

A Thematic Analysis of the Motivation Behind Sexual Homicide From the Perspective of the Killer

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Abstract

Using thematic analysis, this study explores the motivation to commit sexual homicide from the perspective of the perpetrator. In the process, it revisits motivational models and offender typologies that have been put forward to explain such offenses. From the homicide narratives of eight sexual homicide offenders detained in a high security hospital in the United Kingdom, four themes were found which appeared significant in terms of understanding the offenses committed. These themes were labeled as follows: (a) avenging sexual abuse, (b) events leading to a catathymic reaction, (c) homicidal impulse, and (d) emotional loneliness. Although these findings are not inconsistent with previous research, we argue that the current literature fails to capture the complexity associated with these offenses. We also argue that the context or situation in which sexual homicide occurs is a crucial feature of the offense, and one which has not been adequately taken into account by motivational models.

Keywords

catathymia, emotional loneliness, sexual homicide, sexual abuse, thematic analysis

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Introduction

Sexual homicides attract a great deal of attention from the media, the general public, and more recently, the academic community. Although rare, they are devastating crimes and have the potential for repetition (Greenall, 2013; Ressler, Burgess, & Douglas, 1988). In comparison with other forms of sexual offending, sexual homicide is still a relatively new area of psychological enquiry. Researchers have only taken an academic interest in the field in the last 30 years, although a few key papers existed before this time; most notably Brittain (1970) and von Kraft-Ebing (1886). Surprisingly, there is no universally agreed definition of sexual homicide. However, most scholars seem to agree that there must be evidence of sexual activity at the crime scene by the perpetrator (Douglas, Burgess, Burgess, & Ressler, 1992; Folino, 2000; Myers, 2002). Sexual activity might occur before, during, or after the killing, or indeed throughout the event (Porter, Woodworth, Earle, Drugge, & Boer, 2003) and could range from masturbation at the crime scene to actual penetration of the victim (oral, anal, or vaginal) with a variety of objects, animate or inanimate. It might also be symbolically expressed, often suffused with anger and curiosity through mutilation of the victim's genitals (Meloy, 2000). However, some authors believe that a sexual homicide need not contain any evidence of sexual activity at all (Revitch, 1965; Schlesinger, 2004). In such cases, the brutal act itself may be a substitute for the sexual act.

It has been estimated that around 4% of homicides committed in England and Wales each year have a definite sexual element (Francis & Soothill, 2000). This figure is consistent with estimates in Canada (Porter et al., 2003) and Finland (Häkkinen-Nyholm, Repo-Tiihonen, Lindberg, Salenius, & Weizmann-Henelius, 2009). Although the overall homicide rate is higher in the United States, the proportion of homicides that contain a sexual element is lower, around 0.2% (U.S. Department of Justice, 2012). However, given that a sexual homicide need not contain any overt evidence of sexuality, it is highly likely that the above figures are an underestimate. The *true* prevalence of sexual homicide remains unknown. What *is* known about people who commit sexual homicide is that most perpetrators are male and legally sane at the time of their offense(s) (Proulx & Sauvêtre, 2007). Most sexual homicide victims are women and tend to be of a childbearing age (Roberts & Grossman, 1993). It is also the case that the majority of offenders do not kill multiple victims and are therefore not serial killers (Schlesinger, 2004, 2007).

Typological Studies

There have been at least 10 attempts to classify sexual homicide perpetrators according to motivation (e.g., Beauregard & Proulx, 2002, 2007; Beech,

Oliver, Fisher, & Beckett, 2005; Clark & Carter, 1999; Geberth, 1996; Keppel & Walter, 1999; Kocsis, 1999; Meloy, 2000; Ressler et al., 1988; Revitch & Schlesinger, 1981; Sewell et al., 2013). A variety of methodologies have been used. These have included (a) theory-led approaches, (b) clinical opinion, (c) the use of crime-scene demographics, and (d) multivariate statistics (see Kerr, Beech, & Murphy, 2013, for a review). Such research has consistently found three main types of sexual killers: (a) those motivated by anger, hate and revenge, (b) those motivated by a need to satisfy a sadistic sexual drive, and (c) those who kill for instrumental reasons, for example, to silence the only witness to a sexual assault.

Despite variations in the terminologies used across studies, all three types of killers present with a number of consistent characteristics. The angry offender, for example, is likely to have average intelligence, be married or in a stable relationship, and is not socially isolated. Their crime scenes are likely to be disorganized with evidence of vengeance displaced to a specific victim. The sadistic killer is likely to be highly intelligent, although socially isolated with multiple paraphilias. According to Aggrawal (2011), many sadistic killers can be described as “homicidal necrophiles.” These individuals have such a need to have sex with a dead body that they resort to killing. The crime scenes of sadistic killers are likely to be organized with evidence of sadistic, gratuitous violence, and fantasy enactment (e.g., bizarre rituals carried out over the course of the killing; Beauregard, Proulx, & St-Yves, 2007).

Motivational Models

As well as typological studies, there have been at least three motivational models developed independently by researchers to account for the motivation behind sexual homicide (Arrigo & Purcell, 2001; Burgess, Hartman, Ressler, Douglas, & McCormack, 1986; Hickey, 1997, 2002). These models provide a general framework for understanding why an individual may become a sexual killer, with an integration of biological, psychological, and sociological theories. There is a fair degree of overlap between all three models. The prospective sexual homicide offender is believed to originate from an ineffective, early social environment, characterized by abuse and neglect. Low self-esteem and social isolation force the child into a world of fantasy which becomes increasingly violent as puberty approaches. Violent fantasies become merged with sexual excitement and gratification. With the development of negative personality traits, such as hostility and grandiosity, the individual eventually becomes fixated on living out his fantasy as imagined.

The major strength of these models is that they provide a comprehensive account of an individual's pathway to sexual killing, taking into consideration developmental, psychological, and, to a lesser extent, situational

factors. Their weakness is that they have never been tested with empirical data. Although the Burgess et al. model was developed on the basis of extensive interviews, most participants within the sample were serial killers, and thus not representative of sexual homicide offenders in general.

The Present Study

Due to its infancy, and due to the fact that researchers still cannot agree on how to define the term, Schlesinger (2004) has argued for a phenomenological-descriptive approach to the study of sexual homicide. A number of quantitative studies have been conducted, but according to Schlesinger (2004, 2007) premature quantification can easily impede rather than enhance understanding. In this article, we explore the phenomenon of sexual homicide through the eyes of the perpetrator. Our aim was to investigate what motivates these crimes using detailed narratives from men who have committed such offenses.

