thus, the very weakness of the sources – their instrumental nature – provides an entry into the processes by which families and authorities negotiated forms of accepted behaviour and emotional responses.

7.1. Medical Understandings of Disturbed Emotions and their Effect on the Mind

According to the Hippocratic-Galenic explanatory model, “passions”, “accidents of the soul”, “affections of the mind”, as emotions were termed in medical writings, played a significant role in the management of health. “Accidents of the soul” were the sixth non-
natural factor, which after air, sleep and waking, food and drink, excretion and retention, movement and rest, had to be carefully managed in order to preserve good health. Recent studies on the history of emotions have shown that medical literature aimed at a lay public warned its readers about the effects passions could inflict on health. For instance, the regimens for healthy living written in the vernacular that became popular between the sixteenth and seventeenth centuries in Italy focused on the correct management of the accidents of the soul as part of their advice on how to preserve one’s health.\textsuperscript{884}

Passions could either harm or restore health, depending on their intensity and the person’s constitution. These accidents of the soul were understood as the result of the interaction between the body and the environment, manifested through the movement of the spirits towards the heart and away from it to around the body as they reacted to external stimuli. This movement changed the balance of the humours, body temperature and the functioning of the organs, and proved to be seriously harmful or, in some cases, even beneficial, depending on its intensity and direction, the person’s own humoral constitution (temperament), and their gender and age.\textsuperscript{885}

According to Elena Carrera, early modern medical authors did not make a clear-cut opposition between reason and the accidents of the soul. Conceptualized as a cognitive process and as a physiological event, passions were not necessarily signalled as a sign of irrationality.\textsuperscript{886} However, although the Hippocratic-Galenic explanatory framework conceived of the accidents of the soul as cognitive and physiological events that assumed different forms according to each person’s personal qualities, the effects of such events were primarily seen

\textsuperscript{884} Preventive medicine became a well-established paradigm towards the sixteenth century in Italy, as argued by Sandra Cavallo and Tessa Storey. Challenging previous scholarship that approached the history of health and medicine from the viewpoint of medical ideas and the medical marketplace, Cavallo and Storey have called attention to the importance of domestic practices taken for the promotion of healthy lifestyles, following the recommendations popularized by healthy living advice books. Cavallo and Storey, \textit{Healthy Living}. On the persistence of the theory of the six non-naturals in the eighteenth century, see Antoinette Emch-Dériaz, “The non-naturals made easy”, in Porter, \textit{The Popularization of medicine, 1650-1850}, pp. 134-159.


\textsuperscript{886} In her study on anger, Carrera asserts that, “The medieval and early modern medical authors who discussed anger tended to see it in Aristotelian terms as involving a physiological response to an evaluative representation (impressed in spirit) of a perceived, remembered or anticipated object or situation. In their view, anger was neither caused by choleric humour, nor by the objects or situations themselves, but by the particular ways an individual evaluated them, which in turn were dependent on prior experience and physiological disposition.” Carrera, “Anger and the Mind-Body Connection”, p. 144.
in bodily terms. The focus of attention was placed on the damaging effects passions were able to cause in the body. Strong passions, and particularly abrupt changes of mood were widely feared for their dangerous life-threatening effects. But what was conceived as diseased and imperilled was the body and not, yet, the mind.

Recent scholarship in the field claims that historiography has tended to oversimplify the power of humoralism over the passions, rendering the individual helpless to their force and inevitably conditioned to certain passions according to their natural complexion. In contrast, new studies have emphasized the role attributed to willpower and agency by the doctrine of the six non-naturals. Early modern health regimens stressed the importance of balanced lifestyles and careful management of the six non-natural health factors. Hence, even if the accidents of the soul operated differently according to a person’s constitution, age and gender, they could be conveniently disciplined, moderated or even suppressed through willpower.  

Early Modern physicians promoted the careful evaluation, regulation and moderation of one’s passions. Health regimes and other medical writings advocated for the control, avoidance or regulation of emotional reactions to preserve health. For instance, the harmful effects of passions could be counterbalanced through the manifestation of other passions (anger counterbalanced with joy, for instance). According to Cavallo and Storey, there were three major approaches to the management of the accidents of the soul in late Renaissance Italy. “One medical, based broadly on managing the body’s physiology and spirits; one religious, intent on disciplining and dominating the rebellious appetites; and one philosophical, based on redirecting one’s thoughts and bringing the ‘passions’ under the ‘strict control of the intellect’.” Whether through physical therapy, willpower or distracting mechanisms, the accidents of the soul were supposed to be managed.

By the end of the seventeenth century, medical treatises paid increasing attention to emotions in their examination of the causes, symptoms and treatments of mental afflictions, giving birth to a new conceptualization of the relationship between the body and mind. The studies of the nervous system conducted by the English physicians Thomas Sydenham (1624-1689) and Thomas Willis (1622-75) produced a different understanding of the workings of the brain and its principal connectors with the body, the “animal spirits”. These studies first

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887 On the crucial role attributed to will in the management of passions, and the interplay between humour and the passions, see Carrera “Anger and the Mind-Body Connection”; Stolberg, Experiencing Illness and Pender, “Subventing Disease”.

888 Cavallo and Storey, Healthy Living, p. 181.
changed the causal relation between body, passions and brain. For instance, Willis conceived of the “anatomy of the nerves” as the part of the body that reveals “the true and genuine reasons for very many of the actions and passions that take place in our body, which otherwise seem most difficult to explain.”

New medical conceptions about the brain as the seat and cause of mental afflictions are best illustrated through the change in the aetiology of hysteria, which towards the seventeenth century lost its uterine explanations. Willis’ studies on the origin of epileptic and hysterical convulsions in the brain significantly changed the focus of attention towards the brain, challenging the traditional explanation of the wandering womb and its capacity to suffocate women. Nonetheless, Thomas Sydenham’s explorations led to further connections between passions and diseases of the mind. The new aetiology of the brain allowed for the male counterpart of hysteria, hypochondria, to come to the fore, positing both men (particularly sedentary men) and women as the possible victims of their passions. Sydenham considered that people who frequently experienced passions such as “grief... terror, anger, distrust, and other hateful passions” were more exposed to hysteria and hypochondria than those who experienced them only rarely. For in the first case “the mind is still more disordered, it being in the nature of this disease to be attended with an incurable despair; so that they cannot bear with patience to be told that there is hope of their recovery, easily imagining that they are liable to all the miseries that can befall mankind; and presaging the worst evils to themselves.”

While Sydenham saw in the passions of the mind a contributing factor to hysteria and hypochondria that would be aggravated during the illness, later explorations drove medical knowledge to consider passions as the core causality of afflictions such as hysteria and hypochondria. We can see this connection particularly in the Italian medical literature of the late seventeenth century and eighteenth centuries. The Papal physician Giorgio Baglivi (1668-1706) believed that passions of the mind were the cause of many diseases, among them, hysteria. Similarly, in the published volumes of consultations by letter, and in treatises

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specifically on mental diseases, Italian physicians highlighted how passions of the soul (passioni d’animo) or perturbations of the soul (perturbazione dell’animo) were not only clear indicators of a disturbed mind, but its very origin.

Andrea Pasta (1706-1782) claimed in his *Dei mali senza materia*, published posthumously in 1791, that emotional affections, regardless of whether they were triggered by real or imagined events, had the power to affect the nerves and the structure of the brain, causing illnesses such as hysteria and hypochondria, but also curing them when treatments were properly conducted. He explained that these diseases were caused “not from excess or vice in the humours, but from a disorder and disturbance in the nervous system” produced by *perturbazione dell’animo* or the *guai dell’animo* such as fear, anger or indignation, sadness or efforts of the mind. The brain, explained the physician from Bergamo, was particularly sensible to the stimulus of the passions of the mind.893

Over the century, medical consultations frequently cited the “diverse and frequent passions of the soul and mental agitations,”894 “mental fixation on unhappy thoughts,”895 “a long and dark passion of the soul”, accompanied by “obstinate wakefulness” and “disquieting dreams” (sonni inquieti),896 or even a “great passion of fear”897 as triggers of mental diseases, which meant that there was a need to avoid the passioni d’animo at all costs if one was to be restored to health. Hence the importance ascribed to seeking “ilarità dell’animo”898 through a regulated life, indulging in cheerful situations, favouring social life over solitude, and practicing physical exercise. The goal was to achieve the necessary “quietness” and

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893 „Io tengo che i mali nervosi di questa schiatta non dipendano da ridondanza, nè da vizio di umori, ma da sregolatezza e scomposizione del sistema nervoso, e che tale sconcerto de’ nervi e stravagante dissonanza della loro irritabilità proceda interamente da precedute afflizioni, perturbazioni o intensioni smodate e forzose dell’animo. E uno che voglia seriamente razzolare addentro di questi mali, troverà che la sorgente ne suol esser l’animo passionato, o intensamente applicato sia agli studi, sia agli affari politici, militari, o economici; che le morbose impressioni fatte dagli oggetti si esterni che interni nella sostanza midollar del cervello, e propagate a quella de’ nervi che n’è una continuazione e un allungamento, no si distolgono nè si scancellano colle misure di sangue...”, Pasta, *Dei mali senza materia*, p. 50-57.
897 This “grande passione di timore” was followed by “perturbati fantasmi, e sogni spaventevoli”, which affected the patient’s brain in such a way that it caused him to suffer a complicated epileptic disorder, causing organic failure in the brain that explained the persistence of the ailment. Cirillo, *Consulti Medici*, T. II, Consulto XI, “Epilessia Idiopatica da Timore. Per l’Ecc. Sig. Aloisio Manini Nobile Veneziano”, p. 89
“tranquillity” of mind (quieta d’animo and tranquillità d’animo), “far away from any fear.”

Given that the predominant source of these diseases were emotional disturbances, the best way in which to control and cure them was for patients to learn how to manage them. Therapeutics during the eighteenth century was moving away from the traditional bleeding and purgatives, but it still remained within the framework left by the principles of the six non-naturals. The combination of weather, diet, environment and emotions were still the key elements in use to counterbalance and hopefully restrain the effects of mental afflictions.

The renowned Tuscan naturalist and physician Giovanni Targioni Tozzetti declared in one of his medical consultations of 1765 that, due to his occupation as medico fiscale, he was “obliged to visit and examine almost every malati di demenza” there was in Tuscany, and he counted up to 80 a year. Of these 80 mentally afflicted patients, he declared that 95% suffered from melancholic delirium caused by emotional disturbances (deliranti melancolici, per motivo di angustie d’animo). The important thing to bear in mind, however, is that at least 90% of these patients would usually completely recover in a few weeks.

As the history of psychiatry has stressed, passions played a fundamental role in the construction of psychiatry, where the example of moral management appears paradigmatic. Scholarship critical of the Foucauldian model of the medicalization of madness has demonstrated that moral treatment, characterized by “the psychological means of control and care dispensed at specialized institutions, had been practised long before it was propagated by Pinel and the Tukes.”

The recommendations of the Italian Consulti Medici cited above bear witness both to the accuracy of this assertion and the fact that this process surpassed national geographies, to acquire a European dimension. Medical literature promoting health regimes and, particularly, emotional management circulated throughout Europe, and Italian authors

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900 For a discussion on the available therapeutic methods in use at Santa Dorotea and more widely in Europe during the eighteenth century, see Roscioni, Il governo della follia, pp. 217-292; Porter, Mind-Forg’d Manacles; Andrews and Scull, Customers and Patrons.

901 BNCF, Manoscritti, GTT, N. 234, “Consultationes medicae”, cart.2, fasc. X, Consulti per affezioni ipocondriache ed isteriche, Targioni Tozzetti’s opinion on a consultation he gave in 1765, fol. 158v. It is interesting also to note here the figures given by Targioni Tozzetti.


903 Suzuki, “Dualism and the Transformation of Psychiatric Language”, p. 418. The work of Roy Porter was fundamental in the debate on the long-term origins of the psychiatric profession. See Porter, Mind-Forg’d Manacles.
usually based part of their arguments on references to the famous European authors who wrote on such subjects.

We know that throughout eighteenth-century Europe the six non-naturals continued to frame conceptions of health and hygiene, although they were “gradually subsumed under wider classifications” and were combined with new notions such as contagion and the importance of cleanliness, which were being introduced.\footnote{Christopher Lawrence, “William Buchan: Medicine Laid Open”, \textit{Medical History} 19 (1975), p. 25. On the proliferation of popular books of medical advice during the eighteenth century, see Porter, \textit{The Popularization of medicine, 1650-1850}.} Popular medical treatises such as those published by the French physician Sammuel August Tissot (1728-1797), the Scot William Buchan (1729-1805) and the Italian Bernardo Ramazzini (1633-1714) continued to call attention to the importance of the correct management of the passions in order to enjoy good health. Similarly to what was being observed with health regimes in previous centuries, eighteenth-century medical writings that aimed at a non-specialized public still recommended a “healthy” management of the passions of the soul, which had to be either avoided, controlled or diverted, depending on the disease and the patient’s circumstances.

Hence, we can see that there was a wider context for the preoccupation with the dangers of emotional disturbances and their connection with mental diseases. According to the study by Storey and Cavallo, the influence of medical ideas on the danger of uncontrolled passions and their detrimental effects on one’s health can be traced, for instance, in the private correspondence of the Italian elite already in the previous century.\footnote{They claim that, “Despite the complexities of medical accounts of the passions, contemporary correspondence provides considerable evidence that the link between emotional turmoil and illness was widely accepted at the time amongst the laity.” See Cavallo and Storey, \textit{Healthy Living}, p. 189.} Also, we know that medical literature containing health advice underwent a revival in the eighteenth century and was now published in cheaper editions, which meant higher sales figures. Emotional troubles were in fact repeatedly incorporated in the aetiology of mental afflictions in narratives of both the solicitors of the medical consultation and in the responses of the doctors.\footnote{Research on medical consultation by letter has mainly focused on the experience of the body, the patient-physician relationship, the development of medical practice in terms of diagnosis and cures, and also the construction of medical networks. The general characteristic of this genre in Europe is that letters were sent by socially privileged people to famous physicians (as is the case of the medical consultations examined here). These letters were not necessarily written by the patient herself, but by relatives, or by the patient’s physician. It should be borne in mind, however, that what has survived was the correspondence that involved elite patients, although, as Steinke and Stuber observe, “we cannot exclude that consultation by letter was also practised on a more local level by country doctors.” Steinke and Stuber, “Medical Correspondence in Early Modern Europe”, p. 146. The study by Barbara Duden, \textit{The Woman Beneath the Skin}, attests to this possibility. See also Pilloud and Louis-Courvoisier, “The Intimate Experience of the Body” and Smith, “‘An Account of an Unaccountable Distemper’”.}
appropriation of the notions of the six non-naturals can be observed particularly well in the interdiction narratives, where petitioners and witnesses made reference to the hygiene principles the doctrine commanded, pointing towards the connections between sleep and good health, the right amount of work, managing one’s preoccupations, and the ill effects of weather and certain environments, all of which were common pieces of advice in the medical literature that had been circulating in previous centuries.\textsuperscript{907}

For instance, Francesco del Mazza, interdicted and submitted to the authority of the Magistrato Supremo given his numerous extravagances, libertine tendencies and violent attacks against his wife, was confined in the Fortezza of Volterra. From there he requested a few years later that he be released, citing his need for better weather in order to be able to resist the violent epileptic fits he repeatedly suffered, which worsened during the winters.\textsuperscript{908}

The principle behind the decision to lift the order of confinement against Francesco del Mazza was the same as that which grounded many testimonies written by Giovanni Targioni Tozzetti for prisoners at the Stinche or even patients at Santa Dorotea.

