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Incest
I : Paternal Incest*

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I. Introduction

1. *History and geography of incest*

Paternal incest has been known and recorded in all periods of history and in all types of civilization. It seems to be a universal phenomenon which does not recognize any historical, geographical, racial or social boundaries: it was practised by royal families in classical Egypt, Greece, Peru and Japan; it occurred among some ruling families in mediaeval Europe; nowadays it has been reported in most industrial countries of Europe and America, as well as in the remote islands of Polynesia. Incest seems to exist everywhere, in spite of the fact that it is regarded as taboo in many primitive societies (Cooper, 1932; Freud, 1919; Walker, 1940), and is condemned in all Western societies, both by the Church, which regards it as a serious 'sin' and by the Law, which makes it an indictable offence.

2. *Literature*

Compared with the anthropological literature on incest (Bullock, 1931; Cooper, 1932; Devereux, 1939; Frazer, 1910; Gordon, 1949; Malinowski, 1927; Mead, 1963a, 1963b; Nieuwenhuis, 1929; Rank, 1912) the psychiatric literature on this subject does not seem to be as large as might be expected. Yet, in spite of its relative scarcity, it includes papers from all continents with the apparent exception of Africa. This, of course, does not mean that incest is not known or practised there too.

Most psychiatric publications on incest came from the U.S.A. (e.g. Howard, 1959; Kaufman *et al.*, 1954; Lustig *et al.*, 1966; Raphling *et al.*, 1967; Rhinehart, 1961) and from Europe (Colin *et al.*, 1966; Ebner, 1937; Gerchow, 1965; Maisch, 1965; Phillip, 1966; Pirozynski and Scripcaru, 1963; Rennert, 1954; Scripcaru *et al.*, 1966); only very few papers appeared in other parts of the world, e.g. in Australia (Medlicott, 1968), in Canada (Cormier *et al.*, 1962) and in Japan (Kubo, 1959).

II. The Present Paper

1. *Paternal incest in County Antrim (Northern Ireland)*

The present study is concerned with the problem of father-daughter incest in Co. Antrim only. We have come across cases of this type of incest mostly accidentally. A few girls were referred to us by the Juvenile Court, but the great majority of subjects were women referred to our out-patient clinics by their family doctors with various 'nervous' complaints. Some of them, quite casually, reported incestuous experiences with their fathers in their childhood. Such statements were made rather unexpectedly and quite spontaneously, without any questioning or prompting on our part.

We are aware of the fact that by adopting such a restrained attitude we have probably missed a great number of possible cases of incest. Yet even with this guarded and passive approach we have collected 26 cases of paternal incest. We know of 9 further such cases (all of them were the sisters of our patients), but as they officially were not our patients we have not included them in the present survey.

2. *The material*

This has been obtained from: (1) our child guidance and family psychiatry clinic in Whiteabbey Hospital, (2) a Remand Home and Training School for Girls, (3) and (4) our psychiatric out-patient clinics in two general hospitals, and (5) Holywell Hospital, a psychi-

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atric hospital in Antrim, serving the population of County Antrim of an estimated 330,000.

3. *The distribution of paternal incest*

The distribution of paternal incest among the patients from these five sources was as follows: (1) among the 100 unselected girls referred to our child guidance clinic we have met with 3 cases of paternal incest; (2) among the 100 girls in the Remand Home there were 10 cases of paternal incest; (3) and (4) among the 150 unselected out-patients in each of the two clinics in the general hospitals there were 4 cases of reported father-daughter incest in each group; (5) among the 150 unselected consecutive female admissions to Holywell Hospital there were 5 cases of alleged paternal incest. Altogether we have encountered 26 cases of paternal incest in 650 unselected patients, which would suggest that about 4 per cent of female psychiatric patients from the South-Eastern and the Central parts of Co. Antrim have had incestuous experiences at some time in their childhood. Unfortunately this fact does not give any indication of the prevalence of paternal incest among the general population of the county.

4. *Classification*

Incest can be easily classified into three categories: (1) Sexual relations between a parent and his/her child; (2) Sexual activities among the siblings, and (3) Sexual relations among the other blood relatives. The first group can be further subdivided into: (a) incestuous relations between fathers and daughters, and (b) incestuous relations between mothers and sons.

From our experience it would appear that sexual relations between fathers and daughters is the type of incest most often found in County Antrim: we have encountered 26 (in fact 35) such cases, as against only 3 proved cases of incest between mothers and sons.

A similar pattern of sexual behaviour also seems to prevail in culturally quite different societies. Thus, Malinowski (1927) reported that among the Trobrianders '... the father-daughter incest seems to be incomparably more frequent ... than that between mother and son'. Kubo (1959) made a similar discovery in his study on incest in Japan: among his 36 cases of incest among blood relatives there were 31 cases of father-daughter incest, against only 2 cases of mother-son incest.

In the present paper we will concern ourselves exclusively with the father-daughter type of incest. All other types of incestuous relations will be dealt with in another paper.

