



Serial killers: II. Development, dynamics, and forensics



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ABSTRACT

Part I of this two-part article described the demographics, patterns, typologies, and motives of different subtypes of serial killers. Part II describes the development of the serial killer's drives and offense patterns. It discusses the brain mechanisms and dysfunctions that have been purported to underlie this type of extreme crime, as well as the cognitive, psychodynamic, and sociocultural factors that contribute to the development of the serial killer's relentless quest for victims. The article then discusses the practical forensic aspects of theories and knowledge about serial killers, specifically, the efficacy of behavioral profiling of offenders and the relevance of the insanity defense to serial killer cases.

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Contents

1. Introduction	13
2. Developmental histories of serial killers	13
2.1. Childhood characteristics	13
2.2. Adolescence and early adulthood	13
3. Neuropsychological concepts of serial killing	14
3.1. Aggression: Impulsive and predatory	14
3.2. Neurochemistry of violence	14
3.3. Psychophysiology of violence	14
3.4. Neuroimaging studies	14
3.5. Cravings, compulsions, and kindling	15
4. Psychological theories of serial killing	15
4.1. Psychodynamics	15
4.2. Cognitive style and cognitive distortions	16
5. Sociocultural theories of serial killing	16
5.1. Trauma control model	17
5.2. Subcultural theory	17
5.3. Routine activity theory	17
6. Toward a neuropsychodynamic model of serial killing	18
7. Forensic aspects of serial killing	18
8. Behavioral profiling	18
8.1. Origins and processes of behavioral profiling	18
8.2. Validity and usefulness of behavioral profiling	19
8.3. Research on behavioral profiling	19
9. Serial killers and the insanity defense	19
9.1. The insanity defense	19
9.2. Insanity defense standards	20

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9.3. Are serial killers insane?	20
10. Summary and conclusions	20
References	20

1. Introduction

Part I of this two-part article outlined the history of serial killers and described the varying patterns and motives for this type of crime. Part II examines the developmental factors, neuropsychodynamics, and forensic applications of serial killing.

2. Developmental histories of serial killers

Are serial killers born or made? For the past several decades, many law enforcement investigators and behavioral scientists have utilized a standard descriptive profile of serial killers, particularly those in the serial sexual homicide category, that has consisted of the following basic developmental and clinical features (Arrigo & Purcell, 2001; Briken, Haberman, Kafka, Berner, & Hill, 2006; Brittain, 1970; Burgess, Hartman, Ressler, Douglas, & McCormack, 1986; Canter, Missen, & Hodge, 1996; Chan & Heide, 2009; DeLisi & Scherer, 2006; Dietz, Hazelwood, & Warren, 1990; Egger, 2002; Flowers, 2002a,b, 2006; Folino, 2000; Gee, Ward, & Eccleston, 2003; Grubin, 1994a,b; Harbort & Mokros, 2001; Hazelwood, Dietz, & Warren, 1992; Holmes & Holmes, 2001; Langevin, 2003; Langevin, Ben-Aron, Wright, Marchese, & Handy, 1988; Lester, 1995; MacCulloch, Snowden, Wood, & Mills, 1983; Malmquist, 1996; Marshall & Barbaree, 1989; McKenzie, 1995; Meloy, 2000; Meloy, Gacano, & Kenney, 1994; Myers, Burgess, & Nelson, 1998, 2006; Myers, Husted, Safarik, & O'Toole, 2006; Myers, Eggleston, & Smoak, 2003; Oliver, Beech, Fisher, & Beckett, 2007; Palermo, 2004; Palermo & Kocsis, 2005; Prentky et al., 1989; Proulx, Beauregard, Cusson, & Nicole, 1996, 2007; Proulx, McKibben, & Lusignan, 1996; Purcell & Arrigo, 2006; Ressler & Schactman, 1992; Ressler, Burgess, & Douglas, 1988; Sears, 1991; Simon, 1996).

2.1. Childhood characteristics

Although serial killers typically reach the peak of their activity in their early 20s to mid-30s, their fantasized fusing of cruelty and sexuality usually begins in adolescence, sometimes in childhood, and develops over their lifespan. A number of serial killers have been illegitimate or adopted children and several were sons of prostitutes. Many were severely abused physically and sexually as children, and a number have had intensely ambivalent, smothering relationships with their mothers that were characterized by both maternal abuse and sexual attraction to the mother. There was often a strong family history of psychiatric disorders, substance abuse, and/or legal problems. However, the upbringing and family life of a number of other serial killers could not be characterized as pathological in any major sense; these children grew up in relatively stable homes with both parents present and did not describe any abuse history.