Studies on medical consultation by letter in the eighteenth century have shown that the humoral theory was still the predominant explanatory model with which to explain, understand and cure diseases during the eighteenth century.\textsuperscript{909} As a result, some of these studies assert, physical and emotional suffering were still inseparable experiences and held inextricable connections. Early modern concepts of the body escape the traditional mapping of the organs, their workings and connections, as Barbara Duden has eloquently shown. Early modern patients and doctors believed that fluids needed to be released through any available orifice, even if this meant that blood from suppressed menses was expelled through a finger wound or stored in a head bump.\textsuperscript{910}

However, although eighteenth-century observers and sufferers made different connections regarding the mind-body relationship, and the mind was still first and foremost accessed through the body, the fact remains that there is evidence that the concept of a diseased brain was shared by lay society, and that emotional disturbances were identified as its most defining signs. The court records under study here reveal that the incapacity to exert control or management over the passions was singled out as evidence of a disease the source

\textsuperscript{907} Cavallo and Storey, \textit{Healthy Living}.
\textsuperscript{908} ASF, Consiglio di Reggenza, Fiscale, F. 758, no. 20, 1753.
\textsuperscript{910} Duden, \textit{The Woman Beneath the Skin}, p. 121.
of which was to be found in the mind. This sheds light on the problem of the connections between lay and medical knowledge from an interesting angle, as these narratives suggest that medical notions circulated among laity, in a flux that was not just in one direction. Influences ran in multiple directions, acting along different layers, producing a common resource from which litigants, judges and magistrates, medical practitioners and priests could resort to in order to come up with a suitable formula to describe mental affliction. Instability, uneasiness, abrupt fits of anger, or any emotional display seen to systematically breach the accepted norms were increasingly cited as grounds for the interdiction petitions.

7. 2. Family Narratives and the Re-elaboration of Medical Language: The Key Factor of Emotional Disturbances

Interdiction narratives involving defendants who had been interdicted several times or whose families had been involved in various interdiction procedures during the century are especially useful for uncovering the circulation of languages of madness across different cultural groups. Given that these cases shed light on the experience and management of madness over extended periods of time, they allow us to grasp how the language used to explain mental disorder was constructed, and how it evolved with time. By the same token, they enable us to examine the involvement of medical knowledge and medical explanations in the process of identifying and denouncing a family member for mental incapacity. They also allow us to reconstruct particularly well the process by which a family, after identifying a mental disturbance, followed a series of strategies to make sense of the disorder and manage its consequences.

Any attempt to assess the foundations of the lexicon used to describe mental incapacity and the meanings it conveyed must take account of the possible contacts that petitioners and family members may have had with medical knowledge prior to the interdiction petition. Previous interdictions in the family history, past illnesses or long-term mental afflictions of family members may have resulted in a medical practitioner being contacted. In any case, it must be borne in mind that studies on the treatment of madness

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911 Patients could resort to a wide range of medical practitioners depending on their concerns, their motivations and economic resources. Charlatans, unlicensed healers, priests, officially-appointed surgeons and doctors (cerusici and medici condotti), private surgeons or doctors called in specific circumstances, or personal physicians called repeatedly were among the options. For an interesting account on how the choice was made, see Duden, The Woman Beneath the Skin.
outside mental institutions in early modern Europe concur with what has been asserted for the treatment of diseases in general. Patients sought medical advice once they had already identified “what was wrong with them”, asserted a diagnosis and attempted self-treatment or any treatment that was readily available.\textsuperscript{912} Furthermore, particularly towards the eighteenth century, there was a wide spectrum of options for accessing basic medical knowledge, producing what has been called “the popularization of medicine.”\textsuperscript{913} As a result, lay and medical languages of madness were intermingled in a way that is sometimes difficult to separate.

When medical practitioners were involved in interdiction procedures, their testimonies did not always disclose whether their assessment on the patient’s condition was based on a one-time visit or on long-term treatment. As discussed in the previous chapter, doctors and surgeons condotti often gave their testimony more in their capacity as privileged social witnesses, rather than as expert medical practitioners with a particular knowledge of the mental condition under examination. On other occasions, we find clues on the contacts that the family had with medical practitioners before the interdiction in certain comments in the petitions.

The evidence suggests that familiarity with the procedure and its requirements or the recourse to medical treatment did not necessarily result in a more precise medical lexicon of mental incapacity. The tendency in those instances where we know that medical practitioners had been involved is for petitioners and defendants to adopt, reshape and re-signify medical categories. For instance, in 1761 the relatives of 72-year-old Francesco Rossetti said he had been assaulted by a furore maniaco many years before, which his relatives had been forced to treat medically “with great expenditure to the house”, and after that he had suffered “a similar mania more, and more times.”\textsuperscript{914} In this case, the category of mental incapacity used to sustain the interdiction petition is a medical one, but it is employed in a way that is almost detached from its actual symptoms, which were, on this occasion, not described. When the

\textsuperscript{912} Ibid, p. 74. See also Stolberg, \textit{Experiencing Illness}. Similar conclusions regarding the process that led to medical help being sought for mental afflictions were made by MacDonald and, more recently, Andrews and Scull. Self-diagnosis and diseases first identified by families were also combined with diseases whose existence and identification were raised by the doctors as it was in their interest to expand the realm of their practice and make it more profitable. Andrews and Scull, \textit{Customers and Patrons} and MacDonald, \textit{Mystical Bedlam}.

\textsuperscript{913} Porter, \textit{The Popularization of medicine}.

\textsuperscript{914} “...fù parecchi anni sono assalito da un furore maniaco per cui dovette tenersi lungo tempo sotto la cura dei medici con grave dispendio della casa, e come più e più volte ha sofferto una simil mania di cui di tanto in tanto dimostra sensibilissimi effetti, per i quali rendesi inabile all’amministrazione della casa...” ASF, MPAP, \textit{Memoriali}, F. 2305, no. 131, June 1761.
case appears again in the records, however, this medical category is not employed. Instead, explanations for the defendant’s mental condition were reduced to references to his “decrepitude” and his “capricious” – thus, illogical and irrational – act of abandoning his son’s residence, guided by an absurd desire “of being better [stare meglio].” The medical category of *furore maniaco* had been replaced by the more culturally meaningful reference to his unstable and capricious character, with references to the manifestations of emotional disturbance that came to be the preferred evidence of mental incapacity, as the next section will show.

*Patterns in the Incorporation of Medical Categories in Lay Narratives*

Conceptions and perceptions of madness circulated fluidly between the medical and lay languages, though precise medical categories were largely unnecessary. Taking into account lay narratives and the voice of the mad allows us to elaborate more deeply on the dynamics of the circulation of languages and the interplay between medical, legal and lay perceptions of insanity.

How and why families and the sufferers themselves made use of medical terminology was not necessarily conditioned by the direct involvement of medical practitioners. We have seen how in the cases of Lorenzo Baldinotti and Lorenzo Maestrini, both from the first half of the century, their mental disorders were largely addressed through lay and legally embedded terms, even if they had been in contact with medical practitioners. A different situation is exemplified by the case of Angiolo Barchesi, interdicted five times between 1735 and 1754. Not only were his interdiction procedures conducted with the direct involvement of medical opinion, but furthermore, the narratives of the parties involved, including himself, demonstrate an interesting appropriation and re-elaboration of the medical terms employed in the expert testimonies. His first interdiction was decreed in November 1735, based on a testimony from Santa Dorotea that attested he was in the hospital, having been afflicted by a semi-manic insanity (*insania semimaniosa*).

Further characteristics and the behavioural signs of his insanity were disclosed only in the second interdiction, decreed in May 1737, this time without recourse to medical opinion.

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915 ASF, MPAP, *Memoriali*, F. 2307, no. 95, December 1767.
While in the first case we have access only to the testimony given by the keeper of Santa Dorotea, who employed a category rarely used in the hospital records, in the second case we only have access to the description given in a testimony signed by Barchesi’s mother, neighbours and a priest. In this lay testimony the too technical term of semi-manic insanity was diluted into plain “dementia”, “madness” (pazzia) and the description of mad actions. The testimony explained that although he had regained his soundness of mind for a while, he had relapsed into his “dementia”, as manifested in “doing diverse things of a man of unsound mind, such as [engaging in economic] contracts with great and evident prejudice for him”, accompanied by illogical violent reactions, which made him attack people for no reason.\footnote{“...per haver [sic] veduto il medesimo fare diverse cose di uomo di mente non sana, come contrattare con un sommo, ed evidente di lui pregiudizio, volere dare a persone senz’alcuna causa, e molt’altre cose simili...”, ASF, MS, *Atti*, F. 1983, 29 April 1737, f. 377.}

Based upon these signs, and perhaps taking into account the expert testimony given in 1735, the interdiction decree of 1737 declared that the lay testimony revealed Barchesi “had become entirely demented and furious.”\footnote{“...era di venuto affatto demente e furioso...”, ASF, MPAP, *Memoriali*, F. 2300, no. 547, May 1737.} The interdiction decree made a hybrid compound between the lay testimonies, the official category and the medical label, replacing furiosity with the medical manic insanity (the medical term for the institutional *pazzia furiosa* that circumscribed cases accountable for committal), and combining it with the unavoidable legal demente.

The interesting point to observe here is that the narratives describing Barchesi’s mental afflictions evolved along the years so as to introduce the dimension of emotional affliction. While the two following interdiction procedures were built upon the unspecific categories of *infermo di pazzia* (third interdiction with testimony of the *pazzeria* of Santa Maria Nuova, 1740)\footnote{“...da quattro mesi in qua si ritrova in detto Spedale infermo di pazzia...”, Testimony of Gaetano Pellegrini, *medico fisico* of Santa Maria Nuova, ASF, MS, *Atti*, F. 2016, 15 November 1740, f. 125.} and *demenza* (fourth interdiction, based on the information that he had been sent again to the *pazzeria*, 1746),\footnote{ASF, MPAP, *Memoriali*, F. 2301, no. 206(2º), 20 May 1746. In this case the interdiction was directly initiated by the *Proveditore* of the Pupilli.} from 1753 onwards the narratives incorporated more precise categories to describe Barchesi’s mental condition. The change in the lexicon is even more interesting if we take into account how Barchesi himself explained his sufferings.

We have access to Barchesi’s voice only after four interdiction procedures and at least four committals – let us not forget that they were decreed through two separate legal
During the time that elapsed between 1735, when the first interdiction was requested, and 1753, when Barchesi sent a written testimony giving his side of the story, his family group had changed. While the first procedures were conducted by Barchesi’s mother, by 1753 his wife and marriage kin had taken that role. His episodic madness evolved together with his family situation, and his position of weakness inside the family structure changed from him being the responsibility of his mother to that of his wife. Barchesi’s narratives centre precisely around this change. The involvement of his wife’s male kin, and her behaviour towards him were at the core of his anguish, to the point of inducing him to break his silence and make his voice heard.

According to Barchesi’s recounting, the third episode of mental disturbance that sent him once more to Santa Maria Nuova had been triggered by the profound distress his wife’s “cruelties” (sevizie) caused him. She had “capriciously” left the matrimonial residence to live with her father, “on account of which the informant thus troubled, had a fierce oppression of spirits [soppressione di spiriti] that took him out of himself,” causing him to be committed, yet again, to the madhouse. But his tribulations went beyond his episode of derangement, for after he “came to his senses” (il cielo gli fece la grazia dopo pochi mesi di ritornarlo in se), he had to face a long confrontation with his brother-in-law, who had been appointed administrator during his interdiction. In Barchesi’s eyes, his marriage kin had only taken advantage of his situation, making ill use of his resources, refusing to hand over the accounts of the administration and obstructing his business as librarian. Once he had regained his soundness of mind and had his civil rights restored, Barchesi initiated litigation against his marriage kin, demanding that they pay a series of debts they had incurred during their administration. Although the authorities sided with Barchesi, his debtors pulled every available string to delay the payment for as long as possible, which ultimately resulted in further unbearable afflictions for Barchesi, who appears to have again been interdicted a year later, and this time he was said to be “afflicted by a continual delirium.”

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921 I have not been able to find records of Angiolo Barchesi’s committals in Santa Dorotea or Santa Maria Nuova. Before 1750 the records of Santa Dorotea have lacunae, and those of the pazzeria of Santa Maria Nuova nearly non-existent.

922 Regarding the litigation he initiated against his marriage kin, Barchesi recounted: “Dal processo presentato a V.S. Illma restò concludentemente giustificato la sevizie di detta sua moglie contro l’Informante, che capriciosamente si partì dalla casa sua, e andò presso del padre, motivo che l’informante così tribolato ebbe una fiera soppressione di spiriti, che lo levò a fatto di se onde fù provveduto alla sua persona col’ commetterlo in S. Mª Nuova.” ASF, MPAP, Memoriali, F. 2303, no. 118, July 1753.

923 “…travagliato da un continuo delirio…”, Testimony of Giuseppe Sguanci Cameriere of the pazzeria of Santa Maria Nuova, ASF, MPAP, Memoriali, F. 2303, no. 229, October 1754.
Over the years, what had been initially framed in terms of a deviant economic performance and a tendency to furious reactions evolved into emotional anguish provoked by a combination of familial conflicts and economic setbacks. However, even more revealing is the fact that the transition was voiced by the sufferer himself, demonstrating a clear awareness of his episodic mental disturbances, of what triggered them and of his capacity to overcome them after some months. He could have chosen to deny his past insanity, as many other interdicted men and women did, but instead he chose to use it in the civil litigation against his marriage kin to his advantage. Attesting once more for the awareness litigants demonstrate of the consequences of the vocabulary they chose and the situations they disclosed to the authorities, Barchesi decided to highlight the emotional distress the cruelties and subsequent “capricious” abandonment of his wife had inflicted on him. Further revealing for our purpose here, he explicitly connected emotional distress with insanity, and demonstrated an ability to explain it without recurring to any specific medical category.

The transformation at work in the characterization of Barchesi’s insanity should not be interpreted, in my view, as necessarily connected to an actual change in the manifestation of his mental disturbance. That in 1735 Barchesi suffered a violent type of madness that placed him under what in those times was typified as mania and frenzy, which later evolved into anguish and anxiety, to finally result in a (melancholic) delirium is only one way to interpret it, not necessarily an accurate one and it does not shed sufficient light on how his madness was understood and experienced. Rather, I propose to interpret the categories employed as being the result of various layers of factors, in which the influence of medical knowledge and the evolution of the affliction mingle with cultural notions, private concerns, agency and circumstantial developments. Insanity was depicted according to the contexts of manifestation and disclosure, adapting to the evolution of the family history, and assuming the forms that most suited the purpose of each litigation.

Even if the depiction of Barchesi’s madness was contingent upon his familial situation, the line of argumentation chosen by litigants attests to wider changes operating in the perception and understandings of madness towards the second half of the century. In this sense, it is not a coincidence that they referred to the emotional disruptions his familial conflicts caused him after 1750, but not before. The same applies for the narratives of Antonio Corsini and Lorenzo Baldinotti, discussed in the previous chapters. The connection between emotions and madness and, especially, the role attributed to emotional disturbances
as determinant indicators of madness became particularly visible towards the second half of the century.

*Circulation and Re-elaboration of the Lexicon of Emotional Disturbance*

Particularly towards the second half of the century, interdiction procedures involving people who repeatedly relapsed into a state of mental incapacity tend to incorporate more vivid descriptions as the cases reappear. Over time and with the experience gained in each litigation, the narratives of mothers, wives, brothers and sons begin to acquire an increasing level of complexity. The more complex the litigation became and the more frequently relatives turned to the authorities for mediation, the more nuanced the meanings of mental incapacity and the more complicated the scope of its consequences become. From initial descriptions that were mainly centred around economic mismanagement or dissipation, subsequent petitions predominantly concern the relational dimensions of mental incapacity, delineating with increasing accuracy the consequences it caused to family life. Similarly, the testimonies produced by the sufferers themselves also tend to have a richer vocabulary, depending on their relapse into mental incapacity, and so does the reported level of familial conflict surrounding their disorders. The dynamics of family discord and the evolution of the given mental disorder also played a part in the shaping of the languages of mental incapacity.

Probably no other case exemplifies the dynamics and depths of the shaping of a vocabulary of madness better than that of Antonio Becciani, whose mental disturbance underwent an evolution closely connected with the exacerbation of the familial conflicts surrounding him. Antonio Becciani, from the Tuscan locality of Barberino di Mugello, was first interdicted in 1764 for allegedly being "*melenso, stupido, e quasi mentecatto*", and then interdicted a second time in 1771 because for some years he had been under "a profound melancholy, stupid and macilent." Subsequently, his mental condition evolved into "dangerous imbecility", "melancholic humour" and a tendency to be overpowered by his "overheated fantasy."\(^{924}\) The interdiction proceedings for Antonio Becciani and the recurring litigations surrounding them conceal, as on many other occasions, profound discords, strong animosity and conflicting agencies in the life of a family that had been strained by the

\(^{924}\)See, respectfully, ASF, MPAP, *Memoriali*, F. 2306, no. 120, August 1764, F. 2308, no. 79, January 1771 and F. 2309, no. 280, October 1773.

