

A Comparison of Incest Offenders Based on Victim Age

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### Abstract

The purpose of the present study was to compare incest offenders (IO) whose victims include infants or toddlers to IO with adolescent victims on a number of variables commonly examined in the sexual offender literature. Participants were 48 men whose youngest victim was under 6 years of age; *younger-victim incest offenders* (YV); and 71 men whose youngest victim was 12 to 16 years of age; *older-victim incest offenders* (OV). In general, YV were more problematic than OV. Compared to OV, YV had a greater history of substance abuse and more current problems with alcohol. In addition, YV, compared to OV, reported significantly poorer sexual functioning and were significantly more psychiatrically disturbed. YV were also more likely to have a male victim, victimize a nephew/niece or grandson/granddaughter and deny the offence. It was evident that both the YV and OV demonstrated clinically significant difficulty with normal sexual functioning and deviant sexual arousal.

## A Comparison of Incest Offenders Based on Victim Age

While sexual victimization of any age group is unacceptable, the current admonitions surrounding such offenses against adolescents may be largely attributable to societal/cultural norms and mores, and to investigations regarding the physical and psychological damage endured by a young person who has been abused. That is, in an effort to protect young people most modern societies have designated those under the age of roughly 16 as psychologically unprepared for sexual interactions (particularly with adults), irrespective of physical traits or reproductive competencies present that may suggest otherwise. It is primarily this somewhat arbitrary demarcation, where it applies to a victim's age, that forms the basis for the differential labeling of a sexual offender as being a child molester or a rapist. However, perhaps under the blanket designation of child molester there are important subgroups based on victim age. Sexual abuse of an infant or toddler not only represents the same breaching of society's values and laws that a similar crime against an adolescent does, but it also contravenes any semblance of adaptive sexual behaviour, biologically or otherwise. With this difference in mind, it is reasonable to predict that a person who offends against a very young child would differ, on one or many levels, from a person who offends against an adolescent.

Sexual abuse of infants and toddlers is not uncommon, with cases involving victims as young as 2 to 3 months having been reported (1; 2). Exact statistics on the number of very young children who are sexually abused are difficult to obtain as the limited verbal and abstraction skills of these victims, along with the damaging effects of the abuse itself, present significant impediments to full or even reasonable disclosure (3). Finkelhor (4) found that of 270 cases of sexual abuse in a day care, 6% occurred against children under 2 years old and 60% involved children under 4 years. Schetky (5) surveyed Child Protection Services serving three small

counties in Maine and found 53 substantiated cases of sexual abuse involving children under age 4 between the years of 1985 and 1988. Tending to be family members, babysitters, or daycare workers, Schetky reports that perpetrators of sexual abuse against infants and toddlers capitalize on the access to defenseless victims furnished by their caregiving role, an opportunity not available to a stranger.

Although the authors are unaware of any published research in which IO are compared as a function of victim age some comparisons of extrafamilial child molesters have been conducted. Greenberg et al. (6), in a comparison of extrafamilial child molesters who had offended against victims under the age of five with those who had offended against victims aged 8 to 12, found few differences on measures of victim characteristics, offense characteristics, or psychological characteristics of the offender. However, offenders who victimized younger children were significantly younger than those who victimized older children. It is possible that the failure to find further statistically significant differences was due to the small sample size; only 10 participants were in the younger-child group. A follow-up study was conducted by Greenberg *et al.* (3) and as in the previous study, the younger-child offenders were observed to have similar features to older-child offenders, with the exception, once again, of age. In addition, younger-child offenders were significantly more likely to deny their offenses, and have a higher score on Factor 2 (antisocial lifestyle) of the Psychopathy Checklist-Revised (PCL-R; 7). Although this study involved 192 participants in the older-child offender sample there were only 18 participants in the younger-child offender sample, which may have again failed to provide adequate statistical power to detect real differences that may have existed between the two groups. In light of Schetky's (5) observation of the preponderance of family members involved in cases of infant and toddler sexual abuse and given the importance of frequent and isolated

access to the victim in this form of sexual offending, it could be expected that this phenomenon is more likely to be witnessed in incest offender populations. The studies by Greenberg and his colleagues involved samples of extra-familial child molesters only. The exclusion of incest offenders may have contributed to the small sample sizes of the groups with victims under the age of five. In support of this notion is the observation that the majority of perpetrators, in the second study (3), who did offend against children under the age of 5 were, at least acquainted with the victim, if not related.

