

Medico-Legal Approach to Incestuous Sexual Orientation in Men

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Abstract

The present work addresses the controversial issue of incest by men. We sought to highlight that the incestuous tendency in men becomes a sexual preference that isn't determined directly by the existence of borderline or other personality traits or early maladaptive cognitive schemas. A sample of 48 males with confirmed incestuous tendencies was selected. 49% of them showed borderline personality traits and abandonment maladaptive cognitive schemas, their median age being $m=38.17$ and $SD \pm 9.24$ and the mean educational level, $m= 13.11$ and $SD \pm 1.71$. Data was collected with the Millon Multiaxial Clinical Inventory-III, the Young Cognitive Schema Questionnaire (YSQ-L3a), and the Paraphilic Disorders Questionnaire (PDQ). Significant correlations were obtained between borderline traits and the abandonment cognitive schema, the two factors interfering in most cases. A relevant association between incestuous tendencies and borderline traits was identified, yet without connections to the cognitive schema of abandonment. The factor analysis did not reveal the predictive potential of borderline traits, of the abandonment cognitive schema, or the interference of the two factors. Incestuous inclination in men doesn't always result from personality or paraphilic disorders, but from sexual interests that are atypical for one's species.

Keywords: Borderline, Cognitive schemas, Incest, Sexual orientation, Men

INTRODUCTION

Incest remains a taboo subject in the scientific world, although it is part of social reality. For example, DSM-5 shows us that incest (as a subtype of pedophilia) is a sexual attraction, orientation, and/or preference that leads to the maintenance of sexual relations between parents and children [1]. The socio-legal approach describes incestuous behavior as a paraphilic pedophilia-type disorder [2] and states that this behavior is a crime involving consensual sexual intercourse between direct relatives or between brothers and sisters. From a legal point of view, the phenomenon of incest presents particularities that may be contrary to the moral principles that society promotes. The systemic approach to couple and family argues that with a background of diffuse borders between family subsystems, man can develop incest [3] tendencies, although in many cultures incest is condemned for being considered an abnormal kind of relationship, discouraged by Christianity and criminal lawmakers alike. The specificities of this phenomenon can be approached from multiple perspectives. Incest has always been present in social reality, in some cultures [4] or under the auspices of certain religious confessions [5] the incestuous relationships being accepted by groupthink [6] Specialized literature deems incest as resulting from the interaction of a variety of factors which cause the emergence of this phenomenon according to DiPlacidi [7] studies, such as sexual preferences for children, emotional or sexual immaturity, opportunities to assault, the belief in having male sexual rights or the inability to

recognize the impact of such an act [8] Studies show that incestuous sexual preference is more likely to be based on specific types of beliefs, attitudes or cognitive distortions, confusing sexual impulses that could favor a potential predisposition.

The widespread prohibition of sibling incest has been argued by many scholars to be the best or one of the best examples of a moral norm that has an evolutionary explanation. According to Westermarck's theory [9], the individual has reached an evolutionary threshold that involves the perception of sexual aversion to childhood co-residents as an adaptation to avoid inbreeding. This aversion makes us condemn incest, considering it immoral, which explains the incest taboo. However, representation and issues of morality

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or principles imposed by society, show that there is no logical connection between feeling sexual disgust towards one's childhood co-residents and judging sibling sex as immoral [10]. The gap between the content of our instincts and moral norms would help explain the fact that there is virtually no substantial universal moral norm [11] even though basic instincts are universal. As noted, even the prohibition of family incest is far from universally human. However, moral variation is not infinite. Maier notes that "norms tend to cluster under certain general themes," and Zanarini *et al.* [12] found that the categories of behavior related to cooperation are particularly likely to be contested between different cultures. The emergence of general moral themes does not necessarily mean that moral norms are determined by instincts. In all cultures, people with a capacity for normative reasoning are endowed with similar drives, face some of the same challenges, and are subject to some of the same selection pressures. It is not surprising that general themes would emerge independently in different moral systems, even though a wider range of variation is theoretically possible, given the constraints imposed by our biology [13].