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presence of insanity for more than a generation. The leading voices were assumed, as on other occasions, by two women, Antonio’s mother and his wife.

Until 1771 we find no trace of emotional disturbance in the narratives of Becciani’s mental incapacity, and in fact if we were to set aside the later developments of his judicial case, we would be tempted to catalogue Becciani’s proceedings as one more example of the apparent predominance of intellectual impairment as a cause of mental incapacity. In 1764 Becciani’s mother had declared him to be foolish and stupid (melensino, stupido e quasi mentecatto) to the extent of not being able to distinguish between what was useful and what was harmful. Similarly, on that occasion the supporting testimonies claimed he was unable to manage his affairs even though he was 30 years old on account of his “short discernment.”

However, later proceedings on the case showed that Becciani’s condition was far more episodic and with stronger emotional consequences than is revealed in these initial proceedings. His plain foolishness became a state provoked by a profoundly disturbed emotional life, built upon a sense of betrayal by his mother, which caused him deep vexation and recurrent episodes of anguish and aggressive agitation. At least that is how he and his wife articulated his affliction.

Only a few months after the first interdiction had been decreed, Antonio petitioned for it to be lifted, arguing that it was not true that he was the stolido and prodigal his mother had made him appear to be. He claimed that the interdiction had been engineered by his mother who, motivated by her preference for her younger son, aimed to deprive Antonio of the patrimony, and give it instead to her second-born, so that he could have the prospect of a better marriage. Antonio’s petition won, but his mother and brother nonetheless were successful in their aims in 1767 when they managed to secure a semi-interdiction that restricted Antonio’s economic management by placing him under the supervision of local authorities, followed by a full interdiction decree in 1771.

In the interdiction petition of 1771, Antonio’s mother and brother still presented his mental incapacity as being “for some years now... imbecile and mentecatto.” The core of their argument still rested on a combination of lack of experience and “weakness of spirit”, as the officials of the Supremo summarized. Nonetheless, enquiries carried out by the authorities

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925 “...non ostante la sua età di circa a trent’anni non è capace di regolare per il suo corto discernimento alcuna sorte d’interessi...” respectively. ASF, MPAP, Memoriali, F. 2306, no. 120, August 1764.

926 ASF, MPAP, Memoriali, F. 2306, no. 162, November 1764.

927 “…da qualche anno in qua si trova detto Becciani Imbecille, e mentecatto, e affatto incapace di accudire, e amministrare il suo patrimonio...” ASF, MPAP, Memoriali, F. 2308, no. 79, January 1771.
provided a new testimony, signed by priests and other dignitaries of Barberino, stating that Becciani was subject to “…a profound melancholy, [and was] stupid and macilent.” The language of madness and mental incapacity was flexible and overarching, and the superposition of categories had been common since the introduction of the Roman categories into the Tuscan legal system. For this reason, the imbecility and stupidity denounced by Becciani’s relatives in the second interdiction proceedings did not exclude the melancholy identified by the witnesses. Melancholic or not, Becciani continued to be considered in a state of diminished understanding, except the source of it was now located in his emotional sufferings.

Concepts were carefully chosen to frame interdiction petitions. This becomes particularly clear if we take into account that given Becciani’s father had also been interdicted in 1747, the Becciani family had been familiar with the uses of the Magistrato dei Pupilli long before Antonio’s interdiction. Consequently, we can assume that they were perfectly aware of how necessary it was to disclose and identify so as to sustain an interdiction petition. This seems particularly to have been the case with Becciani’s mother, Caterina Puccini, who had been directly affected by the interdiction of her husband. Giovan Battista Becciani’s interdiction had been decreed in 1747 after some unidentified relatives claimed he was mentecatto, and the authorities’ enquiries demonstrated that he was “so imbecile and of little soundness of mind [poco sano di mente]” that nobody believed him capable of properly managing his affairs.

The script employed in the interdiction proceedings of Antonio Becciani was remarkably similar to the one that had been employed to interdict his predecessor twenty years before. The interesting thing is that in 1747, the petitioners, witnesses and authorities agreed that Giovan Battista’s wife was not only equally incapable of assuming the management of her husband’s affairs, but she was even held responsible for the perilous state of the patrimony. Given that everyone considered Giovan Battista to be weak and imbecile, the economic mismanagement was primarily attributed to Caterina, who lived separately from her husband, who dissipated it to satisfy her “splendid” tendencies as she even withheld money from Becciani.

928 Ibid.
929 Mellyn, Mad Tuscans and Their Families and Chapter 3 of this thesis.
930 “…Becciani è talmente imbecille, e poco sano di mente che non viene stimato da veruno capace di potere amministrare da perse il di lui patrimonio…” ASF, MPAP, Memoriale, F. 2301, no. 285, June 1747.
Consequently, it is particularly interesting to note that around 20 years later she decided to denounce her son for economic mismanagement, resorting to almost the same arguments raised against her and her spouse when the latter had been interdicted. Hereditary mental disturbance was a visible and acknowledged reality in the eighteenth century, and so when Caterina Pucci decided to frame her son’s incapacity in similar terms to those used in her husband’s interdiction, she was relying on this awareness. The economy of words and frugality of terms is in part thus explained, not only because the categories of demente, mentecatto or melenso were generally sufficient when backed up by reliable witnesses, but even more because the antecedent of a father interdicted for a similar mental condition was by itself convincing. However, later developments in the story reveal that the words initially chosen to describe Becciani’s mental incapacity give an incomplete image on how his relatives actually perceived it. In what proves to be a pattern rather than an exception, standardized narratives often conceal nuanced conceptions of what mental incapacity amounted to, what its consequences beyond the risk posed to the patrimony were, and how disturbed emotions were becoming a decisive sign. Furthermore, families demonstrate a clear awareness of the implications attached to the argument of mental incapacity, which it was possible to direct according to one’s means.

The disclosure of more nuanced perceptions of mental incapacity is tied to changes in the familial dynamics of the situations that led its members to resort to the interdiction in the first place. The narratives in the above case delve into the depths of Antonio’s mental sufferings in response to the disputes that flared up between the family members, bearing witness to the extent to which madness was a contextual and relational reality. Shortly after the second interdiction, Antonio Becciani’s wife, Maddalena Palloni, claimed her husband had been declared melenso by her in-laws with the sole purpose of taking advantage of him. The woman’s argument was that her husband, whom the Beccianis had sought to present as “imbecile of mind”, was not “the mad person [non è quel mentecatto] depicted by Benedetto his brother.” She acknowledged that her husband was a “man by nature weak in cognition and spirit, [and] prone to be seduced”, but this only made him unable to defend himself from his brother’s schemes. Benedetto’s machinations were also directed against her, resorting to

931 See Chapter 3 for a discussion of conceptions of hereditary madness and how families gathered expertise and familiarity with the forms of the procedure through experiences of interdiction across the generations.
932 “…fusse imbecille di mente…” and “…il medesimo non è quel mentecatto, che si dipinge da Benedetto di lui fratello…”. Written testimony sent by Maddalena Palloni to illustrate her petition to be appointed again administrator of her husband’s patrimony, ASF, MPAP, Memoriali, F. 2308, no. 108, February 1771.
all sort of strategies, arriving even to physical attacks, to try to keep Maddalena away from her husband and the administration of the interdicted patrimony.  

The claim that he was not as mad as his brother had intended him to appear, but was still of a weak cognition and spirit evolved into “dangerous imbecility” and “melancholic humour” in the subsequent petitions by Maddalena Palloni. Becciani, who had initially been depicted as of weak character and suffering a certain degree of mental impairment, was in 1773 described as prone to suffering outbursts of anger that put his wife’s life in serious danger. One of these aggressive episodes was considered so serious that the Pupilli were moved to order the provisional separation of the couple. All the efforts conducted by the officials “to procure peace and reunite the couple” had by now proved unsuccessful in overcoming “the imbecility and extravagancy of Anton Luigi Becciani, his cruelties against his wife and the abuses she has suffered, the unwise and disrespectful behaviour of Benedetto Becciani, the indiscretion of Caterina Puccini, and her mistreatment of her daughter-in-law.”

About a month later Maddalena requested that she be allowed to resume her life at her husband’s side, claiming that, notwithstanding his past abuses and mistreatments, she did not fear the “dangerous imbecility of her spouse, which makes him fall sometimes into extravagances.” She explained that, although Becciani’s “melancholic humour” could not be “controverted”, she had “not the least fear”, judging from the “practice she [had] acquired of his nature in the many years they lived together.” If her husband had committed “some extravagances” against her (that is, if he had reacted aggressively by attacking and beating her

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933 “...per essere uomo per natural debolezza di cognizione, e di spirito, facile ad essere sedotto...”, Petition of Maddalena Palloni, ASF, MPAP, Memoriali, F. 2308, no. 108, February 1771. Maddalena was referring here to a period in which Antonio, persuaded by his kin, felt a strong animosity towards her. As a result, he sent a petition to the Pupilli requesting them to send her away from him, declaring that Maddalena had inflicted “insufferable abuses” on him. The case discloses a long-term conflict between Maddalena and her brother-in-law whom, she claimed, had always hated her and opposed her marriage. Her narratives depict Benedetto as violent and capable of any scheme in pursuit of his abusive intentions. In contrast, Benedetto tried to attack her credibility by accusing her of marrying for opportunism, of dissipating her husband’s resources and of maintaining dishonourable friendships with various men. His testimony is striking for its obvious similarities with the line of accusation made against his mother Caterina when the late Giovan Battista Becciani had been interdicted in 1747. Disputes between women and their brothers-in-law are a common ingredient of the familial conflicts disclosed to the Pupilli for mediation. See Calvi, Il contratto morale, pp. 87-105.


935 “...l’imbecillità pericolosa del consorte, che lo fa cadere alcune volte in stravaganze [sic]...” Before she made this request, Maddalena herself attempted to send him to Santa Dorotea but he was not found to suffer the kind of madness accountable for committal. ASF, MPAP, Memoriali, F. 2309, no. 280, October 1773.
with different objects), this was due to his mother’s and brother’s instigation. They, she said, oppressed Becciani and “overheated his fantasy” with ill-intentioned insinuations against her.\textsuperscript{936}

In the many petitions Maddalena Palloni sent to the Pupilli we see her ability to define and fluently elaborate on her husband’s mental condition. The instrumental incorporation of concepts in accordance with the goal of the narrative becomes particularly clear in this case. Becciani’s mother and brother alleged his imbecility and stupidity to obtain the two interdiction decrees. Maddalena Palloni, on her part, raised the concepts of his “weakness” and natural tendency to be oppressed by his relatives’ machinations, his tendency to suffer melancholic episodes during which he became violent, his irritable and easily influenced imagination, among other things, to explain Becciani’s irascible reactions towards her. Especially interesting is her use of the terms melancholy and melancholic humour, which she frames as a “temporary bad humour’ or “the critical moments when her husband is seized [sorpreso] by some melancholy.” She explains that these critical moments were engineered by “their common enemies”, who “disconcerted... his spirit.” Furthermore, during the period they lived apart from Becciani’s relatives, he was free of these episodes, and they had been able to spend their time harmoniously.\textsuperscript{937}

Her explanations are particularly interesting for us as they underscore the shift that can be observed in the ways mental afflictions were conceived by lay society during the second half of the eighteenth century. The conception of cyclical episodes of melancholy were, of course, not new but the difference here is how she explains her husband’s disease in connection to his individuality and his biography. Maddalena employed the terms “sconcertare” “spirito” and “cattivo umore”, which were the traditional terms used to frame the humoral imbalance responsible for diseases such as melancholy. The difference lies, however, in how she framed them. Her descriptions do not allude to physical sensations or to

\textsuperscript{936} “...per quanto non possa controvertersi l’umore malinconico del marito, pur tutta volta per la pratica che essa ha acquistata del di lui naturale, ne più anni che vive insieme, non ha il minimo timore di sorpresa, e se qualche stravaganza detto suo marito ha commessa è stata sempre per istigazione di chi con spirito cattivo tenta di vedere l’oppressione del marito della supplicante, e de loro figli... l’ultima commessa fragilità è stata originata per essergli stata riscaldata la fantasia sempre a danno dell’oratrice, come il medesimo suo marito ha replicatamente confessato”. Ibid.

\textsuperscript{937} “Poteva veramente la supplicante sottrarsi da questo travaglio e scansare facilmente il passeggiero cattivo umore di suo consorte, per la ragione sopra espressa di ben conoscere i momenti critici, che suo marito è sorpreso da qualche malinconia, sempre originata dai nostri comuni nemici, che sanno sconcertare quando più gli piace il di lui spirito, ed’ è pur troppo vero, che quando la supplicante è vissuta sola col marito, e con i figli, cioè lontana da chi gli giurò perpetua guerra, hanno goduto di quella pace, che desidera la supplicante a tutti i viventi”. Ibid.
corporeal phenomena, but are entirely related to the realm of the mind and the emotional suffering he endured due to disquieting familial situations. Her narratives suggest she understood her husband’s disease as the effects of a perturbed (and thus sick) mind.

Maddalena’s lexicon denotes the shift that, according to Michael Stolberg, can be observed in the letters of eighteenth-century French and German patients’ regarding the meanings attributed to the terms temperament and humour. According to Stolberg, references to a bad, lively or fluctuating humour during this century were more related to what we today understand as mood or disposition than to the balance between the four humours. This assertion can be taken further if we consider the role ascribed to Becciani’s mind. Although we cannot determine if Maddalena conceived of Becciani’s disposition as rooted in the body— as Stolberg claims most laypeople and medical practitioners did at the time—we can certainly observe that she conceived of Becciani’s mind as being responsible for creating the fluctuations of his temperament. Rather than ascribing Becciani’s mental affliction to the effects of a sick body or to the result of humoral imbalance, Maddalena’s narratives centre on the distorted ideas his mind created. The ideas about Maddalena’s supposed dishonourable friendships were so powerful that just the possibility of her infidelity obsessed him to the extent of clouding his judgement and disturbing his mind. His exacerbated jealousy was held to have such a pernicious effect on his damaged mind, that it isolated him from reality and made him reject their new-born, convinced that he was illegitimate.

Maddalena’s line of argument was shared by the rest of the narratives that comprise the proceedings. The Podestà had in fact given notification that Becciani’s disturbed fantasy had been triggered by a jealousy harboured as a result of the rumours, inflated by his brother and mother, regarding Maddalena’s alleged infidelities. Siding in this with Becciani’s kin, he claimed that “most of the petitioner’s passions and turbazioni d’animo come from his wife’s sociability.” Although the Podestà introduced a story that differed from what Maddalena Palloni had asserted that, all the same, he agreed with her on the nature and main source of Becciani’s mental disturbance. Whether labelled as passions, as turbazioni d’animo, overheated fantasy or melancholic humour, all the involved parties agreed on the fact that the cause of his mental affliction was ascribed to emotional disturbance.

938 Stolberg, Experiencing Illness, p. 88
939 “le maggiori passioni, e turbazioni d’animo dell’oratore procedono delle pratiche della moglie.” ASF, MPAP, Memoriali, F. 2309, no. 147, August 1773.
There is one more issue to examine regarding the lexicon employed to articulate Becciani’s mental affliction. Maddalena Palloni, certain witnesses and the authorities talk about his melancholy and melancholic humour, but the descriptions also describe him as having a violent behaviour. We observe expressions such as that he was “infuriated” (infuriatosi), that “his fantasy was overheated” by his relatives (essergli stata riscaldata la fantasia), that he mistreated and inflicted “cruelties” against his wife (strapazzi and sevizie) or that he manifested a “dangerous imbecility” (imbecillità pericolosa), illustrated with references to a particular occasion when Maddalena had been forced to escape from the matrimonial residence, running desperately to find help against her husband’s fury. Thus, Becciani’s story suggests that lay society conceived the proximity between low spirits and mania as a natural consequence of the shifting emotional disturbances that characterized a deranged mind. Furthermore, it suggests that emotional agitation and shifting moods were at the centre of the cultural understanding of madness.