Method

Selection Criteria

Participants were recruited from one of the United Kingdom's high security psychiatric hospitals. They were selected using the criteria formulated by FBI researchers in the 1980s (e.g., Ressler et al., 1988). Ressler et al. classify a homicide as "sexual" if one or more of the following criteria are evident at the crime scene: (a) the victim is found totally or partially naked, (b) the genitals are exposed, (c) the body is found in a sexually explicit position, (d) an object has been inserted into a body cavity (anus, mouth, or vagina), (e) there is evidence of sexual contact, and (f) there is evidence of substitutive sexual activity (e.g., masturbation and ejaculation at the crime scene), or of sadistic sexual fantasies (e.g., genital mutilation).

Participants

A total of 14 men had been identified by their respective clinical teams as having committed at least one sexual homicide (according to FBI criteria), 8 of whom agreed to be interviewed at length. The average age of the participants at the time of the study was 41 years, with a range from 25 to 63 years. The average age at the time of their first homicide was 24 years, with a range from 17 to 29 years. Three participants described themselves as single at the time of the homicide. Five participants described being in a relationship;

however, in four of the cases, the relationship was turbulent, characterized by violence and abuse. All participants were classified as White British.

All participants had been diagnosed with a mental disorder soon after their apprehension for homicide. This was taken into account at the time of their trial; therefore, most had been charged with manslaughter, rather than murder, on grounds of diminished responsibility. Four of the eight participants had a diagnosis of mental illness, notably schizophrenia. Three had a diagnosis of personality disorder, emotionally unstable and dissocial types (ICD-10), and one participant had a dual diagnosis of mental illness (schizophrenia) and personality disorder (dissocial). Given the extreme nature of their crimes, it is perhaps unusual to note that only one participant who agreed to take part was dually diagnosed. It is unclear why this was the case; however, other patients who refused to be interviewed may have had similar diagnostic profiles.

Four participants had committed one homicide. Another two participants had committed two homicides each, within succession and at the same crime scene. The remaining two participants had committed three homicides with a significant time lapse between each, making them serial in nature. All homicides were committed by the offender alone. Thus, a total of 14 sexual homicides had been committed by our sample of eight participants. Four participants asphyxiated their victims to death, three used a knife, and one used a blunt object. With regard to ethnicity of victim, the majority ($n = 10$) were White, two were Asian, one was Black African Caribbean, and one was Hispanic. And with regard to the relationship of the perpetrator to the victim, four killed an acquaintance, three killed total strangers, and only one had killed a member of his own family (see Table 1).

Procedure

A semi-structured interview based on the interview protocol used by Beech and colleagues in their comparison study of rapists and sexual killers detained in prison was used (Beech et al., 2005). The protocol was developed with the aim of establishing a functional analysis of a sexual offense. It asked about potential antecedents, such as major life events, relationships, substance misuse, fantasy, and planning. It also included a number of prompt questions concerning the offense itself, including the type of weapon used (if any), how the offender dealt with the victim's resistance, and presence of sexual arousal during the attack. Finally, the protocol asked about the immediate and general post-offense reaction of the offender to his offense.

All participants were interviewed individually in a private room by the first author. The aims and purpose of the interview were explained and

Table 1. Participant and Victim Characteristics.

Participant	Age ^a	Ethnicity	Number of Victims	Ethnicity of Victims	Victim Relationship	Killing Method	Type of Mental Disorder
1	24	White	1	White	Acquaintance	Asphyxia	Schizophrenia/dissocial PD
2	29	White	3	2 White, 1 African	Total strangers	Blunt object	Schizophrenia
3	17	White	1	White	Family member	Asphyxia	Schizophrenia
4	22	White	1	White	Acquaintance	Knife	Schizophrenia
5	23	White	2	Asian	Acquaintance	Knife	Dissocial/EUPD
6	29	White	2	White	Total strangers	Asphyxia	Dissocial/EUPD
7	25	White	1	Hispanic	Acquaintance	Asphyxia	Dissocial/EUPD
8	27	White	3	White	Total strangers	Knife	Schizophrenia

Note. PD = personality disorder; EUPD = emotionally unstable personality disorder.

^aAt time of first homicide.

informed consent was obtained. Anonymity was assured and participants were encouraged to talk freely. In general, the interviews lasted between 2 hr and 4 hr. The aim was to develop a functional analysis based on what they believed to be the most important factors associated with their offense. The interview protocol was used only as a guide. Participants provided a narrative of their offense in their own words and this was recorded verbatim.

Data Analysis

Transcripts of the interviews were then used to develop themes. This was done using the qualitative technique of thematic analysis which is a method for identifying, analyzing, and reporting of patterns (themes) within data (Braun & Clarke, 2006). Thematic analysis looks at data at a latent level which goes beyond the semantic meaning of the data to interpret underlying meanings (Braun & Clarke, 2006). It is a flexible approach. It can be used as an essentialist or realist method involving the reporting of experiences and meanings for participants, or it can be a constructionist method, examining the ways in which events, realities, meanings, experiences, and so forth, are the effects of a range of discourses operating within society (Braun & Clarke, 2006). As the present study used interview transcripts with offenders, an essentialist method was adopted.

Although there is little agreement in terms of how to conduct a thematic analysis, the present study used the procedure recommended by Braun and Clarke (2006). This consists of six steps. First, the interview data were transcribed verbatim and the first author of this article read and re-read transcripts to ensure familiarity with the content. Initial ideas were noted. Second, interesting features of the data were generated in a systematic manner using general codes. Codes identify a feature of the data that appears interesting to the analyst and refer to "the most basic segment, or element, of the raw data or information that can be assessed in a meaningful way regarding the phenomenon" (Boyatzis, 1998). Third, the first author reviewed codes and grouped data further into themes. Essentially, this step considers how different codes may combine to form an overarching theme. The fourth step involves reviewing themes. In this step, themes are refined. Some may be discarded, others may collapse into others. In step five, themes are defined and named. In the final step, specific examples from narratives are selected to illustrate themes and relate the analysis back to existing literature.

Interrater Reliability

Although it is not highlighted anywhere in the Braun and Clarke (2006) recommendations, a second independent researcher was asked to rate a smaller random sample of the data (10% of the total data) which was compared with

Table 2. Themes Generated Within Each Participant's Offense.

Participant	Avenging Sexual Abuse	Homicidal Impulse	Events Leading to a Catathymic Reaction	Emotional Loneliness
1			X	X
2		X	X	
3	X	X		X
4			X	X
5	X	X		
6	X	X	X	X
7	X			X
8	X	X		X

the first author's coding. This was done in an attempt to ensure consistency in interpretation. Any disagreements were found only to relate to the semantic labeling of codes.

