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JUSTICE FOR MAGDALENES RESEARCH

Stakeholder Submission to the

UN Human Rights Council Universal Periodic Review of

IRELAND

(25th Session, April-May 2016)

Justice for Magdalenes Research (JFM Research) was formed by co-ordinating and advisory committee members of the Justice for Magdalenes survivor advocacy group following Ireland’s State apology to women who were incarcerated and forced into unpaid labour in Magdalene Laundries. We engage in archival and educational work, with the aim of recording and raising public awareness of the experiences of women held in Magdalene Laundries. The members of JFM Research also continue to assist survivors of Magdalene Laundries in our personal capacities.
Suggested Questions for the Irish government:

1. Considering the available evidence of systematic abuse, neglect, exploitation and denial of education of girls and women in the Magdalene Laundries and the gaps in publicly available information regarding the identities and/or burial places of those who died in Magdalene Laundries, will the Irish government confirm what steps it proposes to take and in what timeframe to ensure a prompt, independent and thorough investigation into the Magdalene Laundries abuse?

2. Can the Irish government confirm what steps it proposes to take and in what timeframe to establish the identities and burial places of all women and girls who died in Magdalene Laundries?

3. Can the Irish government confirm that the Magdalene restorative justice scheme will provide Magdalene survivors with the same range of drugs, medicines, appliances; dental, ophthalmic and aural services; counselling and psychotherapy for family members; and complementary therapies that are available to HAA cardholders?

4. Can the Irish government confirm what steps it will take and in what timeframe to provide equivalent health and community care services under the Magdalene restorative justice scheme to women residing abroad?

5. Can the Irish government confirm what steps it will take and in what timeframe to ensure that women with capacity issues are enabled to benefit from the Magdalene restorative justice scheme?

6. Can the Irish government confirm the timeframe within which the “Dedicated Unit”, which is an integral element of the Magdalene restorative justice scheme, will be established?

7. Can the Irish government confirm what steps it intends to take and in what timeframe to ensure that personal advocacy services are provided to all Magdalene survivors who require them?
1 Background to the Magdalene Laundries abuse

1.1 Ireland’s Magdalene Laundries were residential, commercial laundries housed in Catholic convents where between 1922\(^i\) and 1996,\(^{ii}\) well over 10,000\(^{iii}\) women and girls, as young as nine, were incarcerated and forced into unpaid labour.

1.2 Testimony provided by Magdalene survivors to the UN Committee against Torture and UN Human Rights Council in 2011,\(^iv\) to the Irish government’s Inter-departmental Committee to establish the facts of State interaction with the Magdalen Laundries (IDC) in 2012 and 2013,\(^v\) and in the media\(^vi\) overwhelmingly portrays a system in which women and girls were:

(a) involuntarily detained behind locked doors and high walls, with no information as to whether or when they would be released and subject to the threat of potential arrest by the Irish police force if they escaped;
(b) stripped of their identities, including through the imposition of house names and numbers, uniforms, haircuts and a prohibition on speaking;
(c) banned from communicating with the outside world except under strict surveillance;
(d) verbally denigrated and humiliated;
(e) kept in cold conditions with minimal nourishment and hygiene facilities;
(f) denied any education;
(g) denied adequate opportunity for rest and leisure; and
(h) forced to work, constantly and unpaid, at laundry, needlework and general chores through the coercive force of the above factors and additional punishments including deprivation of meals, solitary confinement, physical abuse and/or humiliation rituals.

2 Developments since 2011 UPR

2.1 During Ireland’s 2011 UPR, the OHCHR’s Compilation Report included as one of three “\[k\]ey national priorities, initiatives and commitments”\(^vii\) the Committee Against Torture’s 2011 Recommendation that Ireland should (a) institute prompt, independent and thorough investigations into all complaints of torture and ill-treatment in Magdalene Laundries, (b) in appropriate cases, prosecute and punish perpetrators, and (c) ensure that all victims obtain redress, including the means for as full rehabilitation as possible.\(^viii\)