Doctors frequently alerted the authorities to a melancholic delirium that could easily turn into a furious one, as attested by many of the Santa Dorotea records. In the Becciani story, we do not see the term delirium, or furioso, or mania, but nonetheless the symptomatology and medical categorization of mental diseases appear translated into unmedicalized contexts which suggest a very similar conceptualization. Judging from the narratives just examined, it seems that towards the second half of the century, lay understandings of mental disturbances were close to how contemporary medical knowledge approached them, without direct contact with medical practitioners being necessary.

In the records of the interdiction and guardianship of Antonio Becciani, we find no evidence that medical opinion was involved. But, neither of the interested parties seemed to need expert opinion for a matter that could be observed and sufficiently argued by those around the sufferer. The lexicon they employed was neither particularly medical nor necessarily new, but its terms, such as “melancholy humour” or “overheated fantasy” were transposed to fit the new concerns of the eighteenth century.

New social concerns made room for more individualistic representations of mental disturbance that saw in emotional displays the privileged indicators of the workings of the mind. The narratives of Becciani’s mental disturbance defined the characteristics of his disorder by following a new purpose. We have seen that since its origins interdiction

940 For instance, “in alcuni infermi il delirio malinconico degenera molte volte in furioso.” Administrative board of Santa Dorotea to the Consulta. ASF, SD, Motupropri, Rescritti..., F.3, no. 39, October 1758.
procedures were primarily aimed at protecting patrimony from the consequences of mental incapacity. Thus, requests were primarily argued in relation to property and economic behaviour. To a great extent, excessive expenditure, growing debts, the engagement in wrong or counterproductive economic transactions had all played a leading role as indicators of mental incapacity. This manner of arguing mental incapacity begins to change towards the second half of the eighteenth century, when more nuanced interpretations of what constituted mental incapacity start to be introduced. As the case of Becciani shows, mental incapacity at some point started to be defined not only in connection to patrimony. In this sense, I believe it could be argued that the change produced in the understandings of mental incapacity and madness during the eighteenth century are located precisely in this shift from patrimony to emotions and the mind. Mellyn has suggested that between the sixteenth and seventeenth centuries the novelty in understandings of mental incapacity was the pathologization of economic mismanagement. \(^{941}\) Although this existed during the eighteenth century, explanations shifted from external and practical behaviours to the manifestations of a disturbed mind. And here, mental disturbances played a leading role.

Relatives and sufferers no longer argued only in relation to patrimony. Given that Becciani’s mental incapacity was never challenged, the narratives were not bound to economic behaviour. As happens with many other defendants of the eighteenth century, Becciani’s case continues to appear not in relation to patrimony administration, but because of the relational and emotional dimensions surrounding his mental disturbance. The issues under discussion were how and where the mentally afflicted were supposed to live, who was to take care of them, what were the responsibilities of their next of kin and what measures could be taken to discipline them, cure them, control them. To determine and solve these questions more accurate descriptions were necessary, for the conventional legal categories of mental incapacity had proved insufficient.

Narratives acquired more nuanced tones the moment they left the realm of economic behaviour to enter the realm of relationships and emotions. Maddalena Palloni spoke of herself, her expectations with regards to her matrimony with a man she knew to be profoundly sick, but whose mental disturbances she accepted anyway, in what can be interpreted as a mixture of genuine affection and a more practical concern to ensure she was not separated from her children. Wives raising their voices and using this mixture of

\(^{941}\) Mellyn, *Mad Tuscans and Their Families*, pp. 128-160.
emotional and practical lines of argumentation are commonly found in the eighteenth century records. The possibility of losing one’s children often forced women to accept cohabitation with a mentally afflicted man, and this was among the standard issues negotiated between women and the authorities in interdiction procedures. But they received something valuable in exchange: the Pupilli usually placed them as administrators of their husband’s patrimony, and even if a third person was entrusted with this task, they were generally the preferred mediators between the government administration and the interdicted.

As Maddalena Palloni defined her experiences and her sufferings in front of the authorities, she also delved into her husband’s experience. She was the ultimate authority on Becciani’s mental condition, and the government officials relied mostly on her to build their opinion on its characteristics. In the disclosure of the domestic space through the voice of women, we see male irrationality under the control of women, who are placed in the position of rational agents inside the household, a position that was in fact promoted and ratified by the authorities. The solution to family disorder and to patrimonial mismanagement were placed in the hands of women: mothers, wives or widows who were seen to have the power to produce the desired change in men. Or, if their men’s mental condition was conceived as irreparable, women were the best option to reduce the damage it caused.

7.3. Emotional Disturbances as Evidence of Mental Affliction

What unifies the different spaces in which madness made its appearance during the eighteenth century is the increasing visibility acquired by emotional perturbations as evidence of mental disturbance. Although we have seen that medical terminology generally did not penetrate the civil and criminal courts, we can observe shared meanings of madness and common understandings to explain it, particularly regarding the role attributed to emotional disturbances. On the one hand, the tendency to manifest consistent and frequent emotional perturbations was employed by litigants and government officials to indicate a clouded judgement or a disturbed mind. On the other, the emotional perturbations suffered by those catalogued as mentally incapacitated increasingly became a major concern for the surrounding family members, as we saw in the previous section. The picture of the evolution undergone by the procedure of interdiction during the century is illustrative on this matter. At the beginning of the period, we have seen, interdictions were primarily based on the fact of demonstrable economic mismanagement attributed to mental incapacity. Likewise, petitions
to revoke the interdiction generally argued that the interdicted had recovered their capacity to administer, or they otherwise refuted the initial accusation of mismanagement. Consequently, roughly until the 1740s, interdiction proceedings showed little concern for the characteristics of the alleged mental incapacity besides its economic consequences. However, with time interdiction narratives came to pay increasing attention to deviant emotional displays both as a way of proving mental incapacity and as a way of illustrating its consequences on family life, thereby arguing for the intervention of the governmental apparatus.

Actions and emotions were judged and interpreted according to specific contexts, in evaluations that were both gender specific and age specific. Context transformed a given emotional reaction into a sign of mental incapacity. Thus, each space of appearance constituted a sort of “emotional community”, to follow Barbara Rosenwein’s term. The same emotional reaction could be considered justified or utterly irrational depending on why, where and to whom it had been directed and disclosed. Not all forms of emotional distress singled out as breaching the accepted codes were identified as a sign of mental disturbance. Factors such as financial behaviour, quotidian behaviour and repetition of the events were what denoted mental disturbance.

Which emotional perturbations constituted evidence of mental disturbance was contingent upon each case, based on an evaluation that was highly contextual in nature. Emotional displays were not assessed in the abstract, but in close connection to the circumstances that surrounded their expression. When, why and to whom a given emotional reaction was displayed, and who experienced it were key factors in deciding whether it was a just and correct expression of emotional distress, or if it breached the cannons of accepted behaviour.

The universe of emotional reactions included can be organized under active and passive types or according to the emotion involved, which roughly correspond to the opposing poles of mania and melancholia. I have arranged them under anger, irritability and irascibility on the one hand, and emotional instability, anguish and inquietudine, on the other hand. At the end I examine the concept of extravagance as an overarching category that encompassed the violent and the anguished form. Many of the terms employed to make reference to emotional disruption are words that also have very precise physical meanings,

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942 The contextual nature of the interpretations of emotions, its performative nature and the interplay between the cultural context and individual agency have been at the core of seminal studies for the history of emotions. See Reddy, *The Navigation of Feeling* and Rosenwein, *Emotional Communities*.

bearing witness to the loose boundaries between mind and body. *Inquietudine* was at the same
time restlessness and the feeling of disquiet, anguish could be used to mean that the heart or
the lungs were under pressure, as well as to mean emotional anguish (*angustia d’animo*).\(^{944}\)

**Anger, Irritability and Irascibility**

**Passions and Crime**

Guided by the principles established by Roman law, the Tuscan criminal system
considered that strong passions had the power to alter one’s judgement and capacity of
discernment. Strong passions were considered to be attenuating circumstances provided it
could be proven that they had left the suspect deprived of full discernment. However,
diminished responsibility was not only determined by the assessment of the extent to which
the passion had disturbed the person’s mind. According to Savelli’s compendium of judicial
practices, “crimes committed moved by just rage, anger or pain caused by offences,
provocations or other just causes are not punished with ordinary penalty, but with an
arbitrary, more lenient one according to the quality of the fault and the person,” so long as the
accused had not persevered in his or her intentions after the crime.\(^{945}\)

Diminished responsibility by reason of a disturbing passion was dependant upon the
possibility of proving that the rage had been sudden and violent (no time could elapse
between provocation and reaction), that it had been caused by justified reasons, and that the
crime had not been premeditated. Although reacting violently to a serious offence was
considered justified anger, if the anger had been controlled and later evolved into a studied
revenge leading to an attack days after the first offence, the crime changed from

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\(^{944}\) *Angustia* and *angustiato* was employed in at least three contexts in the eighteenth century. Anguished
(*angustiato*) could accompany patrimony and debts: a patrimony was anguished when it was at risk of
bankruptcy, someone was anguished by creditors if he or she was oppressed by them. Additionally, *angustia* was
used in medical language not only for psychological anguish (*angustie d’animo*), but also to describe the
physical contraction or physical distress of an organ (*angustia di petto, angustia alla gola, angustie del
respiro, sostanza del cervello... angustiata*), which entailed a “sensation” of distress. This is one of the pieces of
evidence identified by Smith in French and English medical consultations for the overlap between the mind
and body. Smith, “‘An Account of an Unaccountable Distemper’”, p. 463. For examples on these, see Del Papa,
*Consulti Medici*, vol. II, Consultations 30, 44 and 56.

\(^{945}\) “Delitti commessi per iracondia, ira, o giusto dolore causato da ingiurie, provocazioni, o altre giuste cause
non si puniscono di pena ordinaria, ma d’altra arbitraria più mite secondo la qualità dell’eccesso, e persone,
mentre che il delinquente non perseverasse nella mala volontà ratificando anco doppo il delitto, ò che la causa
dell’ira, ò provocazione fosse ingiusta, come se egli fusse stato il primo a provocare, ò in altra maniera facendo
cosa illecita, e proibita, o che l’ira e causa di essa fusse stata molto leggera, e non si provasse, perchè in questi
unpremeditated murder to attempted murder. For instance, in a 1730 procedure for attempted murder resulting from a brawl, it was established that the suspect was motivated by a desire for revenge, considering the time that had elapsed between the insult that had elicited his rage and the actual attack, which occurred some days later.\footnote{ASF, OGB, Negozi, F. 2135, Negozio 7357, no. 3, September 1730. On the contrary, a brawl with serious insults and a physical attack were reasons that justified murder in self defence, allowing the accused to escape the death sentence. See Ibid., Negozio 7358, no. 1, December 1730.} Even if a father was justly defending his daughter’s honour, if his need for revenge (\textit{ira}) had moved him to prepare the assault, the just cause behind his passion was insufficient to diminish his culpability. On the contrary, it would prove that he had acted with conscience and malice. Intent, motivation and premeditation can be clearly established in these cases. Now, if the passion leading to the crime was unjustified, even if the action was unpremeditated, the suspect could be charged with the full rigour of the law.

Crimes that were committed when driven by feelings of anger, hate, revenge or jealousy are common in the records of the Otto di Guardia, the majority of which were judged with the ordinary penalty. However, in some cases the crime was found to have been committed while under a perturbed state of mind caused by a strong passion. But solely the fact that a murder had been committed “under the heat of anger” felt by the offender when he found out that the victim had seriously injured a close relative was not necessarily enough grounds to reduce a sentence.\footnote{ASF, OGB, Suppliche, F. 2530, no. 95, July 1750.} The definitive signs that the line of sanity had been crossed lay in the pattern that could be identified behind the events. That is, it depended on the possibility of proving that the crime had been unpremeditated or fortuitous, the nature and intensity of the passion, but also on the person’s biography, for it was pertinent if they had a tendency to lose their temper to the point of irrationality.

The key to how lawyers and judges assessed the emotional reaction under scrutiny is provided by the words accompanying the aforementioned feelings. Sometimes, the anger is only termed as “\textit{avutosi a male}”, or “\textit{revocatosi all’animo}”, or a “\textit{mal animo}”, which needed to be “\textit{sfogato}”, expressions that described the feeling of resentment and indignation caused by a certain event that eventually led to the need to vent it. However, in other cases the accused had been “infuriated” (\textit{infuriatosi}) and with his “blood upside down” (\textit{il sangue sottosopra}),\footnote{ASF, OGB, Suppliche, F. 2511, no. 8, April 1730.} acted in “the heat of anger” and the “heat of passion” (\textit{calore dell’ira} and
calore della passione), or “taken by anger” (preso dall’iracondia). Descriptions here draw on the usual physical changes that were thought to accompany an outburst of rage, to highlight the degree to which the feeling had clouded the suspect’s judgement.

Episodes of frantic anger appear in fact as an argument frequently put forward in petitions to reduce a sentence. Even if these petitions did not always result in a favourable response, they are indicative of the interpretations given to these emotions, and their power to alter a person’s mind. Resolutions regarding how to punish and when reductions of penalty were to be conceded, as we have seen, were passed after taking complicated aspects into consideration, ranging from the seriousness of the crime, to the familial, social and mental circumstances of the accused. For instance, a man charged with the murder of his father-in-law was sentenced to the galleys for life, although the criminal proceedings established that he had acted “infuriated” by his wife’s denial to return him some items that belonged to him. So, the attack had been clearly fortuitous, and could be explained because he had “the blood upside down” by reason of his wife’s insults and refutation. Since the attack had been unpremeditated and he had not been in control of himself while he committed it, he was spared the death sentence. Nonetheless, this was not found to be reason enough to grant a further grazia, as the accused later requested.

Excessive displays of rage were frequently accompanied by inebriation, which theoretically served to prove further the extent to which the person had been bereft of reason when committing the crime. Drunkenness, it was widely agreed, exacerbated the inability to control one’s temper. Petitioners in fact tried to attenuate their responsibility using the argument that while “overheated with wine” (riscaldati dal vino) they had been “seized with anger” (sorpreso dalla collera) or “seized with violent passion and insurmountable anger” (sorpreso da violenta passione, e da insuperabile collera).


Because there was always a concern for discipline, men who pointed to their inebriation to explain their irascible reaction were not likely to see their sentence commuted. The circumstances surrounding the crime and the individual’s past history were fundamental in determining to what extent they deserved a grazia. On this, see Chapter 5, section 1.
Defence of honour, revenge, “passions” and jealousy were the most commonly mentioned triggers of uncontrolled outbursts of passions leading to criminal prosecution. In all these cases petitioners singled out uncontrolled anger, of a kind that temporarily disturbed their judgements, as what moved them to act. Anger presented in the form of an irrational passion was not only present in lower-class street brawls, but was equally censured in the higher ranks of Tuscan society, whose social ethos demanded, especially from men, the capacity to reflect upon the manifestation of passion before taking an action. For instance, in 1743 a noble man was denounced to the Auditore Fiscale because, sword in hand, he had demanded recompense for an offence. Instead of giving the offender enough time to defend himself, he let himself be overcome by the “heat of passion” and attacked immediately. The noble man himself attributed afterwards the episode to the “heat of anger”, which had not allowed him to “reflect” properly.

Anger, independently of whether it stemmed from unrequited love, jealousy, or just revenge, appears in criminal procedures as the quintessential passion that “blinded”, overpowered and transported the accused far from the realm of reason. While the power of passions to shatter one’s reason was widely accepted, judges often differed with petitioners regarding the extent its consequences could be condoned. Let’s compare two situations. A father shot a man “taken by passion and blinded” (presso dalla passione, ed accecato) to defend his daughter’s honour, whom the victim intended to “make love to” (amoreggiare) and had declared his intention to make her pregnant at any cost. In another case, a man shot his lover as he was “transported with passion” (trasportato dalla passione) when he found out that she intended to abandon him. Although in both cases the victim had survived the attack, in the first one the man was sentenced to internal exile (confino), while in the second...

955 Honour, revenge and jealousy appear to be the common denominator of the early modern criminal prosecution. See Brackett, *Criminal Justice and Crime*; Dean *Crime and Justice in Late Medieval Italy* or Trevor Dean, and K.J.P. Lowe, (eds.), *Crime, Society and the Law in Renaissance Italy* (Cambridge: Cambridge University Press, 1994). The connection between irrational emotions in the shaping of notions of criminal insanity still constitute an underexplored field, particularly in the Italian context.