Hard to accept that every one of our moral beliefs can be explained as the direct product of natural selection. By all accounts, sociological factors also exert at least some influence, as important as psychological factors. However, some researchers admit that certain basic, widespread moral norms are the more or less direct expression of adaptations based on the biological arsenal [14]. Carr and Francis [15] argues that "natural selection has had an extraordinary direct influence on the shaping of sexual preferences, our 'basic evaluative tendencies' and these basic evaluative tendencies have in turn had a major influence on the evaluative judgments we would make." Even this qualified position may be too strong. Our evaluative tendency to see incest as immoral is among the most "rudimentary" we have. Yet there are reasons to believe that our opposition to incest not only was not but could not have been directly shaped by natural selection through an instinct with a different content [16].

Delcea *et al.* [17] highlighted in a study of 837 participants that sexual interest in children and the tendency to incest are distinct. Therefore, the predisposition towards incestuous sexual preferences must be analyzed differently, considering the factors involved. The specialized literature does not highlight the predictive value of sexual psychopathy in terms of incestuous sexual preferences. The incestuous tendency between siblings is the most common form at the social level.

Freud's psychoanalytic theory of psychosexual development approaches the problem of the phenomenon of incest through the lens of the phallic development stage centered around the Oedipal complex (in the case of boys) and the Electra complex (in the case of girls). Thus, Freud emphasized in his theory that the incestuous desire aroused at puberty must be curbed by the young person so that he can distance himself from his parents, which is why incest becomes a barrier

imposed by society and the culture of the society of which the individual is a part [18].

Delcea [19] argued that incest is often a precursor to BPD, especially in hospitalized borderline women. A report based on meta-analysis studies confirms that there are associations between incestuous abuse in women and a diagnosis of borderline personality disorder [20]. We have no empirical data on the etiology of incest in men who engage in incestuous sexual behavior. There are very few studies (type of case studies) where the predictor of incestuous behavior in men is addressed. There are no controlled studies on non-incestual pedophilia and incest. There are no discriminatory studies on pedophilia and pedophilic sexual orientation with the incest subtype.

Because the studies carried out on the phenomenon of incest rather focus on the victims of incestuous abuses, explaining the multiple implications that this phenomenon has on the victims, this study tries to focus on psychosexual aspects related to the nature and specificity of incestuous sexual preference in men. Also, the studies carried out so far are predominantly carried out on female populations, with a major gap regarding the male population. The incestuous sexual preference of the male participants included in this study was confirmed in the knowledge of the case, the main objective being to try to highlight the fact that incestuous sexual preference is not definitively determined by personality disorders nor by the abuse suffered in the past. The etiology of sexual preferences should be considered, without a direct association with sexual psychopathology. Thus, in the specialized literature, genetic factors, brain structures, and the learning phenomenon (experience-induced neural changes) are mentioned which are the basis, as well as environmental factors that favor the shaping of some sexual behavioral patterns [21]. The present research tries to capture particularities of incestuous sexual preference in men, emphasizing the fact that a potential personality disorder, as well as the maladaptive cognitive schemes indirectly associated with a personality disorder with incestuous behavior, do not directly and specifically determine an incestuous sexual tendency, this incestuous sexual preference being independent of the existence of personality problems or maladaptive cognitive schemas.

MATERIALS AND METHODS

Instruments

The data was collected electronically (Millon Multiaxial Clinical Inventory - III (MCMI-III), Young Cognitive Schema Questionnaire (YSQ-L3a), and Paraphilic Disorders Questionnaire (PDQ)).

Procedure and Methods

Considering the very delicate topic of our study, such as incestuous sexual preference, the selection of eligible cases

concerning ethical aspects was carried out in the period 2015-2022.