III. Clinical Illustrations

We propose to classify our material into four groups, according to the effect which the paternal incest seems to have had upon the development of the girls' personality and their later behaviour: (1) Girls who later became promiscuous, (2) Girls who became frigid, (3) Girls with some neurotic reactions, and (4) Girls who showed no ill effects.

Group I: *Girls who later became promiscuous*

Case 26, Miss 'Z', 14, a schoolgirl. Her father, now 34, was illegitimate. At 17 he took up lodgings with a single woman of 33, who had an illegitimate daughter of 16. Soon the man became this woman's lover, but at the same time he engaged in sexual relations with her daugher who later gave birth to 'Z'. The child's mother and grandmother continued sharing her father. When 'Z' herself was about 11 her father initiated sexual relations with her too, with the tacit approval of his wife and her mother. Soon 'Z' became promiscuous with boys at school and in the neighbourhood. For the past year the father had occasionally had sexual intercourse also with his younger daughter 'Y', now almost 11. Her comment: 'Oh, I enjoy it, and he always gives me sweets afterwards.' 'Z' sometimes becomes jealous and then threatens her father: 'You leave her alone, or I'll report you to the Police.' But she never has, and she continues her relations with her father, sharing him with her younger sister, her mother and her grandmother. Everybody seems to be quite happy in this rather unusual household.

Group II: *Girls who became frigid*

Case 11, Mrs. 'K', aged 19, had a most unhappy childhood: her father, an unemployed labourer, has had sexual relations with her since she was 6 years old. Two years later he started 'hiring' her out for sexual intercourse to their middle-aged bachelor lodger. The patient met her future husband at work when she was 17, and married him within a few weeks. However it turned out that she was 'frigid', or rather horrified of any sexual relations. After the wedding the couple went to England to live with the husband's parents. Unfortunately Mrs. K's father-in-law soon began making sexual advances to her. Finally she complained to her husband. There was a family row, and the young couple were turned out of the house. Then the husband decided to go back to Ireland and to stay with his

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wife's parents until they could get some accommodation on their own. Mrs. 'K' was most unwilling to go to her parents' house, but she was afraid to tell her husband why. As soon as they moved in, her father forced her to resume incestuous relations with him, threatening to expose her to her husband if she refused. She had to yield, but became depressed and made a suicidal attempt. When seen in the emergency ward, she stated: 'I have never loved my husband. I married him to get away from my father. And now he has forced me to come back to my father and to go through it all again. I hate sexual intercourse. I get stiff with fear when anybody approaches me with sex. I can't stand it any more . . .'

GROUP III: *Girls who developed neurotic reactions*

Case 20, Miss 'T', 18, a typist, began sexual relations with her father when she was 7. The mother pretended not to know anything about it. At 14 'T' became pregnant. She reacted with depression and a suicidal attempt by taking drugs and slashing her wrists. Her pregnancy was terminated and the father was sent to prison for three years. However, after serving his sentence he at once resumed the incestuous relations. This girl eventually married a man twice her age (father image), after repeated spells of chaotic promiscuity, alternating with depressive episodes, suicidal attempts and several readmissions to hospital.

GROUP IV: *Girls with no ill effects*

Case 22, Mrs. 'V', 33, with 4 children, was 8 when her mother left the house and went to live with another man (in the same street) whose wife had left him with four children. Since then V's father, who was then 32, started sexual relations with her. After four years he obtained a divorce and married another woman, but continued the incestuous relations with his daughter, until his new wife caught both of them in bed and expelled the girl, who was then 15. 'V' went to live with her grandmother until she married at 19. Her marriage is quite happy, her husband knows about her past, and is quite philosophical about that: 'Don't worry. Many fathers have intercourse with their daughters. You just have to accept it.' Mrs. 'V' is sexually well adjusted, and has no bad feelings towards her father: 'Oh, I don't mind it. I think it was quite natural for him to do so after his wife had left him. Besides, I know that he loved me.'

IV. DISCUSSION

(a) *General factors*

1. *Social class and environment*

Although in ancient Egypt, Peru and Japan incest seems to have been the 'privilege' of the royal families, whilst it remained forbidden to other members of society, nowadays incest is not confined to any special social class.

One might perhaps expect more cases of incest in families living in social isolation, for instance in some remote rural areas, where social contacts with eligible members of the opposite sex outside the family would be limited and infrequent. Indeed, Weinberg (1955) found a rather high incidence of incest in both rural and urban subcultures in the U.S.A. isolated from the 'cultural mainstream'. Also, most of Kubo's (1959) incestuous subjects lived in small settlements or family groups in remote mountainous parts of Japan.

According to our experience in Co. Antrim, incest seems to occur mostly among working class families living in cramped quarters in industrial towns. Thus, 19 fathers out of 26 belonged to Social Class V (*cf.* the class definitions of the *Registrar General*, 1968), 4 belonged to Class IV, and 3 belonged to Social Class III. We have met also with cases of incest among working class families in Bristol (England), and Alexander Leitch (1956) told us of cases of incest among the working class population in Glasgow (Scotland). Lustig (1966) expresses a similar view on the prevalence of incest in lower social class families in the U.S.A. Most authors (e.g. Flugel, 1926; Riemer, 1940; Sonden, 1936) emphasize the importance of the low living standards and of cultural isolation in the aetiology of incest.

