

Adolescent Sexual Matricide Following Repetitive Mother-Son Incest

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ABSTRACT: A case of a 16-year-old male who committed a sexual matricide following years of mother-son incest is reported. After murdering his mother by strangulation, which itself was sexually arousing, the youngster engaged in both vaginal and anal necrophilia. The homicide occurred while the perpetrator was in a dissociative state and experiencing what has been referred to as a catathymic crisis: the sudden release of emotionally charged psychic conflict and tension, resulting in extreme violence within an interpersonal bond. Discussion of maternal image and maternal sexual conduct in relationship to the psychosexual development of adolescent males offers insight into the motivation in this extremely rare case.

KEYWORDS: forensic science, forensic psychology, forensic psychiatry, adolescent sexual homicide, matricide, mother-son incest, catathymic crisis

Although there are no national crime statistics on the number of adolescent sexual homicides, adolescent matricides, or instances of mother-son incest, these acts are very rare occurrences singularly and extremely rare in combination. Most frequently, the victims of juvenile sexual murderers are either neighbors or randomly selected individuals, rather than family member's (1–5). When adolescents—even those who commit serial sexual homicides as adults—do kill a family member, it is highly unlikely that the murder was sexually driven (6).

The crime of matricide, fairly well known in literature and myth, is encountered infrequently in forensic practice, and is hardly ever sexually motivated. The research on matricide is small (7); most offenders seem to be schizophrenic adult men, living alone with their mothers at the time of the murder (8). A review of the various reported cases reveals that the homicides were mostly a consequence of escalating arguments, or sometimes an outgrowth of a psychosis, either associated with schizophrenia or substance-induced.

Cases of mother-son incest have been sporadically reported in the literature beginning with Krafft-Ebing in 1892 (9). While the research on father-daughter incest is extensive, there is relatively little study on the consequences of sexual relations between mother and son. Many of the cited cases reveal a range of negative effects, from general sexual identity conflicts (10), to sexually aggressive behavior with strangers (11), with one report of a sexual assault and physical injury to the mother (12).

There have been a few reported cases of matricide by adolescent sons following mother-son incest. MacDonald (13) briefly described the case of a 14-year-old who killed his mother, eventually revealing that he had sexual relations with her, about once a month, on her initiative. Brown (14) described, in detail, another case of a 19-year-old who, after eight years of an incestuous relationship, killed his mother by smashing her skull with a sash weight. Hours prior to the homicide, he was unable to consummate sexual relations with a prostitute. When the mother discovered her son's fetish collection of female hair brushes, he became embarrassed; an argument ensued, resulting in her death. He then calmly called the police explaining "I had to. There was nothing else to do." In both of these cases, the sexual element is obvious, but the murder itself was not sexually gratifying, arousing or eroticized in any of its aspects.

The following case is noteworthy, not only because of the rarity of an adolescent committing matricide after years of mother-son incest, but the murder itself was sexually arousing and included vaginal and anal necrophilia.

Criminal Offense

K.M., a 16-year-old high school sophomore, started each school day in a routine fashion. On the day of the homicide, he woke up at about 6 a.m. and began his daily chores. He had breakfast by himself, got washed, and said goodbye to his father, who was leaving for work. Later, he observed his mother through the opened bathroom door; she was wearing only her underwear and a partially buttoned shirt. K.M. stated that he got an erection. She then began to scold him for "fooling around with the dog and not getting ready for school fast enough." He explained, "She kept yelling and I didn't say a word back. I took it all in. I got angry. I went downstairs and I was thinking about how angry I was at her, about her abusing me, sexual abuse, about her touching me. This was all going through my mind."

"I took her and pulled her out of the bathroom. I pulled her out and shoved her upstairs. I didn't say a word, but I was real aroused. She said, 'What are you doing? I am your mother. What are you doing?' I felt like I was out of control. My body was responding to the anger, all the anger that was bursting out from me. I shoved her in her bedroom; I put my hands around her neck and I got really excited. I choked her; I didn't say a word. After she was dead, I tore off her clothes. I was still angry."