Clinical File Check

To assess the honesty and accuracy of each participant's account of their offending, previous offending accounts and depositions of their crimes were checked in their clinical files. Participants provided their informed consent to allow access to file information. In all cases, participants' accounts of their offending largely matched previous accounts given in interviews with the police, psychologists, and other mental health professionals.

Results

From the detailed analysis of all eight interviews, four specific themes were generated. They were selected on the basis that they held direct significance to the commission of the offense(s). The four themes were labeled as (a) avenging sexual abuse, (b) homicidal impulse, (c) events leading to a catathymic reaction, and (d) emotional loneliness (see Table 2). Within each theme, a number of sub-themes were also identified. These are discussed in turn following each of the main themes.

Theme 1: Avenging Sexual Abuse

Five of the eight participants talked about their experiences of being sexually abused during childhood. In all cases, the abuse lasted for several years, and

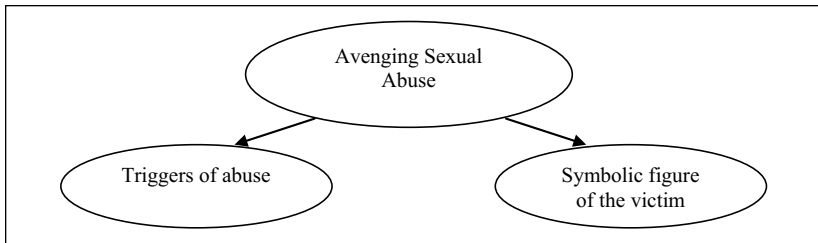


Figure 1. Main theme: “Avenging sexual abuse,” shown with sub-themes.

in four out of five cases it involved the use of violence, sometimes torture, and more than one offender. All abusers were reported to be male and were either “caregivers” or people with some kind of authority over the child (e.g., headmaster). In most cases, salient aspects of the abuse were clearly featured in the homicides of the participants. Within this theme, two sub-themes were identified: triggers of the abuse and symbolic figure of the victim (see Figure 1).

Triggers of abuse. In this sub-theme, unexpected sensory and environmental triggers of the abuse appeared to initiate homicidal violence in participants. In all cases, triggers acted as a catalyst to violence by evoking traumatic memories associated with their abuse. In two cases, the triggers occurred during the commission of a coercive sexual act, with homicidal violence following at some point during the sequence. In another two cases, the trigger initiated a re-experience of the abuse and associated grievance thinking. In both cases, a killing was carried out a few days later. This sub-theme is illustrated in the following excerpts. The first provides an example of violence occurring immediately after the trigger, the second provides an example of a more protracted process lasting several days.

One participant talked about his intention to rape a victim only to find that she was menstruating at the time. He said that

the sight of blood reminded me of my own abuse when I was a kid. I was abused by my father, and sometimes as a punishment he’d make me lie in my sister’s bed which had blood stains from when she had been menstruating. When I saw the blood between her [the victim’s] legs I became really angry and killed her. The thought of the blood stayed with me for ages . . . I could smell it . . . it was sickening.

Another participant described chronic sexual abuse from both his father and older brother in childhood and a terrified mother who knew of the abuse

but was paralyzed by fear to do anything about it. A few days before he committed a double sexual homicide, he

remembered finding out that the man who abused me when I was a kid [meaning his older brother] was back in prison . . . he had been doing the same things he did to me to another kid . . . it reminded me of all the shame and guilt that I went through.

Symbolic figure of the victim. In this sub-theme, the actual victim of the homicide was perceived as representing a salient figure involved in the abuse of the participant. One participant talked of how he had killed an elderly couple in their home. He stabbed the female through the chest upon gaining entry into the apartment.

I remember seeing her [the victim] cowering on the floor after I stabbed her . . . I could see the fear in her face . . . I was looking straight into her eyes, but it wasn't her I was seeing . . . it was my mother cowering on the floor scared of my father. I remembered thinking to myself see Mum I can protect you, I could have protected you all those years ago if you'd protected me.

After killing both victims in their home, the participant then removed the genitals of both victims and inserted them into their mouths. The participant had suffered years of sexual abuse from both his father and older brother and, according to him, he killed his two elderly victims because of what his brother and father had done to him.

I killed them off. At that moment in time I had killed my father, mother, and brother . . . and when I walked out of their [the victims'] flat, I was the calmest I had ever been in my life. I felt clean inside, although empty . . . but with no more hatred and no more anger.

Theme 2: Homicidal Impulse

Five participants talked about an impulse to commit homicide. Although participants did not describe fantasies to commit *sexual* homicide (i.e., erotophonophilia), they did talk about a drive to kill that had existed within them for many years. In four out of the five cases, the actual killing of the victim was preceded by a trigger that reminded participants of the sexual abuse that they had suffered in childhood. In this respect, "homicidal impulse" as a theme is therefore closely related to the theme of "avenging sexual abuse" described above. However, we believe that within our analysis, an impulse to kill was deserving of its own separate theme, as the drive to kill had existed from an early age (usually adolescence) and was a significant feature in its own right.

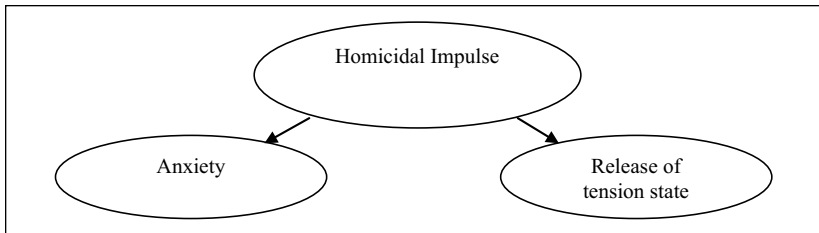


Figure 2. Main theme: “Homicidal impulse,” shown with sub-themes.

An impulse to kill is recognized in the work of Schlesinger (2004, 2007), although he describes the phenomenon as a “compulsion” that is “more abstract than fantasy and difficult to explain” (p. 263). The literature also suggests that most sexual killers who experience this state are aware of it. Brittain (1970) wrote that “given the opportunity, the [sexual] murderer is likely to murder again, and he knows it” (p. 205). “Homicidal impulse” included two sub-themes in our analysis which we labeled as “anxiety” and “release of tension state” (see Figure 2).

Anxiety. Anxiety was a common emotion reported by all participants in this theme. In all cases, participants struggled to articulate what the feeling consisted of. One participant appeared to somatise the experience by complaining of headaches and nausea just before the actual killing of a victim. Another participant reflected that “I always knew that I’d kill someone . . . the feeling inside me was so strong . . . I knew it would end in murder.” Another participant responsible for multiple homicides remarked that

I had to kill . . . there was a horrible feeling that would rise in me every so often and the only thing that got rid of it was killing . . . I felt a sense of relief afterwards.