2.2 In 2011, the Irish government established an Inter-departmental Committee to establish the facts of State involvement with the Magdalen Laundries.\(^ix\) The Inter-departmental Committee’s report, published in February 2013, found that the Irish State directly placed over one quarter of women and girls in Magdalene Laundries\(^x\) and that the State was aware of and involved in the Laundries’ operations through:
(a) awarding laundry contracts to Magdalene Laundries on the basis of the nuns’
tenders being the most competitive, in the knowledge that the women and girls
were receiving no wages for their work;\textsuperscript{xi}

(b) financially supporting the Magdalene Laundries through payments for some of the
girls and women placed there by State actors and by conferring charitable status
upon the Laundries;\textsuperscript{xii} and

(c) subjecting the Laundries to the requirements of the Factories Acts, although State
records only show inspections of some Magdalene Laundries from 1957 onwards
and only in respect of machinery and laundry premises rather than regarding
wages, working hours or living conditions.\textsuperscript{xiii}

2.3 On 19 February 2013, the Irish government issued a State apology to Magdalene
survivors “for the hurt that was done to them, and for any stigma they suffered, as a
result of the time they spent in a Magdalene Laundry”.\textsuperscript{xiv} Four months later, the
government announced an \textit{ex gratia} restorative justice scheme, which it promised
would offer the surviving women lump sum payments, State contributory pension
payments, health and community care and other supports in exchange for their
agreement not to sue any State body or agency with respect to their time in a
Magdalene institution.\textsuperscript{xv}

3 Ireland’s Failure to Comply with Previous Recommendations

3.1 Notwithstanding the State apology and announcement of an \textit{ex gratia} redress scheme,
Ireland is still failing to comply with the repeated Recommendations of the
Committee Against Torture.\textsuperscript{xvi} In 2014 and 2015, respectively, the Human Rights
Committee and Committee on Economic, Social and Cultural Rights issued
Recommendations for a prompt, independent and thorough investigation into all
allegations of abuse in Ireland’s Magdalene Laundries, prosecution and punishment of
perpetrators, and effective redress.\textsuperscript{xvii}

4 Failure to provide effective redress; promised \textit{ex gratia} scheme not fully
implemented

4.1 The government has not implemented significant elements of its promised \textit{ex gratia}
redress scheme. Over 500 women have signed up to the redress scheme and in doing
so, they have been required to waive their legal rights against the State.\textsuperscript{xviii} However,
they have not received the full range of health and community care services promised
by the government in 2013. They are still waiting for the establishment of a promised
Dedicated Unit to assist them in accessing benefits, meeting each other, meeting with
the nuns if desired, and agreeing on a suitable memorial. The government has deemed
a number of women to lack sufficient capacity to apply to the scheme, and it appears
that no provision will be made for these women until after the \textit{Assisted Decision-
Making (Capacity) Bill 2013} is debated and passed.
Failure to provide promised health and community care

4.2 In May 2013, Mr Justice John Quirke, President of the Irish Law Reform Commission, delivered a report to government recommending the contents of an ex gratia redress scheme for Magdalene survivors.\textsuperscript{xix} His report was made public and in June 2013 the government agreed on the Parliamentary record to accept all of Mr Justice Quirke’s recommendations “in full”.\textsuperscript{xx}

4.3 Mr Justice Quirke recommended that ‘Magdalen women should have access to the full range of services currently enjoyed by holders of the Health (Amendment) Act 1996 Card (“the HAA card”).\textsuperscript{xii} The HAA card was created in 1996 for those who contracted Hepatitis C through State-provided blood products. It provides numerous private and public healthcare services and wide-ranging access to medicines, drugs and appliances. Mr Justice Quirke included a guide to the full range of services available to HAA cardholders at Appendix G of his report. His first recommendation continues: “Details of the range, extent and diversity of the community services to be provided to the Magdalen women are described within Appendix G”.\textsuperscript{xxi}

4.4 Contrary to the government’s promise, the medical cards which Magdalene survivors received in August 2015 under the ex gratia redress scheme are barely an improvement upon the ordinary means-tested State medical card, which many of the women already hold. The differences between the HAA card and the Magdalene card include the following:

(a) **Drugs, medicines and appliances:** HAA cardholders may “freely obtain any and all drugs, medicines and appliances prescribed to them, the only limitation being that they cannot obtain “cosmetic type toiletries (e.g. perfume etc)”.\textsuperscript{xxii} Magdalene survivors are entitled only to the drugs, medicines and appliances covered by the Community Drugs Scheme (ordinary medical card standard).\textsuperscript{xxiii}

(b) **Dental, ophthalmic and aural care:** HAA cardholders may visit any private practitioner and are freely entitled to any medically necessary treatment or appliance. When referred for hospital ophthalmic or aural treatment they are entitled to an appointment within 2 weeks.\textsuperscript{xxiv} Magdalene survivors are entitled only to “public dental, ophthalmic (eye sight) and aural (hearing) services”.\textsuperscript{xxv}

(c) **Counselling and psychotherapy:** HAA cardholders, their partners and children (and under certain circumstances, other close family members) are entitled to counselling and psychotherapy, regardless of whether or not they have contracted Hepatitis C, without a referral from a GP or consultant.\textsuperscript{xxvi} Magdalene survivors are only entitled to counselling for themselves, and only upon referral by a registered medical practitioner.\textsuperscript{xxvii}

(d) **Complementary therapies:** HAA cardholders are entitled to massage, reflexology, acupuncture, aromatherapy and hydrotherapy. Magdalene survivors are not entitled to any of these services under their card.
4.5 The government has defended its decision to refuse the above services to Magdalene survivors on the basis of Mr Justice Quirke’s statement at the beginning of Appendix G that:

> Not all the community services described in that Guide [the HAA card guide reproduced at Appendix G] may be directly relevant to the Magdalene women and any comparable Guide for the Magdalen women would require suitable adaptation.\(^{xxix}\)

4.6 The government has not given a reasonable explanation as to why it views all of the above services as irrelevant to, or unsuitable for, Magdalene survivors.

4.7 In August 2015, several dentists confirmed publicly that, instead of receiving HAA-standard services as recommended by Judge Quirke and agreed by the government in 2013, Magdalene survivors have been given a card that entitles them only to the “limited and incomplete treatment…for most medical card holders.” The dentists called on the Council of the Irish Dental Association “to publicly disassociate itself from this act by the Government and to speak out publicly on behalf of its members who do not accept the injustice we are expected to support.”\(^{xxx}\)

4.8 As of September 2015, Magdalene survivors living abroad who signed up to the *ex gratia* redress scheme have received no health or community care services, apart from an invitation to return to Ireland to use their medical card there.

*Delay in access to ex gratia redress scheme for survivors deemed by government to lack sufficient capacity*

4.9 In his report, Mr Justice Quirke noted that “[a] significant number of the Magdalen women are frail and some are very vulnerable” and recommended that:

> Safeguards must, therefore, be put in place to ensure that the payments made to them are secured and protected and used exclusively for their benefit. Their rights to participate and benefit from the proposed Scheme must remain identical to the rights which will attach to all of the other women who participate in it.\(^{xxxi}\)

4.10 JFM Research is concerned that approximately 40 women, whom the Department of Justice has determined as having capacity issues, seemingly will not have access to the ex gratia restorative justice scheme until the Assisted Decision Making (Capacity) Bill 2013 is passed and enacted.\(^{xxxii}\) There is no clear indication from government as to when this will be.

*Delay in establishing “Dedicated Unit”*

4.11 The government has not yet established the “Dedicated Unit” under the *ex gratia*
restorative justice scheme, recommended by Mr Justice Quirke to provide the following services:

(a) a helpline accessible daily by the women to assist them to obtain the health, monetary and other benefits to which they will now be entitled;
(b) investigative and other help and assistance in obtaining such sheltered or other housing as they may be entitled to;
(c) investigative and other help and assistance in obtaining such educational assistance as they may be entitled to;
(d) practical and, if necessary professional, assistance to enable those women who wish to do so to meet with those members of the Religious Orders who have similar wishes to meet and interact;
(e) similar practical assistance to meet and interact with other Magdalen women; and
(f) the acquisition, maintenance and administration of any garden, museum or other form of memorial which the Scheme’s administrator, after consultation with an advisory body or committee, has decided to construct or establish.xxxiii

5 Refusal to investigate; Denial that systematic human rights abuse occurred

5.1 The Irish State refuses to institute a “prompt, independent and thorough investigation into all allegations of abuse” of women and girls in the Magdalene laundries. No official findings regarding the experience of abuse or lines of responsibility for abuse have been made. As a result, the women and their families are denied several elements of the rights to an effective remedy and reparation, including truth, accountability and guarantees of non-repetition.