"I had sex with her after she was dead. At the time I thought maybe she was just unconscious. I had an erection. I was aroused by her." After he engaged in vaginal and anal necrophilia, he ejaculated. "It went through my mind that she was dead, since she was not moving. I felt in control of her now. She was in control of me

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all of the time. I was like a play toy. I felt I was getting her back by doing this. I did it to her.”

Then he explained, “I laid her on the bed. I took food, money, my dog, and keys to the car. I took jewelry; in case I ran out of money, I could sell it. I just wanted to get as far away as possible.” He threw a t-shirt over his mother’s head “because the eyes didn’t close; they were staring at me.”

K.M. got into the family car and drove around for about an hour (although he did not have a driver’s license and really did not know how to drive) until the car skidded off the road and into a snow bank. When the police came, he asked to call his father. Earlier that morning, Mr. M. had been called by Mrs. M.’s employer because she was several hours late for work, an extremely unusual occurrence for her. He arrived home to receive the call from K.M., who said, “I killed Mom. Please come get me.”

History of Mother-Son Incest

When K.M. was evaluated in the juvenile detention center, where he was awaiting trial, he revealed a detailed history of mother-son incest beginning at about age seven. Initially his mother “would play around with my penis.” By the time he was in the fourth grade, the sexual touching became more frequent. On one level he did not regard the touching and rubbing as abnormal, but on a deeper level he had a feeling that something was wrong. He described a typical scenario as follows: “I would usually come home from school. She’d kiss me and start undressing me. She’d hold my penis. She’d take my hand and place it underneath her blouse on her breast. I guess I was curious or something. I didn’t think anything of it. After a while I got a feeling this wasn’t right.”

Around the onset of puberty (sixth grade), his mother would “undress me and herself. She started to do more things; she’d say, ‘You have nice legs and a body.’ I was curious. As soon as my dad came home, she was totally a different person.” K.M. explained that he enjoyed the sexual relations “because it felt good.”

Mrs. M. attempted to have intercourse with him many times. Initially he was “afraid,” but he eventually succumbed. He detailed this first encounter: “She was in her bedroom. She called me to come up. She was dressed from work. She kissed me on the mouth and hugged me. She started to take her clothes off. I took my shirt off. After she took her blouse off, she took off my pants. I fell on the bed; she pushed. She took her skirt off. She started to touch and kiss me on my body. I was lying there, I had an erection. She turned over and I was holding her on top; her legs were wrapped around me. She tried to like turn me over again. We never did this before. It was always oral sex. I just wanted to do it then.” After he ejaculated, he pushed her off. “She said, ‘What’s wrong? Are you afraid? What’s your problem?’ I ran into my room. I was sitting by the door. She was mocking me out, the way she said it. I was getting angry. I stayed in my room thinking, ‘Why is she doing this?’ I thought I wasn’t normal. I felt different from the other kids at school. I’d sit in school and look at everybody and wonder if this happens to them.” K.M. stated that he and his mother had sexual relations about twice a week for about seven to eight years. Most of the time his mother would masturbate him and perform oral sex; he also performed oral sex upon her at her instruction.

Events Leading to the Homicide

About six months prior to the homicide, K.M. began feeling very uncomfortable about the frequent and ongoing sexual relations with his mother. He thought of telling his father, “but I didn’t trust him. If I told him, we might all split up and I didn’t want

that. I thought it was my fault when they separated before.” The week before the homicide, he was grounded for two months for a poor report card. He tried to ignore his mother and he tried to refrain from sexual involvement, although she was “pressuring” him to continue. She started to touch me on the legs, shoulders, and chest. She’d say, ‘Why don’t you love me?’ I thought that meant sexually. When I came home with the dog, and my dad wasn’t there, she’d say, ‘What’s wrong? You’re like your father.’ She touched me and she started to undress. She unbuttoned her blouse, and I ran out.” When asked why he did not want sex now, after he had been having sex with her for many years, he stated, “It was different the whole month; I felt like I was used. Like I didn’t mean anything to that person. I just didn’t want sex anymore. She said, ‘You’re just like your father, you don’t want to do anything, you got problems.’” K.M. felt that she was implying that he had sexual problems.