It is difficult to establish the cause of anxiety in relation to this theme. One hypothesis is that it resulted directly from the participant’s resistance to kill. This may have been the case with some, but in multiple homicide offenders it may be in relation to a fear of getting caught.

Release of tension state. Within this sub-theme, participants talked about eventually “giving in” to their urge to carry out homicide after several months or, in some cases, years of resistance. Participants found it very difficult to identify any specific triggers of the release, although three admitted being in

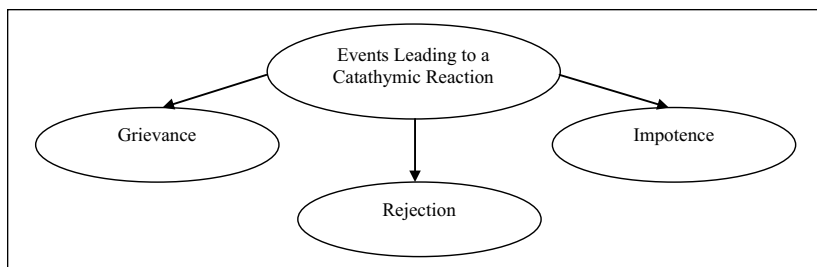


Figure 3. Main theme: “Events leading to a catathymic reaction,” shown with sub-themes.

an intoxicated state before the killing which likely served to reduce inhibition. In two cases, it seemed apparent that anxiety and tension continued to build until it reached a point where the offender made a conscious decision that he was not going to resist any longer. This process is captured in the following excerpt:

I remember waking up one morning and deciding that I was finally going to give up the fight . . . the fight of resisting to kill . . . I always knew that I'd kill someone, it was just a matter of time.

Theme 3: Events Leading to a Catathymic Reaction

Four participants talked about a particular event in their lives to which they attached significance in terms of their motivation for killing. Analysis of the interview material revealed that in all four cases the event had initiated a catathymic reaction. *Catathymia* literally means “according to emotions” and was first used about a hundred years ago by the Swiss psychiatrist Hans Maier to account for the development of the content of delusions that stem from deep-seated emotional conflicts. Schlesinger (2004, 2007), Meloy (2000), and others have used this construct to explain the motivation behind some forms of sexual homicide. According to Schlesinger (2004, 2007), some forms of sexual homicide can be understood as resulting from a breakthrough of underlying sexual conflicts that have been fused with strong negative emotion. They can be chronic or planned, although not in the sense of avoiding detection, or they can be acute, referring to a sudden release of tension, often precipitated by a seemingly innocuous comment from the victim. The motivation behind these types of homicide, according to Schlesinger (2004, 2007), is to rid the individual of emotional turmoil associated with the conflict, thus providing some sort of relief. Within this theme, three sub-themes were identified (see Figure 3).

Grievance. Grievance, as a motive for sexual homicide, has been highlighted by many researchers. Beech et al. (2005), for example, identified a type of sexual killer motivated by grievance in their cluster analysis of 50 sexual killers detained in U.K. prisons. After being mocked by a prostitute for his “poor sexual performance,” one of our participants resorted to serial sexual homicide as means of aggrieving the insult. Although there was evidence to suggest that this individual made an active effort to avoid capture by the police, a catathymic reaction to the insult had been initiated and this persisted for many years. The remark made by the prostitute appeared to challenge the participant’s sense of integrity and identity of being a “man.” He described feeling

an intense rage after the whore had insulted me. I couldn’t let it go. I had an intense feeling to kill prostitutes and I couldn’t control it. After I killed one I felt relief for a while, but it kept coming back.

Rejection. A strong sense of rejection was highlighted by one of our participants. He talked about the devastation he felt when his homosexual partner left him for another man. This individual had killed two male victims he had met in a gay bar and taken back to his apartment. When talking about the immediate antecedents to the homicides in interview, he commented,

he [the first victim] said something . . . I was very drunk and very out of my head, and he said something . . . like no wonder [your partner] left you with all your drinking . . . you weren’t able to satisfy him . . . and I just snapped and I just grabbed him from behind. I only had him in an arm lock round his throat. I only did it to scare him and the next minute he was dead.

The sense of rejection that this participant was feeling, again, extended to his sense of being a “man” and of being able to satisfy a partner sexually. The catathymic reaction in this case was more sudden and more acute than the chronic case highlighted above.

Impotence. Impotence, or a perception of threat to one’s own sense of sexual identity, was reported by two participants within this theme. In both cases, participants were able to trace the root cause of their impotence to a significant event that had happened to them. For example, one participant talked about an inability to become erect during a sexual encounter with his first girlfriend during adolescence. He persisted in his attempts to have sex with the girl which apparently lasted all night. He described this experience as “traumatic” and said that “she [the girlfriend] broke up with me in the end. She said it wasn’t because of that [the impotence] but I knew it was. I hated

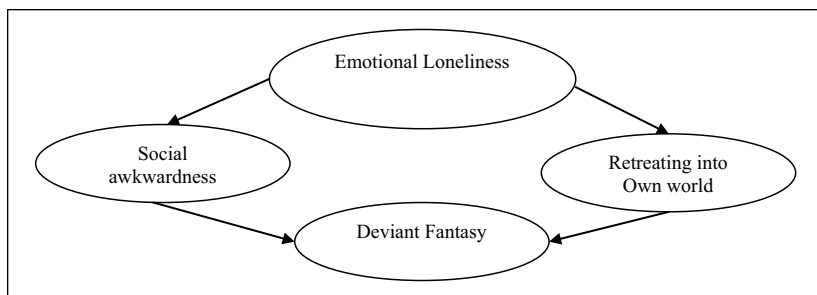


Figure 4. Main theme: “Emotional loneliness,” shown with sub-themes.

myself for being so inadequate.” This participant experienced similar problems in subsequent relationships, but only with women he found “extremely attractive.” He described feeling “jinxed” that he would never be able to have the girlfriend of his dreams.

Theme 4: Emotional Loneliness

Six individuals reported feeling emotionally lonely from either childhood or early adolescence. Emotional loneliness has been a common finding in the literature on sexual homicide, where it is often referred to as “social isolation” (e.g., Grubin, 1994; Milsom, Beech, & Webster, 2003). In the present study, we chose to label the theme as “emotional loneliness” because participants talked of feeling a lack of emotional connectedness to those around them, even if they were in an intimate relationship at the time of their offense. Participants described feeling “alone” and “shut off from the rest of society.” In the present study, three sub-themes were identified. These were labeled “social awkwardness,” “retreating into own world,” and “deviant fantasy” (see Figure 4).

