PERSONALITY CHARACTERISTICS OF WOMEN WITH REPEATED ILLEGITIMACIES: DESCRIPTIVE ASPECTS*

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Personality and social aspects of 20 women with three or more illegitimacies were investigated simultaneously by three specialties. In this preliminary report, data indicate a predominant pattern of periodic dyscontrol with a chronic undertone of self-defeating social relations. Mental retardation does not appear to be a significant factor. Family and social settings were often contributory to their difficulties.

HE NUMBER OF ILLEGITIMATE CHIL-DREN in this country is a problem which has become of increasing concern to many of the behavioral and welfare disciplines. This project is predominantly concerned with the problem of recidivism within the overall category of women who have children out of wedlock. The investigation was limited to women with three or more illegitimate pregnancies. The object of the study was to evaluate the personality and social characteristics of the subjects by a psychiatrist, psychologist and social worker. It sought to determine if there are any significant personality differences between women

who repeatedly have children out of marriage in comparison with those who have a "chance" illegitimacy and do not repeat and those who have had similar numbers of children within marriage. This initial report deals with 20 mothers who have been investigated in this manner, and subsequent investigation will compare them with a matched control group. Demographic data on the general problem of illegitimacy in the area the subjects reside in, including their socioeconomic backgrounds, also have been obtained.

In undertaking this study, we were impressed by the statistics which indi-

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cated the sharpest rate increase (the number of illegitimate births per thousand unmarried women) in illegitimacies occurred in women from 20–29 years of age although in terms of absolute numbers the teenage population made the greatest contribution. Thus, from 1940 to 1960 the rate of illegitimacy for those between the ages of 15 and 19 rose from 7.8 to 15.9, for those between 20 and 24 from 9.5 to 39.3, and for the 25–29 year olds from 7.2 to 45.9.¹ A logical inference would be that the non-teenage group would be the one where repeaters would be found.

METHOD

The subjects used in this investigation were women from a midwestern metropolitan area of about 860,000 people. (Hennepin County in Minnesota which includes Minneapolis and adjacent suburbs.) They were referred to the outpatient psychiatric clinic at the County General Hospital in cooperation with the Hennepin County Welfare Department, Child Service Division. The Welfare Department estimates that of the total number of such women being seen in their department, contact has been made with 99 per cent of those who would qualify for such a study. The 20 subjects in this report have been evaluated by a psychiatrist, psychologist and social worker independent of one another before collating the material on

the subjects. All the mothers were either pregnant or delivered during the year of the study.

The psychiatrist was predominantly interested in the psychodynamic trends and personality structure of the women. Specific historical data also were obtained on each of the women. Following the third interview of each patient, the California Q-sort was done by the psychiatrist. The psychologist independently administered a Minnesota Multiphasic Personality Inventory (MMPI), Rorschach, Porteus Mazes and Shipley Hartford. Socioeconomic background data on the subjects and their environment were obtained by the social worker. Table 1 illustrates data from the state and Hennepin County on births and the number of women in the category of having three or more illegitimacies.

DESCRIPTIVE DATA

The data were broken down into many diverse categories. The ages ranged from 19 to 35 with a clustering in the midtwenties. The mean age of the subjects was 26.10 years. The number of children that the mothers had out-of-wedlock varied from three to eleven. Three of the girls were part Negro and the remainder were Caucasian. Only four of the mothers had ever been married and they subsequently had been divorced; the total of three or more children born illegitimately refers to

Table 1

Data on Births and Illegitimacies, Minnesota and Hennepin County (1964)

	Minnesota	Hennepin County
Number of Births	76.468	22,908
Number of Illegitimate Births	3,636	1,505
Percent of Illegitimacies	4.8%	6.6%
Number of Women with Three or more Illegitimate Bi	rths 219	101
Percent Recidivists Among Illegitimacies	16.6%	14.9%

those born outside of the married state. This contrasted prominently with the number of marriage offers they reported, and the possibilities for what seemed to be suitable marriages. The four who had been married were married by age 20, and none had lasted beyond two years. In two of the four marriages, the husband had been in the armed services or was inducted and gone for most of the marriage.