2. *Housing conditions*

Of the 26 families under survey 5 lived as tenants in private dwellings, as a rule very old, neglected, crumbling and delapidated, without the most essential amenities (4 of them with water supply and toilets outside the house). Eighteen families lived in houses belonging to the Local Authority, or to the 'Northern Ireland Housing Trust'. These houses were soundly built and had all amenities (i.e. bathrooms and toilets); each house had a small garden, some had a garage. All these houses were standard 3- or 4-bedroom houses, but many were still over-crowded because of the large number of children in most families: an average family had 6 or 7 children, but some had up to 12. The remaining 3 families lived in their own houses, rather small, but fairly comfortable and usually well furnished. Two of these families belonged to Social Class III, one to Class IV.

Many investigators, e.g. Flugel (1926), Hirn-

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ing (1947), Sonden (1936), regard overcrowding as at least a contributory factor in the occurrence of incest, and Weinberg (1955) drew attention to the rise of incest at times of housing shortage. On the other hand Cavallin (1966) thinks that 'there is little evidence that deprivation, low intelligence, overcrowding, and isolation are significant contributing factors' in incest.

(b) *Personal factors*

1. *Age*

The age of our patients at the time of their referral ranged from 11 to 33 years, at the start of their incestuous relations it was between 5 and 14 years, the mean age being 8½ years. The fathers' age at the onset of their incestuous behaviour ranged from 29 to 41, the mean age being 32½ years.

Here are some comparisons: Merland *et al.* (1962) found a similar age range in their 34 fathers: most of them were in the 30 to 40 age group; over 70 per cent of their daughters were between 10 and 20 years old. In Cavallin's (1966) 12 cases the average age of fathers at the time of detection was 39 years, of daughters 13 (the youngest was 3 and the oldest 18 years old). He noted that 'the incestuous relationship took place with more than one daughter' in about 40 per cent of cases. Other writers, e.g. Evensen (1933), Kaufman *et al.* (1954), Weinberg (1955), found the daughters' ages to be 6 to 15. 'The fathers typically began incestuous activity around the age of 40, selecting the oldest daughter . . . as the first partner but subsequently trying to initiate incest with other accessible daughters' (Weiner, 1962). Cowie, Cowie and Slater (1968) believe that the fathers chose their daughters at such an early age because of their infertility at this age.

2. *The duration and the frequency of incestuous relations*

The *duration* of the incestuous activity in our group varied from 4 months to 12 years, the average being 8 years. The frequency of intercourse was much more difficult to establish with any accuracy, but it seems that in most cases it took place between once a week, usually at the weekends, and almost every night.

Our impression was that the girls in whom the frequency of intercourse was high belong to two groups: to those who later became promiscuous, and to those who did not show any ill effects from their clandestine relations. If this observation was correct, one might assume that the participation in the incestuous activities on the part of these girls was not entirely passive, and that perhaps some of them even enjoyed their role of the 'little mother' (e.g. Mrs. 'V', our Case No. 22, was happily married and sexually well adjusted, and had no bad feelings toward her father: 'Oh, I don't mind it. I think it was quite natural for him to do so after his wife had left him. Besides, I have enjoyed it.' Also her husband, who was told all about it before the marriage, was quite philosophical in this matter: 'Never mind. Many fathers have intercourse with their daughters. You just have to accept it.' Those were the girls who later used to 'pick up' adult males as their sexual partners—a 'father image'. Weiner (1962) expressed a similar view: 'As described in the literature the length and frequency of these incestuous contacts and the absence of any complaints on the part of the daughters indicate that these girls were not merely helpless victims of their fathers' needs but were gratified by the relationship . . .'

3. *The size of the family*

This ranged from 4 children in five families to 12 children in one family. Altogether our 26 families had 183 children, which means an average of 7 children. This is well above the average for County Antrim with an estimated mean of 4½ children per family.

(c) *Personality profiles*

1. *The fathers*

The fact that most of our fathers (about 70 per cent) were habitually unemployed at a time of full employment (1967–1968) and lived with their families in subsidised 'council houses', on unemployment benefit, family allowances, supplementary benefits, etc., would suggest in itself that these men must have had an inadequate, and often an antisocial personality. Clinically none of them was psychotic or frankly neurotic, none suffered from an organic illness or any form of disability. Only one of them twice developed a 'reactive depression'

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and got himself admitted to a psychiatric hospital—on both occasions when his incestuous activities became exposed and his arrest and prosecution were imminent. Yet his 'depression' did not prevent him from establishing incestuous relations with the third of his four daughters, as soon as the danger of prosecution was over. Similarly none of Weiner's (1962) five fathers was psychotic.

The profile of a 'typical' incestuous father emerging from large numbers of men seen by different writers (e.g. Riemer (1940) had seen 100 fathers in Swedish Courts; Weinberg (1955) reviewed the files of 159 fathers convicted for incest in Illinois) is as follows: he comes from a 'broken home'; his parents were seldom employed; he had little schooling and left home before the age of 15, but worked only sporadically at various labouring jobs (Weiner, 1962).