The current study will investigate whether incest offenders that have offended against very young children are distinguishable from those who have offended against pubescent children. There is some similarity in the current study to the methodology and focus of the earlier studies on sexual offenders of infants and toddlers by Greenberg et al. (6; 3). Greenberg and his colleagues are also affiliated with the SBC at the ROH and used data from a similar database as the present authors. However, Greenberg studied extrafamilial child molesters while this investigation involves a sample of incest offenders, so there is no overlap in participants. To the authors' knowledge there have been no other studies of child molesters who offend against children under the age of five using such a population. A potential limitation of the Greenberg studies concerns the fact that the group with victims 5 years of age or younger was compared to a group with victims as old as 16 but as young as 6 years. This may have masked differences that existed between offenders in the two groups whose victims' ages were more dissimilar. With this in mind, another key difference in the protocol of this study is the use of a comparison group consisting of men who have exclusively offended against pubertal victims in their index offences. This decision was made to maximize the contrast between the ages, and thus the physical and emotional characteristics of the two groups' victims. Twelve years was chosen as

the lower limit for the group with older victims based on the fact that the average age for the onset of menses for girls in the United States is 12.5 years (8), and the average age for boys to develop pubic hair is 13 (9).

## Method

### *Participants*

The present sample consisted of two groups of adult men convicted of hands-on sexual offences against family members (biological child, step-child, nephew, niece, grandchild, or sibling) who were 16-years-old or younger; all participants were assessed at the Royal Ottawa Hospital, Sexual Behaviours Clinic. In one group were 48 men whose youngest victim was under 6 years of age; *younger-victim incest offenders* (YV). In the other group were 71 men whose youngest victim was at least 12 years of age; *older-victim incest offenders* (OV).

### *Measures*

#### *Sexual Functioning*

The Derogatis Sexual Functioning Inventory (DSFI) is designed to assess general and specific dimensions of sexual functioning (10; 11). The DSFI collects information using numerous items at once in order to grasp “the fundamental components judged essential to effective sexual behavior” (11, p.117). The 10 subscales are Information, Experience, Sexual Drive, Sexual Attitude, Psychological Symptoms (also known apart from the DSFI as the Brief Symptom Inventory), Affect, Gender Role Definition, Sexual Fantasy, Body Image, and Satisfaction. The Sexual Functioning Index (SFI) is a global measure derived by summing the 10 subtest scores. It provides an overall measure of an individuals’ level of sexual functioning. The DSFI has been used with large nonforensic samples, but its use with sexual offenders is limited. There is some suggestion that sexual offenders show high levels of sexual dissatisfaction (12).

### *Psychiatric Disturbance*

The Brief Psychiatric Rating Scale (BPRS; 13) is an inventory designed to provide clinician ratings on psychiatric symptomatology in 16 domains, such as anxiety, emotional withdrawal, somatic concerns, and other symptomatology. For each domain, the clinician is required to rate the degree to which symptomatology is present in the subject. Ratings may range from a low score of 0 (not present), to 6 (extremely severe). In addition to providing information about specific symptomatology, a total score provides an overall indication of psychiatric disturbance. An acceptable internal consistency coefficient of .63 has been reported (14).

### *Alcohol Abuse*

The Michigan Alcoholism Screening Test (MAST), a 24-item self report inventory, is used to identify behaviors indicative of alcohol abuse (15). The internal consistency is adequate with a reported overall alpha coefficient of .87, and the test is relatively unaffected by age or by denial of socially unacceptable characteristics (16; 17). Scores of 5 or 6 are considered suggestive of alcohol problems, and a score of 7 or more is considered strongly indicative of alcohol abuse (18). The MAST has been found to correlate with DSM-III-R criteria for alcohol dependence (17). The MAST has been extensively used as a screening tool for alcoholism, and many studies have used samples of sex offenders (e.g., 18; 19; 20; 21).

### *Psychopathy*

The Psychopathy Checklist-Revised consists of 20 clinical rating scales designed to assess behaviours and personality characteristics considered fundamental to psychopathy (7). Rigorous testing has indicated that the PCL-R is a psychometrically sound instrument (22). Valid PCL-R ratings can be made on the basis of high quality archival information (23; 24). The existence of two factors has been replicated using various samples: (1) the degree of personality,

interpersonal, and affective traits deemed significant to the construct of psychopathy, and (2) the degree of antisocial behaviour and an unstable, corrupted lifestyle (25). Previous studies have found the interrater reliability and internal consistency of both factors to be high despite the small number of items per factors (7; 25). In the present investigation, the PCL-R was completed from descriptive material contained in institutional files by two research assistants. A random sample of 100 clinic files were independently rated by each researcher, resulting in a satisfactory interrater reliability correlation  $r=.88$ ,  $p<.0001$ .