Social awkwardness. In this sub-theme, participants described feeling awkward, clumsy, and generally un-skilled in social situations, particularly with people their own age and especially those they wished to develop an intimate relationship with. One participant described feeling increasingly lonely from the age of around 13 shortly after starting high school. He made frequent attempts to relate to people of his own age but was never successful.

I don’t know why, but I began to feel very awkward in social situations and developed a bizarre sense of humor that people found creepy . . . I would try

and be like the comedians of the TV to make people laugh and win some friends but I could never pull it off . . . I think they saw me as weird and a bit odd.

Although social anxiety is quite common in children and adolescents (Beesdo, Knappe, & Pine, 2009), the sense of social awkwardness described by participants appeared to be particularly damaging. From the descriptions provided by participants, it may have led to the following additional sub-themes.

Retreating into own world. Feeling emotionally detached from the rest of society and lacking the ability and confidence to make new friends, a number of participants described retreating into their own internal world. One participant remarked,

Because I couldn't make any friends at school I began to shut myself away . . . I used to like my own space and I needed to be alone. I began taking drugs and not really talking to anyone. I remember that I used to play out happy endings to bad things that had happened to me in my head so I could cope.

This participant killed a family member through asphyxiation. Sexual intercourse then took place after the victim was dead. The participant described being raped repeatedly by his headmaster at school, but at the time he felt unable to disclose the abuse to anyone. It was not until the headmaster was dismissed from his post after abusing other children that the participant made his own abuse known.

Deviant fantasy. Five participants talked about fantasies involving forcing sex on a partner, and in at least two cases the fantasies involved highly sadistic elements, such as inflicting pain. One participant commented,

I had thoughts of forcing sex on a woman. The thoughts went away while I was in a relationship, but once she [his partner] became pregnant and refused to have sex with me, they came back. The fantasies mainly involved tying girls up and feeling in control of them . . . particularly girls who had upset me.

The psychological literature on sexual homicide is consistent in suggesting that deviant sexual fantasy plays a significant role in its etiology. All three motivational models of sexual homicide include fantasy as a key feature, and typological studies highlight the importance of fantasy in the sadistic offending pathway. According to Ressler et al. (1988), it is sexual murderers'

fantasies that motivate them to kill. Furthermore, they suggest that violent thoughts and fantasies in sexual killers “are established early and exist in the context of social isolation.” For the purposes of the present study, we also argue that deviant sexual fantasy plays a key role in understanding the offense of sexual homicide. In all five cases, it was the participant’s deviant fantasy system that brought them into contact with their victim(s) in the first place. Although no participant knew their victim well, victims had been selected as targets for a sexual attack in accordance with their fantasy. However, in all cases, according to our participants, none of their fantasies involved the killing of a victim. Thus, no participant in this study matched the descriptions provided by Hickey (1997, 2002) and others of the erotophonophilic, who kills to achieve sexual orgasm. Furthermore, no participant described masturbating to their homicide(s) after the event. Thus, we have chosen to label “deviant fantasy” as a sub-theme and one arising out of “emotional loneliness” which in all cases preceded its development.

Discussion

This study identified four key themes in the offense narratives of sexual homicide perpetrators: (a) avenging sexual abuse, (b) homicidal impulse, (c) events leading to a catathymic reaction, and (d) emotional loneliness. All four themes were highlighted as significant in understanding the motive behind such crimes. Each theme also carried with it a number of sub-themes. We will now explore each of the main themes in turn with further reference to the psychological literature.

Theme 1: Avenging Sexual Abuse

This theme was observed in the offense narratives of five participants. We included two sub-themes: triggers of the abuse and symbolic figure of the victim. The psychological literature exploring the relationship between childhood sexual abuse and later sexual offending is far from clear. Some research supports a link (Glasser, Kolvin, Campbell, Glasser, & Farrelly, 2001; Jespersen, Lalumière, & Seto, 2009), but it is very difficult to accurately estimate the proportion of victims that do later become offenders and results from studies vary substantially (Salter et al., 2003). According to Glasser et al. (2001), the nature of the abuse, the severity, and the relationship between the victim and the perpetrator are important factors to take into account when considering its impact on victims later in life.

In Hickey’s (2002) model, psychological trauma at such a young age is thought to disrupt normal personal development to a point where the

adolescent takes refuge in a fictional fantasy world in which he dominates others. In the present study, by killing in a sexualized context in adulthood, participants seemed to be avenging in some way the sexual abuse they suffered in childhood. In the literature on child sexual offending, it has been noted that there is often a tendency for offenders to abuse the victim in a way that replicates their own experience of abuse (Hilton & Mezey, 1996).

Beauregard and Proulx (2007) observed a similar set of dynamics in their sample of sexual killers ($n = 10$) who targeted male victims. Indeed, they labeled this type of killer "the avenger." The researchers found that most of the individuals who corresponded to the avenger category of killer were involved in male prostitution. In most cases, it was the type of sexual activity requested by a client in such encounters which seemed to trigger memories of abuse from childhood, leading to homicidal rage. Although none of our participants were involved in prostitution, a similar dynamic seemed to be apparent in each of our cases. Unexpected triggers of the abuse unleashed the violence and in most cases, the victim held symbolic significance for the perpetrator.

Theme 2: Homicidal Impulse

The concept of 'homicidal impulse' is an important feature in Schlesinger's (2004, 2007) understanding of the compulsive murderer. Schlesinger believed the compulsion to be strongly associated with sexual arousal. The compulsive murderer was seen as driven by intense and unrelenting sexual fantasies which ultimately involve the killing, usually by asphyxiation, of another human being.

It was unclear in the present analysis exactly what factors contributed to a release of the tension state. However, of the five participants whose offenses corresponded to this theme, three highlighted alcohol and illicit substances as a major disinhibitor. The other two participants described the tension state as becoming increasingly difficult to manage and eventually reaching a point where their internal resources could no longer contain it.

In the works of Schlesinger (2004, 2007), Meloy (2000), and others, the impulse to kill in sexual killers is closely related to sadism and sadistic sexual fantasy. However, none of the participants in the present study described any feeling of sexual arousal associated with their impulse. As predicted by Schlesinger, they did describe very strong urges to take another person's life, characterized by intense feelings of anxiety and worry which made the drive difficult to resist. However, the impulse was more closely related to intense feelings of hatred than of sex. The impulse appeared to serve a means of avenging, in some way, the abuse that had been encountered in childhood

previously. It is interesting that one participant described feeling “clean” and “calm” after he had finally “given up the resistance to kill,” and others talked of a sense of “relief.”