The play of children who later become serial killers commonly has a repetitive, stereotyped, aggressive pattern. These children often lie, steal, destroy property, set fires, and are cruel and callous to other kids. Many have shown the triad of bedwetting, firesetting, and cruelty to animals that predicts antisocial behavior in later years (Pallone & Hennessy, 1996). In particular, many have especially enjoyed torturing animals from an early age. Most have grown up shy, lonely, highly sensitive children, with feelings of being rejected, unloved, and neglected, and harboring a baseline hostility toward specific persons and/or the world at large. A few, however, have reportedly been gregarious, extroverted conversationalists. In such cases, their outward behavior is

incongruous with their basic inner feelings; they have learned to “play the game.” Most would meet some or all criteria for conduct disorder as children, and for antisocial, narcissistic, and/or schizoid personality disorder as adults. Many have records of previous arrests and convictions for a wide variety of crimes, while others remain under the legal radar until their serial killings are discovered.

2.2. Adolescence and early adulthood

Odd and isolated since childhood, the future serial killer turns inward and nurtures sadistic sexual fantasies, sometimes accompanied by transvestism, voyeurism, exhibitionism, and other fetishes, usually involving violent pornography. The early fantasies may consist of elaborations on certain actual experiences or may be stimulated by “experiments” conceived in various types of movies, magazines, video games, Internet porn, combat websites, and so on. Some of this material may be integrated into actual sexual experiences or into masturbatory fantasies. At some point, the individual begins to incorporate actual people he knows into his sexually murderous fantasies and begins to mentally rehearse more realistic scenarios for stalking, abducting, and torturing victims to death. In these developing fantasies, as in the subsequent actual killings, the victims become depersonalized, reduced to contemptible objects that exist solely for the gratification of the perpetrator.

As adolescents and young adults, these subjects' criminal careers often begin with assault and escalate to battery, arson, rape, and eventually murder. Once they have fully acted out and gotten away with their sexually violent fantasies, they feel increasingly empowered. The killings feed their fantasies of invincibility which spur further killings. Over time, the abduction, torture, and murder sequences become more ritualized and more refined, and the killers learn from their near-miss mistakes, becoming increasingly efficient in their killings and evasion of capture. Even at this latter stage, fantasies may still be employed between actual crimes because, unlike reality, the fantasied scenario can always be “perfect.”

Consistent with Simon's (1996) contention that “bad men do what good men dream,” many people have sexual fantasies, even sadistic sexual fantasies. However, only a very small number of those individuals have either the desire or the wherewithal to cross the line into actual physical violence against real human beings. For example, long before the widespread use of the Internet, Crepault and Couture (1980) studied a sample of 94 “normal” men (i.e., having no legal or mental health histories) and found that 66% of them engaged in regular sexual fantasies of any type, with a smaller but significant proportion reporting that they enjoyed fantasies of bondage (39%), rape (33%), other sexual aggression (27%), and humiliation (15%). Experts from the time of von Krafft-Ebing (1898/1965) to the present (Chan & Heide, 2009) have recognized that it is a singular lack of conscience combined with an inflated sense of entitlement that characterizes those sadistic criminals that cross over the line into actual predation on other people.

One representative clinical investigation of the historical psychological dynamics of future serial sexual murderers comes from an in-depth study of adolescents by Johnson and Becker (1997) in the form of detailed case histories of nine 14- to 18-year-old males who were referred to the authors for a forensic evaluation after having committed some non-sexual but violent legal offense and who, in the course of the examination, had expressed a fascination with serial killing, including the desire to do it.

These adolescents reported repetitive and explicit fantasies of sexual torture, mutilation, and murder, dating from an early age, and increasing

over time. The sexually violent fantasies were described as arousing and exciting by these youths; in fact, the types of sexual fantasies reported by these adolescents were strikingly similar to those described by established serial killers who have been apprehended and interviewed. Some of these boys had already begun to practice their sadistic craft on pets and other animals. This study confirmed that the evolving nature of the sexually sadistic fantasy life seen in nascent serial killers often begins in childhood and adolescence and is a key factor in identifying youth who are at risk for becoming sexually sadistic serial murderers.