The personality of fathers in our group, as assessed on the basis of the histories obtained from their daughters and wives, and the reports of our psychiatric social workers, was as follows: 14 fathers appeared to have been *inadequate psychopaths*; 5 seemed to have been *aggressive psychopaths* with several convictions and gaol sentences, mainly for disorderly behaviour, assault and violence, and 2 of them also for incestuous relations with their daughters; 4 men were alcoholics, and two of them had been in gaol for breaking in and stealing. Altogether 7 fathers served gaol sentences for various offences. All these men seemed to have been of average intelligence.

Five fathers had sexual relations not only with their daughters who were our patients, but also with their other daughters: one father with 4 daughters; two with 3 daughters, and two fathers had incestuous relations with 2 of their daughters. As almost all these men had intercourse with their wives as well (and two also with their mistresses who lived with the family —with the wife's blessing), one may conclude that these men apparently had an unusually strong sexual drive, and either very weak or no inhibitions. Weinberg's (1955) fathers also were sexually demanding: they had intercourse frequently and their wives complained about lack of any affection in their husbands.

2. *The mothers*

None of our mothers was psychotic, and most of them appeared to be 'normal', hard working and much suffering women, usually with large families, and either a habitually unemployed, inefficient, 'good for nothing' husband (in 14 cases), or an aggressive and demanding husband (in 12 cases).

In spite of this only two mothers charged their husbands with incest. In both cases the husbands went to gaol and the marriage ended in divorce, In both these instances, as in Malmquist's (1966) two cases 'the mother played the role of a martyred victim who had been abused by her husband', although for years she must have been not only aware of incest between her husband and her daugher (our Case 3), but might even have tacitly encouraged it (one of Lustig's (1966) mothers). Also, according to Weiner (1962), the mothers 'often encourage such activity by frustrating their husbands sexually, deserting them in some fashion, and leaving the daughter to assume the maternal role' (*cf.* also a similar case of Lustig (1966)). This view is supported by findings of other writers, e.g. Ebner (1937), Kaufman *et al.* (1954), Riemer (1940) and Weinberg (1955). In Ebner's group of 100 mothers 44, for various reasons, were not available as sexual partners.

Heims and Kaufman (1963) thus characterize these mothers: they 'were infantile persons pushing the daughters prematurely into the mother role, including the incestuous relationships with the fathers'. A few of them showed what Lustig (1966) defined as 'ego fusion between mother and daughter', and a complete role reversal with their daughters.

From the study of Kaufman *et al.* (1954) it appears that most of their mothers also were dependent and 'infantile', very attached to their own mothers (Lukianowicz, 1971), and afraid of responsibilities, which they were quite happy to leave to their teenage daughters. Like their husbands, most of them left home and school early—either to go to work or to marry.

There was evidence that at least 10 of our mothers were fully aware of what was going on between their husbands and their daughters, but they chose to keep quiet, some of them probably because they were afraid of losing their

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husbands. These women were extremely dependent on their husbands and would have allowed them to do anything they wanted for the price of remaining with them. Similarly some of Cushing's (1950) mothers claimed that they were much 'too fond of their husbands to bring charges against them'.

However there were other reasons too: e.g. two of our mothers were themselves promiscuous and had eloped with their lovers even before their husbands started incestuous activities with their daughters; 6 further mothers were frankly promiscuous and would even bring men home when their husbands were out. So they were apparently quite happy to tolerate their husbands' 'unfaithfulness' with their own daughters, as long as their husbands did not object to their own promiscuous behaviour. Two mothers were frigid and agreed not only to being replaced by their daughters, but also to their husbands' keeping a mistress at home (in one case the wife and the mistress became so fond of each other that they still live together, three years after the husband's death).

As far as the mother's personality is concerned, 12 of them did not show any gross deviations; 8 were probably psychopaths (the promiscuous mothers); 2 frigid women showed symptoms of hysterical personality; 3 were excessively anxious; the personality of one mother could not be assessed because she died 8 years before her daughter was referred to us.

3. *The daughters*

At the time of their referral one girl was almost psychotic (Case 20), a few girls showed some neurotic symptoms, and almost half of them presented various forms and degrees of character disorder. It is difficult to say how much these disturbances were due to their early incestuous experiences, as it is impossible to talk about these girls' personality before the incestuous relations took place, when most of them were only about 8 years old.