956 ASF, CR, *Fiscale*, F. 754, no. 60, July 1743. It is well known that duelling was not an act of uncontrolled anger or committed in the heat of passion, but was instead a controlled and well-planned settling of a dispute among elite societies. The ritualized forms of anger that characterized duelling have been the script for studies following Elias’ civilizing process. See for instance Edward Muir, *Mad Blood Stirring: Vendetta in Renaissance Italy* (Baltimore: Johns Hopkins University Press, 1998) and Robert B. Shoemaker, “The Taming of the Duel: Masculinity, Honour and Ritual Violence in London, 1660-1800”, *The Historical Journal* 45, no. 3 (2002), pp. 525-545. For a resent contribution on the connections between honour and violence, see Carolyn Strange, Robert Cribb and Christopher E. Forth (eds.), *Honour, Violence and Emotions in History* (London: Bloomsbury, 2014).

957 ASF, OGB, *Suppliche*, F. 2537, no. 93, January 1761.

958 ASF, OGB, *Suppliche*, F. 2537, no. 52, November 1760.
he was sentenced to death. Both passions were framed as irrational, but one was considered justified, the other not.

We can observe that in both cases the effect of the passion over the person’s judgement was portrayed by the petitioners with the aim of moving the Grand Duke to grant them the grazia of their sentence. While subject to this feeling, the accused had not been able to command himself. Both defendants had allowed themselves to be commanded by passion, yielding to its force. In both cases this force assumed the form of uncontrollable rage. According to the Otto officials, in the case of the rejected lover, his amorous affection had mutated into “hate and grudge” against the woman (concepisse perciò verso di lei odio, e rancore), and the attack was thus explained by the urge to “vent” (sfogare) such hostility. Thus, what the petitioner intended to frame as a powerful force that captured his mind and commanded his will without him being able to do anything, the judges considered to be the effect of a “determination” (determinatosi di volersi sfogare) to “vent” his hatred. Unpremeditated attempts of murder under the effect of a disturbed state of mind were changed by the judges into deliberate revenge. In contrast, the need to defend a daughter’s honour, even if this resulted in attempted murder, was considered less reprehensible and the motives behind the action were not questioned. Nonetheless, it only served to spare the indicted the death sentence, but not to escape internal exile.

Similarly to what Natalie Davis has pointed out regarding sixteenth-century pardon tales, I have not found any cases where the disturbing powers exerted by anger over the mind were employed to diminish the responsibility of women for committing a crime. Women do appear engaged in crimes of murder, assault and slander, but their anger is generally not used as either a mitigating or an aggravating factor. In cases of quarrels and altercation that ended in physical violence, women were also said to have “taken it badly” (avutosi a male) when somebody had insulted them or their families, and so they threw a stone in response, for

959 Ibid.
960 Similarly, a man charged with the infanticide of his grandchild was spared the death sentence because he had acted driven by the passion that “overpowered” or “oppressed” him (sopraffatto dalla passione) when he found out about his daughter’s pregnancy, which was only when she gave birth. Although he requested a lenient sentence, it was not granted. ASF, OGB, Suppliche, F. 2523, no. 161, March 1743/44.
961 Davis, Fiction in the Archives, p. 81-82. It is well known that more men than women were prosecuted for violent behaviour in the early modern courts. However, as Garthine Walker suggests, “This interpretative model of men’s violence as ‘normal’ and women’s as numerically and thus culturally insignificant is inadequate”. Garthine Walker, Crime, Gender and Social Order in Early Modern England (Cambridge: Cambridge University Press, 2003), p. 75.
962 However, to prove this assertion it would be necessary to conduct a more systematic study of the Tuscan criminal sources than the one on which this study is based.
instance. Female and male violence stemmed from similar motives: defence of honour, self-defence, jealousy, mere animosity or resentment, to name a few. Responding with insults, blows, throwing stones or any other violent reaction that could eventually lead to the death of an adversary was a likely reaction for both genders. However, female anger, I am tempted to say, was not used as evidence of a temporary state of mental obfuscation. The attenuating factors of their physical violence or murderous actions were more likely to be found in the principles of self-defence and honour, on the one hand, and lack of full discernment or plain simplicity (semplicità or sciocchezza), on the other – notably when women tried to excuse infanticide – rather than in an uncontrollable fit of rage.

Angry Reactions in Civil Procedures

When we leave the domain of criminal justice to enter interdiction procedures or special requests to denounce a disordered relative, the association between certain forms of anger and mental disturbance is revealed to be not only gender specific, but also age specific. While emotional instability was identified as evidence of both female and male mental disturbance, violent and particularly irascible reactions are almost invariably associated with men. Frequent and ungrounded outbursts of rage appear as a typical characteristic of male mental incapacity in interdiction records. Divenuto furioso, solito dare in frenesia, feroce, fiero or furibondo are characteristics that appear regularly in the family narratives disclosed to the Tuscan authorities. Different gradations of mistreatments (strapazzi) or physical and verbal abuse were frequently introduced as evidence of the disorder in which men in a state of mental incapacity found themselves. The signs of disturbed angry reactions were to be of an “unruly nature and a quarrelsome disposition” (natura poco docile e di animo rissoso) or a “ferocious nature” (naturale feroce), the tendency to be transported by sudden wrath or outbursts of fury for the most unexpected reasons (escandescenze and furiosi trasporti), being driven by a maddening fury and engaging in “excesses of fury” (furibondo frenetico and eccessi de furia).
Although irascible reactions were given as evidence of male mental incapacity throughout the adult lifecycle, irascibility and a tendency to let themselves be galvanized by a surge of anger was more frequently associated with old age. Interdiction procedures suggest that irritability and illogical fits of anger were thought to be aggravated when men reached the last decades of their lives. When men were considered to have reached a “decrepit age” – roughly in their 70s and 80s – they were depicted as particularly prone to being governed by their fits of fury.

When interdiction narratives involving old men delved into the realm of disturbed emotions to evidence mental incapacity, the reaction that most frequently comes up is the product of maddening fury. A series of undesirable and reprehensible actions were said to be committed under the “heat of anger” or “under the impetuosity of indignation and anger.”

Interdiction records portray the mental decay of old men as a stage in life characterized by an emotional instability that most of the times assumed the form of uncontrolled fits of fury.

Although emotional disturbances in old age remain an unexplored field, the historiography of the experience and the cultural meanings of early modern old age have usually described a tendency to low spirits as its most commonly attributed emotional affliction. Thus, the connection observed in interdiction procedures between growing irascibility and old age is at odds with what the specialized scholarship has determined based on different sources. In fact, humoral theory tended to view old age as a stage in life mostly governed by melancholy and phlegm, tending to passivity rather than to aggressiveness. According to studies of eighteenth-century medical literature on old age which have touched upon the emotional disturbances of old age, medical writing saw the elderly as no longer

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966 For instance, the interdiction proceedings of Filippo Catani, 89 years old; Carlo Felici, 84 years old, ASF, MPAP, Memoriali, F. 2301, no. 218, April 1744; Giovanni Magherini, 70 years old, Antonio Foreznani of 90 years old, Ibid, F. 2302, no. 73, January 1748/49; Francesco Taddei, of “advanced age”, Ibid, F. 2303, no. 213, September 1754.

967 “…nel calore dell’iracondia, e della vendetta…” and “…nell'impeto dello sdegno, e dell'ira…” ASF, MPAP, Memoriali, F. 2301, no. 218, April 1744. Contrary to its English definition, the word impetuosity (impeto) in Italian meant not only to act “quickly and without thought or care”, but referred more to the emotional disposition that commanded the movement. Impeto was a “movement accompanied by violence and fury.” See, respectively, Oxford Dictionaries, s.v. “impetuous”, http://www.oxforddictionaries.com/definition/english/impetuous?q=impetuosity#impetuosity__6 and Vocabolario degli accademici della Crusca, 4th ed. (1729-1738), s.v. “impeto”, http://www.lessicografia.it/IMPETO, both accessed 19 August 2014.

troubled by unwanted passions, for mental and physical decline was thought concomitant to “weakening of sensations, appetites and passions.”

We need to bear in mind that the characteristics of the sources examined here, as I have pointed out several times, conditioned the narratives. The disruption to family life caused by prodigality and dementia changed according to the age of the defendant. While in the case of young men the issues at stake were their future families and the authority of their elders or, in the case of middle-aged men, the administration and care of a current family, in the case of the elderly the family was already grown up, and so it was a matter of legacy and inheritance. It could be argued, therefore, that the family conflicts surrounding the elderly made the interdiction narratives denouncing both old men and old women more open to descriptions regarding the emotional realm. But, besides these reasons, which could be circumstantial, the major difference between the emotional disturbances described in old age and those of younger ages can be found in the meanings attributed to such emotional displays. Whilst in the case of younger defendants interdiction narratives ascribed the manifestation of emotional disruptions to mental illness, in the case of the elderly they were invariably attributed to the effects of old age. In other words, old age produced the inability to control one’s emotions, together with the mental decay it entailed.

The meanings of fury or any type of anger able to cloud one’s judgment when they appear in interdiction procedures should be examined against a bigger picture. Anger has been examined as an important force behind matrimonial litigations, for instance. Insults and verbal abuse, physical violence and even death threats were part of the family conflicts disclosed to Early Modern courts, and constituted the most common cause for matrimonial litigation. As scholars working with matrimonial disputes have pointed out, the fact that anger and violent reactions appear almost invariably associated with male behaviour has more to do with the uses and requirements of justice than with an actual gendered differentiation. For a request of separation to be successful, petitioners – predominantly female – had to present plausible stories and strong motives, among which sevizie (cruelties) and physical threats that put their life in danger were amongst the most effective. Against this context, there is nothing particularly remarkable in the repeated allusions to mistreatment and aggressive behaviour portrayed in interdiction procedures, except that they were argued as evidence of

969 Troyansky, Old Age in the Old Regime, 119. See also Schäfer, “That Senescence Itself is an Illness”.

970 La Rocca, Tra moglie e marito, p. 256. In most European scenarios women were the most common initiators of matrimonial suits. See also Silvana Seidel Menchi, “I processi matrimoniali come fonte storica”, in Seidel Menchi and Quaglioni, Coniugi nemici; Lombardi, Matrimonio di antico regime.
mental incapacity and behavioural deviance. That is, violent reactions were used not only to prove the need to live separately from a husband, but to explain why a father, husband or son was thought to be subject to mental disorder.

Complaints about spousal violence have been mostly examined from the point of view of expectations about marriage, the emergence of the so-called romantic family, power relations and behavioural norms. However, studies have generally not read these disputes from the point of view of the history of madness, thus missing the opportunity to elaborate on how litigants conceived of emotional distress, how it was thought to affect the mind, and how they made use of the argument to turn a litigation to their favour.

Thus, the narratives under study here illuminate the problem of references to matrimonial violence from a different perspective. The fact that ungrounded or illogical violent outbursts were increasingly used as evidence of mental incapacity suggests interesting conclusions in this regard. For one, it portrays women as making use of shared codes about what constituted mental deviance, and how it affected one’s emotional displays. It also suggests that the notion that disturbed emotional reactions served as evidence of altered states of mind could have played a role in the change in the way that matrimonial disputes started to be settled towards the end of the century.971 Furthermore, women were generally ascribed with the role of temporary head of the family while their husbands or sons were in a state of mental incapacity, which inverts the traditional order of rationality inside the family, whereby judgement and reason were eminently masculine characteristics.

Frantic fits of fury were at the core of the traditional image of madness. The raving mad running amok in the streets was a feature of the social fears that were responsible for having devised strategies such as confinement and interdiction to deal with the problem since antiquity. We have seen that the furioso was a Roman category that had passed and survived in the Tuscan judicial framework until the eighteenth century, even if it had fallen into disuse. And the pazzo furioso was the legal category that justified committal to the mental hospital, and which was transformed into mania furiosa by the medical language. But, violent reactions are not the most common emotional display cited as evidence of mental incapacity in interdiction proceedings or in the records of the office of the Auditore Fiscale. Particularly towards the second half of the century, emotional disruptions come to encompass a wider

971 According to Daniela Lombardi, physical and verbal forms of abuse started to be considered an acceptable cause of separation even when life was not in danger towards the end of the century. Daniela Lombardi, “L’odio capitale, ovvero l’incompatibilità di carattere. Maria Falcini e Andrea lotti (Firenze 1773-1777)”, in Seidel Menchi and Quaglioni, Coniugi nemici, pp. 335-367.
array of displays, ranging from violence, to instability to what we today would call depressive states. But what seems even more interesting is the wide rage of emotional distresses associated with the same individual. What current psychiatry today calls bipolar disorder was a common feature of mental disturbances evidenced through emotional distress. Violent fits of anger and frenzy could easily coexist or alternate with low spirits and melancholy. As the next section will explore, at the core of these narratives is the perception that the key to ascertaining the presence of mental incapacity, instead of fury or persistent low spirits, was emotional instability. From the initial descriptions that were limited to the principles of the preservation of the family through good economic management, interdiction narratives increasingly opened up to more nuanced forms of understanding mental incapacity.

**Emotional Instability and Unpredictable Emotional Reactions**

**Passions**

In 1756 a man prosecuted for contumacy for firing his arquebuse at his paternal uncles attempted to reduce his culpability by claiming he suffered from the “great misfortune” that “many times, particularly when agitated by some passion, he remains completely bereft of cognition, and totally demented and unable to understand his duty.” His petition was accompanied by the testimony of his uncles in which they ratified their nephew’s assertion by saying he was widely reputed to be *pazzo* and *scemo di cervello*. The interesting issue here is how the petitioner linked his fits of madness with his tendency to be agitated by some passion. Attesting to this new concern that can be observed in the records towards the second half of the century, the petition circumscribed the crime to an episode of temporary madness produced by a disturbing passion. The petition made use of the long-lasting legal tradition that attributed to passions the power to cloud a person’s judgement, only that here it was placed in a context of a person who was reputed to be evidently mad. In other words, it was not that a sudden overpowering rage had moved him to act, as in the majority of the cases examined above, but that he was overpowered by rage only because he was mentally ill. His emotional disturbances were directly framed as pathological, as caused by his mental illness.

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972 “…esso supplicante per sua gran disgrazia spesse volte, specialmente allora quando è agitato da qualche passione, resta affatto privo di cognizione, e totalmente demente, ed incapace di più conoscere il suo dovere…” ASF, OGB, *Suppliche*, F. 2534, no. 113, April 1756.
In criminal records, passions are predominantly framed as a sudden feeling of rage, or as a tendency to experience fits of fury that resulted in the shattering of a person’s rational faculties. However, notwithstanding the frequent references to passions as a powerful force capable of disturbing judgement in the criminal proceedings and supplications to the Otto di Guardia, the term makes a relatively minor appearance in the records of the Magistrato dei Pupili. The phenomenon is worth examining, particularly if we take into account that passion is singled out by scholars as the most common term of the early modern world for making reference to emotions, particularly when they were associated with irrationality. Passions was still the most frequently used term in eighteenth-century medical literature to make reference to disturbed emotions. Hysteria and hypochondria were generally termed Hysterical passion or Hypochondriac passion in the eighteenth-century Italian medical consultations. Both afflictions were strongly correlated with passioni d’animo, which was the most frequent medical expression that reference to those emotions that were capable of “irritating” the nerves and producing – or aggravating – mental afflictions.973

Passion in the records of the Pupilli is mostly employed to make reference to the vital force guiding the behaviour of a young prodigal. It was either the “passion” to gamble, the need to “satisfy their passions” or the “passion that governs him” that drove them to dissipate.974 Passion appeared in this context as a force that took control over the individual, commanding his thoughts and actions, inducing unhappy consequences. The passion to spend, gamble, sell goods, or indulge in the pleasures of lavishness, women and alcohol was portrayed as a compelling force rather than as an overpowering feeling, albeit with the same end. The disturbing powers of the passion to gamble assumed particularly exacerbated levels when the gambler was confronted by his relatives. In one case, it was said that it turned into a “mad passion” (forsennata passione) driving him to engage in “excesses of fury” (eccesi di furia), and causing him to manifest “fierce agitations” (fieri trasporti) to the extent of “frenzy”, all signs that according to his wife proved his “uncertain temperament and

973 See the medical consultations of Niccolò Cirillo, Giuseppe del Papa or Giovanni Targioni Tozzetti, to name a few. Cirillo, Consulti Medici; Del Papa, Consulti Medici; BNCF, Manoscritti, GTT, N. 234, “Consultationes medicæ”, cart.2, fasc. X, Consulti per affezioni ipocondriache ed isteriche”.
974 ASF, MPAP, Memoriali, F. 2302, no. 128, April 1749; Ibid., F. 2303, no. 15, December 1751 and no. 59, August 1752, respectively. The term appears used in this sense in few more cases, see Ibid., F. 2305, no. 92, September 1760; Ibid., F. 2306, no. 265, April 1766 and no. 293, August 1766.
humour." The compulsion driving the action of the eighteenth-century prodigal strongly resembles the driving force of a bipolar sufferer in a manic episode, with hyperactivity and an aggressive obstinacy that grew stronger as his gambling was impeded.