Four out of the five participants who described this phenomenon had killed at least two victims, two of them were serial killers. Three out of the five described asphyxiating their victim to death, one used a knife and the other used hammer blows. The notion of homicidal impulse has not been highlighted as a specific feature in any of the motivational models on sexual homicide and there is little other research exploring it. Given what Schlesinger has written about the subject and what we have found in the present study, homicidal impulse is more likely to be a feature of the serial sexual homicide offender.

Theme 3: Events Leading to a Catathymic Reaction

This theme was present in four of our participants. All four described a significant event in their lives, sometimes stemming from childhood and other times stemming from young adulthood which they attached great significance in terms of understanding their homicides. In one case the event centered on grievance, in another rejection, and in two other cases, impotence. However, in all cases, an extremely strong negative affect was attached, and at some point during the process, this affect had become fused with their sense of sexual identity.

The literature on sexual homicide is consistent in suggesting that many offenses are motivated by anger (Beauregard & Proulx, 2002, 2007; Beech et al., 2005; Clark & Carter, 1999). However, few studies have explored in detail the nature or cause of the anger which we argue is far more important in terms of formulating motive. Anger was an important antecedent in the offenses of all participants in this theme, but a feeling of hate was described with more credence by our subjects in the 48 hr preceding their homicide. The experience of hate could be channeled externally (i.e., to a particular target or victim group) or internally, resulting in low self-esteem and poor relationship skills. However, in all cases participants traced the emotion back to the original event which they could not deal with.

It is interesting to note that what initiated three of these homicides was a comment, often innocuously made by the victim which just happened to remind the offender of the event or conflict which he had been struggling with. In all cases, the conflict carried with it an intense degree of negative affect (i.e., hate and anger) which appears to have been unleashed in full force upon the victim. In three cases, there was evidence to suggest that the sexual element of the offense was planned, although not in any great detail and

certainly not to the degree one would expect from a compulsive killer. Furthermore, in all cases there was evidence of “over-kill,” meaning that the injuries inflicted on the victim far exceeded what would have been necessary to cause death.

Our findings in relation to this theme are partially consistent with the literature on catathymia, and, in particular, the acute catathymic category of sexual homicide described by Schlesinger (2004, 2007). That is, trauma or conflict that has been present in an individual for many months or years becomes fused with intense levels of negative emotion as well as sex. The emotion is then released onto a victim with fatal consequences, although generally has the effect of alleviating the tension. We argue for only partial support because most of our cases contained features of both the catathymic (i.e., anger driven) and compulsive (i.e., sadistically driven) categories of killer.

Theme 4: Emotional Loneliness

Emotional loneliness was the most consistent theme in our analysis. It was present in six of our cases. Emotional loneliness is a fairly common finding in sexual homicide perpetrators, perhaps even more so than sexual aggressors of women who do not kill their victims (Grubin, 1994; Milsom et al., 2003).

According to Marshall (1989), social isolation can be seen as a form of psychological suffering which can lead to violence. It has been a consistent feature in motivational models of sexual homicide. In the FBI model (Burgess et al., 1986), for example, emotional loneliness was perceived as the result of childhood victimization experiences and as a major precursor for the development of deviant fantasy. This pattern was observed in some of the homicide narratives in the present study, but not all. In some participants, an experience of isolation appeared to have existed since early childhood and in the absence of abuse.

In the absence of any objective developmental evidence, it is difficult to say in the present study why so many of our participants experienced emotional loneliness from such a young age. We cannot rule out the possibility that the experience of loneliness was the result of negative symptoms associated with a mental illness in some of our participants. However, from the descriptions of their experiences, there did seem to be a relatively strong association with sexual victimization, and this is consistent with previous research on sexual killers (e.g., Burgess et al., 1986).

Linking Themes Together

We found evidence for the anger and sadistic pathways in our sample, but there was little indication to suggest that participants killed purely for

instrumental reasons. This may have something to do with the fact that all of our participants were recruited from a mental health setting and therefore deemed not fully legally responsible for their crimes, but it is also in agreement with acts of violence perpetrated by people with schizophrenia which tends to be expressive rather than goal directed. It is reasonable to hypothesize that offenders who kill purely for instrumental reasons are more likely to be deemed fully responsible in the eyes of the law, as killing to destroy evidence clearly denotes some degree of rationality and consequential thinking, although this has not been investigated empirically. More will be said about the possible impact of mental disorder on the offenses of our participants below. Here, we make an attempt to link themes together in the hope of developing a more complete understanding of motivation.

Although there were several between-subject inconsistencies, the emergence of a sadistic motivation is captured in Theme 1 of our analysis (Avenging sexual abuse). In most cases, extreme physical and sexual abuse suffered from an early age throughout childhood led to the development of emotional loneliness (Theme 4). For this type of offender, loneliness led to a retreat into the child's internal world and the use of fantasy serving to regain a sense of mastery and control. As the child developed, fantasies became increasingly aggressive and an impulse to kill (Theme 2) slowly emerged. This theme was particularly common in those with multiple victims. In such cases, the impulse did not seem connected to the offenders' own deviant fantasy system as the literature would predict (e.g., Schlesinger, 2004, 2007), but more a feature of their intent to avenge, in some way, the sexual abuse/torture that they suffered in childhood. This pathway and the sequences which emerged in our analysis are highly consistent with previous motivational models of sexual homicide.

Offenses that appeared consistent with the anger pathway were preceded by an event that led to a catathymic reaction (Theme 3). In most cases, the event challenged the individual's sense of identity, including sexual identity, or transgressed how they believed others should behave (e.g., women should not sell their body for sex). In the anger pathway too, emotional loneliness (Theme 4) emerged out of an inability to cope with intense negative emotion, but its effect on the individual was different to the sadist. Instead of the individual retreating into their own world and fantasizing how they wanted things to be, the angry individual became detached from the rest of society and was generally thought of by others as "odd." Whether or not a homicidal impulse occurs in this type of offender may depend on how the catathymic reaction is processed. If the offender is aware of such emotions and attributes a cause to their origin, then he may develop an impulse to kill. This could manifest in a specific target or