However, one may try to speculate on the kind of impact the incestuous relations seemed to have made upon the girls' developing personalities. In this respect our subjects may be divided into the four following groups: promiscuous, frigid, neurotic, and the group with no ill effects. Here they are in some detail:

(a) Eleven girls seem to have developed *character disorders*: they became promiscuous, and four of them later became prostitutes. Apart from their disturbed psychosexual development and behaviour, these girls also showed other symptoms of a disorganized and anti-social personality: they indulged in taking alcohol and drugs, and in petty thieving, and they all were on many occasions arrested for drunkenness, disorderly behaviour, soliciting and stealing (two of them 'specialized' in shoplifting in supermarkets). All these girls were on probation at some time, and some served brief prison sentences. One should mention, however, that all girls from this group came from very disturbed homes with alcoholic and psychopathic fathers and with frankly promiscuous mothers. Thus there was perhaps also a great deal of subconscious imitation of parental behaviour. Sloan and Karpinski (1942) noted that many girls after giving up incest seek a substitute of it in promiscuous relations with other men. Flugel (1926) quoted a report of the Chicago Vice Commission in which 51 out of 103 women examined claimed to have had their first sexual experience with their own fathers. Also Heims and Kaufman (1963) found in their incestuous girls that 'they developed character disorders rather than neuroses or psychoses'.

(b) Five girls, after they married, developed *frigidity* and aversion to sexual relations with their husbands. Three of them showed symptoms of hysterical personality, with attention-seeking behaviour.

(c) Four girls showed some frank *psychiatric symptoms*: one developed an acute anxiety neurosis precipitated by her father's continuous threats that he would kill her if she dared to tell anybody about their clandestine relations; three other girls, each almost 14 at the onset of their incestuous relations, developed depressive reactions with repeated suicidal attempts.

(d) In six girls there were *no apparent ill effects* of their incestuous relations. One of them expressed it thus: 'Oh, I don't mind it. I know he really loved me. Besides, I enjoyed our relations too.' A few girls became jealous when their fathers discontinued relations with them

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and turned to their younger sisters. One of them became quite indignant because her father paid her 2s. for intercourse, and later paid her younger sister 2s. 6d. She even complained to her mother, but the latter chose to turn a blind eye on the whole affair, involving two of her daughters, and 'tactfully' suggested: 'Never mind. Try to forget it.' This group of girls would rather confirm Bender's and Blau's 1937) observations that most children who have had sexual relations with adults do not come to any real harm.

(d) *Aetiology*

There seem to be two main schools of thought, the analytical and the organic, each attempting to explain the origin and the meaning of incest in its own way:

(a) The *analytical school* is mostly represented by the American writers, e.g. Gordon (1955), Howard (1959), Lustig (1966), Rhinehart (1961), Tompkins (1940), although also some French-Canadian and Japanese authors subscribe to this school, for instance Cormier *et al.* (1962) and Kubo (1959). It interprets the father-daughter incest as an attempt on the part of the father to see in his daughter the young wife of his own youth, in whom he subconsciously saw a substitute of his first love object, i.e. his mother. In this way, through incest, the father is trying to return to his first 'true' love, i.e. to his mother. On the other hand Lustig (1966) saw in incest also 'a tension reducing defence within a dysfunctional family, serving to maintain the integrity of the family unit'. He found 'generalized role reversal and ego fusion between mother and daughter, fear of abandonment through family disintegration . . . the sexual expression of pregenital anger and/or dependency wishes, and the need of both parents to maintain a public façade of role competence'.

(b) The *physio-pathological school*, represented mostly by French-speaking authors, interprets incest rather in terms of toxic psychoses, mental deficiency, and alcoholic encephalopathy. Here are some examples: Merland *et al.* (1962), in their 34 cases of father-daugher incest, found alcoholism in 16 fathers, and some serious psychiatric disturbances in 22. Phillip (1966) found that more than 50 per cent of his 182 incestuous fathers were alcoholics, and 'a great number were "imbeciles" '. Pirozynski *et al.* (1963) reported similar conditions in their subjects, and Scripcaru *et al.* (1966) discovered in their two cases of paternal incest that both fathers had suffered from 'alcoholic encephalopathy with atrophy of the frontal lobes'.

(c) *Our own interpretation* of the father-daughter incest in our 26 families is based rather on social and cultural factors: none of our fathers was psychotic; only one was 'neurotic'; the remaining fathers showed various degrees and forms of personality disorder with anti-social behaviour, ranging from breaking in and stealing to assaults. Thus their common and basic characteristic was aggressive behaviour, and one may argue that their incest was only one of its expressions. They all appeared to have been aggressive 'oversexed' males with poor inhibitions and overtolerant wives. One might hypothesize that their incestuous activity was rather the expression of a type of sexual behaviour accepted by the particular sub-culture of their social group, and was not the result of any real sexual deviation (i.e. of paedophilia).

Such interpretation seems to be supported by the fact that most of the girls accepted their fathers' sexual behaviour as 'normal', and in almost all cases of a later promiscuity the girls concerned actively chose adult males as their sexual partners, in preference to adolescents. This behaviour might further suggest that at least some of the girls might have played an active part in the initiation of the incestuous relations and that not all of them were only 'innocent victims'. (N.B. Schultz (1952) drew attention to the involved victim-offender relationship, pointing out that, particularly in sex offences, in many instances the victims played an active part, collaborating, or even initiating the delinquent activity in a seductive way.)