In a subsequent study of 61 convicted serial killers, Harbort and Mokros (2001) found that they were most likely to be of average intelligence, and only three (5.2% of the sample) reported having been sexually abused as children. Psychological descriptors used to characterize these murderers included lack of empathy, hostile emotional state, emotional instability, egocentricity, lack of responsibility, low frustration tolerance, poor impulse control, and low self-confidence. Except for the last descriptor, the rest are all hallmark traits of narcissistic and antisocial personalities.

3. Neuropsychological concepts of serial killing

Much evidence points to neurological and neuropsychological factors in criminal aggression in general and sadistic serial killing in particular (Anderson, 2007; Miller, 2000, 2012; Pallone, 1996; Pallone & Hennessy, 1996; Raine, 1993, 2013; Volavka, 1995, 1999; Walsh, 2002; Walsh & Bolen, 2012). One problem has been that most current neuropsychological theories tend to be too narrowly localizationistic, prompting the need to look for a more integrative psychological-neurobehavioral-ethological theory that blends brain, mind, individual development, phylogenesis, and situational factors. This represents a move away from a reductionistic approach, and encourages a more systemic and interactive understanding of the brain's role in violent behavior (Martell, 1996; Miller, 1986, 1987, 1988, 1994, 1998, 2000, 2008, 2012; Pallone & Hennessy, 1996; Raine, 2013; Volavka, 1995).

3.1. Aggression: Impulsive and predatory

In the ethological literature on aggression, one of the most widely validated behavioral and neurobiological distinctions is between affective (or impulsive) aggression, and predatory aggression (Eichelman, 1992; Eichelman & Hartwig, 1993; Kitaëff, 2011; Meloy, 1997; Volavka, 1995).

Affective aggression involves high states of emotional and physiological arousal and typically occurs in ritualized intraspecies fighting for food, territory, mates, and social status. One thinks of two wolves in a pack battling over top-dog rank, or two rival human gang members signifying, cursing, or threatening each other with gestures, fists, or weapons. In natural environments, the usual purpose of affective aggression is to intimidate and dominate rivals within an established social hierarchy, so serious physical injury usually does not occur. Actual death of one of the combatants is rare and probably accidental, although for modern humans, access to technologically lethal weapons makes death more likely.

Predatory aggression is more “cold-blooded,” involves low emotional and physiological arousal, usually requires some degree of preparatory stalking, and typically occurs across species, especially between hunter and prey, with the goal clearly being to kill and consume the prey animal for sustenance, not out of hatred or revenge: “it’s business, not personal.” One thinks of a leopard quietly tracking a gazelle, before rushing in for the kill, which usually involves a single, efficient bite to the throat, or a professional hit man patiently stalking his target, before quietly and efficiently dispatching him with a garrote, blade, or bullet. In many species, including humans, affective and predatory aggression can be mixed, and in higher animals, primates, and especially man, this includes the additional cognitive feature of more complex planning, symbolization, and socialization.

The meticulous stalking of his victim by the organized serial killer (see Part I) would appear to represent a clear expression of intraspecifically transposed predatory aggression. In addition, some types of mass murder, such as school shootings or terrorist bombings, can be characterized as a predatory mode of violence — planned, purposeful, emotionless, consistent with the “warrior mentality” (Hempel, Meloy, & Richards, 1999; Meloy, 1997, 1999; Miller, 1999). Recall that both affective-impulsive and predatory forms of aggression are not “pathological” in animal species; on the contrary, such creatures couldn’t survive without these traits and, under certain circumstances, the same may be true for humans.

For example, Barratt, Stanford, Dowdy, Liebman, and Kent (1999) asked a group of 216 college students to assess their own aggressive acts using a specially designed self-report questionnaire. The resulting reasons the students gave for acting aggressively could be classified into separate categories of impulsive and premeditated aggression. In particular, impulsive aggression was frequently followed by feelings of remorse for the acts and by internal confusion over the motives. On the other hand, premeditated aggression was related to more purposeful social gain and dominance, replicating the hierarchical structure seen in many species who live in mutually interdependent social groups.