K.M. felt that his mother was putting more and more pressure on him: “She kept trying and she kept yelling.” Finally, he told her, “If you don’t leave me alone, I am gonna tell someone.”

K.M. had sex with his mother for the last time about ten days before the homicide. “In the middle of oral sex, I said, ‘I don’t want to do this no more,’ and pushed her away. She said, ‘No, we’re gonna have to do this some time; what’s wrong with you now?’” They finished oral sex when he ejaculated in her mouth and lost his erection. “She tried to turn me on again, tried to arouse me again. I pushed her off me and went to the bathroom, locked the door, got washed up. She was outside the door saying ‘What’s wrong? What’s with you?’” On several other occasions, Mrs. M. tried to initiate sexual relations, but K.M. refused. On the day prior to the homicide “I thought of hitting her. She kept touching me when my dad wasn’t around, and I didn’t want it anymore. I thought of slapping her in the face to get her attention that I didn’t want her anymore.” That night “I thought myself to sleep. When I woke up on Monday morning, I felt tired.”

Clinical Findings

K.M. had just turned 16 years old two days before the homicide. He was the only child of Mr. and Mrs. M., who had had a very troubled marriage for years. K.M. was pleasant and cooperative, but he also seemed emotionally detached, cautious and fearful, especially when he was describing the events of the homicide. This detachment was clearly an attempt on his part to insulate himself from experiencing the severe emotional impact of the events that occurred.

K.M.’s performance on psychological tests revealed bright-normal intelligence (Full Scale WAIS-R IQ of 113) and no evidence of any type of organicity. Complete neurological evaluation also did not reveal any abnormalities. K.M. had all the usual laboratory tests, including an EEG (both sleep-deprived and awake), which was normal. A CAT scan was normal as well.

Clinically, there was evidence of mild depression. No particular pattern of personality traits or characteristics had yet solidified with this youngster. Testing and clinical evaluation showed no evidence of severe psychopathology, nor were there any indications of structural disorganization or of schizophrenia, psychosis, or even developing borderline features. K.M. had a good capacity for empathy, as seen on the Rorschach by an adequate number of human (movement) perceptions. His thinking followed logical lines, and his reality testing was good. The Rorschach did not show any significant evidence of impulsivity—a finding consistent with his history, since prior to the homicide he had never behaved in an impulsive, aggressive, or violent manner.

The MMPI revealed a youngster in psychic distress manifested by anxiety, worry, and difficulties with concentration, and in thinking efficiently. Traits of shyness, social discomfort, and lack of self-confidence were all noted, as well as some feelings of guilt and inferiority. There were two interesting TAT stories, one with a theme of child abuse and another of a husband finding out his wife was unfaithful. In both instances, the woman is killed, the former by the victim of the abuse and the latter by her husband.

Discussion

The image of the mother plays a crucial role in the psychosexual development of an adolescent male. Adolescent boys need to view their mothers as asexual or sexually pure, and the notion that the mother is a sexual being can be destabilizing. "For some reason, possibly cultural, a boy's perception of his mother's infidelity and sexual looseness is more traumatic than a girl's perception of the same behavior in her father" (6, p. 108). Wertham's (15) description of a 17-year-old who stabbed his mother 32 times while she was sleeping is illustrative. This adolescent was troubled by the sexual conduct of his mother, who had had a succession of lovers just after his father's death. He considered her a disgrace, and he killed her to avenge the family name. Similarly, Scherl and Mack (16) discuss the case of a 14-year-old who was upset because his mother became sexually involved with another man when his father was away from home. On one occasion he caught them in bed together. He also expressed disgust at his mother for partially exposing herself, at times, when sitting down. Following an argument the night before, he shot his mother while she was sleeping and then went to a local priest to whom he confessed the crime.