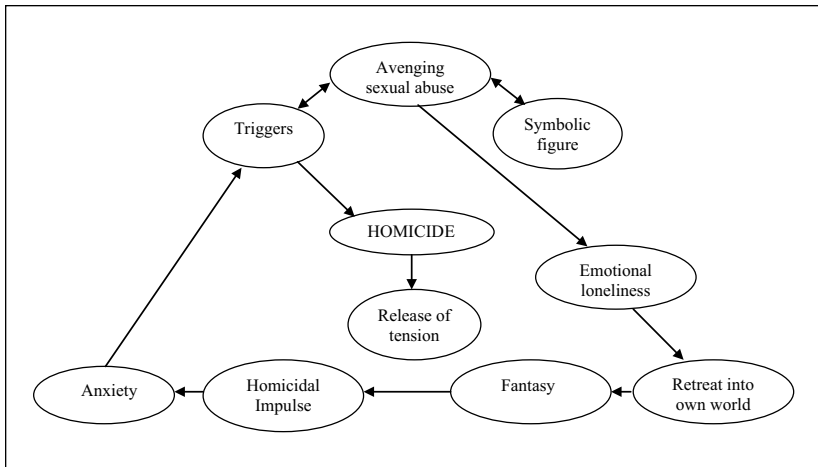


Figure 5. Sadistic pathway mind map.

group of targets in the case of the serial killer (e.g., prostitutes). If the individual is unaware of the catathymic dynamic then the trigger for the homicide will likely occur as a feature of the interaction between the offender and the victim, for example, the victim mentioning something which just happens to unleash pent-up negative emotion connected with the conflict. See the thematic mind maps in Figures 5 and 6 for a diagrammatic representation of how our themes fit together.

Impact of Mental Disorder

To what extent mental disorder had an impact on the outcome of our participants' offenses remains unclear. Four participants had a diagnosis of schizophrenia, which is quite rare in cases of sexual homicide (Firestone, Bradford, Greenberg, & Larose, 1998). Positive symptoms (i.e., command hallucinations) were thought to play a role in one serial case as the participant complained of hearing voices instructing him to kill shortly after his apprehension. There is some doubt, however, as to the veracity of his claim, as accounts of the participant's story have not been consistent. In other cases, mental illness appeared to play a less direct role in the offenses of our participants; resulting in a disorganized mental state that compromised effective decision making. In this way, the mental illness was perhaps better viewed as a disinhibitor of violence, rather than having any direct influence per se.

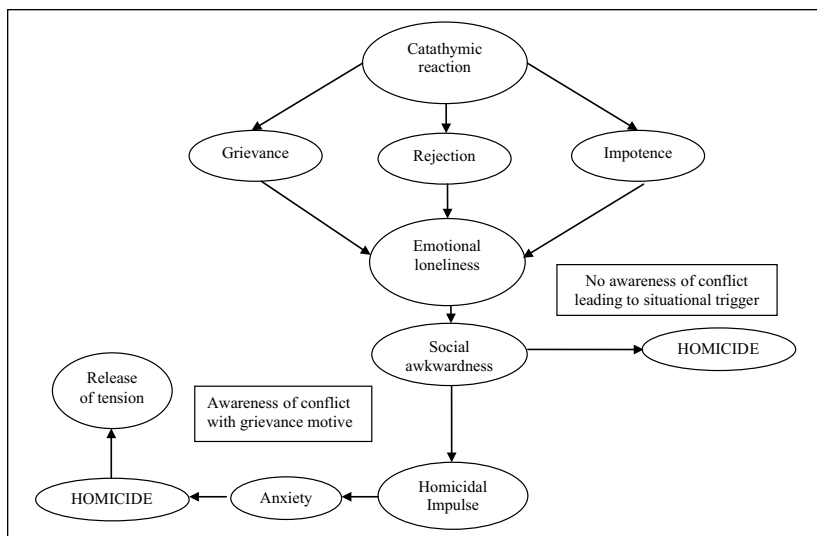


Figure 6. Anger pathway mind map.

Limitations of the Present Study and Suggestions for Future Research

A major weakness of this study concerns the small sample size used. In addition, sexual homicide offenders are a rare breed of sex offender, and those with major mental disorders or personality disorders to the severity that their culpability for the offense is reduced, are even rarer. Therefore the generalization of results to other groups of sexual offenders or indeed other groups of sexual homicide offenders is very limited.

In terms of future research, it would be interesting to examine the motivations of sexual homicide perpetrators with and without mental illness to determine any similarities and differences. Also important would be to determine the commonality of the themes identified in the narratives of these offenders versus other mentally ill offenders of similar, but not sexually motivated, crimes. Many of the themes identified in our participants are commonly reported in the literature on mental illness and may thus be features of the illness rather than motivation for sexual homicide.

Conclusion

The results of this study indicate that the motivation which lies behind sexual homicide is far more complex than previous research suggests. Our study

provides partial support for motivational models of sexual homicide, as well as typological studies and the catathymic process described by Schlesinger and others (e.g., Meloy, 2000; Schlesinger, 2004, 2007). However, none of our participants were found to fall convincingly into one pathway or another. We argue that motivational models underestimate the power of the situation in cases of sexual homicide, and although sadism and anger are important antecedents to such crimes, they do not usually account for why a victim ends up being killed. Themes of sexual abuse and other traumatic events, as well as social isolation, and an impulse to kill are all important factors when attempting to understand why an individual ends up killing in sexual circumstances. They will not be present in all cases of sexual homicide, and how they fit together in the formulation of an offense will depend very much on the uniqueness of the offender and the interaction with his victim.

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References

- Aggrawal, A. (2011). *Necrophilia: Forensic and medico-legal aspects*. Boca Raton, FL: CRC Press.
- Arrigo, B. A., & Purcell, C. E. (2001). Explaining paraphilias and lust murder: Toward an integrated model. *International Journal of Offender Therapy and Comparative Criminology*, 45, 6-31.
- Beauregard, E., & Proulx, J. (2002). Profiles in the offending process of non-serial sexual murderers. *International Journal of Offender Therapy and Comparative Criminology*, 46, 386-399.
- Beauregard, E., & Proulx, J. (2007). A classification of sexual homicide against men. *International Journal of Offender Therapy and Comparative Criminology*, 51, 420-432.
- Beauregard, E., Proulx, J., & St-Yves, M. (2007). Angry or sadistic: Two types of sexual murderers. In J. Proulx, E. Beauregard, M. Cusson, & A. Nicole (Eds.), *Sexual murderers: A comparative analysis and new perspectives* (pp. 123-141). Chichester, UK: Wiley.
- Beech, A. R., Oliver, C. J., Fisher, D., & Beckett, R. C. (2005). *STEP 4: The sex offender treatment programme in prison: Addressing the offending behavior of rapists and sexual murderers*. Birmingham: University of Birmingham.