5.2 Related to the State’s failure to investigate is the refusal of all four religious orders responsible for operating the Magdalene Laundries to apologise or provide any measures of reparation to the women or their families.

5.3 The Irish government contends that the Inter-departmental Committee to establish the facts of State involvement with the Magdalene Laundries, which it established in 2011, carried out a “comprehensive and objective” investigation into “the factual position” regarding the Magdalene Laundries.xxxiv The government further asserts that the Inter-departmental Committee found “no factual evidence to support allegations of systematic torture or ill treatment of a criminal nature in these institutions”xxxv and that “[t]he facts uncovered by the [Inter-departmental] Committee did not support the allegations that women were systematically detained unlawfully in these institutions or kept for long periods against their will”xxxvi

5.4 The government’s position is untenable for the following reasons:

(a) The Inter-departmental Committee did not have the mandate to investigate and make findings in relation to allegations of abuse in the Magdalene Laundries. Its terms of reference were limited to investigating state involvement with the Laundries.xxxvii The government acknowledged in its Follow-up letter to the UN
Committee against Torture in August 2013 that “the Committee had no remit to investigate or make determinations about allegations of torture or any other criminal offence”.

(b) The Inter-departmental Committee had no statutory powers, it was not independent (its members, with the exception of the Independent Chair, were senior civil servants from government Departments closely involved with the Magdalene Laundries) and it did not issue public calls for evidence. Extraordinarily, the Inter-departmental Committee agreed to destroy all copies and return all of the evidence obtained from the religious orders at the conclusion of its work.

(c) Numerous women who died in Magdalene Laundries and their burial locations remain unidentified.

(d) 118 Magdalene survivors provided testimony to the Inter-departmental Committee in person. The Inter-departmental Committee included extracts of this testimony in a Chapter entitled “Living and Working Conditions”, but it did not evaluate the evidence according to a human rights framework or any comprehensive legal framework. The Chair’s Introduction to the Report states that, with regard to “the question of the conditions experienced by and the treatment of women in the Laundries”… “[t]he Committee does not make findings on this issue.”

(e) Chapter 19 of the Inter-departmental Committee’s report, entitled “Living and Working Conditions”, states that “[a] large majority of the women who shared their stories with the Committee said that they had neither experienced nor seen other girls or women suffer physical abuse in the Magdalen Laundries”. However, the category of ‘physical abuse’ includes numerous women’s complaints of being forced constantly to work, in addition to evidence of girls or women being shaken, poked or ‘dug’ at with implements, rapped on the knuckles, slapped or punched. The punishments of enforced kneeling for several hours, being forced into a padded cell and having soiled bed sheets pinned to one’s back are categorised by the Inter-departmental Committee as ‘psychological and verbal abuse and non-physical punishment’. In yet another category, Chapter 19 includes three women’s evidence of hair cutting as punishment.

(f) Although Chapter 19 does not include a category concerning imprisonment or involuntary detention, the Inter-departmental Committee states that a “very common grievance of the women who shared their stories with the Committee…was that there was a complete lack of information about why they were there and when they would get out”. The Committee acknowledges that “a large number of the women spoke of a very real fear that they would remain in the Magdalen Laundry for the rest of their lives”. Chapter 19 also includes explanations from the Religious Orders as to why they locked doors and gates of the Magdalene Laundries.
(g) The Inter-departmental Committee concluded that the women’s and girls’ average duration of stay was 3.22 years and median 27.6 weeks.\(^1\) However, in the records which three of the four relevant religious orders produced to the IDC, duration of stay (which would include date of exit) was not recorded for 58% of entries.\(^{li}\) Furthermore, the Inter-departmental Committee treated each transfer between Laundries and each repeat entry as beginning a brand new period of detention and did not collate these to reach its conclusions regarding the average and median durations of stay.\(^{lii}\) The Inter-departmental Committee also disregarded entirely for the purpose of these calculations the detentions of women who had entered Magdalene Laundries before 1922 and remained thereafter.\(^{lii}\)