A further confirmation of our hypothesis, regarding incestuous paternal behaviour as a cultural type of behaviour rather than an 'abnormal' behaviour, might be found in the unusual condoning attitude on the part of the mothers: only two of them reported their husbands to the police, although it would be

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inconceivable to assume that all the other mothers were unaware of the clandestine relations between their husbands and their daughters taking place in the same house over a long period of time. Thus one may assume that the mothers also regarded this relationship as an 'accepted' (although perhaps not very common and not desirable) type of behaviour in their social group.

A final support to our hypothesis comes from the attitude and the views expressed by the husband of our Case No. 22: 'Never mind. Many fathers have intercourse with their daughters. You just have to accept it.'

VI. Summary

Twenty-six cases of paternal incest met with in 650 unselected psychiatric female patients in a part of County Antrim (Northern Ireland) were presented. The mean age of the fathers at the beginning of the incestuous activity was 32½ years, the mean age of their daughters was 8½ years. The social class and environmental factors were discussed, and the family dynamics, the personality of the fathers, the mothers and the daughters were sketched. The results of the incestuous relations on the personality development, the behaviour and the future fate of the daughters were reviewed. The conclusion was arrived at that incest in girls' early life may cause in some cases personality disorders, very rarely a neurosis, never a psychosis. Two aetiological theories were discussed, and a hypothesis was put forward to the effect that incestuous behaviour on the part of some fathers should not necessarily be regarded as an expression of a real sexual deviation (paedophilia), but rather as an expression of a morally and socially accepted type of behaviour in some 'oversexed' and under-inhibited males in the subculture of certain social groups.

II : Other Types of Incest

Material

The material for this paper was obtained from the same sources as the material for paternal incest. An essential difference between the two materials is that in the first paper the girls referred to us by Courts and detained for assessment in the Remand Home were included. These girls came from all six counties of Northern Ireland and accounted for 38 per cent of our cases of father-daughter incest. The material in the present paper is based only on patients from our personal catchment area in Co. Antrim, which includes the North-Eastern outskirts of Belfast and the Central part of the County, with an estimated population of about 100,000.

The present inquiry is based on 100 male and 100 female patients in each of the two out-patient clinics (i.e. 400 subjects), on 50 boys and 50 girls from our child guidance clinic, and on 100 male and 100 female admissions to Holywell Hospital—altogether 700 unselected subjects. By 'unselected' we mean that the cases were consecutive referrals to the out-patient clinics or consecutive admissions to Holywell.

Among these 700 male and female patients, 29 (ie. 4 per cent) had had some experience of different types of incest. This figure is almost identical with the number of father-daughter incest cases discussed in our other study, where there were 26 cases of this type of incest among the 650 unselected subjects, i.e. also about 4 per cent.

Results

1. *Relationships*

Among the 29 subjects there were: (a) 15 cases of brother-sister incest, (b) 5 cases of grandfather-granddaughter incest, (c) 4 cases of uncle-niece incest, (d) 3 cases of mother-son incest and (e) 2 cases of aunt-nephew incest.

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2. *Age of participants*

Here is the age range of the incest perpetrators in each of our five groups: (a) the brothers' age ranged from 12 to 19, mean 15½; the sisters' age ranged from 8 to 18, mean 13; (b) the age of the grandfather was 55, the age of his five granddaughters ranged from 8 to 14, mean 11; (c) the uncles' age was between 29 and 41 years, mean 34½, the nieces' age ranged from 10 to 14, mean 11½; (d) the mothers' age ranged from 35 to 42, mean 38; the age of the sons ranged from 11 to 18, mean 15½; (e) one aunt was 34, the other 35; the nephews were 14 and 18 respectively. All these are the ages of the participants at the onset of the incestuous relations.

In four groups the initiating partner was an adult; in one (brother-sister) it was an adolescent boy, occasionally a pre-adolescent sister. In two groups (mother-son and aunt-nephew) the initiating partner was a woman; in three groups (brother-sister, uncle-niece, grandfather-granddaughters) the active and initiating partner was a man.

There were no real cases of rape in our group, although one may perhaps question the case of the 11-year-old ESN boy (and his schizophrenic mother), as well as the case of the 12-year-old girl and her aggressive alcoholic uncle; all other children, male and female, were far from being innocent victims; on the contrary, they were willing partners and often provocative seductresses.

3. *Frequency and duration of incestuous activity*

(a) *Frequency:* in most cases sexual relations took place almost every day, in many cases several times per week; only in one case (mother-son incest, case 3), were the incestuous acts confined to sporadic incidents.

(b) *Duration:* in the brother-sister group the range of duration of incestuous relations was from 2 to 14 years, average about 4 years; it ended when each participant found a sexual partner outside the family circle. The incestuous grandfather maintained relations from a few weeks with the oldest girl to over two years of almost a daily intercourse with the second youngest granddaughter; in the uncle-niece group the average duration of incest was two years (range ½ to 5 years); in the mother-son group the incestuous relations lasted from a few isolated incidents to 17 years; in the aunt-nephew group they lasted from about 2 to 5 years (all figures at the time of referral).

4. *Personality of perpetrators*

(a) *Brother-sister incest:* two brothers and one sister were aggressive psychopaths; 13 brothers and 14 sisters were free from gross personality disorders, neurosis or psychosis.