- Beesdo, K., Knappe, S., & Pine, D. S. (2009). Anxiety and anxiety disorders in children and adolescents: Developmental issues and implications for DSM-V. *The Psychiatric Clinics of North America*, 32, 483-524.
- Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- Brittain, R. P. (1970). The sadistic murderer. *Medicine, Science and the Law*, 10, 198-207.
- Burgess, A. W., Hartman, C. R., Ressler, R. K., Douglas, J. E., & McCormack, A. (1986). Sexual homicide: A motivational model. *Journal of Interpersonal Violence*, 1, 251-272.
- Clark, J., & Carter, A. (1999, September). *Sexual murderers: Their assessment and treatment*. 18th Annual Research and Treatment Conference, ATSA, Lake Buena Vista, FL.
- Douglas, J. E., Burgess, A. W., Burgess, A. C., & Ressler, R. (1992). *Crime classification manual*. Lexington, MA: Lexington Books.
- Firestone, P., Bradford, J. M., Greenberg, D. M., & Larose, M. R. (1998). Homicidal sex offenders: Psychological, phallometric and diagnostic features. *Journal of the American Academy of Psychiatry and Law*, 26, 537-552.
- Folino, J. O. (2000). Sexual homicides and their classification according to motivation: A report from Argentina. *International Journal of Offender Therapy and Comparative Criminology*, 44, 740-750.
- Francis, B., & Soothill, K. (2000). Does sex offending lead to homicide?. *Journal of Forensic Psychiatry and Psychology*, 11, 49-61.
- Geberth, V. J. (1996). *Practical homicide investigation: Tactics, procedures and forensic techniques* (3rd ed.). Boca Raton, FL: CRC Press.
- Glasser, M. L., Kolvin, D., Campbell, A., Glasser, I., & Farrelly, S. (2001). Cycle of child sexual abuse: Links between being a victim and becoming a perpetrator. *The British Journal of Psychiatry*, 179, 482-494.
- Greenall, P. V. (2013). Understanding sexual homicide. *Journal of Sexual Aggression*, 18, 338-354.
- Grubin, D. (1994). Sexual murder. *British Journal of Psychiatry*, 165, 624-629.
- Häkkinen-Nyholm, H., Repo-Tiihonen, E., Lindberg, N., Salenius, S., & Weizmann-Henelius, G. (2009). Finnish sexual homicides: Offense and offender characteristics. *Forensic Science International*, 188, 125-130.
- Hickey, E. W. (1997). *Serial murderers and their victims* (2nd ed.). Belmont, CA: Wadsworth.
- Hickey, E. W. (2002). *Serial murderers and their victims* (3rd ed.). Belmont, CA: Wadsworth.
- Hilton, M. R., & Mezey, G. C. (1996). Victims and perpetrators of child sexual abuse. *British Journal of Psychiatry*, 4, 408-415.
- Jespersen, A. F., Lalumière, M. L., & Seto, M. C. (2009). Sexual abuse history among adult sex offenders and non-sex offenders: A meta-analysis. *Child Abuse & Neglect*, 3, 179-192.

- Keppel, R. D., & Walter, R. (1999). Profiling killers: A revised classification model for understanding sexual murder. *International Journal of Offender Therapy and Comparative Criminology*, 43, 417-437.
- Kerr, K. J., Beech, A. R., & Murphy, D. (2013). Sexual homicide: Definition, motivation, and comparison with other forms of sexual offending. *Aggression and Violent Behavior*, 18, 1-10.
- Kocsis, R. (1999). Criminal profiling of crime scene behaviors in Australian sexual murders. *Australian Police Journal*, 53, 113-116.
- Marshall, W. L. (1989). Intimacy, loneliness and sexual offenders. *Behavior, Research and Therapy*, 27, 491-503.
- Meloy, J. R. (2000). The nature and dynamics of sexual homicide. *Aggression and Violent Behavior*, 5, 1-22.
- Milsom, J., Beech, A. R., & Webster, S. D. (2003). Emotional loneliness in sexual murderers: A qualitative analysis. *Sexual Abuse: A Journal of Research and Treatment*, 15, 285-296.
- Myers, W. C. (2002). *Juvenile sexual homicide*. San Diego, CA: Academic Press.
- Porter, S., Woodworth, M., Earle, J., Drugge, J., & Boer, D. (2003). Characteristics of sexual homicides committed by psychopathic and non-psychopathic offenders. *Law and Human Behavior*, 27, 459-469.
- Proulx, J., & Sauvêtre, N. (2007). Sexual murderers and sexual aggressors: Psychopathological considerations. In J. Proulx, E. Beauregard, M. Cusson, & A. Nicole (Eds.), *Sexual murderers: A comparative analysis and new perspectives* (pp. 51-69). Chichester, UK: Wiley.
- Ressler, R. K., Burgess, A. W., & Douglas, J. E. (1988). *Sexual homicide: Patterns and motives*. New York, NY: Lexington.
- Revitch, E. (1965). Sex murder and the potential sex murderer. *Diseases of the Nervous System*, 26, 640-648.
- Revitch, E., & Schlesinger, L. (1981). *The psychopathology of homicide*. Springfield, IL: Charles C. Thomas.
- Roberts, J. V., & Grossman, M. G. (1993). Sexual homicide in Canada: A descriptive analysis. *Annals of Sex Research*, 6, 5-25.
- Salter, D., McMillan, D., Richards, M., Talbot, T., Hodges, J., Bentovim, A., . . . Skuse, D. (2003). Development of sexually abusive behaviour in sexually victimized males: A longitudinal study. *The Lancet*, 361, 471-476.
- Schlesinger, L. B. (2004). *Sexual murder: Catathymic and compulsive homicides*. Boca Raton, FL: CRC Press.
- Schlesinger, L. B. (2007). Sexual homicide: Differentiating catathymic and compulsive murders. *Aggression and Violent Behaviour*, 12, 242-256.
- Sewell, L. A., Krupp, D. B., & Lalumière, M. L. (2013). A test of two typologies of sexual homicide. *Sexual Abuse: A Journal of Research and Treatment*, 25, 82-100.
- U.S. Department of Justice, Federal Bureau of Investigation. Criminal Justice Information Services Division. (2012). *Uniform Crime Report: Crime in the United States 2012*. Retrieved from <http://www.fbi.gov/about-us/cjis/ucr/crime->

in-the-u.s/2012/crime-in-the-u.s.-2012/offenses-known-to-law-enforcement/expanded-homicide/expanded_homicide_data_table_10_murder_circumstances_by_relationship_2012.xls

von Kraft-Ebing, R. (1886). *Psychopathia sexualis* (C. G. Chaddock, Trans.). Philadelphia, PA: F.A. Davis.

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