The religion of the subjects was evaluated in terms of their religion of family origin, their present religion and church attendance. No women were of the Jewish faith. There was a significant difference between current practices and the religion of their childhood. Although 11 of the mothers had been raised and baptized Roman Catholic, only five of them indicated that this was their present religion, and their church attendance and conformity to the practices of the Catholic religion were perfunctory. Seven of the women had been raised in the Protestant faith (Lutheran, Baptist or Methodist). Many of their feelings about their religion were tied in with some of the dynamic formulations. There appeared to be much hostility and resentment on the part of many of the women about their religious upbringing and the duplicity which they had experienced from their families about religion. Thus, one of the patient's overt sexual experiences had occurred with a clergyman, and an older professional person continued to be the father of several of her illegitimate children at present. Two indicated no formal religious affiliation in their childhood period or at present.

An interesting question was which children born illegitimately would be kept by the mother, and which given to a community agency for adoptive placement. For 12 of the mothers, the first child had been a girl, and 10 of the 12 had kept this child despite many family and community pressures to the contrary. Eight of the first-born were male children, and in contrast only four of the mothers kept that child. An explanation for this seems to depend upon the individual situation and psychodynamic factors involved with each mother. In many cases, she appeared to be highly identified on a narcissistic basis with the child if it were a girl and wanted to relive her own life through this young female. This was phrased in terms such as wanting to make sure the child did not grow up as she had and the belief that she now had the knowledge so that her daughter could grow up in a very dissimilar way. However, this was typically mixed with concern that the child would grow up exactly as she had. On the other hand, some of the mothers who kept their first male child exhibited a need to demonstrate to their family that they had been able to "come through" with a male offspring where some of their familv had failed. In several of these cases the mother was consciously aware of an expectation in her family that she was supposed to have been a boy.

Another factor of related interest was the mother's sibling rank in her family of origin. None of these mothers studied was an only child although six of the 20 were oldest children. Only two out of the entire group were the youngest child, and these two were ten years or more younger than the next oldest sibling. There were some unusual sibling distributions among several of the mothers. Thus, one mother came from a family with 11 girls and no boys, while another came from a family in which there had been five boys and then five girls born

in succession. The families of origin were usually in the Midwest; the only exceptions were two Negro girls who had been born in the deep South and migrated to Minneapolis in their teens. Twelve of the women had come from families in Minnesota while the other six had come from adjacent midwestern states.

Educational attainment was widely distributed among these women. Formal education often had been limited due to a combination of personal and socioeconomic difficulties. Ten of the group had completed high school. Six had not completed high school (only one of whom had not finished grade school). Four had had some training after high school; two of the latter had business college training, and two had had one and two years of college respectively. The estimated IQs on the Shipley Hartford indicated all but one of the women were in the average or high average range. Even the one exception with an IQ of 46 was atypical in that she had maintained a socially appropriate manner of interacting with others and the degree of intellectual retardation was totally unknown to the social agencies with whom she had been in contact.

The present living arrangements revealed a variety of situations. Since all of these mothers were on AFDC, it was necessary that they maintain a home for their children. However, the pattern revealed a high frequency of the mothers either living with their own mothers or very close to them. In five cases the subjects lived in their own family of origin home where they were frequently scapegoated and treated with disrespect by other members of the family. They frequently were involved in masochistic relationships with several family members.

One was referred to as "the family slut" while another was the "beast of burden." In one case where several brothers were living in the home or visited frequently, the subject was routinely addressed as "bitch" by all males in the family. For eight other subjects the parental home or that of a sister was within one mile. The remaining mothers either lived in a different city than their family of origin or had severed the tie to a greater degree than these 13.

A living arrangement with a man who was frequently present had to be concealed because of the AFDC arrangement. Typically the man did not reside in the home, but he was an ever-present reality as indicated by comments the mothers made, and also those of the children whom the psychiatrist had an opportunity to interview. This seemed to be a source of great confusion and conflict to the children who were seen; they frequently brought up questions such as who their father really was, having several "daddies," and wondering where many of their "old daddies" had gone. This usually had been handled by distortion on the mother's part which the child sensed was falsification.