(b) *Grandfather-granddaugher incest:* the only man involved here seemed to be mentally entirely normal (in particular there was no question of any early senile or organic deterioration), and physically he was in excellent health; all five granddaughters had a normal personality. Although three of them later became promiscuous, this was a normal and an accepted behaviour in their subculture. It turned out that their grandfather had had incestuous relations with two of his three daughters before they were married, and it seems that at least one of his granddaughters was in fact also his own daughter.

(c) *Uncle-niece incest:* one uncle was alcoholic and a psychopath; one was mildly immature; the remaining two uncles and all four nieces seemed to be normal.

(d) *Mother-son incest:* one mother was normal (later she developed involutional depression), her son was schizophrenic; the other mother was suffering from schizophrenia, her son was educationally subnormal; the third mother was a neurotic individual, her son was normal (after two years of incestuous relations with his mother he left home, found himself a girl friend and married her.)

(e) *Aunt-nephew incest:* one aunt (a spinster) was hypomanic; her nephew was rather shy, withdrawn and passive, but otherwise normal. The other aunt (married) seems to have been quite normal (although perhaps slightly elated), but she was very promiscuous and had affairs with many men; her nephew had a normal personality.

5. *Intelligence*

The majority of our subjects were examined personally. In some cases, however, the estima-

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tion of their intelligence is based mainly on the history of their school achievement, their occupation and their behaviour; in some it was also based on the impressions of psychiatric social workers (in the case of men who would not come to the clinic). The following is the picture which thus emerged: one boy of 11 and his schizophrenic mothers, involved in mother-son incest, were both mentally subnormal: his I.Q. was 64, hers was 72; two women and one man seemed to be of dull normal intelligence (I.Q. 80–90); the remaining subjects all appeared to have been of at least average intelligence (I.Q. 90–110).

6. *Social class*

All subjects in our group came from the three lower socio-economic classes: Class III—1 subject (4 per cent), Class IV—6 subjects (21 per cent), Class V—22 subjects (75 per cent). It is interesting to note that the majority of them (in fact 17, i.e. 56 per cent) came from the country: 6 were small farmers, 11 farm labourers. The remaining 12 subjects lived in towns and had the following occupations: 7 were labourers (6 of them chronically unemployed), 1 was a shopkeeper, 3 were factory workers, and 1 was a university student.

Discussion

1. *Psychopathology*

Among the perpetrators of incest in our group there were two schizophrenics (one mother, and the son of the farmer's widow), 1 case of hypomania; 4 cases (14 per cent) of personality disorder (psychopathy), i.e. 2 brothers, 1 sister and 1 uncle; 2 mentally subnormal (1 son and his schizophrenic mother). Altogether there were 9 cases (16 per cent) of various mental abnormalities among our 54 subjects. The remaining 19 males (not 24, because one man had incestuous relations with his separated sister and at the same time with her daughter, i.e. his niece, and the only grandfather was engaged in incest with his five granddaughters) and 25 females involved in various types of incest did not show any gross psychopathology.

Psychiatric illness as such might have been of aetiological significance in three cases: (1) in the schizophrenic mother who was also of dull intelligence (I.Q. 72); (2) in the schizophrenic son; (3) in the manic aunt who seduced her nephew for the first time during one of her hypomanic phases.

However, in many of our cases there was another very important aetiological factor—social isolation. For instance, all our six farmers and 11 farm-labourers lived a lonely life in remote farms, without any social contacts or amenities. A typical example of social isolation among country people was our grandfather who was a farmer living miles away from any neighbours. The factor of social isolation has been stressed by other writers too (e.g. Lustig, 1966; Kubo, 1959).

Most French-speaking authors (e.g. Colin *et al.*, 1966; Merland *et al.*, 1962; Phillip, 1966; Pirozynski and Scripcaru, 1963; Scripcaru *et al.*, 1966) have reported a combination of two factors in their material: (a) alcoholism and mental illness, or (b) alcoholism and personality disorders. Quite often they also met with (c) some organic sequelae of alcoholism, e.g. alcoholic encephalopathy with frontal lobe atrophy (Pirozynski and Scripcaru; Scripcaru *et al.*).

2. *Psychodynamics*

In one case of mother-son incest the mother was a widow, and in a second case the mother's married life was very unhappy, and it seems that both these women became very dependent on their eldest sons, sought moral support and protection in them, and also saw in them the idealized young lovers of their own youth. Such interpretation is similar to the psychoanalytical explanation of the father-daughter incest (Cormier *et al.*, 1962; Gordon, 1955; Howard, 1959; Raphling, 1967). The third mother (unmarried) was a chronic schizophrenic of low intelligence, and her incestuous attempts on her illegitimate son seemed to have been impulsive, unpremeditated and rather infantile.