Thus, the selection of study participants was carried out voluntarily. Participants were subjected to psychological assessment at the Institute of Forensic Medicine in Cluj-Napoca (6 participants), at the Institute of Sexology in Cluj-Napoca (19 participants), and at the Penitentiary Gherla, Cluj County (23 participants)

Inclusion/Exclusion Criteria

The participants included in this research met the eligibility criteria as follows: they were all male, over 18 years of age, suffering from a borderline personality disorder with confirmed incestuous sexual orientation, but without neurodevelopmental, neurocognitive, or other associated disorders, education level being of 10 classes. minimum.

Ethical Aspects

The eligible participants for this research have given their consent electronically in the consent form regarding the purpose of the research and their participation in the testing as well as the aspects related to Regulation (EU) 2016/679 on the protection of natural persons about the processing of personal data and regarding the free circulation of this data and the repeal of Directive 95/46/CE (General Data Protection Regulation) and Law no. 506/2004 regarding the processing of personal data and the protection of private life, and regarding the research team which should administer in safe conditions and only for the specified purposes, the data it will provide: e-mail address (optional), socio-demographic data and subjective responses to the assessment tools.

Methods

Each participant completed the assessment and testing instruments. Afterward, the collected data was uploaded to the cloud system for storage. Subsequently, all data were analyzed in SPSS 26 and processed in tabular form using correlation tests and factorial ANOVA. The preliminary results of the statistical data indicated that the answers given by the participants were free from material errors and that all the items were fully completed.

Participants

The sample group consisted of 48 male participants registered at the Institute of Forensic Medicine in Cluj-Napoca, the Institute of Sexology in Cluj-Napoca, and the Gherla Prison in Cluj County, Romania. They were assessed for borderline personality disorders, early maladaptive schema (Abandonment), and incestuous sexual preferences. The mean age is $m=38.17$ and $SD \pm 9.24$. In terms of educational attainment, the mean is $m=13.11$ and $SD \pm 1.71$. All descriptive indices are centralized in **Table 1**.

Table 1. Demographic characteristics of the sample

Variable	N	Mean	Std. Dev.
Age	48	38.17	9.24

Educational level	48	13.11	1.71
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Statistics

Starting from the premise that the previous studies in this field have focused on samples that include men, we aimed to analyze the potential links between incestuous sexual preferences, borderline psychopathological vulnerability, and maladaptive cognitive schema of Abandonment in the sense that significant others will not be able to continue providing emotional support, connection, strength or practical protection because they are emotionally unstable and unpredictable (e.g., angry outbursts), unreliable or erratically present; because they will die imminently; or because they will abandon the patient for someone deemed to be better.

The present research aimed at the analysis of borderline personality disorders, incestuous sexual preferences, and the cognitive schema of Abandonment. Following the descriptive analysis (**Table 2**), a mean of $m=81.72$ and $SD=\pm 13.19$ was obtained for borderline personality disorders, a mean of $m=92.47$ and $SD \pm 5.32$ for incestuous sexual preference, and a mean of $m=81.61$ and $SD =\pm 14.67$ for Abandonment cognitive schema.

Table 2. Descriptive statistic indicators

Variable	N	Mean	Std. Dev.
Borderline personality disorders	48	81.72	13.19
Incestuous sexual preference	48	92.47	5.32
Abandonment cognitive schema	48	81.61	14.67

The results achieved for the variables under analysis are within ranges corresponding to the clinical level. Thus, the borderline personality disorder and abandonment cognitive schema scores were divided into clinical and subclinical ranges.

RESULTS AND DISCUSSION

Borderline Personality Disorders and Abandonment Cognitive Schemas

Numerous studies have demonstrated the existence of a link between borderline personality disorders and the abandonment of cognitive schemas. Therefore, the existing relationships between Borderline Personality Disorder vulnerability and abandonment cognitive schema (**Table 2**) were analyzed starting with the premise that people who developed abandonment cognitive schema perceive unpredictability and instability of any close relationships, exhibiting strong negative reactions such as anger in many cases of borderline personality disorders.

