**Serial Killer Psychology**

By William R. Harris

Criminal psychology refers to the study of the mental and behavioral characteristics of people who break laws established by local, state, national or international governments. Some criminal, or forensic, psychologists focus their research on serial killers -- men and women who murder a large number of people over an extended period of time — typically months or years.

What constitutes a serial killer is open to interpretation. In the United States, Congress has defined a serial killer as someone who murders a minimum of three or more people. By definition, a cooling-off period separates the murders, making them appear random or unconnected. The victims — often prostitutes, runaways or other vulnerable populations — rarely know their killer and may serve as a symbol that triggers the attack. In other words, a serial killer's motive tends to be psychological, not material.

Understanding what goes on — or gets turned off — in a serial killer's mind is the ultimate goal of scientists who specialize in this area of psychology. You might think the field is relatively new, but it dates back to at least the 19th century, when psychologists tried to develop a profile of the mysterious and elusive Jack the Ripper.

**Antisocial Personality Disorder vs. Psychopathy**

**DENNIS RADER**



Dennis Rader — aka BTK, or "bind, torture, kill" — stands as one of history's most notorious serial killers and the epitome of a psychopath. Between 1974 and when he was captured in 2005, Rader killed 10 Wichita, Kan., residents, terrorizing the entire city. On the surface, however, he seemed completely normal. He was married, had two kids, served in the U.S. Air Force and held several good jobs. All of that was a facade for the monster lurking inside him. When he confessed to the gruesome murders in court, he did so without remorse, which stunned observers in the courtroom. Rader is currently serving 10 life sentences in a Kansas prison.

Mental health professionals use the Diagnostic and Statistical Manual of Mental Disorders (DSM), developed by the American Psychiatric Association, to understand the illnesses of their patients and how to treat them. The DSM doesn't list serial murder among the 300 known mental disorders catalogued in its pages. It does, however, describe antisocial personality disorder, or ASPD. It's this condition that describes the behavior of many serial killers.

To understand ASPD, it helps to review the DSM criteria used to diagnose it. The most obvious indicator of the disorder is a total disregard for laws and social norms. People with ASPD have a long history of arrests and are often involved in physical fights or assaults. Some are capable of lying, cheating and deceiving so skillfully it is difficult to know when they are telling the truth or lying. They also act impulsively, with little care given to the safety of themselves or others.

To be diagnosed officially with ASPD, a person must be 18 years old, but symptoms generally begin to appear earlier, sometimes in the early teens. Adults with ASPD struggle to stay employed and, as a result, often have financial problems, according to the DSM. The manual also mentions that the disorder occurs more frequently in men than women — about 3 percent versus 1 percent.

Experts describe psychopathy as a more severe form of ASPD. Psychopaths have the antisocial symptoms just mentioned, but they also have additional traits that make them especially difficult to diagnose and treat. Chief among these traits is a lack of remorse or guilt for their actions. They also tend to be highly paranoid and suspicious.

Robert D. Hare of the University of British Columbia, a pioneer in the field, developed a diagnostic tool for psychopathy that measures the same antisocial symptoms as the DSM, but also evaluates interpersonal criteria, such as lack of empathy and shallow emotions. The tool is known as the Hare Psychopathy Checklist — a collection of 20 criteria that measure a person's antisocial behavior, emotional and interpersonal traits, and other factors.

The highest possible score is 40, but someone who scores 30 points is considered a psychopath, according to Kent Kiehl and Joshua Buckholtz, who explored the mind of a psychopath for Scientific American. Interestingly, the average score on the Hare Psychopathy is 4, write Kiehl and Buckholtz. That just means that psychopathy is a continuum, the way many other disorders are. It also means most psychopaths are not violent and are not destined to commit murder. A few, however, fall at the far end of the scale. These violent psychopaths may include serial killers.

**Organized vs. Disorganized Killers**

**TED BUNDY**



Experts hold up Ted Bundy as the perfect example of an organized killer. He had a method that worked so well he may have murdered, by some estimates, 100 women. This is how it went: Wearing a sling, Bundy would approach a young woman and ask for help to load something in or on his Volkswagen Beetle. The woman would follow Bundy to the car, and when he had the door open, he would subdue her, then drive to another location to play out the final grim scene of his carefully orchestrated plan, according to Michael Newton, author of "The Encyclopedia of Serial Killers." Newton writes that Bundy's charm and good looks usually put his victims at ease, although a few sensed the evil simmering below the surface. Gradually, Bundy became less and less organized. Florida police captured him in February 1978 after a messy killing spree that left three more people dead.