### *Measurement of Sexual Arousal*

Changes in penile circumference in response to audio/visual stimuli were measured by means of an Indium-Gallium strain gauge. The data were then processed in an IBM compatible computer for storage and printout.

*Stimuli presentation.* The order of stimulus presentation, held constant for all participants, was computer controlled. Participants were presented with one or more of three series of audiotapes, according to the nature of the participants' sexual offense. The audiotapes consisted of 120-second vignettes that described activities varying in age and gender of the victim or partner, and degree of violence portrayed (26). Each participant was presented with at least one full set containing one vignette from each category following instructions to allow normal arousal to occur. The categories used in the assessment of arousal to children that are relevant to the current study were (a) child initiates, (b) child mutual, (c) nonphysical coercion of child, (d) physical coercion of child, (e) sadistic sex with child, (f) nonsexual assault of child, and (g) consenting sex with adult. The audiotape series used to identify sexual attraction to rape included two scenarios of two-minute duration for each of three categories: (a) consenting sex with adult female, (b) rape of female adult, and (c) nonsexual assault of female adult.



*Scoring.* The Pedophile Index (PI) was computed by dividing the highest response to the child initiates or child mutual stimulus by the highest responses to an adult consenting stimulus. Adequate criterion validity for the PI (utilizing the same stimuli as the present study) has been demonstrated by its ability to differentiate child molesters and nonoffenders significantly above chance levels of accuracy (27).

The Pedophile Assault Index (PAI) was computed by dividing the highest response to an assault stimulus involving a child victim (nonphysical coercion of child, physical coercion of child, sadistic sex with child, or nonsexual assault of child) by the highest response of the child initiates or child mutual stimulus. Adequate criterion validity for the PAI (utilizing the same stimuli as the present study) has been demonstrated in past studies finding significant differences between homicidal sex offenders and non-offenders (28; 29).

#### *Procedure*

Most of the data examined in the current study, such as demographic, historical, psychological test, phallometric, and index sexual offence information, were derived from the medical records or the participants' assessments, which routinely involved numerous interviews and extensive testing. Data on prior criminal charges was gathered post-assessment from the Canadian Police Information Center (CPIC) at the Ottawa Police Station, a national data base of criminal arrests and convictions including INTERPOL reports from the Royal Canadian Mounted Police.

#### *Results*

Before performing statistical tests, the data were screened to ensure that the assumptions underlying the tests were not violated. In the very limited number of cases where outlying values occurred they were adjusted upward or downward according to the direction of the problem. This

method is appropriate when case retention is desirable and when it does not unduly influence the group means (30). Two-tailed *t* tests were performed on continuous variables and dichotomous variables were analyzed by chi-square, cross-tabular, independent group tests. An alpha level of .05, two-tailed, was used for all statistical tests.

Demographic and historical data for YV and OV are presented in Table 1. The groups did not differ in their age or number of years of education. However, a statistical trend ( $p < .10$ ) suggested the YV had lower full scale IQ scores than the OV. The YV group were also significantly more likely to have a history of drug abuse and alcohol dependency. In terms of family background, the group with younger victims were significantly more likely to have been raised in a family with a history of criminality, but there were no other significant differences

The two groups of incest offenders were compared on a variety of psychological and phallometric measures as described in Table 2. The YV had poorer overall sexual functioning than the OV group, as evidenced by significantly a lower mean scores on the DSFI. It is interesting to note that neither group scored above the 5<sup>th</sup> percentile on this sexual functioning inventory. In addition, scores on the MAST indicated that YV are significantly more likely than OV to be alcohol dependent. It should be noted that given the high standard deviation, the data required correction for heterogeneity of variance and the statistical significance here was calculated accordingly. Offenders against younger children also exhibited significantly more psychiatric disturbance than the other group on the BPRS. The PCL-R did not distinguish between the YV and OV groups. As indicated at the bottom of Table 2, phallometric analysis revealed that both groups showed clinically meaningful levels of deviant sexual preferences. Nevertheless, there was not a significant difference between the YV and OV participants.