Alternatively, although to a lesser degree, passion was employed to mean amorous affection, lust, or occasional suffering, without implying a force capable of disturbing the mind. Contrary to what one might think when taking into account the contemporary medical lexicon of psychological suffering, interdiction narratives employed a quite rich and varied range of terms to allude to emotional turmoil. Instead of turning to the very common passioni d’animo (which I have been able to find only once in the records of the Pupilli), litigants and government officials preferred to attach the adjectives of irregular, unstable, uncertain, uneasy and extravagant (irregolare, volubile, incerto, inquieto and estravagante) to the nouns used to make reference to the psychological state (capo, temperamento, umore, spirito or animo). Rather than a persistent preference for one of the extremes of the emotional palette, interdiction narratives favoured the image of shifting moods as their preferred evidence for mental incapacity. I do not intend to imply here that this can be taken as a sign of a shift from passions to emotions. On the contrary, the overwhelming presence of the term in contemporary medical literature or in criminal records attests for its currency. But, the relative absence of the term in the Pupilli records does suggest that Tuscan society preferred a different set of terms to make reference to a disordered and uncertain disposition.

Emotional instability was repeatedly singled out as evidence of some degree of mental perturbation in the evidence examined here. Extravagant and irregular characters, unpredictable or illogical reactions and unease abound in the narratives of interdiction procedures, a profusion replicated in descriptions of perturbed states of mind reported to the

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975 Accusations of Angiola Mori against her husband Gaetano Giorgi in her interdiction petition, which was not granted. ASF, MPAP, Memoriali, F. 2306, no. 293, September 1766. Notwithstanding these denunciations, he was interdicted only around 6 years later. The case appears again in Ibid., F. 2309, no. 78, May 1773.

976 According to the DSM-5, a Manic Episode is characterized by “a distinct period of abnormally and persistently elevated, expansive, or irritable mood and abnormally and persistently increased goal-directed activity or energy”, accompanied by at least three to four of the following symptoms: “1. Inflated self-esteem or grandiosity, 2. Decreased need for sleep..., 3. More talkative than usual or pressure to keep talking, 4. Flight of ideas..., 5. Distractibility..., 6. Increase in goal-directed activity (either socially, at work or school, or sexually) or psychomotor agitation (i.e., purposeless non-goal-directed activity), 7. Excessive involvement in activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)”. In the case of the eighteenth-century Tuscan interdicted, symptoms 1, 2, 5, 6 and 7 are repeatedly reported, particularly the last one. Diagnostic and Statistical Manual of Mental Disorders, Fifth edition (DSM-5) (Washington: American Psychiatric Association, 2013), p. 124.

977 Dixon has dated the shift from passions to emotions in the English language, for instance, around the middle of the nineteenth century. Dixon, From Passions to Emotions.
authorities of the Grand Duchy. Furthermore, if we take into account that what was expected in
a good *pater familias* or a virtuous administrator was that he was “well moderated in his
actions” (*ben regolato nelle sue operazioni*),\(^978\) it becomes clear that lack of regulation over
actions and emotions meant deviance.

Behind this evaluation of self-government we find long philosophical and medical
traditions, as we have seen. Renaissance culture had praised the self-government of passions
and appetites, producing a vital discussion that visualized the importance of balanced life
regimes not only for health, but also for social life and politics.\(^979\) Similarly, humoral theory
was structured according to a ruling principle: the importance of regulation, of balance. If in
the previous centuries emotional imbalance was primarily interpreted as a disarrangement in
the levels of the four humours, towards the eighteenth century will and the mind were
increasingly ascribed a predominant role as ultimate regulators of the passions. But, the
importance of regulation was still at the core of the management of improper passions,
organized under the belief that a regulated life equalled a healthy life, while lack of it
inevitably entailed illness. The various forms of unpredictable reactions and emotional
instability that we see recurrently cited as the predominant symptoms of mental affliction in
eighteenth-century medical literature were similarly employed with increasing frequency as
evidence of mental disturbance in lay social circles.

The medical recommendations given to patients complaining of mental afflictions or
nervous complaints such as hysteria or hypochondria invariably point towards the importance
of regulation. Patients had to rule their lives and follow regulated life systems, with a
convenient amount of exercise and rest, a balanced diet and a proper combination of
intellectual activities, domestic affairs and social amusements. Excess and lack of regulation
were, in this sense, equated to unhealthy lives, and any patient who intended to counteract
disease had to undertake serious changes to regulate his or her life. In particular, a regulated
life was the only way to avoid the damaging effects of *angutie d’animo*, which were the evil
elements often responsible for triggering mental disease.

\(^978\) ASF, MPAP, *Memoriali*, F. 2304, no. 70, December 1756.

\(^979\) I am thinking here not only on the predicaments of Galenic medicine examined in section 1 of this chapter,
but in general in conduct manuals, or the humanist praising of the virtuous politician. These premises are at
the core of the *vir virtus* studied by Quentin Skinner, for instance, in the self-discipline of Norbert Elias’
civilizing process, or in the self-examination and scrutiny promoted by the Protestant and Catholic Reformations, to name
a few instances. Quentin Skinner, *The foundations of modern political thought* (Cambridge: Cambridge
femminili e discernimento degli spiriti”, and Françoise Lebrun, “The Two Reformations: Communal Devotion
Madness was supposed to rule in unregulated or disordered life systems. Giovanni Targioni Tozzetti, for instance, repeatedly argued for the importance of regulation, control and authority as an effective way of curing madness in his medical consultations and legal expert opinions. Targioni Tozzetti’s call for regulation is echoed in the various *Consulti Medici* published during the eighteenth century both in Italy and abroad. Even more interestingly, the importance of equilibrium and, particularly, the damaging effects of emotional instability and emotional excess also can be traced in the legal records under study here, and form an immanent layer of the lay narratives of mental disturbance.

*Uneasiness, Irregular Characters and Voluble Temperaments*

The inability to control one’s temper and appetites was a major concern for early modern families. Inner turmoil and lack of self-control, we have seen, were commonly employed to describe, and thus prove, mental incapacity. In particular shifts of temper, which denoted a lack of self-government and subsumed the fear for social disorder. As the second half of the eighteenth century drew near, petitioners increasingly tended to centre their claim of mental incapacity on the observation that their relatives manifested a persistent instability, indicated by their recurrent shifts of ideas, purposes or mood. That their expenditure and debts were capricious was only one aspect of a disorder that, on a relational level, was primarily perceived as an unpredictable character. Concomitant to the incapacity to follow rules and ascribe to the expected behaviour, petitioners singled out the defendant’s inconsistent or “irregular” (*irregolare*) “character”. Personalities were perceived as uncontrollable, not only because they refused to be tamed, but even more so because no patterns could be drawn to predict their behaviour. The resolutions, affections and animosities of these people could shift unexpectedly to any imaginable end at the slightest provocation.

The conception of the disrupted emotional state identified in prodigals and the demented is best summarized under the term *inquietudine* (uneasiness), which presupposed a lack of internal peace with physical and emotional manifestations. The allegedly mentally incapacitated men and women were often defined by their relatives as *inquieto* or *inquieta*, demonstrating a *spirito inquietissimo* or a *naturale inquieto*. *Inquietudine* was defined in the eighteenth century as “travaglio, passione, tribolazione”, that is, affliction, passion,

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In the sources under study here, the term was employed to define the emotional and physical sensation of feeling uneasy, disquieted, anguished, emotionally agitated and disturbed. It was usually accompanied by descriptions of the actions that indicated this state of disturbance, which served both to illustrate and categorize the type of mental affliction under observation. Inquietudine could affect a person’s mind at different levels, and was evidenced through a gradation of emotional displays, from fickleness, volatility and instability, to frenzy. Inquieto/a was used to characterize someone who stubbornly contested judicial resolutions or who engaged in a never-ending litigation. But, it also functioned to indicate the emotional state that accompanied a deranged behaviour, allowing us to identify the feeling of uneasiness that frequently vexed the mentally disturbed at the same time as it served to allude to its relational consequences. In fact, the term was employed not only to describe perturbed states of mind, but also to characterize the “disquieting” influence these behaviours exerted on the surrounding family members.

The elasticity observed in the meanings and applications of inquietudine, shared by most of the judicial categories examined in this thesis, served to circumvent the need to employ more straightforward terms to mean mental disturbance. This is of particular interest when we examine more hidden meanings of the term, comparing them against the different contexts in which they could be used. Let me give an example. Disordered and deviant women were confined in the Medicanti for allegedly being donne inquiete, in the words of a woman who in 1759 complained she did not fit that pattern. To her misfortune, the Pupilli officials confirmed to the central administration that she was in fact an “uneasy woman” (inquietissima donna) and manifested “an extraordinarily uneasy nature” (naturale inquieto fuori di modo). Because there was no need for an interdiction, a more straightforward category of mental incapacity was not needed in her case. However, in other cases inquieto was coupled with “stupid in the brain” (scemo di cervello), “weakness of mind” (debolezza di mente), “signs of an unsound mind [segni di non sana mente]” or furioso, in which cases the link between the inner turmoil denoted by the word inquieto and mental illness was

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981 Vocabolario degli accademici della Crusca, 4th ed, 1729-1738, s.v. “inquietudine”, accessed 15 January 2014, http://www.lessicografia.it/Controller?lemma=INQUIETUDINE. I have decided not to translate inquietudine as anxiousness, distress or disturbance to avoid the connection with the modern meaning of these terms.

982 ASF, MPAP, Memoriali, F. 2305, no. 25, October 1759.
straightforward. Moreover, the very presence of the term *inquieto*, when used in connection to other categories such as “prone to fall into frenzy” (*solito dare in frenesia*), “fantastical man” *uomo fantastico* and “madness” (*pazzia*) served to demonstrate that an accusation of dementia was sufficiently grounded.

The gender differentiation disclosed by the two examples presented above is not fortuitous. Although *inquietudine* was employed in descriptions of both men and women, its connotations and ambit of application were gender-specific. In women, it particularly denoted a difficult temper and questionable demeanour, and indicated passionate or unstable characters. Furthermore, women of “uneasy spirit” (*spirito inquieto*) were generally said to change their minds for no reason. In fact, the woman cited above who had been sent to the Mendicanti allegedly manifested an *inquietudine* that presented both characteristics; she was considered to be incapable of moderating her language, committed “great iniquities” and was “poorly capable of adapting to any plan.” Her uneasiness was further connected to fickleness, that is, the propensity to change loyalties and affections unexpectedly, becoming thus incapable of being faithful to one person.

While women’s disturbed emotions, subsumed by the term *inquietudine*, were generally shown in their changing decisions, their misguided affections, their unfounded sufferings and vexations, men’s distress was often connected to displays of anger and periods of agitated hyperactivity. They were restless and anxious, constantly moving, unable to sleep at the recommended resting hours, constantly changing their location or activity. They were never satisfied, unable to yield and accept the rules, unable to settle. Their inherent uneasiness at times made them irritable and frantic, and at times excessively driven by a given sensation, a feeling or an idea. Thus, it also made them stubborn and fixed on irrational purposes or improper affections. Their *inquietudine* drove them to engage in futile and expensive litigations, which could be against their relatives, their creditors or whoever was opposed to their goals. Finally, it made them utterly confrontational to the commands of the Magistrato.

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983 See ASF, MPAP, *Memoriali*, F. 2304, no. 32, June 1756; Ibid., F. 2307, no. 19, May 1767 and Ibid., F. 2303, no. 210, August 1754, respectively.

984 ASF, MPAP, *Memoriali*, F. 2302, no. 73, January 1748/49.


986 See the symptoms defined by the DSM-5 for a manic episode in note 976.

987 See, for instance, the cases of Vincenzio Coletti, Giuseppe Buonamici or Pietro Marracci in ASF, MPAP, *Memoriali*, F. 2302, no. 44, 1748 and no. 106, 1749, and Ibid., F. 2306, no. 265, 1766, respectively. Litigiousness was also coupled with extravagance and capricious. The evidence examined in this thesis suggests that craving for litigation was conceived as an anomaly, although it did not receive, to my knowledge, a medical categorization. The limited scholarship on the subject suggests that pathological litigious behaviour, although
dei Pupilli, making them to send petition after petition, or sometimes presenting themselves personally before the officials to try to get their way. Let’s not forget that Galluzzi subsumed his reprobation to the disordered nature manifested by the Grand Duchess Marguerite Louise by resorting to the term “uneasy spirit.”

Again the key to grasping the meanings ascribed to these concepts lies in the combinations of terms. One who was said to demonstrate a “rather uneasy and resented nature” (naturale alquanto inquieto e risentito) was also described as of an inquietissimo naturale, becoming in his advanced age “a character so irregular that treating him becomes impossible for everyone, and he gives sometimes signs of an unsound mind.” Thus the inner instability that characterized someone as inquieto was also linked to a character (in the sense of temper here) considered irregular (irregolare), unstable (volubile) and uncertain (incerto). The two extremes of this instability received unequal attention in the narratives, with a declared preference for the violent and angry edge. This should not lead us to assume that the low-spirited edge was not perceived but, rather, that it was the cause of far less disturbance for family life. There are some exceptions, nonetheless. One is when dejection led to suicidal intentions, in which case the low-spirited state was directly transformed into the medico-legal lexicon proper to the procedure of committal (most times through the plain pazzo/a furioso/a, on a few occasions termed delirio melanconico). The other exception is when dejection affected the financial performance of the sufferer, manifested through a profound insecurity or weakness of character that made him incapable of making decisions, or unable to stick to any plan (a characteristic termed volubile). Remarkable in this regard are the letters written by one interdicted person, where he disclosed his total impotence with regards to the management of his property, describing his desperation and the recurrent urges he had to disappear and leave everything behind (including his wife and children) “because like this I cannot live any more” (perche cosi non posso più vivere). In the eyes of the officials of the

with classical roots, was delimited by German psychiatry around the mid-nineteenth century as the “litigants’ delusion”, a concept that assumed different connotations according to the psychiatric schools of the twentieth century. Benjamin Levy, “From paranoia querulans to vexatious litigants: a short study on madness between psychiatry and the law. Part I”, History of Psychiatry 25, no. 3 (2014), pp. 299-316.
988 Galluzzi, Istoria del Granducato di Toscana, vol. IV, pp. 139-151, and passim.
989 “...di un carattere così irregolare che impossibile riesce a chiunque il trattarlo, e dà qualche volta dei segni di non sana mente.” ASF, MPAP, Memoriali, F. 2307, no. 19, May 1767.
990 See the admission records of Santa Dorotea. ASF, SD, Motupropri, Rescritti..., F.1-15.

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Pupilli, these letters demonstrated his volubilità and complete incapacity to regulate his affairs.  

It seems clear that Tuscan society in the eighteenth century conceived of madness as a disorder that could develop both extremes in the same person. This could change unexpectedly from laughter to tears, or periods of dejection that were intersected with periods of hyperactivity, extreme irritability and compulsive behaviour. The manic edge was also unstable, and did not suppose a constant state of frenzy. As said by a husband who petitioned for his wife’s committal in 1760, “she is mad [pazza], and many times goes from a cheerful madness [pazzia allegra] to a frenetic madness [pazzia frenetica].”