3.2. Neurochemistry of violence

To summarize a vast neuropharmacological literature, serotonin is the neurotransmitter most clearly implicated in the inhibitory control of aggression within the brain's limbic system. Potentiation of gamma-aminobutyric acid (GABA) activity also inhibits aggression. Dopamine and norepinephrine generally enhance aggression, and it is possible that the noradrenergic system modulates the relationship between serotonin and aggression by raising the preparedness of the organism to react aggressively. High testosterone, the male sex hormone, is clearly associated with aggression, especially when paired with low serotonin, but its effect, particularly in primates and humans, interacts with social factors. In addition, hormones of the hypothalamic-pituitary-adrenal axis, such as cortisol, involved in the stress response to threatening situations, also play an intricate role in the regulation of aggression (Anderson, 2007; Raine, 1993, 2013; Raine, Lencz, & Scerbo, 1995; Volavka, 1995, 1999).

3.3. Psychophysiology of violence

One of the most frequently observed electroencephalographic (EEG) abnormalities associated with violence consists of excessive theta activity, an abnormality consistent with the *underarousal theory of psychopathy*, which posits that psychopaths seek excessive stimulation through antisocial behavior to compensate for their constitutionally low levels of physiological arousal; that is, they are *sensation-seekers* (Raine, 1993, 2013; Raine et al., 1995; Raine, Venables, & Williams, 1990; Williams, 1969; Zuckerman, 1979, 1990, 1991). Additional psychophysiological evidence for underarousal includes long latency brainstem averaged evoked responses (BAERs), significantly lower resting heart rates, and reduced skin conductance activity. Yet, psychopathic subjects also show enhanced P300 amplitudes, indicating increased attention to stimuli of interest. If serial killers are indeed a particularly lethal subspecies of psychopath, this would explain their relentless focus on stalking their quarry, as well as the orgiastic pleasure from torture and murder that their sensation-craving brains cannot obtain in any other way.

3.4. Neuroimaging studies

Neuropsychologically, the frontal lobes of the brain are crucially involved in behavioral self-awareness and self-control, while the temporal lobes contain many of the limbic structures that mediate emotional and motivation states such as sexuality and aggression (Miller, 1987,

1988, 1994, 1998; Volavka, 1995, 1999). Mills and Raine (1994) reviewed 20 brain imaging studies of violent and sexual offenders, using CT, MRI, rCBF, and PET technologies. The authors concluded that frontal lobe dysfunction was more associated with violent, nonsexual offending, such as murder, while temporal lobe dysfunction was associated with sexual, but relatively nonviolent offending, such as incest and pedophilia. Dysfunction that involved both regions of the brain was associated with offending that combined sexual and violent elements, such as rape. Another study (Volkow & Tancredi, 1987) revealed frontal lobe dysfunction in violent individuals who had no remorse for their actions, a prominent personality trait of psychopaths (Miller, 1987, 2008).

The neuroethologically-based categorization of aggressive acts into predatory vs. affective was studied by Raine et al. (1998) using PET scans with 15 predatory murderers, nine affective murderers, and 41 nonviolent controls. The results indicated that, while both affective and predatory murderers showed heightened activity in subcortical limbic brain regions, only affective murderers showed impaired frontal lobe functioning. Thus, affective murderers appear to be deficient in their ability to regulate and control aggressive impulses generated from subcortical limbic structures due to impaired frontal lobe regulation. Predatory murderers, however, retain the frontal lobe ability to direct, control, and modulate their activity, but they do so in the service of their limbically-driven compulsion for sex and dominance.

Although this was not studied directly, there is an intriguing potential correlation between these findings and the organized-disorganized dichotomy of serial killers discussed in Part I. While the crimes of the disorganized serial killer are impulsive and haphazard, the organized serial killer is the personification of malevolent strategizing. The planning, rehearsing, preparing, stalking, manipulating, and ritualized execution of his crimes bespeak a set of frontal lobes that would be the neuropsychological envy of any commercial, political, or military campaign planner. Like the broader class of narcissistic psychopaths from which he stems, his exquisite cognitive skills are used for the purposes of exploitation, domination, and fulfillment of his murderously obsessive passion. It is the source of this passion that is essential to understanding the driving engine of the serial killer's destructiveness.