As detailed in Table 3, non-parametric analysis of data regarding offender's sexual

offences and victim characteristics revealed that YV were more likely to have multiple victims. This variable was calculated with dichotomous data (i.e., 1 victim vs. more than one victim). This significant result should be interpreted with caution for two reasons. First, a frequency table revealed that the vast majority of YV (87.5 %) had two *or less* victims, while the remaining 12.5% had between 3 and 7 victims. In other words, it may be more appropriate to consider the YV as being more likely to have 2 victims than the OV. Secondly, the authors acknowledge that the operational definitions of the groups may have lent themselves to a result favoring higher victim counts for the YV. The YV could have any number of victims *over* 5 years of age (but under 16), so long as they had at least one victim 5 years or younger. Meanwhile, for the sake of maintaining purity in the OV group, an offender who did offend against a 13 year old, but also had a 7 year old victim, would *not* be included. To determine whether the offenders excluded from the OV group would have had a different distribution on this variable from those retained in the OV group, medians for each were examined and both were found to be 1.00 victims, suggesting that the stringent criteria of the OV group did not unduly affect the results on this variable. The YV were more likely to have offended against a male victim than the OV. The victim's relationship to the offender was derived from a categorical variable which listed the following options: step-son/daughter, biological son/daughter, sibling, and relative (grand-son/daughter, niece/nephew). The only significant difference between YV and OV concerning the victims' relationships to the offenders was that of Relative; all other victim relationships to the offender were equally likely for both groups. Another way of describing this finding is that YV were more likely than OV to have been grandfathers or uncles to their victims. It was also evident that the YV were more likely, than the OV, to deny having committed their offences. Finally, as reported in Table 3 there were no significant differences between the two groups in

terms of criminal history.

### Discussion

In general, the results of the current study provide support for the notion that incest offenders with prepubescent victims are a more disordered group than men who have only sexually assaulted pubescent children. With one exception, whether statistically significant or not, those men convicted of a sexual offenses against younger children scored more poorly on all measures studied. The only exception was for previous sexual offenses, which did not statistically differentiate the two groups.

#### *Demographic and Historical Information*

Unlike the previous findings with extra-familial child molesters (6; 3), the group with the younger victims in this study did not differ in age from the group with older victims. However, the average age of all participants in this study ( $M=40.1$  years) is considerably older than the ages of participants in the report by Greenberg and his colleagues ( $M=27.9$  years). This may be due to the participants in this study being incest offenders; incest offenders are usually older than extra-familial child molesters (12). The two groups of men did not differ in the number of years of education completed. Nevertheless, it is noteworthy that the average number of years of education for all participants in this study is considerably lower than the general population of Canadians of similar age, 85 percent of whom graduate from high school (32). There was a statistical trend that emerged in the data suggesting that sexual aggressors of prepubescents demonstrated lower intelligence than sexual aggressors of adolescents, as measured by IQ scores. The rates of marriage in the histories of the two offender groups did not differ and appears to be in line with the national rate for Canadian men, which is approximately 75 percent (32).

Williams and Finkelhor (33) have noted that many incest offenders rationalize their

crimes by blaming their offending behaviour on alcohol. In the present study, there were no differences between the two groups regarding whether they reported being influenced by drugs or alcohol during the commission of their offence. Nevertheless, sexual offenders of young victims were more likely to have reported drug abuse and alcoholism in their history, compared with offenders against older victims. Moreover, in terms of more current alcohol abuse, the offenders of adolescent victims scored only in a borderline range that may be suggestive of alcohol problems, while with the offenders with prepubescent victims it was very evident they had very serious alcohol problems currently. They scored well beyond the cut-off of 7 that is strongly indicative of alcohol abuse (18). There are many reports that substance abuse is pervasive amongst sex-offender populations (33) but in the current study only offenders who victimized very young children indicated that alcoholism is both a historical and current problem. The effects of recreational drugs or alcohol may augment an offender's libidinal drive, distorting his perceptions or lowering his inhibitions, any number of which may lead to impaired judgment regarding sexual interactions with a very young member of his family. It is also possible that the sexual offenses against prepubertal children is part of the paraphilic attraction that these men have. It was certainly evident that both groups of offenders in the present investigation evidenced clinically meaningful levels of deviant sexual arousal to children.