The unstable disposition that characterized a state of inquietudine supposed both that the person was governed by his or her emotional turmoil, which oscillated between two extremes, and at the same time an inability to act in accordance with behavioural norms. For this reason, inquietudine was also equated to an “irregular head” (capo irregolare), and a behaviour that was both improper and extravagant. A capo irregolare was also someone of an “extravagant humour”, who was demonstrated as being “indocile”, lived “irregularly” (meaning both beyond the law and with instability), committed “unreasonable arbitrary [actions]”, abused his wife, and was, thus, “half mad” (mezzo matto). The adjective irregolare highlighted not only that the person lived outside the rules, was disorderly (in these cases, coupled with sregolato, used also to indicate to the licentious activities of the prodigal), but, foremost, that this disorder came from an irregular head. A capo irregolare was very similar to an “extravagant brain” (cervello stravagante) and, in general, to the meanings behind any noun accompanied by the latter (i.e. natural, humour, behaviour, to name some).

It has been stated that, during the eighteenth century, emotional disturbances were predominantly identified in women and that, consequently, emotions as a cause of madness were predominantly employed in descriptions of female mental disturbance. We saw in a previous chapter that feminist historiography following the study by Elaine Showalter has

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991 Interdiction proceedings of Egidio Pieri, ASF, MPAP, Memoriali, F. 2305, no. 7, August 1759 and no. 81, July 1760; Ibid., Lettere, F. 2522, 21 and 26 February 1760, n/f. See also the interdiction proceedings of Giacinto Torsi, denounced by his relatives for his volubilità dei sentimenti and “the extravagancy of his operations”. ASF, MPAP, Memoriali, F. 2304, no. 60, 1756.
992 “...è pazza, e spesse volte da una pazzia allegra, passa ad una pazzia frenetica, tanto che conviene al supplicant[e] per sicurezza della sua famiglia, e delle persone ad essa vicine, tenerla di continuo legata in una stanza da dove bene spesso ne scappa...” ASF, SD, Motupropri, Rescritti..., F. 3, no. 91, 1760.
993 ASF, MPAP, Memoriali, F. 2303, no. 27, May 1752.
994 ASF, MS, Suppliche, F. 1209, June-August 1761, fols. 402-411v.

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identified the beginnings of the feminization of madness in the eighteenth century. Even Houston, who questioned that madness was a female malady, conceded that “emotional causes of insanity... were more likely to be cited as an explanation of a female’s descent into madness.” Taking into account the commonly held assertion regarding the chronology of the feminization of madness, it is interesting to note that the Tuscan legal records identified emotional causality for both male and female mental disturbances, suggesting that men were thought to be equally likely to be overcome by emotional suffering.

The sources under examination here shine light predominantly on male mental disturbance. In the majority of the cases, we have men and women describing male disturbance, and not the other way around. This restriction in the sources allows us to draw interesting conclusions regarding the so-called feminization of madness. How emotional suffering was codified and evaluated, however, varied according to gender but this, to my view, has more to do with the different spaces in which madness was staged in the case of men compared to women (i.e. patrimony administration, public and professional life, etc.).

It could be argued that this is explained by the structural bias of the sources under study here, which give a distorted image in terms of gender balance. However, the very fact that the sample of cases studied largely involved men proves that emotional imbalance was considered to affect both women and men. Furthermore, given that men were mostly denounced by women, interdiction narratives prove that women assumed the role of the rational and stable head of family that their husbands or sons had failed to assume. This position, as has been argued in other parts of this thesis, was promoted by the Tuscan administrators, who in fact considered that the best way out of the disorder produced by a mentally afflicted man in the family was to rely on the domestic capacities of women. In this sense, if anything, the Tuscan eighteenth-century records suggest that emotional instability was a masculine affliction whose best chances of being cured were to be placed under the rational (and tender) capacities of women.

The danger of perturbed emotions for familial and personal life is not a novelty for the eighteenth century. On the contrary, it echoes the reprimands of contemporary religious writings praising the control of one’s passions, which also recognized that many of them were simply impossible to control (e.g. passionate love, which was thought to obfuscate the mind

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995 Showalter, *The female malady.*
and take control of one’s rational faculties). So strong could the power of sinful passions be that the only possible way to deal with them was to avoid those situations that usually triggered them.

The obsession over inquietudine observed in the reactions and emotional displays of those deemed mentally afflicted, and the lack of inner peace they disclose bears a strong religious component. These narratives are certainly the products of a Catholic culture that had been bred under the precepts of Catholic strategies of confessionalization, and they speak of the appropriation of the religious commands regarding self-control, albeit codified through a different key. Historians of the Reformation and Counter-Reformation have stressed the role of religion in the construction of subjectivity. A well-known strand in this field are the studies on sanctity and possession, with the construction of “new maps of interiority”, 997 and the role of confession and the spiritual adviser in creating the practice of self-examination. 998 Female and male spirituality shaped the early modern emotional system, creating a new subjectivity that could easily become dangerous to the Protestant and Catholic churches. The subjective emotional world was thus shaped and even mapped by the cultural context, which can be traced in the negotiation of the proper ways of expressing feelings in the court records, but also in the religious sensibility.

The late seventeenth and early eighteenth century witnessed a new map of interiority and the place of passions both in public and private life. Familial disorder seemed to be the rule, and the dangers of an uncontrolled imagination were now at the core of the Church’s concerns. The polemic emerged over quietism and the reform of the accepted signs of sanctity at the end of the seventeenth century condemned any external or visually provocative manifestations of mystical experience and other forms of devotional practices considered too sensible and carnal. 999 The aims of confessionalization during the century were centred on the condemnation of juvenile manifestations of love and the excessive liberties promoted by the new sociability of the century and the renewed vigour of the practices of gambling and drinking, which now also involved women. 1000

997 Sluhovsky, Believe Not Every Spirit.
998 Prosperi, “Diari femminili e discernimento degli spiriti”; Schutte, Aspiring Saints; Zarri, Finzione e Santità; Roy Porter (ed), Rewriting the self. Histories from the Renaissance to the present (London: Routledge, 1997), Roper, Oedipus and the Devil, among many others.
999 Brambilla, Corpi invasi, p. 123-186.
1000 For the religious condemnation of passionate love at the beginning of the eighteenth century, see Lombardi, Matrimonio di antico regime, pp. 359-375.
Particularly in Tuscany, the end of the Medici regime favoured a series of reforms aimed at a moral disciplining based on stricter moral codes. The beginning of the eighteenth century witnessed the reactivation of strategies on the part of the Catholic Church to enforce its control over moral behaviour, producing a new discourse on family roles that praised the simplicity and reclusion of the domestic space. As Elisa Nova Chavarria has argued, religious discourse towards the eighteenth century proclaimed the domestic space as a space of affection free from the dangers of the outside world as a way to safeguard the moral and affectionate cohesion of the family. The sermons of late-seventeenth and early-eighteenth century Jesuit preachers, among them the influential Paolo Segneri, particularly embody the renewed campaign against the dangers of passions, which needed to be controlled and purged. Men were advised to evade the temptations of gambling and alcohol offered by taverns by seeking refuge at home with their wives and children. Similarly, women, whom religious discourse had traditionally singled out as more inclined to human passions than men, were called on to seek refuge in their domestic roles as custodians of their children and as well as in the affection of their families. But the familial affections promoted by the sermons were of an increasingly controlled and authoritarian kind. Fathers were advised not to be too complacent with their children, and mothers were warned not to follow their natural tendency to express an excessively affectionate nature.  

Extravagance

Extravagance has been frequently pointed out as a characteristic that subsumed the manifold transgressions committed by the mentally ill. The characterization of mad people as extravagant, doing extravagant things, behaving extravagantly, or displaying extravagant emotions is a *topos* of madness in the early modern world. However, the meanings enclosed within the concept have been largely understudied. Although studies that examine the shaping of legal, medical or cultural languages of madness in the eighteenth century usually touch upon the use of extravagance (and its variations as extravagant humour, temper, discourse,  

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1001 Chavarria, “Ideologia e comportamenti familiari”, p. 704-712. See also Calvi, *Il contratto morale*. The practice of Jesuit preaching, following the model set out by Paolo Segneri, was characterized as theatrical and appealing to emotions rather than to emotions. This was precisely one of the points later criticised by Ludovico Antonio Muratori and the eighteenth-century Church. See Louis Châtellier, *La religione dei poveri. Le missioni rurali in Europa dal XVI al XIX secolo e la costruzione del cattolicesimo moderno* (Milan: Garzanti, 1994).
actions, etc.) to describe madness, I have not come upon a study that addresses the issue in depth.  

Extravagance is an overarching term that was frequently employed to characterize both the behaviour, actions and emotional reactions of the allegedly mentally incapable. Petitioners and authorities frequently summarized the problem of someone held to be mentally incapacitated by labelling their behaviour, mind and disposition as extravagant. As in the majority of the terms examined here, *stravagante* served to indicate the illogical workings of a deranged mind, the emotional turmoil that many times accompanied the former, and how these two were manifested through abnormal behaviour. A concept that was sufficiently imprecise as to be able to comprise manifold forms of deviation, extravagance was used to label the degree into which a given behaviour, practice and emotional display diverged from the boundaries of normality.

The semantics of the term are rather imprecise, and are insufficient for understanding the manifold uses and interpretations given to it. “*Stravagante*” was defined as “fantastical, deformed, out of ordinary use.” Something extravagant was something strange and different, that could not be reduced to standard forms and that escaped the known rules. An extravagant person was fantastical, which was also to be *falotico* and *intrattabile*, that is, abstract in the sense of detached from reality and intractable. Thus, when used to characterize a person’s behaviour or personality, the breaching of rules and standards was closely related to madness and the world of fantasy and imagination. Extravagance then provided a dimension of uncanniness and lack of moderation, at the same time it conveyed the idea of emotional and mental instability.

The usage given to the term extravagant in the sources examined here covers a wide range of contexts and discloses interesting meanings. It appears mostly after 1750 and, although we encounter both female and male extravagance, the concept appears largely associated with middle-aged and elderly men. In the few cases in which young men were described as extravagant, the concept was primarily used to catalogue the prodigal’s excessive expenditure, his fondness for grandeur, sociability, diversions and vices. The debauchery that

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we have seen as concomitant to prodigality and the unruly discoli was indeed a form of extravagance, which served both to demonstrate their detachment from the accepted rules of behaviour and their “irregular mind” [capo irregolare].\footnote{See the interdiction of Pietro Gaspero Cicatti, denounced by his brother for his “contegno improprio e stravagante”, which to his eyes needed prompt repair. ASF, MPAP, Memoriale, F. 2303, no. 52, September 1752.} Given that they acted outside the rules and their behaviour could not be predicted – as suggested by the terms extravagance and irregular – they could reach extremely undesirable extremes, such as making undesirable marriage proposals.\footnote{See interdiction of Ignazio Giuliano Fiorilli, ASF, MPAP, Memoriale, F. 2303, no. 191, July 1754.}

Contrary to what can observed in the descriptions of older men and women, extravagance in young men appears particularly connected to eccentricity. Not only because their behaviour was off and unconventional, but because their oddness was particularly directed towards a compulsive need to spend in quantities that exceeded their means, their need for luxuries and constant diversions. These common features of prodigality could assume more serious forms, like a certain 19-year-old nobleman who intended to marry a lower-born woman with neither dowry nor respected relations, who had participated in the last carnival in a most improper way, and had even attempted to sell most of the family paintings to built a comedy theatre in his villa. These “eccentricities” revealed an “extravagance” which provided clear signs of an altered state of mind. But, furthermore, they conveyed the idea of an inner disposition towards disorder and instability, represented in a man who was governed by his compulsory need to spend and show off.

If we examine this tendency against what was argued above regarding the role attributed to emotional turmoil in perceptions of mental incapacity, the degree to which prodigality constituted a mental disorder for eighteenth-century Tuscany may become clearer. As was argued in previous chapters, the excessive expenditure of young generations, their lack of respect for certain values that had ruled their fathers’ lives is not a feature unique to Tuscany, and was certainly not automatically associated with madness. The fact that the descriptions of the young prodigals are deeply entrenched in a growing conflict between younger and older generations regarding the value of social position and how the latter was concomitant with a certain financial management does not rule out the fact that older members of the family frequently saw the recklessness of youth as pure madness.

The conflicts that characterized the relation between fathers and sons towards the end of the eighteenth century have been beautifully examined by Nicola Phillips in her study on a
profligate son whose, at first desperate and afterwards positively condemning, father could do nothing other than write a memoir to narrate his son’s descent into financial ruin, delinquency and moral depravation. Although her study is not concerned directly with the connection that can be drawn between perceptions of profligacy and perceptions of madness, her study illuminates how the clash of moral values between two generations also entailed a particular conception of what a disordered mind meant. This young man’s father referred to his son’s mind by employing terms the meanings of which closely resembled the terms examined here. The young man’s debauchery indicated he had lost his rational self-control, governed by the pernicious effects of “irregular and intemperate passions.”

Madness was evidenced not only in reckless expenditure – which was not new in the eighteenth century – but in the emotional turmoil behind it.

The meanings ascribed to extravagance are further revealed by its surrounding words, which when applied to describe middle age and old men denounced for mental incapacity, included behaviour (contegno), character (carattere), humour (umore), nature (naturale) and brain (cervello). The financial mismanagement and excessive expenditure that constituted the starting point of every interdiction petition was accompanied in these cases by expressions that described their disturbed emotional state. Extravagance came with brain, spirit, humour and thinking, and was accompanied with expressions denoting disturbed forms of emotional display, such as inquieto, furious, frenetic, uncertain temperament (temperamento incerto), and disconcerted fantasy (sconcertata fantasia). An extravagant behaviour was mainly associated with three aspects in men: a disordered mind; a disturbed emotionality that was non-violent and frequently assumed the form of emotional instability; and, a disturbed emotionality that was violent. The two latter were generally accompanied by the first, with expressions that pointed towards the head or mind (capo or cervello) and its thinking or ideas (sentimento or idee). Thus we have cervello stravagante, capo irregolare, volubilità dei suoi sentimenti, stravaganza del suo pensare, stravagante idee.

The case of one Gaetano Giorgi well exemplifies this issue. Denounced by his wife, Gaetano Giorgi followed the patterns of a prodigal, but manifested the kind of prodigality that most resembled insanity. The core of this disturbance lay in his “passion” to gamble, which moved him to abuse his wife, act extravagantly and demonstrate his frenetic, mad and uneasy temper whenever she, or other relatives denied him the money for his vice. He fell into fits of

rage, which made him capable of all kinds of indiscretions, extravagances and excesses. Among his extravagances, his wife listed his gambling like a mad and stupid man (forsennato and stolto), which made him lose huge amounts of money. His mistreatment of his wife was also singled out as extravagant, with an escalating aggressiveness and innumerable iniquities towards her. He was fierce (feroce) with her, had fits of “frenzy” and continuously demonstrated his “uncertain temperament and humour” and “extravagant humour”. One night, when he was “more furious (foribondo) and menacing than usual, after having given several signs of disconcerted fantasy”, he started to quarrel with his wife, and had an outburst of fury against her that ended with him expelling her from the house despite the fact that it was a “rainy day”, declaring she was not to come back ever again. His threats were said to have been pronounced (uttered) in an “extravagant way”, which made the wife fear for her safety and obey his threats.¹⁰⁰⁸

Extravagant behaviour comprised the usual features of defiance to the precepts that guided family life, seen in their neglect of their role of heads of family, the lack of regulation that characterized their daily performance, and their capricious financial decisions.¹⁰⁰⁹ It is worth mentioning here that the term extravagance is for the most part employed by government officials, and much less by petitioners. The nuanced descriptions narrating the emotional turmoil described above, with its corollary of a lack of regulation, imprudence, and the capricious and disordered (sregolato) behaviours of the allegedly mentally afflicted were summarized by the authorities by recourse to the term extravagance. For instance, the officials of the Pupilli described the kind of dementia suffered by Lorenzo Baldinotti by referring to his “naturale furioso, stravagante, ed inquieto”, thus encompassing the different assessments his relatives had given of his disorder.¹⁰¹⁰

7.5. Conclusion

Scholars of madness have identified the eighteenth century as the point when a more nuanced medicalization of emotions arose with the introduction of new theories of madness that inclined towards the predominance of emotions and the mind in the aetiology of mental

¹⁰⁰⁸ ASF, MPAP, Memoriali, F. 2306, no. 293, 1766.
¹⁰⁰⁹ See for instance the interdiction of Agostino de Paola, father of seven children, whose extravagance was revealed through his unjustifiable act of expelling them all from home, his dissipation, lack of regulation and capricious selling. ASF, MPAP, Memoriali, F. 2303, no. 164, March 1754.
¹⁰¹⁰ ASF, MPAP, Memoriali, F. 2303, no. 210, Agosto 1754.
disturbances. However, medical knowledge has often been seen as isolated from society. For instance, according to MacDonald, people’s understandings and responses to mental afflictions were isolated from the medical developments on mental disturbances. He identified a disjunction between medical theory and popular knowledge, which according to him deepened towards the eighteenth century. “Because English society was highly stratified socially and culturally, we must be sensitive to the disjunction between medical theory, which was written by and for the educated elite, and actual practice, which was conducted by and for people drawn from every social rank.”