The correlation coefficients identified between the variables under analysis indicate significant relationships. Thus, concerning the sample group of men proposed in the present research, significant positive correlations ($r=0.844/$

Sig.=0.000) were identified between borderline personality disorders and abandonment cognitive schemas.

Incestuous Sexual Preferences, Personality Disorders, and Maladaptive Cognitive Schemas

The statistical analysis sought to identify the association relationships that could exist regarding incestuous sexual preferences. The studies that were considered to be a theoretical foundation claim that incestuous sexual preferences would be largely influenced by the existence of a vulnerability to borderline personality disorders, as well as an abandonment cognitive schema. Following the statistical analysis, significant positive correlations were obtained between incestuous sexual preferences and borderline personality disorders ($r=0.178/ \text{Sig}.0.045$). No significant correlations were identified between incestuous sexual preferences and abandonment cognitive schema.

Factors Influencing Incestuous Sexual Preferences

To highlight the degree of influence of the factors in this research, factorial variance analysis was chosen. Thus, ANOVA sought to evaluate the global effect of the factors altogether, the main effects of each factor included in the analysis, and the effect of the interaction of the proposed factors. The eligibility conditions for the factorial ANOVA test were analyzed beforehand. We considered that the dependent variable, incestuous sexual preferences, should be measured quantitatively and that the collected data should not be affected by errors.

Also, the shared groups were of equal volume and the scores for incestuous sexual preferences presented a normal distribution across the population, the skewness and kurtosis indices falling within the range of ± 1.96 (skewness= $-0.317/\pm 0.218$; kurtosis= $-0.801/\pm 0.433$). The group's homogeneity of variance was tested using Levene's test ($F=0.999/ \text{Sig}. 0.521$). **Table 3** summarizes the main indicators of the analysis.

Table 3. Between Subjects Effects

Source	F	Sig.	Partial eta squared
Global effect	1.408	.108	.707
Abandonment cognitive schema	.994	.475	.236
Borderline personality disorders	1.594	.090	.449
Interaction Abandonment cognitive schema* Borderline personality disorders	1.269	.218	.530

In terms of the global effect, we obtained an insignificant index ($F=1.408/\text{Sig}.=.108$). By analyzing the factors separately, a statistically insignificant index was also obtained for the abandonment cognitive schema factor ($F=.994/\text{Sig}.475$), and so was the borderline personality disorder factor ($F= 1.594/\text{Sig}.090$). None of the factors

proposed in the analyzed model has a significant influence on the variation in incestuous sexual preferences. Although the borderline personality disorder factor tends to have a slightly greater impact on incestuous sexual preferences (partial eta squared=.236) compared to the abandonment cognitive schema factor (partial eta squared=.449), none of them has shown such statistically significant values as to be considered to have a considerable influence on incestuous sexual preferences. By analyzing the effect of the interaction of the two proposed factors, we obtained an insignificant index ($F=1.269/\text{Sig}.218$), the impact (partial eta squared=.530) being statistically insignificant as well.

The purpose of the article was to identify incestuous sexual orientations in men by differentiating between personality problems, psychopathological preferences on the spectrum of paraphilic disorders, and early maladaptive cognitive schemas. The results above confirm the purpose of the present research, namely that incestuous orientation in men is not always duplicated by personality problems and paraphilic disorders. The existence of the strong correlation identified ($r=0.844/ \text{Sig}.=0.000$) between borderline personality disorders and abandonment cognitive schemas indicates that there is a significant association between borderline personality and the abandonment cognitive schema compared to incestuous sexual orientations that do not have strong correlations [12]. Such an association is also found in specialized literature, a subject addressed by numerous studies [15, 22, 23].