(h) By comparing a number of available electoral registers, Claire McGettrick of JFM Research has found that 63.1% of adult women registered in the Donnybrook Magdalene Laundry in 1954-55 were still registered nine years later, in 1963-64. Similarly, 63.4% of the adult women registered in the High Park Magdalene Laundry in 1954-55 were still registered in 1963-64. Comparison of electoral registers against grave records at the Donnybrook Magdalene Laundry site show that over half of the women on electoral registers between 1954 and 1964 died at that institution.\(^{lv}\)

(i) None of 793 pages of witness testimony which Justice for Magdalenes transcribed and submitted to the Inter-departmental Committee (and offered to have sworn), appears in the report. This testimony contains evidence from Magdalene survivors and others with experience of the Magdalene Laundries of involuntary detention, forced labour, physical abuse, psychological abuse, neglect and denial of educational opportunity.\(^{lvi}\)

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\(^{1}\) The year the Irish Free State was founded.

\(^{ii}\) When the last Magdalene Laundry, at Sean McDermott Street in Dublin, closed.

\(^{iii}\) Report of the Inter-departmental Committee to establish the facts of State involvement with the Magdalen Laundries (hereafter ‘Inter-departmental Committee report’), [http://www.justice.ie/en/JELR/Pages/MagdalenRpt2013](http://www.justice.ie/en/JELR/Pages/MagdalenRpt2013). Executive Summary, p XIII. The statistic of 10,012 women excludes women who spent time in the Sisters of Mercy Magdalene Laundries in Galway and Dun Laoghaire, due to the absence of records. It also excludes 762 ‘legacy cases’ of women who entered prior to 6 December 1922 and remained thereafter (see Report of Inter-departmental Committee, chapter 7 paras 27, 30).


\(^{v}\) See Justice for Magdalenes, Principal submissions to the Inter-departmental Committee to establish the facts of State involvement with the Magdalene Laundries, [http://www.magdalenelaundries.com/State_Involvement_in_the_Magdalene_Laundries_public.pdf](http://www.magdalenelaundries.com/State_Involvement_in_the_Magdalene_Laundries_public.pdf).

All pharmacists have been advised that if there are any questions regarding the recoupment of individual items, your prescription should be addressed with the Liaison Officer and not under any circumstances ask you to pay for these items yourself once they have been prescribed. The pharmacist needs to get refunded by the HSE’s Reimbursement Service (the PCRS) of the HSE.

You will be required to sign a receipt for “Your prescribing physician, that is your GP, Consultant or Dentist should write your prescription on a private prescription and not on the prescriptions used for medical cardholders.” You may also be required to sign a receipt for whatever is dispensed to allow the pharmacist to be paid. Pharmacists are paid through the PCRS (Primary Care Reimbursement Service) of the HSE.

Your prescribing physician, that is your GP, Consultant or Dentist should write your prescription on a private prescription and not on the prescriptions used for medical cardholders. You will be required to sign a receipt for whatever is dispensed to allow the pharmacist to be paid. Pharmacists are paid through the PCRS (Primary Care Reimbursement Service) of the HSE.

Compilation prepared by the Office of the High Commissioner for Human Rights in accordance with paragraph 15(b) of the annex to Human Rights Council resolution 5/1, UN Doc A/HRC/WG.6/12/IRL/1 (25 July 2011), para 57.


xvi See Inter-departmental Committee Report, above note iii.

xv Inter-departmental Committee Report, above note iii. See Chapter 13, para 19, which states that 26.5% of entries for which manner of entry was known were made or facilitated by the State. However, note that in the non-State category the report puts transfers from other laundries (14.8% of known entries) and NSPCC and Legion of Mary (7.1% of known entries). Chapter 8, para 19 acknowledges the connection between these organisations and the State: “the categories of the “Legion of Mary” and “NSPCC” are presented separately (as neither State nor non-State) due to the fact that these categories include both State and non-State referrals in unknown proportions.”