The FBI has also worked hard to develop a useful classification of serial killers. In 1974, the agency formed its now-famous Behavioral Science Unit (BSU). One of the first tasks of the BSU, between 1976 and 1979, was to interview 36 serial murderers in an effort to understand their motivation and psychology. Investigators determined that serial killers could be divided into three groups:

1. Organized — As the name suggests, organized killers plan their attacks methodically, allowing the planning process itself to become part of a powerful and consuming mental fantasy. They target victims carefully and may stalk them for weeks or months. They carry the tools of their crime — weapons and restraints — with them and almost never kill at the scene where they encounter a victim. Instead, they transport their victims to another location, commit the murder there and then dump the bodies in a third location, making it difficult to collect evidence. After a killing, they often follow the investigation in the media.
2. Disorganized — Disorganized serial killers are the complete opposite. They plan nothing and most often attack suddenly and without notice. Their victims hold no symbolic value and have the misfortune of being in the wrong place at the wrong time. They don't carry weapons to the crime scene, choosing instead to use what they can put their hands on — a pipe, a rock, a knife. They don't dispose of bodies, although they often take anatomical "souvenirs." Ultimately, their disorganized behavior makes it easier for law enforcement officials to track and find them. Until that happens, however, the public lives in fear as they wait for the unpredictable killer to strike again.
3. Mixed — Of course, some serial killers defy classification. Perhaps they kill occasionally while under the influence of drugs or alcohol. Or perhaps their methods make their attacks more susceptible to interruption. Or, finally, perhaps they fall in with other criminals who are quick to kill, but prefer different methods. Whatever the circumstances, the FBI created a third catch-all category for serial killers who can't be classified neatly as either organized or disorganized.

In this system, the psychology of serial killers becomes a bit more muddled. Organized killers, for example, are classic psychopaths and tend to kill in a merciless, cold-blooded fashion. They make meticulous plans and always know what they're doing. Disorganized and mixed-category killers can be psychopathic, but they can also be psychotic. Someone who is psychotic loses contact with reality and may suffer from hallucinations or delusions. In some serial killers, such reality breaks can play a significant role in their murders.

**The Holmes and Holmes Serial Murder Typology**

**DAVID BERKOWITZ**



When psychologists interviewed David Berkowitz after a yearlong shooting rampage that left six people dead and several more wounded, they diagnosed him as a paranoid schizophrenic. Based on the style of his slayings, he seemed like a classic visionary killer. He claimed he was driven by demons, including one demon he believed to be living inside the black Labrador retriever owned by his neighbor Sam Carr. Son of Sam's killing spree ended on Aug. 10, 1977, just 11 days after his last murder. He eventually gave a full confession, but a few questions remain. Some investigators theorize that Berkowitz belonged to a satanic cult and may not have acted alone. Maury Terry, a newsman who worked the Son of Sam case, believes the attacks were carried out by five gunmen, including Berkowitz.

 Some critics argue that the BSU's three-tiered scheme has severe limitations, with little empirical support. One attempt to improve it came when Ronald M. and Stephen T. Holmes, authors of numerous textbooks on serial murder and violent crime, proposed their serial murder typology, which organizes killers into four principal categories:

1. Visionary killers feel compelled to murder because of visions they see or messages they receive from angels, demons, Satan or God. Their victims are unrelated and share no connection, unlike those of mission killers.
2. Missionary killers slay within a particular group or class of people in an effort to eliminate them.
3. Hedonistic killers derive intense sexual gratification from their deeds. These hedonistic killers can be further divided into two categories: lust killers, who derive pleasure both before and after the victim is dead, and thrill killers, whose excitement fades as soon as the murder is over.
4. Finally, the Holmes typology recognizes power or control killers, who desire to master their victims completely, including when and how they die.

Several researchers have analyzed the Holmes and Holmes Serial Murder Typology and questioned its validity. For example, an empirical study of the typology by British scientists at the University of Liverpool found that the attributes of power/control killers actually applied to all of the other types of killers. In other words, according to these researchers, the power/control category should be eliminated completely. Still, the Holmes typology remains a useful tool in helping to understand the motivations and psychological processes of serial killers.typology remains a useful tool in helping to understand the motivations and psychological processes

**Studying the Serial Killer Brain ...**

Many researchers now believe that the symptoms manifested by serial killers -- regardless of their classification -- are the result of brain abnormalities. Recently, neuroscientists using medical imaging techniques have discovered that the brains of psychopaths have noticeably thinner tissue in key subcortical areas. These regions span what doctors call the limbic system, which includes the cingulate gyrus, amygdala and hippocampus. It also spans other structures, such as the orbitofrontal cortex and the temporal pole, that are adjacent to the limbic system, but not always considered part of it.