A borderline personality disorder is one of the most common psychiatric disorders [24] and displays two categories of symptoms: acute, which involves self-injurious and reckless behavior, or impulsivity and temperamental symptoms, such as low self-esteem, fear of destructive abandonment and inhibited or manifested anger [17]. Various studies have addressed the link between borderline personality disorder and abandonment cognitive schema [19, 25], demonstrating the existence of a direct interaction between maladaptive cognitive schema and the development of borderline personality disorder. Starting with the conceptualization of Carr and Francis, [15] regarding the fact that the psychopathological characteristics of the BPD disorder represent some sort of regression into intense emotional states experienced as a child, Young hypothesized that one of the four schema modes central to BPD is the Abandoned Child (the first author suggested to label it the Abused and Abandoned Child); and the Angry/Impulsive Child. According to Young's model, the Abused and Abandoned Child mode denotes the desperate state the patient may be in. Its roots are related to (threatened) abandonment and abuse that the patient had experienced as a child. As for our research sample, we refer to individuals with incestuous sexual preferences who display a borderline personality structure that would be based on maladaptive cognitive schemas outlined since early childhood. These factors may have an indirect and undetermined influence on sexual preferences and incestuous tendencies. A study carried out by Mishaw

points out that research in the field excessively accredits personality attributes as the core of sexual pattern development, minimizing the importance of external environmental factors and context [26, 27].

To explore the existence of possible associations related to the phenomenon of incest, a correlational analysis that targeted incestuous sexual preferences, abandonment cognitive schema, and personality disorders was carried out. We did not identify significant correlations in our sample group between the first two, which indicates that we will not take into account the influence of abandonment cognitive schema on the incestuous tendency in men in this case. A significant association between incest and borderline personality disorder exists, which means that the existence of a vulnerability to the latter may influence incestuous sexual tendencies. A significant correlation shows an influence, but it doesn't tell us the impact that influence has on this incestuous trend. In other words, we cannot determine whether this influence is a direct determinant of the incestuous tendency. The Fisher index obtained after performing ANOVA shows the variation of incestuous sexual preferences according to the abandonment cognitive schema and the existence of some borderline personality traits. No variations were identified in the dependent variable (incestuous sexual preferences) according to any of the factors, nor according to the interaction between borderline personality disorders and the abandonment cognitive schema. These results could indicate that the existence of the abandonment cognitive schema is not a direct determinant of incestuous tendency. The Fisher index resulting from the variance analysis has a statistically insignificant threshold indicating that the existence of borderline traits is not a direct determinant of the incestuous tendency. At a statistically insignificant threshold, the Fisher index further shows that the existence of borderline traits in interaction with the existence of the Abandonment cognitive schema is not a direct determinant of the incestuous tendency. This aspect means that the incestuous tendency cannot be explained by the abandonment of cognitive schema or borderline personality traits/disorder but through the lens of other factors [28-30].

To identify the impact that each of these factors has on borderline personality traits, as well as the existence of the abandonment maladaptive schema on the incestuous sexual tendency, we performed a factorial analysis aimed at showing us the impact of each factor on the incestuous tendency, as well as the effect of the interaction between borderline personality traits and the abandonment cognitive schema on the tendency towards incest. None of the factors proposed in the present research, the borderline personality disorders, the abandonment cognitive schema, and, consequently, neither the interaction of these two variables have influenced the variations of the dependent variable (incestuous sexual preferences). This infers that, although we obtained an association between borderline personality disorders and incestuous sexual preferences, it does not have a significant impact. In other words, incestuous sexual preferences are not

determined by borderline personality disorders. As for the abandonment cognitive schema, no significant association relations were identified, and the factor does not have a significant impact on incestuous sexual preferences. However, the possibility that borderline personality disorders in interaction with abandonment cognitive schema have a determining influence on incestuous sexual preferences was taken into account. Nevertheless, the statistical data obtained from the sample group indicate an insignificant impact. This data should be able to raise the issue that incestuous sexual preferences in the sample group of men are neither caused by borderline personality disorders nor by the abandonment of cognitive schema, the determining factors being entirely different [31-35].