In the current investigation there was not a great deal of evidence to suggest that offenders with younger victims were more likely to have been raised in problematic families. It is worth noting that roughly 40 percent of all participants in this study reported they were sexually and physically abused themselves, a proportion which is a little higher than the one-third of pedophiles who report being sexually victimized during their own childhood, by other researchers (34). However, it is remarkable that on every reported measure these men seem to

have come from families with more problems. Although intuitively appealing, the link between commission of sexual crimes and offenders' own experiences of sexual abuse is a contentious one. Interestingly, Hanson and Slater (34) found that the proportions of sex offenders against children that reported being sexually abused themselves were similar to those found in other sexual and nonsexual offender groups. *Psychological measures*

Kalichman (35) has reported that child molesters who abuse prepubescent children demonstrate significantly more psychopathology and emotional disturbance. The results of the current study lend credence to this observation. As indicated previously, the group of men with younger victims were clearly more alcoholic than the group with older child victims. In addition, on the DSFI a general measure of sexual functioning, sexual aggressors of prepubescents rated themselves as having significantly more problems than the other group. While this observation lends support to the hypothesis that those who offend against younger children are likely to be more disturbed than those who do not, it should be noted that the mean score on the DSFI for both groups places them in approximately the fifth to seventh percentile of the population at large (36). This suggests that the sexual functioning of all incest offenders is quite problematic at best. In addition, on the BPRS which was used to determine the degree of psychiatric disturbance, the group with younger victims was found to be significantly more disturbed than the group with older victims. Psychopathy as measured by the PCL-R, revealed no difference between the two groups.

#### *Phallometric Analyses*

Laboratory measures of sexual arousal have generally indicated that child molesters have a relatively distinct preference for sexual activity with children (37; 27; 28) as compared to rapists and nonsexual offenders. As mentioned earlier, both groups exhibited clinically

significant deviant sexual arousal to child stimuli. However, there were no significant differences between the groups on these indices of deviant arousal. It is possible that the stimuli simply did not adequately target such a young victim age preference. For example, the recordings describe *a child* but not a particular child and the descriptions are quite general outside of gender. Perhaps other forms of stimuli that specifically address the physical, intellectual and emotional qualities of a very young child may have elicited differential responses from the two groups.

#### *Victim and Offence Characteristics*

The results of the current study show sexual aggressors of infants/toddlers to be more likely to have multiple victims. Of course, more victims may simply be the result of more opportunities for this particular sample, but it may suggest that these offenders either possess less restraint or experience stronger inclinations to victimize. As discussed in the result section the results from this variable should be interpreted with caution as the phrase “multiple victims” may connote serial offending or a degree of pathology not represented in the data; the majority of offenders against younger victims who did have more than one victim had two victims. Another finding concerning victim characteristics was that the offenders with younger victims were more likely to victimize a male. This observation does not eliminate the possibility that these same individuals also offended against a female. In fact, in the entire incest database from which the two groups in this study were sampled only 19 of 342 offenders did not have a female victim. Offenders of infants/toddlers were also significantly more likely to have offended against their nephew/niece or grand-son/daughter.

#### *General discussion*

The current study represents a preliminary effort to determine whether differences exist

between incestuous child molesters as a function of victim age. The majority of the differences found are in line with a general prediction that the offenders with younger victims represent a more generally disordered group. Previous attempts to find differences between groups of child molesters arranged according to victim age may have been hampered by small sample sizes, but an argument could be made that the incestuous component incorporated into the offenses of the current sample of child molesters may have had an effect on the results. In other words, if the sexual abuse of an unrelated infant or toddler represents an especially deviant act, it may follow that the same offense perpetrated by someone against a member of his own family - possibly a daughter or nephew, constitutes even further pathology and thus perhaps a more disordered offender.

A unique feature regarding the current study is the nature of the population considered. To date, a great number of studies regarding sex offenders have utilized samples from maximum security psychiatric hospitals or prisons. In the present study the subjects were convicted of sexual offence against a child and were assessed in a sexual behaviours clinic located in the forensic unit of a large general psychiatric hospital. Therefore, this group may be much more representative of the wide array of men processed through the courts than those in many previous studies.

### *Limitations*

A limitation to this study is the heterogeneity in the group of sexual offenders against younger children. Participants in this group were defined as anyone from the incest database who had offended against a child 5 years of age or younger. This criterion did not exclude offenders who had, for example, offended against a 14 year old, so long as he had also offended against at least one child who was 5 years of age or younger. With this in mind, the 19 offenders who also



had victims over 5 years of age, but were deemed operationally as offenders with younger victims may have been no more infantophilic than they were hebephilic, except where the ages of their victims are concerned. To the extent that victims against whom one has offended represent an arousal preference, or an absence of one, it may be that this confound is one of the reasons that significant differences in phallometric results were not observed. Despite this limitation, the sexual offenders against adolescents group, defined as those whose victims were exclusively 12 years of age or older, was indeed homogeneous, and the fact remains that in the current study those that had offended against an infant or toddler could indeed be distinguished on several notable variables from those who had not.