Very few of the mothers in the study reported difficulties in their pregnancy or in the delivery. The hospital records for all of their deliveries were not available since some of the children had not been delivered at the hospital where the study took place or in the same city. Where the hospital records were available, they were examined and the mothers' histories appeared valid. One mother reported a toxemia of pregnancy and one other had had some third trimester bleeding. None of the children was born Caesarean. This was fortunate since many of these mothers did not seek pre-

natal care until late in the pregnancy, which would put them into the "highrisk pregnancy" category. Research on inadequate prenatal care appears to show a correlation between prematurity and perinatal mortality and morbidity and an increased incidence of neurologically damaged and subnormal infants.2 Only two of the mothers reported having had premature infants that were under five pounds, eight ounces at birth. However, one of these mothers had had four illegitimate children by different fathers; all of the infants were born prematurely. With only one exception, all the children were born in a hospital.

Previous therapy of some form had been obtained by nine of the mothers. The use of the word "therapy" here must be clarified. Although many of these mothers had seen psychiatrists or psychologists in private practice or in community clinics, very few of them had participated for any length of time in dealing with their conflicts on even a conscious level. Five of the nine had seen three or more different therapists at some time in their life, but many of the contacts were for brief periods of a few months' duration. Only one of the nine indicated any satisfaction or change in her behavior which she associated with therapy. The latter was an exception, and had once been in therapy for two years. As noted, all of the women had been involved with some community agency during their span of motherhood, and many of them had been in contact with several agencies most of their lives including their childhoods.

Most of these women made no distinction between therapy and general welfare services that were offered. Those who had therapy received mainly support and advice. This was quite interest-

ing since many of the women, as discussed below, had very disturbed behavioral patterns. In fact, none of the 20 mothers ever had been hospitalized in a mental hospital. This was surprising in view of the behavioral manifestations that were frequently present. Also, the lower socioeconomic classes they came from appear to have a higher incidence of hospitalizations than the higher classes.

Illegitimacy of the mother herself was investigated. In some cases this was not known, and only those giving a positive response were included. Four of the 20 women indicated they had been born illegitimately. For those women who had sisters in their own family, inquiry was directed as to whether the sisters also had illegitimate children. It appeared significant that only two of the women indicated that their sisters had had illegitimate children, and these women had had only one such child each before marrying.

Data on the family background of these women indicated diverse, chaotic factors. Only two subjects had a consistent father figure in the home during their childhood. Four of them had had placements at various times in foster homes as they were growing up. Their experience with men and fathers as they were maturing was predominately that of violence and inconsistency. While there were several men that the subjects had knowledge of as "the man in the home," very few of these men functioned in a fatherly way to the girls.

One of the striking findings was that five of the 20 women had experienced incestuous relations. Two of these instances were with a stepfather, one with a biological brother and two with their biological father. A consistent pattern

among these five was that of attempting to tell their mother about it and being shamed and at times physically beaten for bringing up the topic. As an example, when one of the girls was five years of age she recalled her brother, 19, beginning to "experiment" with her. One day the mother caught the patient and her brother together and physically beat the girl calling her a "dirty little thing who does such things." No further mention was made of this episode and from that time on sexual play continued with this brother on a clandestine basis until adolescence. The pattern with the stepfathers was similar, and in the cases where the father was involved, there was direct evidence that the mother was fully participating in the use of the daughter by her husband. In two cases the matter eventually came to court with the father being sent to prison while the mother played the role of a martyred victim who had been abused by her husband.