Sometimes the mother may be rejecting, harshly punitive, and cruel, triggering homicidal fantasies displaced from the mother to other women (17). The notorious case of Edmund Kemper (3) is an example. Kemper killed six females, some of whom he decapitated and cannibalized. Finally, he killed his mother. He cut out her larynx and threw it in the garbage disposal. After killing his mother, who was cruel and had degraded him for years, he turned himself in.

K.M.'s relationship with his mother was complex and disturbed. The mother was a promiscuous and blatantly seductive woman who brought many boyfriends to the house when her husband was away. She often walked around in her underwear, in front of her son, thereby sexualizing even the nonincestuous aspects of their relationship. She would also make sexual comments to his friends, humiliating him greatly, and once openly flirted with his high-school soccer coach. On several occasions, she left the house with nothing on except a fur coat, acting in a seductive manner to local merchants; and many other acts of immodesty were reported. On the whole, however, she was not punitive or rejecting; in fact, K.M. was pleased when she "would yell at me for not doing my homework. It seemed normal."

The murder of Mrs. M. graphically illustrates the concept of catathymic crisis, initially described by Wertham (18) and further developed and elaborated by others (19,20). It is a psychodynamic process explaining acts of severe violence within the context of an interpersonal bond (21). The disorder taps a deeper level of emotional conflict than occurs in situational acts of violence triggered by anger, fear, or jealousy. Here, a powerful emotion is attached to an underlying conflict that creates an enormous amount of psychic tension, which is released through the violent act, typically murder, after which the perpetrator feels relief.

Years of mother-son incest created great conflict and tension within K.M. He was eroticized by the incest (22) and eventually be-

came filled with rage at his mother's sexual conduct and behavior. This conflict was so emotionally charged that it placed K.M. in a state of psychic tension and disequilibrium. He felt an overpowering urge (that was sexually arousing) to kill his mother when he saw her in the bathroom wearing only her underwear and a shirt not fully buttoned. He could not explain the acts of necrophilia (23), particularly the anal penetration, except to describe a feeling of domination and control, also expressed by many other sexual murderers (24). Bunker's (25) contention that, on an unconscious level, the adolescent regards mother-son incest and matricide as identical acts provides insight into the fusion of sexual and aggressive impulses in this case. K.M.'s vivid description of his dissociative state at the time of the homicide is typical in cases of acute catathymic murder (26): "I knew what I was doing, but it was like a movie—watching myself almost in motion. It was like a movie and the camera was my eyes. I was aware of everything but I was just not thinking. I really didn't think I was killing someone; the whole thing seemed like a dream." Immediately following the murder, K.M. felt relief.

K.M. had never had a girlfriend or any real female contact prior to his mother's death, because "somehow they'd know about me and my mom, or it might slip out when I was talking to them." After Mrs. M's death, he did develop a few relationships, but he became frightened if the girl behaved in any way that seemed sexually assertive. He feared he might lose control again, since he realized that such sexual behavior would remind him of his mother. Freud (27) noted that some men need to degrade their sexual partners in order to experience sexual pleasure: purity in a woman conjures up the mother and therefore creates sexual inhibitions connected to fear of incest. Such men exhibit what Mathis (28) has referred to as the Madonna-Prostitute Syndrome. In K.M.'s case, a variant of this syndrome developed. He could become intimate only with a sexually naive and inhibited woman—a woman who was different from his mother—since a sexually assertive woman would arouse incestuous conflicts.

After two and a half years of psychotherapy, following K.M.'s release from prison (he served two years after pleading guilty to manslaughter), he was able to make a fairly successful adjustment. He entered college and worked part-time as a house painter. Treatment ended when he moved to a different state with his father and his father's new wife. A ten-year follow-up finds K.M. unmarried but with a steady girlfriend (described as rather quiet and insecure); he has completed college, works in his chosen field, and apparently has had no severe long-term problems stemming from his experiences as an adolescent.

Whereas some investigators have emphasized the unalterable negative consequences of mother-son incest (29–31), others (e.g., 32) have cast doubt on this conclusion, citing many cases where the negative effects have been minimal. The case of K.M. lends support to both positions: the effects of mother-son incest may be disastrous, but the long-term consequences need not be irreparable.

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