xviii http://www.justice.ie/en/JELR/Pages/PR13000256 and the Report of the Magdalen Commission (May 2013), http://www.justice.ie/en/JELR/Pages/PB13000255 . See also https://www.youtube.com/watch?v=hOQyl7ZpoH8 (The Taoiseach’s full apology was approximately 18 minutes in length.)


xx Magdalen Commission Report, above note xv.


xxiii Magdalen Commission Report, above note xv, p92:

“Your prescribing physician, that is your GP, Consultant or Dentist should write your prescription on a private prescription and not on the prescriptions used for medical cardholders. You will be required to sign a receipt for the items dispensed to allow the pharmacist to be paid. Pharmacists are paid through the PCRS (Primary Care Reimbursement Service) of the HSE. **There are certain items which your GP/Consultant/Dentist may prescribe for you and which the pharmacist cannot get re-imbursed for from the PCRS. In this case the pharmacist needs to get refunded by the HSE directly via your Hepatitis C Liaison Officer and they should not under any circumstances ask you to pay for these items yourself once they have been prescribed.** It is a matter for the Pharmacist to address with the Liaison Officer and not with you. (emphasis added)

All pharmacists have been advised that if there are any questions regarding the recoupment of individual items,
these should be brought to the attention of either the PCRS, or to the relevant Hepatitis C Liaison Officer, and not to the HAA cardholder. Every effort will be made by the HSE and the PCRS to sort out any problems that might arise without recourse to the individual cardholder if at all possible.

**What Pharmacy products are not covered?**

Cosmetic type toiletries (e.g. perfume etc) are not covered under the HAA card, this does not include creams and lotions used for certain skin conditions, which may be prescribed by your GP or Consultant in certain circumstances. Your Hepatitis C Liaison Officer can advise you on whether or not certain items are available to you on your HAA card and you should discuss any queries with them in the first instance.”

xxv Guide to the Health Services under the Redress for Women Resident in Certain Institutions Act 2015, para 2(ii).

xxv Magdalen Commission Report, above note xv, Appendix G:

**Dental**

If you require a prescription - your dentist should write your prescriptions on a private prescription form *(not on the form used for medical card prescriptions)*. You are then entitled to have these prescriptions dispensed without charge on production of your HAA card by a pharmacist.

**Ophthalmic**

Any cardholder requiring a specialist medical eye examination must be referred by his/her GP or hepatologist to an appropriate consultant (this does not apply to straightforward sight tests), the optician may provide assistance with this in certain cases. The cardholder will receive priority treatment from the HSE’s Community Ophthalmic Physician, or will receive their first appointment with a hospital consultant within two weeks.

**Aural**

Hearing tests and aids (sometimes referred to as aural services) are available to all HAA cardholders. If you have difficulty with your hearing, you are advised to contact your GP or hepatologist in the first instance, so that any medical problems can be ruled out. If necessary, your hepatologist or GP might decide to refer you to an Ear, Nose and Throat (ENT) specialist. This referral as with all referrals to another specialty should be facilitated within 2 weeks and you should liaise with the Hepatitis C Liaison Nurse in your Liver Unit.

xxvi Guide to the Health Services under the Redress for Women Resident in Certain Institutions Act 2015, para 2(iii).

xxvii Magdalen Commission Report, above note xv, Appendix G:

“You do not need to be referred by your GP or consultant for counselling and you do not need prior approval from the Liaison Officer, as long as you attend one of the counsellors on the HSE list, which is available from your Liaison Officer. This also applies to counselling services for your spouse or partner and children (including adult children). In the case of children who contracted Hepatitis C, counselling services will also be available to their parents, brothers and sisters, without prior approval or referral.