Of the 15 cases of brother-sister incest only one was permanent (lasting 14 years), and in some stages it was continued by the aggressive and violent psychopathic brother against the sister's wishes. All remaining cases followed the pattern of sexual exploration, play, and later real heterosexual intercourse as found among

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siblings in different remote societies (Malinowski, 1927; Mead, 1963a, 1963b; Nieuwenhuis, 1929; Cooper, 1932; Devereux, 1939) and also in overcrowded households of working class families in our own Western society. The parents usually turn a blind eye to such behaviour in their children (as long as the girls have not begun to menstruate); hence there is no scolding, no threats, no punishment, and so these children do not later develop feelings of guilt and later find it easy to substitute for their siblings new sexual partners from outside the family. As a result of this permissive attitude of their parents, and of their subculture, these youngsters usually do not come to any psychological harm (Bender and Blau, 1937). It seems to be almost a 'normal' usually a short-lasting phase in the sexual development of children from some social groups.

Three out of the four incestuous uncles were quite normal, though they may have been 'oversexed' males who obviously did not regard their sexual behaviour with their nieces as a 'sin' or a 'crime'. They were apparently backed by the permissive attitude of their social class and their subculture. The fourth man, an alcoholic and a psychopathic farmer, used to force (often by beating) both his separated sister and her 12-year-old daughter (i.e. his niece) to have sexual intercourse with him. There was no question of any emotional involvement on his part.

The grandfather misusing over the years each of his five granddaughters in turn, probably fits into the category of the 'oversexed males' discussed in our previous paper on father-daughter incest, particularly as he also used to have sex relations with two of his three daughters, one of whom was the mother of the five granddaughters involved in his present incestuous activities.

One of the two aunts was sporadically hypomanic, and she first initiated the sexual relations with her nephew during one of her more acute manic phases; the other aunt, a married woman with five children, was generally promiscuous and her nephew was only one of her many 'love affairs'. No emotional involvement or any particular psychodynamic problems seemed to have existed in these two cases.

Sequelae and Conclusions

One mother developed feelings of guilt in the course of her (unrelated to incest) late involutional depression. The other mother was neurotic all her life, but she never developed any feelings of guilt related to her incestuous relations with her son; instead she blamed her husband and his jealousy for her own behaviour—she said: 'My husband pushed me to sleep with my boy through his lack of feeling and his jealousy.' Only one of the 15 sisters developed a reactive depression (at the age of 28), and this was precipitated not by the incest itself, but by her brother's rough treatment of her, and by her jealousy, frustration, and humiliation when he began bringing other women to their house and having intercourse with them under her very eyes.

No other participants in incest have shown any morbid consequences or ill effects of their incestuous behaviour. So one may accept Malinowski's (1927) view that aversion to incest is not a 'natural' phenomenon, but one created by culture, what he calls 'a complex scheme of cultural reactions'. Ellis (1939) expresses a similar view: 'There is no anti-incestuous instinct, no natural aversion.' Freud (1919) of course, held that there is a strong 'natural' instinct to incest from early infancy.

In our present group of subjects we could not confirm the findings of Adams and Neel (1967) on the high mortality and morbidity rate in the offspring of the father-daughter incest. Yet one has to remember that in our present group were children born of this incestuous relations in only four cases: (1) one of the five granddaughters involved in incestuous relations with her grandfather was also his daughter; she was perfectly normal, both mentally and physically, although promiscuous; (2) the 8-year-old boy born from the incestuous relations of the depressed farm girl and her psychopathic brother was physically and mentally normal, although he was only of dull normal intelligence (I.Q. 85); (3) the 11-year-old son of the schizophrenic mother was fathered by her brother, who later married, and having had no children from this marriage adopted the child. Here, again, apart from his low intelligence (I.Q. 64), the boy did not show any apparent mental or physical abnormality;

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regarding his low intelligence one has to remember that his mother also had poor intelligence (I.Q. 72); (4) Mrs. 'H', Case 8 in our paper on Paternal Incest, claimed that she conceived her 7-year-old son from her father. The child was bright and in every respect perfectly normal.

Thus it would appear that there were no pathological effects of incest either on our subjects themselves or on their offspring. Their psychiatric disorders (2 cases of schizophrenia, 2 cases of depression, 1 case of mania, 3 cases of psychopathy) were quite incidental (with the exception of the reactive depression in one case; but even here the depression was not precipitated by the incest but by the brother's cruel behaviour).

Furthermore, it may seem that in most cases the incestuous relations were a cultural (or, more correctly, a sub-cultural) phenomenon, and in many cases they were precipitated either by overcrowding, or on the contrary, by social isolation and lack of normal heterosexual contacts outside the family circle. In children the incestuous activities seem to have been only a transitory, culturally permissible, phase in the process of their normal psychosexual development, and as such did not result in any bad effects.

Summary

Twenty-nine cases of various forms of incest (with the exception of father-daughter incest, which has been already described in the previous paper) are reported and analysed. Most numerous (15 cases) was the group of brother-sister incest. The personality, intelligence and social class of the participants show no marked deviations from what might have been expected of a random population sample. There were no grave psychiatric sequelae. With the exception of two cases of schizophrenia and one case of involutional depression (aetiologically not related to the incest itself) no other cases required admission to hospital or any special treatment. The children born of various combinations of incestuous relations did not seem to show any abnormalities (two cases of poor intelligence were apparently genetically determined).

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