The overt sexual life of most of these women began quite early as judged by middle-class social standards. Thirteen reported sexual activity before the age of 12. To them such middle-class concepts as "dating" had very little meaning. Several of the subjects never had really dated in their lives in the sense of going out with someone approximately their age for an evening of enjoyment or entertainment. Rather, their heterosexual experiences began in the latency period and continued on a pregenital basis for most of their lives. It was continuing on that basis for most of them at the time they were seen for the study. Sexual pleasure was quite restricted. Only three of the 20 reported that they could achieve an orgasm regularly during intercourse. Two of the mothers had

no idea about a sexual climax for women. Eight of the 20 reported that they were consciously aware that sexual activity for them was a price to be paid for being cuddled and held. Pregenital activity was described by these eight as more pleasureable than intercourse itself which was merely something to be tolerated. In five of these eight, autoerotic activity was favored over heterosexual activity in terms of enjoyment and preference. In two of the women, the autoerotic activity was on a highly narcissistic basis coupled with pregenital activity. Thus masturbation by these two was carried out by touching their breasts rather than genitals, and one of them supplemented this by kissing her own picture or reflected image in a mirror. Another consisted of acts of troilism in which the patient might be a passive participant in these situations. One of the women had been promiscuous since she was 12; she reported crying each time she had intercourse. This was associated with a recurrent image, each time she had intercourse, when her father had forced her to look at her genitals in a mirror which he held, and her horror and fear at the sight of "the raw, bleeding wound." This type of direct expression of what usually is concealed or dealt with symbolically was quite characteristic. For some of these mothers sexuality had a compulsive quality while in others it was quite secondary to the need for compulsive pregnancies and sequential babies.

In none of the 20 mothers was any form of birth control used regularly or consistently. In fact, 10 of the mothers had never used any form of birth control. The other 10 had made sporadic attempts but usually left it completely to the male with no demands on them to

prevent conception. When asked about this, the most common reason given initially was that contraception never was thought of, and no attempt to prevent conception usually was carried out. Massive use of denial and magical thinking was in evidence to conceal the motives which led repeatedly to pregnancy. A frequent example would be the mother who had her first or second child placed for adoption but still felt a need to fulfill herself by repeating her pregnancies until she could keep her own children. It was apparent from the determination of the intellectual functioning of these women that becoming pregnant was not due to a matter of mental deficiency nor to a lack of ability to obtain some type of birth control information had they desired. In fact, all of the women did possess a knowledge of birth control techniques. Several of the mothers had been fitted for diaphragms which never were used or had been "misplaced." None of the mothers gave religious beliefs as a reason for not using some form of birth control. The vicarious participation of the mothers of some of the subjects in their acting-out behavior was noted in that several of them had been given birth control devices by their mothers when quite young. In some cases, it was apparent that a feeling of defiance was present as one factor with respect to the woman not wishing to comply with mother's wishes and prevent pregnancy.

DISCUSSION

During the course of the study, it became apparent that a large majority of the mothers had more than the assumed characterological disturbances believed present by most of the agencies involved with them. Two women exhibited very prominent, deep-seated, passive-dependency characteristics which were consistent and had been so for most of their lives. One woman's behavior was that of a naive "little girlness" which went along with her mental deficiency. Apart from these two the predominant behavioral organization of these women appeared to be that which goes with a state of ego disorganization. At times, these women looked and acted "crazy" which went along with clinical and dynamic evaluations that indicated their ego functioning at such times would be called psychotic. At other times when their controls were operating more satisfactorily, they behaved in ways which made them look like typical character disorders. Diagnostic purity thus seemed even less attainable for these mothers than with most patients. Although only three of them reported outright periodic hallucinatory and delusional material (which in terms of descriptive diagnosis would be associated with psychotic behavior), the entire remaining 17 demonstrated periodic behavior which was associated with a regressed and fragmented ego state.

In one patient without any history of previous psychiatric difficulty, an obvious dissociative state occurred during the first interview as part of a psychotic process. She had been talking about her incestuous experiences when the psychiatrist suddenly realized that the patient had no realization of where she was while rambling on in an incoherent manner. A crying jag ensued which the interviewer dealt with directly in an attempt to confront the patient with the reality of the interview situation. The patient later told him that she had experienced the exact feelings she had had when at 10 years of age her stepfather

had seduced her. She had been unable to "shake it off" when associating to it. This tendency to dissociate in varying degrees was one of the most frequent things noted in several of these mothers.