Some researchers apply the collective term paralimbic system to all of this tissue and believe it may hold the key to understanding psychopaths. Why? Because the paralimbic system controls basic emotions — fear, pleasure, anger — and handles decision making, high-level reasoning and impulse control. If this tissue is damaged or underdeveloped, then a person may have a decreased capacity to register feelings or assign emotional value to experiences. It explains a great deal about the behavior of psychopaths, who have great difficulty feeling emotions (like empathy), reading other people's cues and learning from their mistakes.

This new take on neurobiology can also be understood in terms of classic psychoanalytic theory. Freud described the id as the part of the mind that regulates innate instinctive impulses and primary processes. The ego, Freud said, mediates between the conscious and the unconscious and is responsible for reality testing and a sense of personal identity. And the superego acts as a self-critical conscience, reflecting social standards learned from parents, teachers and other authority figures. In psychopaths, a disrupted paralimbic system could weaken the ego, which would allow the id to direct behavior, leading to a need for immediate gratification. Abnormal brain function could also compromise the superego, allowing an individual to harm others in their pursuit of gratification without experiencing feelings of guilt or remorse.

**... And the Serial Killer Environment**

Of course, biology alone can't explain everything we need to know about serial killers. Some data suggest that information hardwired in DNA accounts for just 50 percent of the variability among those who exhibit adult antisocial traits, according to Scientific American writers Kiehl and Buckholtz. In other words, genetics can only account for so much. The environment plays an equally important role in shaping how a person develops.

One thing seems clear after years of research by several teams: Many serial killers suffered some kind of trauma in their childhood, such as physical or sexual abuse at the hands of a domineering father. Others were abandoned, sold into slavery or removed from the home. Those that remained in their childhood home faced extreme poverty, erratic, inconsistent discipline and, sometimes, religious fanaticism.

Childhood trauma played a key role in the lives of numerous serial killers. John Wayne Gacy, who murdered 33 young boys in the 1970s and buried their bodies in the crawlspace of his Chicago home, suffered greatly at the hands of his tyrannical father. Gacy endured brutal beatings and saw his beloved dog shot while he watched. When he wasn't being physically abused, he withstood verbal assaults, listening as his father called him "sissy" and "worthless," according to author Michael Newton and writer Shirley Lynn Scott.

Albert DeSalvo, who was implicated in the strangulation deaths of 11 Boston women but never formally charged, also survived a nightmarish childhood. His father terrorized the entire family, beating the young DeSalvo with a pipe and breaking his mother's fingers as the boy watched. That was not the worst. According to some accounts, the elder DeSalvo reportedly sold his children to a farmer in Maine. Although they were rescued by their mother, the scars they shared from the incident must have been significant, according to Scott.

Sometimes, the abuse is not always so obvious. Jeffrey Dahmer, responsible for 17 murders in the late 1980s and early 1990s, seemed to have a normal childhood. His parents described him as happy and bubbly, although court records suggest that Dahmer was a withdrawn boy who, among other things, was fascinated with dead animals. Something worked to turn Dahmer into a sadistic killer. He may have been sexually molested by a neighbor boy in 1968, writes Scott. She adds that Dahmer may have also been traumatized, at age 4, by a hernia operation, which was so painful that Dahmer wondered if his penis had been removed.

Some children can endure such abuses without suffering long-term psychological damage. Others can't. Those in the latter category often fail to develop an appropriate "attachment" -- the emotional connection formed between a child and his caregiver. Without that connection, these children may never learn to trust the people around them. Instead of relying on social interaction with others, they turn inward, creating a fantasy world that becomes their source of gratification. When they're challenged, they react violently and never feel sympathy or remorse for the harm they cause.

The FBI can put hard numbers around some of these general observations. After a three-year study of 36 sexually motivated killers, including 29 serial killers, investigators reported the following sobering statistics:

* 69 percent of killers studied reported family histories with alcohol abuse.
* 53 percent listed relatives with psychiatric problems.
* 46 percent admitted family sexual problems.
* 33 percent described histories of familial drug abuse.

By themselves, these numbers don't explain everything. But if you combine severe childhood abuse and isolation with certain neurobiological deficits, it becomes much clearer how an individual could grow up to be a vicious and heartless killer.