The current study also relies somewhat on self-report data, which may be vulnerable to biased responding in order to present oneself in a more favorable light, especially in incarcerated sex offenders (38). However, the validity of many of the measures used in the current study are not unduly threatened by social desirability.

#### *Future Research*

It would be interesting to compare incestuous offenders of young children to a similarly defined group of extra-familial offenders with an adequate sample size to determine the differential psychopathology. Another important variable to investigate regarding incestuous offenders might be the extent of the caregiving role that the offender fulfilled and the amount of time the offender spent with the child prior to the offence. According to the “Westermarck hypothesis”, humans may have an innate incest avoidance mechanism such that persons raised together from early childhood have an aversion to sexual intercourse with one another (39). One would speculate that a sufficient quality and duration of time spent with a young child in a caring capacity serves to inoculate adult family members against inclinations toward sexual

interactions.

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Table 1

*Demographic and historical information of Younger-Victim Incest Offenders (YV) and Older-Victim Incest Offenders (OV)*

Variable	YV		OV		df	t or $\chi^2$
	n	M (SD) or %	n	M (SD) or %		
Age	48	40.8 (14.7)	71	39.5 (9.3)	117	-0.65
Years education	40	9.5 (2.7)	62	9.9 (2.5)	100	0.53
FSIQ	21	85.2 (15.3)	27	93.3 (14.3)	46	1.87
Ever married	38	78.9%	57	91.2%	1	2.91
History of drug abuse	41	36.6%	64	9.4%	1	11.62**
History of alcohol dependency	42	50.0%	63	27.0%	1	5.78*
Family history of violence	34	61.8%	42	42.9%	1	2.69
Family history of criminality	33	33.3%	58	8.6%	1	8.86*
Family history of alcoholism	31	54.8%	60	43.3%	1	1.09
Sexual abuse	51	45.1%	79	39.2%	1	0.43
Physical abuse	33	51.5%	43	32.6%	1	2.77

\* $p < .05$ . \*\* $p < .01$ .

Table 2

*Psychological test and phallometric data of Younger-Victim Incest Offenders (YV) and Older-Victim Incest Offenders (OV)*

Variable	YV		OV		df	t
	N	M (SD)	n	M (SD)		
DSFI	43	26.9 (9.6)	67	32.0 (12.0)	108	-2.32*
MAST	20	16.9 (17.3)	41	5.1 (8.7)	59	3.58*
BPRS	14	15.4 (8.9)	34	10.5 (6.9)	46	2.05*
Degree of psychiatric disturbance						
PCL-R						
Factor 1	38	8.9 (3.1)	57	8.6 (3.1)	93	0.69
Factor 2	29	7.7 (4.8)	35	5.8 (4.1)	62	1.65
Total score	38	19.1 (7.6)	57	16.4 (6.1)	93	1.88
Phallometric Indexes						
Pedophile Index	34	1.20 (1.32)	41	0.96 (0.77)	62	-1.02
Pedophile Assault Index	34	1.07 (1.01)	41	1.01 (0.82)	73	-0.22

\* $p < .05$ .



Table 3

*Index Sexual Offence Characteristics and Criminal History of Younger-Victim Incest Offenders (YV) and Older-Victim Incest Offenders (OV)*

Variable	YV		OV		$\chi^2$
	<i>n</i>	%	<i>n</i>	%	
2+ victims	51	49.0	79	17.7	14.46**
Any male victim	47	25.5	70	10.0	4.99*
Son/daughter	45	28.9	70	41.4	1.86
Step-daughter/son	45	35.6	70	45.7	1.16
Relative (grand-daughter/son, niece/nephew)	45	46.7	70	15.7	13.07**
Admitted to offence	48	64.6	71	85.9	7.43**
Influenced by drugs or alcohol	37	37.8	62	21.0	3.32
Threat, violence, or injury	46	32.6	69	8.8	10.57**
Any previous criminal history					
Sexual	48	12.5	71	25.4	2.94
Violent (nonsexual)	48	25.0	71	14.1	2.26
Criminal (nonsexual, nonviolent)	48	13.4	71	12.7	0.71
Any type	48	26.2	71	32.7	0.95

*Note.*  $df = 1$ .

\* $p < .05$ . \*\* $p < .01$ .