Denial often operated quite prominently regarding their pregnancies and how this was handled with the children they kept. One mother who had kept her first illegitimate child, now age six, had had three others since then, all adopted at the time of birth. This never had been discussed with the child, and questions about "mommy getting fat" were handled by ignoring them or telling the child that mother had eaten too much. Hospitalizations for delivery were referred to as illnesses, and no mention was made of the children. When this mother was being seen, she referred to the fact of her daughter living in a dream world and wondered if the daughter could be seen. This was done and in the first interview the child revealed an imaginary family composed of three younger children to whom she talked and had attached specific visual images and names. Their ages all coincided with the births of her half-siblings whom she had never seen. When this was brought up with the mother, she expressed complete amazement and denial that this could be so, although she remained motivated in seeking therapy for the child.

A great deal of dereistic thinking was present in most of these women, and some of them were unable to distinguish current dreams from day dreams. Much of the past had a fictional quality in that they were not certain as to what actually had transpired and what was a product of their fantasy life. Throughout, there was a great admixture of irrelevant and circumstantial details which at times

would be used as a defense, but it appeared more prominently to be an inability to follow certain thought processes through to their conclusion. Prominent feelings of depersonalization were noted in ways that were quite obvious to the patients but they felt hopeless to do anything about them. They frequently would report longstanding feelings of loneliness and isolation accompanied by deepseated, self-depreciatory feelings. Two of the white mothers reported that they had only cohabited with Negro men because they felt this was all they should expect. A similar trend was to involve themselves only with men who had obvious and longstanding antisocial problems. Two women had their longest relationship with men who were currently serving long prison terms and maintained the idea to themselves that this was the man they wanted to live with the rest of their lives. However, they also were aware of resisting any ideas of an actual marriage tie in the remote event of its possibility. Three other women had recurrent relationships with men who had alcoholic problems. One woman stated, "I'm too fat and ugly for anything but Negroes and white trash." During the course of evaluation she revealed that in high school she had gluttoned herself to 180 pounds, was then called "fatty" and had behaved as the class clown. This humiliating position was the one in which she felt most comfortable. During the study she became aware of the similarity of her current degraded behavior to these past experiences.

Rather than a specific symptom neurosis, a variety of symptoms was alternatingly present, such as histrionic behavior; dissociative phenomena; phobias; obsessive-compulsive phenomena, and hypochondriacal complaints such as

weakness, tiredness or backaches. Accompanying all of these conditions, a chronic and unresolved depressive nucleus appeared to be in evidence. Many of the patients expressed deep resentment and hatred toward the people they had been close to in growing up; this was not specifically directed toward one sex but seemed present toward both sexes indiscriminately. Many of them had a hostile dependency on their own mothers accompanied by a resentment for men, whom they felt "used them." Much paradoxical behavior occurred in this regard, particularly with respect to who was in "control" of the situation. Thus, one of the mothers who had had six illegitimate children reported that each seduction for her was carried out in a prearranged, structured manner to make it seem as though the man were raping her. In reality she knew that this was not so, but then she had each man "over the barrel" with respect to telling him it was a rape. She lived in constant fear of an actual rape (which had happened at age 13 according to the patient). To make sure this did not happen again she was never without a loaded revolver in her purse, which was removed during one of her interviews with the psychiatrist and offered to him for examination. The incongruity of this situation is apparent when it is realized that the event to be controlled was occurring repetitiously.

SUMMARY

Twenty women with repeated illegitimacies, defined as three or more, were studied with respect to various personality and social characteristics. In this first paper of an ongoing project, descriptive data are reported concerning their past and present religious backgrounds, children kept and those placed for adoption, sibling rank of the mothers and living arrangements. Educational attainment was checked, and psychological testing revealed only one of the subjects subnormal. Very few complications of pregnancy or delivery were present. These mothers rarely sought or received psychotherapy, and none ever had been hospitalized for mental illness. This seemed surprising in view of their tendency to periodic regressions, ego disorganization and chaotic sexuality. It is believed significant that five of the subjects reported incestuous experiences. A variety of alternating symptom pictures was present rather than clearly defined disturbances.

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