In contrast, Porter has stressed that psychiatry was shaped “from below”, producing meanings and understandings that were continuously renegotiated.

To approach the history of how mental disturbances were experienced, labelled and handled using the model of a collective process presupposes that those discourses and practices were culturally and “equally” constructed by the actors involved (physicians, magistrates, family, the mentally disturbed). The study of the Tuscan civil and criminal litigation of the eighteenth century on madness and mental incapacity shows that lay, legal and medical communities shared an understanding of mental deviance. Furthermore, this chapter has shown that throughout the century the different understandings of madness concur on the increasing importance attributed to manifestations of disturbed emotions as the predominant indicators of mental disturbance.

This chapter has examined the place of emotions in eighteenth-century medical and lay descriptions of madness. It has argued that during the century emotional disturbances played an increasingly determinant role in the understandings of madness held by petitioners, witnesses, government authorities and medical practitioners alike. Although in most cases there is no evidence of the involvement of medical knowledge, lay narratives concur with contemporary medical writings regarding the place attributed to “disturbed” emotions as an important symptom evidencing mental disturbance.

Criminal and civil records demonstrate that certain forms of emotional display were considered as a key to a disordered mind. The notion that strong feelings could disrupt the mind was a shared consensus that can be traced in a wide variety of contexts and across different social groups. Legally it served to argue for diminished responsibility for committing a crime, due to the power of passion to temporarily overshadow the rational

1012 Porter, Mind-Forg’d Manacles.
faculties. Similarly, medical knowledge gave increasing importance to strong emotions, referred to as *passioni d’animo*, for their capacity to trigger mental disturbance. But even more interestingly, forms of emotional distress were also placed at the centre of lay narratives, a centrality that was also shared and acknowledged by authorities. Interdiction narratives were increasingly concerned with how certain behaviours and reactions denoted a disturbed disposition, referred to with the terms *inquietudine, volubile, irregolare* or *stravagante*.

Emotions came to be crucial for differentiating rational behaviour from the indicators of a disturbed mind. Negotiating forms of appropriate emotional display presupposed exploring how emotional reactions affected a person’s mind, in which situations certain forms of emotional excess could be accepted and in which others they had to be condemned. Furthermore, careful considerations had to be taken to establish how these forms of deviant emotional display were to be controlled, disciplined, differentiated or punished.

The new attention to emotional disruptions as indicators of mental affliction was accompanied by a growing awareness of the emotional dimension of familial relations. Families were paying increasing attention to the emotional displays that characterized mental incapacity because they were preoccupied in defining sane emotional displays as well. Better put, narratives of madness and mental incapacity shed light on the discussions about proper and improper emotional displays, but also on the role of emotions in social relations and family life, determining nuanced sets of rules about accepted codes of reaction depending on the space and situation. Inquiries into mental capacity debated how a man or a woman was supposed to “navigate”, to use Reddy’s term, through their emotional disturbances, in accordance with the codes of each space, gender and age. Furthermore, interdiction narratives place men on the side of emotional disequilibrium, and women on the side of self-control and rationality. It was largely in their hands to help the man return to his senses.
CONCLUSION

This thesis has examined the appearance of madness across different procedural and institutional spaces, to elaborate on how madness was understood and argued, ascribing particular attention to the language employed and the meanings it encoded. Largely drawing from inquiries into mental incapacity, but also taking into account criminal records and special requests to the executive powers of the Grand Duchy, it has explored the circulation of meanings and languages of madness, placing the family at its centre.

The model of the itineraries of madness shows that the understandings of madness were of a contextual and contingent nature. Madness in the early modern period was measured against patterns of normality that were conditioned by variables such as age, gender, social role and status. This evaluation was further shaped by the requirements of each of the spaces in which madness was disclosed, conditioning its lexicon, typologies and meanings. Madness had many faces in early modern Europe, assuming forms that adjusted to each framework of appearance. Its meanings changed according to who was speaking, why and to whom. The institutional space in which mad behaviour was disclosed dramatically shaped the narratives and language employed. Petitioners, witnesses, government officials and medical practitioners knew how to adjust their language to each institutional context, and every party involved knew how and when it was desirable to introduce certain concepts instead of others.

By and large, the legal and institutional records examined here reveal the capacity of early modern Tuscans to adapt their language to the needs and requirements of each context, whether an interdiction petition, a criminal defence, a petition for mitigation of a sentence by reason of insanity, a petition for confinement or a particular request made to the office of the Auditore Fiscale. This becomes particularly clear when we can follow the same individual across more than one of these institutional and legal spaces. Families resorted alternatively to one context or the other, depending on the results, and in each space they adapted their narratives accordingly. Following the itinerary also reveals that the joint effort to tame deviance involved many stages without a clear pattern or order. When one solution proved insufficient, families resorted to the other, passing from incarceration to interdiction, and then
to incarceration again, and from there to exile.\textsuperscript{1013} The basic principle is that all of these measures were independent from one another, and could be requested simultaneously, as clearly expressed by the absolute disengagement between interdiction and confinement.

This thesis has explored the circulation of notions of madness through the different agents that shaped the understanding of madness, taking into account the different voices, aims and contexts that came into play. The languages of madness under examination here suggest the pervasive presence of conceptions of madness that understood it as a disease of the mind, located in a diseased brain. Even though priests were commonly called as expert witnesses to assess mental incapacity, their testimonies did not regard madness as a moral flaw, but as a disease of the mind. This, however, did not change the fact that it was a disease whose primary signs were disclosed through behaviour that breached the moral codes.

I have argued that legal categories of madness and mental incapacity were open and deliberately vague so as to encompass a wide spectrum of cultural meanings. This was particularly clear in interdiction procedures, which during the century opened their field of enquiry into a broader spectrum of what madness amounted to. Against a backdrop of a constant rise in interdiction petitions, narratives started to introduce familial and personal situations that were no longer exclusively related to patrimony, such as intergenerational conflicts, matrimonial disputes or confrontations with the extended family. The argument of mental incapacity served, then, not only to prove economic mismanagement, but also to argue in favour of one or another side in a familial conflict, to give evidence supporting the need to change household dispositions or legitimize the need to end a co-residence.

Following the itineraries of madness has allowed me to chart a more complete picture of how madness was understood, explained and experienced than what can be grasped by focusing only on one of the spaces in which it appeared, as previous studies have done. It demonstrates that mental disturbances were a present and increasingly demanding reality for Tuscan families, forcing families to resort to the different available mechanisms. But it also demonstrates that madness was increasingly “employed” as an argument in front of the authorities to settle a dispute, or to make sense of odd behaviour. Thus, although we cannot ascertain that mental disturbances were identified to a larger degree than in the previous centuries, and we certainly should not conclude that there was a rise in the incidence of

\textsuperscript{1013} This was the strategy taken by Giovanna Martelli regarding her husband. For her whole itinerary in seeking the government’s help, see ASF, MPAP, \textit{Memoriale}, F. 2301, no. 195, March 1745/46; ASF, CR, \textit{Fiscale}, F. 757, no. 15, July-August 1751, ASF, MS, \textit{Suppliche}, F. 1208, fols. 28-30v, December 1760 and ASF, OGB, \textit{Suppliche}, F. 2537, no. 194, September 1761.
mental illness during the century, we can definitively demonstrate that madness acquired increasing visibility during the century.

As this thesis has argued, changes in social life and the appearance of new expectations of family life and conflicting agencies inside families were the conflating factors that explain why madness appears more in the eighteenth-century records. The new ways in which intergenerational and matrimonial disputes were managed during the century finds an interesting parallel in inquiries into mental capacity and special requests to control mental deviance. It shows that litigants resorted to a new language to argue and settle their disputes, where notions about madness played a new role.

I have suggested that the relatively marginal involvement of medical practitioners is thus not grounds enough to argue against the medicalization of madness. Quite the contrary, although it appears clear that the involvement of medicine in mental diseases was still highly exploratory (as it would continue to be for most of the nineteenth century), scholars have convincingly argued for the gradual involvement of medicine in this field during the early modern period. But the point under discussion here is slightly different. When we take as a starting point the circulation of languages to assess the shaping of new notions of madness, the development of psychiatry and the medicalization of emotions assume a more nuanced form. On the one hand, the medical profession appears much more connected to social conceptions of insanity but, on the other hand, the language in itself appears disconnected. To put it differently, while the medically specialized language of madness appears not to have been subject to wide circulation, the meanings enclosed in a medical lexicon can be widely found in social language. Whether through the use of medical terms such as delirio melanconico, turbazione di fantasia, fissazioni, or through the socially embedded concepts of stravaganza, alterazioni or soppressioni di spirito, inquietudine or volubilità, medical, legal and lay narratives share a conception of insanity that placed the mind and altered emotional states as its leading features.

Even if medical categories to classify mental disorders appear at first glance completely dissociated from lay language, their contents and meanings were not. Centuries of litigation and contact with medical practitioners had from way back given families the necessary means to categorize and explain a situation that they historically had been the first ones to identify. Madness, as this study shows, was a distinctly present reality for early modern families, who had given sense and had recourse to every available mechanism to cope with its different variants and degrees of severity. In this sense, medical knowledge by the end
of the eighteenth century was colonizing a field that had traditionally been the prerogative of
families and, by their request, of justice. Not because it was not considered a disease, but
because early modern society was more concerned with controlling its consequences than
with finding a cure.

Scholars working on madness in early modern Europe have warned us that mental
disorders were widely conceived by lay society as a disease by the sixteenth century. Notions
of the pathological origins of deranged behaviour were not a novelty of the eighteenth
century, so medicine was not creating a new conception, but rather ascribing new names to it.
What medical practitioners called fixations, delusions, melancholic delirium, etc., were well
known realities for those who lived with these manifestations of mental derangement. In the
previous centuries they had been framed under the interpretative model provided by humoral
theory, by the eighteenth century they were explained using the theory of the nerves. Lay
society, on the contrary, was much more comfortable with their factual explanations centred
on behaviour as the only true path to assess someone’s state of mind, to which descriptions of
altered emotional states were progressively added as the preferred proof to evidence its
presence. The connection between emotions and madness and, particularly, the role attributed
to emotional disturbances as determinant indicators of madness became particularly visible
towards the second half of the century. By the end of the century, emotional agitation and
shifting moods were at the centre of the cultural understanding of madness, present both in
medical and in lay society.

If until roughly the first half of the eighteenth century mental incapacity was first and
foremost recognized in financial behaviour, speech and demeanour, towards the end of the
century it was increasingly evidenced by and illustrated with the person’s emotional displays.
Although the effect emotional perturbations could exert on physical and mental health was
not a novelty, the fact remains that the records evidence a shift with regards to how mental
incapacity was argued in legal procedures. Changes intrinsic to the archives and the
administration of the records are intermingled here with changes in the general administration
of the Grand Duchy – specialist historiography identifies the mid-eighteenth century as the
epoch where the changes brought about by the new dynasty became perceivable, but also with
deeper cultural changes. Two clues might be indicative of this broader cultural background
signalling a new codification of behaviours and emotions. Scholarship on the history of the
family has identified the introduction of a new set of concerns regarding familial roles. This
change can be traced, for instance, in the manifestation of intergenerational conflicts hidden
behind the condemnation of unequal marriages, the tightening of measures to control juvenile unruliness, sexual misbehaviour and debauchery, or the spread of a religious discourse condemning passionate behaviours and proclaiming emotionally controlled familial roles.

The eighteenth century brought new spaces of sociability that were accompanied by unprecedented forms of self-determination, but also by supposedly stricter codes of moral behaviour. Efforts to control the family disorder that we have been examining throughout this thesis were concentrated around this contradiction between agency and norms, between a stricter paradigm of rationality and the continual outbursts of uncontrolled passions. A close examination of the language employed by Galluzzi to delineate his condemnation of the moral excesses manifested by the last Medici is indicative of the special concern developed during the eighteenth century against certain forms of emotional disturbance. The relationship between Cosimo III and Margherita Louisa was marked, on the one hand, by her “extravagances”, “caprices”, and her “unruly and turbulent spirit” and, on the other hand, his “weakness of his spirit”, his personal dose of melancholy and uncontrolled passions.\textsuperscript{1014} Margherita Louisa’s extravagances and open defiance of his authority and manliness left him under the strains of his strong passions, agitated, for instance, by “maddening jealousy” (\textit{agitato dalle smanie della gelosia}) and the strong desire of vengeance against her (\textit{il desiderio di vendicarsi con essa lo agitava continuamente}).\textsuperscript{1015} Their son was equally portrayed as “a sensible man” (\textit{un uomo sensibile}) consumed by the “violent passions” that continually “anguished” him, his prodigality and his uneasy character (\textit{carattere inquieto}).\textsuperscript{1016}

In other words, the vocabulary we see employed again and again to portray their disturbed dispositions is in stark consonance with the vocabulary of mental incapacity we see employed in the contemporary civil and criminal records of the Grand Duchy. \textit{Stravaganza}, \textit{carattere inquieto}, \textit{pazzie}, \textit{trasporti} or \textit{agitazioni} are all terms we see employed to describe the emotional disturbances that tormented the mentally afflicted. It can thus be observed how the concern over emotional disturbances was not restricted to the special characteristics of interdiction procedures or a special request to confine a family member. The tones of emotional instability assumed by familial disorder during these years can be traced in public characterizations of the family, in religious discourses and in discussions about politics. The disclosure of family conflicts was total.

\textsuperscript{1014} Galluzzi, \textit{Istoria del Granducato di Toscana}, vol. IV, passim.
\textsuperscript{1015} Ibid., p. 154 and p. 163 respectively.
\textsuperscript{1016} Ibid., p. 220 and p. 230.
By the eighteenth century, Tuscan society saw emotional disturbances as the source of familial conflict and mental affliction. *Inquietudine, carattere irregolare, umore stravagante* and any form of emotional instability increasingly come to the fore in discussions about deviant behaviour. Changing concerns and expectations about family life were intertwined with the debate about behavioural norms and expected patterns of emotional display. The shaping of understandings of madness, and the role attributed to emotions as its most defining signs appear, once more, entrenched in the history of the family. In this sense, the debate about proper emotional reactions and the features of what constituted a normal emotional life, and when emotional reactions breached the frontiers of sanity connect us with the negotiated shaping of systems of feelings within Tuscan families.

Interdiction procedures were a legal procedure devised to provide a solution for the financial consequences of mental incapacity. However, this thesis has argued that behind the primary purpose of defending the family patrimony from reckless or irrational behaviour, interdictions largely served to resolve familial disorder. This intervention was explicitly requested by the family members petitioning for the interdiction, and functioned as an arena for discussing appropriate codes of behaviour and emotional display, which were profoundly age and gender specific. The solution proposed by the Tuscan authorities for containing the disorder of the family tended to empower the female members of the household. Wives and mothers were not only the most common petitioners, but they were also entrusted with the management of the household until their sons or husbands regained their mental faculties. However, their role went beyond the administration of the interdicted patrimony, to result in a complete reorganization of the family structure. In fact, even when they were not appointed administrators, they assumed the place of the head of the family, commanding family life and most of all, being there for the irrational men’s recovery. Beyond the curing power of medicine, women were held to be able to tame, discipline and control mentally incapacitated men. Male irrationality was thus to be domesticated by women, who were identified as the rational, sane and stable members of the family while the weakened male recovered from his condition.
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