Under certain circumstances, counselling for adults with Hepatitis C can also be extended to other close family members, particularly relatives or carers who are living with you or who are in close contact with you, with the prior approval of your Hepatitis C Liaison Officer.”

xxviii Guide to the Health Services under the Redress for Women Resident in Certain Institutions Act 2015, para 2(viii).

xxix Magdalen Commission Report, above note xv, p 83.


xxiii See Magdalen Commission Report, above note xv, pp 11-12.

xxiv United Nations Human Rights Committee, Replies of Ireland to the list of issues, UN Doc CCPR/C/IRL/Q/4/Add.1 (5 May 2014), para 52

xxv United Nations Human Rights Committee, Replies of Ireland to the list of issues, UN Doc CCPR/C/IRL/Q/4/Add.1 (5 May 2014), para 53

xxvi United Nations Human Rights Committee, Replies of Ireland to the list of issues, UN Doc CCPR/C/IRL/Q/4/Add.1 (5 May 2014), para 54

xxvii See *Inter-departmental Committee* Report, above note iii, Chapter 2, para 8.


xxix Inter-departmental Committee to establish the facts of State involvement with the Magdalen Laundries, Interim Progress Report, 20 October 2011, [http://www.justice.ie/en/JELR/Appendix%201.pdf/Files/Appendix%201.pdf](http://www.justice.ie/en/JELR/Appendix%201.pdf/Files/Appendix%201.pdf), para 35

x Claire McGettrick and Justice for Magdalenes Research, ‘Death, Institutionalisation & Duration of Stay: A critique of Chapter 16 of the Report of the Inter-Departmental Committee to establish the facts of State
involvement with the Magdalen Laundries and related issues’ (19 February 2015),

xli Inter-departmental Committee Report, above note iii, Chapter 19.
xlii Inter-departmental Committee Report, above note iii, Introduction, p VII.
xliii Inter-departmental Committee Report, above note iii, Chapter 19, para 33.
xliv Inter-departmental Committee Report, above note iii, Chapter 19, para 35.
xlv Inter-departmental Committee Report, above note iii, Chapter 19, para 38.
xlvi Inter-departmental Committee Report, above note iii, Chapter 19, para 43.
xlvii Inter-departmental Committee Report, above note iii, Chapter 19, para 51.
xlviii Inter-departmental Committee Report, above note iii, Chapter 19, para 52.
xlix Inter-departmental Committee Report, above note iii, Chapter 19, paras 69-71.
l Inter-departmental Committee Report, above note iii, Executive Summary, p XIII.
li Inter-departmental Committee Report, above note iii. See Chapter 7, paras 20-23, which explain that the Sisters of Mercy could produce no records for the Magdalene Laundry in Dun Laoghaire and very few records for the Magdalene Laundry in Galway.
lxii Inter-departmental Committee Report, above note iii, Chapter 8, para 29 states that duration of stay was known for 6,151 women and unknown for 5,047 women. However, these numbers must in fact refer to ‘admissions’ rather than ‘women’, because they total 11,198. Chapter 7, para 34 states that “10,012 or fewer women are known to have entered the Magdalen Laundries between 1922 and 1996” because out of a total of “14,607 known admissions” at least 3,409 of these were repeat entries and at least 1,186 of these were transfers of the same woman from another Magdalene Laundry.
lxiii Inter-departmental Committee Report, above note iii. According to Chapter 8 paras 9 and 10, the available field of information for analysis of duration of stay consisted of 11,198 cases. This is greater than the number of women the report considers (see note 29).
lxiv Inter-departmental Committee Report, above note iii, Chapter 8, para 7.
lxv Claire McGettrick, Death, Institutionalisation & Duration of Stay: A critique of Chapter 16 of the Report of the Inter-Departmental Committee to establish the facts of State involvement with the Magdalene Laundries and related issues, pp 58, 59, http://www.magdalenelaundries.com/JFMR_Critique_190215.pdf. It is relevant to note that the IDC found the women’s and girls’ average age at the time of entry to have been 23.8, and the median age at the time of entry to have been 20. See IDC Report, above note 8, Executive Summary, XIII.
lxvi See Justice for Magdalenes, Principal submissions to the Inter-departmental Committee to establish the facts of State involvement with the Magdalene Laundries,
http://www.magdalenelaundries.com/State_Involvement_in_the_Magdalene_Laundries_public.pdf