CONCLUSION

The specific analysis of the sample group consisting of men with confirmed incestuous sexual tendencies outlines that sexual preferences are not directly determined by a personality disorder, nor by specific cognitive schemas found in the clinical picture. Given that current studies do not include male samples, this research aims to emphasize the need to explore this highly controversial niche.

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REFERENCES

1. Bach B, Sellbom M, Skjernov M, Simonsen E. ICD-11 and DSM-5 personality trait domains capture categorical personality disorders: Finding a common ground. *Aust N Z J Psychiatry*. 2018;52(5):425-34. doi:10.1177/0004867417727867
2. Haugaard JJ. The use of theories about the etiology of incest as guidelines for legal and therapeutic interventions. *Behav Sci Law*. 1988;6(2):221-38. doi:10.1002/bsl.2370060206
3. Itzin C. Incest, paedophilia, pornography and prostitution: Making familial males more visible as the abusers. *Child Abus Rev*. 2001;10(1):35-48. doi:10.1002/car.649
4. Delcea C. Construction, Validation, and Standardization of the Sexual S-On Application. *Int J Sex Health*. 2022;34:196-9. doi:10.1080/19317611.2022.2017618
5. Siserman C, Giredea C, Delcea C. The comorbidity of paraphilic disorders and rape in individuals incarcerated for sexual offences. *Rom J Leg Med*. 2020;28(3):278-82. doi:10.4323/rjlm.2020.X
6. Groza LG, Marina FI. Justifications of Rape. Comparative analysis between rapists and students. Gender differences. *Int J Adv Stud Sexol*. 2021;3(2):86-96.
7. Novac EG. Sexual sadism. *Sexol Inst Romania*. 2021;3(2):73-9. doi:10.46388/ijass.2021.13.33
8. Karl HR, Gizzarelli R, Scott H. The Attitudes of Incest Offenders. *Crim Justice Behav*. 1994;21(2):187-202. doi:10.1177/0093854894021002001
9. Beauregard E, Lussier P, Proulx J. An exploration of developmental factors related to deviant sexual preferences among adult rapists. *Sex*