3.5. Cravings, compulsions, and kindling

The sudden, explosive, paroxysmal nature of some forms of violence has led to the idea that they may represent a variant of seizure disorder, such as psychomotor or temporal lobe seizures (Money, 1990). However, paroxysmal brain activity need not represent frank seizures per se. Neurophysiological research has identified a process called *kindling*, by analogy to easily combustible material (e.g., dry leaves or twigs) that ignite when heated to a critical temperature, and then go on to facilitate the combustion of the main fuel pile (e.g., fireplace branches and logs). In experimental research, repeated stimulation of temporal lobe limbic structures, especially the *amygdala*, produces a cumulative increase in excitability and a lowering of the seizure threshold. That is, each stimulus makes the brain more sensitive, until finally, a subsequent minor stimulus that would have been insufficient in itself to evoke a seizure-like response now incites the already-primed brain into paroxysmal activity with correspondingly uncontrolled behavior. Kindling has been used as a model for the slow, progressive build-up of angry or dysphoric feelings in humans that eventually flashes over into full blown violence or depression (Adamec, 1990; Adamec & Stark-Adamec, 1983; Goddard, 1967; Miller, 1997; Pallone & Hennessy, 1996; Post, 1980; Racine, 1978).

Several researchers have proposed kindling as a neurophysiological model for predatory violence (Niehoff, 1999). Simon (1996) believes that kindling may have specific applicability to serial sexual murderers because of the escalating pattern of killings, the build-up of dysphoric tension prior to each killing, and the relief felt after the killings. It may be that serial killers have an unrecognized, aberrant, or atypical form

of mood disorder, so that torturing helpless victims to death literally affords them an exhilarating, if perverse, antidepressant high.

This compulsive aspect of serial killing may actually represent an extreme subtype of a more general typology of cravings, addictions, compulsions, and so-called “irresistible impulses” (Soutullo, McElroy, & Goldsmith, 1998). In DSM-IV-TR (APA, 2000) and DSM-5 (APA, 2013), the essential feature of an *impulse control disorder* is the failure to resist an impulse, drive, or temptation to perform an act that is harmful to the person or to others. One characteristic feature of impulse control disorders is that the individual typically feels an increasing sense of tension or arousal before committing the act and then experiences pleasure, gratification (the “rush”), and relief in the commission of the act. Behaviors included in this class of disorders are as diverse as *intermittent explosive disorder* (paroxysmal attacks of extreme rage), *kleptomania* (compulsive stealing), *pyromania* (compulsive fire-setting), *trichotillomania* (compulsive hair-pulling), and *pathological gambling*. It has been hypothesized that serotonergic abnormalities underlie some of the impulsive and/or compulsive features of impulse control disorders, noradrenergic or dopaminergic abnormalities underlie their pleasurable or euphoric features, and abnormalities in all three systems underlie the affective dysregulation of these disorders (Simon, 1996; Soutullo et al., 1998; Stein, Hollander, & Liebowitz, 1993).

On this dimension, we might situate organized serial killers not on the extreme impulsive end, because unlike the pure impulsivist whose numerous and varied antisocial acts are impelled by the whims of the moment, many serial killers seem locked in to a particular form of violent expression: they cannot adequately release their tension in any way *but* the sadistic act. However, the “compulsive” quality of their murderous behavior lacks the overly self-reflective, ego-dystonic, anhedonic quality of true obsessive-compulsives: serial killers may say they are “driven” to kill, but they certainly enjoy doing it, feel entitled to do it, painstakingly plan out how they will do it, and rarely regret doing it.

4. Psychological theories of serial killing

A dramatic crime like sexually sadistic serial homicide might be expected to generate a plethora of psychological theories, spanning centuries. Here, we will consider a few of the more well-known representative modern conceptualizations.

4.1. Psychodynamics

Simon's (1996) approach places the underlying psychology of the serial killer not primarily in antisocial predation and narcissistic entitlement, but fundamentally in a core of self-loathing, from which the killer briefly relieves himself in the acts of controlling, torturing, and killing a victim. In this view, only the most intensely violent, sexually sadistic exploitation of his victims can bring the serial sexual killer out of an emotional deadness to life, temporarily enabling him to feel calm and relaxed. As noted above, many serial killers report a profound sense of relief after carrying out a torture and murder episode, stating that this act is the only way they can feel “normal” — at least until the urge builds toward another murder.

Similarly, Malmquist (1996) highlights the profound depression and despair reported by many serial killers just prior to their next murderous act, with the subjugation, degradation, and slow destruction of a helpless human being acting as a mood-elevating tonic for these murderers — the kind of perverse antidepressant function of serial killing noted earlier. However, many serial killers report no such dysphoric feelings and give every impression of killing simply because they revel in the control and power that their acts afford.