- Abuse: J Res Treat. 2004;16(2):151-61. doi:10.1023/b:sebu.0000023063.94781.bd
10. Gherman C, Enache A, Delcea C, Siserman C. An observational study on the parameters influencing the duration of forensic medicine expert reports in assessment of inmates' health status in view of sentence interruption on medical grounds—conducted at the Cluj-Napoca Legal Medicine Institute between 2014 and 2018. *Rom J Leg Med.* 2019;27(2):156-62. doi:10.4323/rjlm.2019.156
 11. Gherman C, Enache A, Delcea C. The multi-factorial determinism of forensic expertise regarding sentence interruption on medical grounds and decision. *J Forensic Leg Med.* 2019;61:45-55. doi:10.1016/j.jflm.2018.10.005
 12. Zanarini MC, Frankenburg FR, Reich DB, Silk KR, Hudson JI, McSweeney LB. The subsyndromal phenomenology of borderline personality disorder: a 10-year follow-up study. *Am J Psychiatry.* 2007;164(6):929-35. doi:10.1176/ajp.2007.164.6.929
 13. Lussier P, Beauregard E, Proulx J, Nicole A. Developmental factors related to deviant sexual preferences in child molesters. *J Interpers Violence.* 2005;20(9):999-1017. doi:10.1177/0886260505278024
 14. Street NR, Skogström O, Sjödin A, Tucker J, Rodríguez-Acosta M, Nilsson P, et al. The genetics and genomics of the drought response in *Populus*. *Plant J.* 2006;48(3):321-41. doi:10.1111/j.1365-313X.2006.02864.x
 15. Carr SN, Francis AJ. Early maladaptive schemas and personality disorder symptoms: An examination in a non-clinical sample. *Psychol Psychother: Theory Res Pract.* 2010;83(4):333-49. doi:10.1348/147608309X481351
 16. Pezzoli P, Babchishin K, Pullman L, Seto MC. Viewing time measures of sexual interest and sexual offending propensity: An online survey of fathers. *Arch Sex Behav.* 2022;51(8):4097-110. doi:10.1007/s10508-022-02324-5
 17. Delcea C, Fabian AM, Radu CC, Dumbravă DP. Juvenile delinquency within the forensic context. *Rom J Leg Med.* 2019;27(4):366-72. doi:10.4323/rjlm.2019.366
 18. POP ML. 3rt intervention on cognitive distorsions regarding the justification of sexual offenders. *Int J Adv Stud Sexol.* 2022;4(1):5-18. doi:10.46388/ijass.2022.4.1
 19. Delcea C, Enache A. Personality traits as predictor of crime. *Rom J Leg Med.* 2021;29(2):227-31.
 20. Kunst H, Lobbstaël J, Candel I, Batink T. Early maladaptive schemas and their relation to personality disorders: A correlational examination in a clinical population. *Clin Psychol Psychother.* 2020;27(6):837-46. doi:10.1002/cpp.2467
 21. Siserman CV. Frotteurism disorder. *Int J Adv Stud Sexol.* 2021;3(2):101. doi:10.46388/ijass.2021.13.43
 22. Sempertegui GA, Karreman A, Arntz A, Bekker MH. Schema therapy for borderline personality disorder: A comprehensive review of its empirical foundations, effectiveness and implementation possibilities. *Clin Psychol Rev.* 2013;33(3):426-47. doi:10.1016/j.cpr.2012.11.006
 23. Baruch I. Paraphilic disorders. Anorgasmia. *Int J Adv Stud Sexol.* 2020;2(2):94-7.
 24. Lescai EF. The transvestic disorder. An individual psychology approach. *Int J Adv Stud Sexol.* 2020;2(1):25-31.
 25. Delcea C, Chirilă IV, Săucea MA. Effects of COVID-19 on the people's sexual life - meta-analysis. *Sexologies.* 2021;30(1):e49-54. doi:10.1016/j.sexol.2020.12.001
 26. Singh S, Fetters T, Gebreselassie H. The estimated incidence of induced abortion in Ethiopia. *Int Perspect Sex Reprod Health.* 2010;36(1):16-25.
 27. Palade M. Zoophilia. *Int J Adv Stud Sexol.* 2020;2(1). doi:10.46388/ijass.2020.13.21
 28. Abeyasinghe NL, Weerasundera BJ, Jayawardene PA, Somarathna SD. Awareness and views of the law on termination of pregnancy and reasons for resorting to an abortion among a group of women attending a clinic in Colombo, Sri Lanka. *J Forensic Leg Med.* 2009;16(3):134-7. doi:10.1016/j.jflm.2008.08.010
 29. Romano H. Incest, a genocidal crime. *Rev Infirm.* 2022;71(283):22-4. doi:10.1016/j.revinf.2022.09.003
 30. Ioana M. Paraphilias and paraphilic behaviors. *Voaiorismul. Int J Adv Stud Sexol.* 2020;2(1):53-8. doi:10.46388/ijass.2020.13.19
 31. Stan CI. Frotteuristic disorder. An individual psychology approach. *Int J Adv Stud Sexol.* 2020;2(1):15-9.
 32. Ben Salem S, Bras N, Renaudet-Calvo C. Silence around incest victims. *Soins.* 2021;66(858):51-7. doi:10.1016/j.soin.2021.07.011
 33. Donalek JG. First incest disclosure. *Issues Ment Health Nurs.* 2001;22(6):573-91. doi:10.1080/01612840118152
 34. Chereches C. Case study on penetrating genito-pelvic pain disorder and proposal for evaluation and treatment by digital S-ONapp applications. *Int J Adv Stud Sexol.* 2022;4(1):56-67. doi:10.46388/ijass.2022.4.6
 35. Beech AR, Miner MH, Thornton D. Paraphilias in the DSM-5. *Annu Rev Clin Psychol.* 2016;12:383-406. doi:10.1146/annurev-clinpsy-021815-093330