For all their individual permutations, Schlesinger (2000) maintains that the fundamental psychological dynamics of all true serial homicides can be distilled down to three core components: (1) sexual sadism, (2) intense fantasy, and (3) a compulsion to act out that fantasy. In any given serial murder case, all three components will be present,

but the proportion and intensity of each will differ from perpetrator to perpetrator, as follows.

Sadism. This is defined as sexual arousal derived from the physical suffering, humiliation, domination, and control of the victim, and is at the core of serial sexual homicide: these individuals kill sadistically because nothing else gives them the same kind of thrilling stimulation.

Fantasy. As noted previously, in the early development of the serial killer, fantasies of domination, control, and sexual aggression initially serve as mental rehearsal for the soon-to-occur behaviors, and fantasies are later used to relive and reinforce the pattern of killings once they have begun.

Compulsion to kill. Many offenders describe a state of mounting inner tension, precipitated and maintained by fantasy, that builds over time into an almost unbearable state, the only relief for which is obtained by the act of sexually sadistic murder. Once the homicide is carried out, the tension is discharged, and the offender feels a sense of relief and satisfaction — until the cycle begins again.

Schlesinger (2000) points out that, powerful though this compulsion may be, it does not constitute an “irresistible impulse” in the legal sense (also see below). Moreover, various descriptions by the offender of “another personality taking over” are not indications of multiple personality disorder or dissociation. The serial offender knows exactly what he is doing and he technically has volitional control over his actions but chooses to kill because he seeks the thrill and relief from his state of inner tension, much in the same way as a drug addict compulsively seeks his high, but can volitionally abstain if the costs are great enough, such as the risk of violating parole and going back to prison.

4.2. Cognitive style and cognitive distortions

The previous point is a crucial one for understanding the behavior not just of serial killers but of most “crimes of passion,” be they rape, assault, or murder. Many people *feel* compelled to take some kind of violent action, but most of us do not, even though we understand how good it might feel to “let it all out.” This may be because the act in question would violate our own personal moral code or it may simply be because we do not want to get caught and be sent to jail by the court or be consigned to Hell by God. For whatever reason is important to us, we *stop ourselves*, while the serial killer does not because carrying out his predatory crimes is of paramount importance to him. Some criminal psychologists (e.g., Samenow, 1984, 2002, 2007) assert that most criminals affirmatively choose to commit their crimes because they “think differently” than the rest of us. So it is legitimate to explore just what patterns of thinking might be involved in giving oneself license to brutally destroy another human being for one’s own gratification.

Palermo and Kocsis (2005) describe serial killers as having a particular *cognitive map*. They view the world as hostile and are correspondingly unable or unwilling to properly interact with other people. Their thinking is trapped in a circuitously narcissistic, isolative, and self-referencing cycle, which revolves around fulfilling their need for perverse stimulation to reduce their state of inner tension. The commission of their crime represents an act of narcissistic grandiosity, reinforcing their sense of entitlement to use other people for their own gratification and, with each act, reestablishes a certain degree of inner psychological homeostasis until the next time.

Research with rapists and other sexual offenders (Malamuth & Brown, 1994; Polaschek & Gannon, 2004; Polaschek & Ward, 2002; Scully & Marolla, 1984, 1985; Ward & Keenan, 1999) has established that many of these perpetrators possess particular attitudes and cognitive styles, which have been termed *implicit theories*. These are basic

views of the world and of themselves that allow the offenders to rationalize and justify their sexually predatory actions.

Beech and Mitchell (2005) carried out a systematic study of the cognitive styles and implicit theories of two groups of offenders: rapists and sexual murderers. The researchers found no significant differences in the kinds of implicit theories manifested by the two groups, but the shared implicit theories themselves fell into several categories:

It’s a dangerous world. “The bitch deserves it — they all deserve it.” This was the most common implicit theory found in sexual murderers and consisted of viewing other people, especially other women, as being unreliable, unfair, and abusive, thereby reinforcing feelings of anger and resentment against those perceived to have wronged the subject. This then often spurs a retaliatory response, either against a woman who was perceived to have offended the subject, or to a target of convenience that resembled the alleged betrayer in some way.

Male sex drive is uncontrollable. “We’re guys: we’re gonna do what we’re gonna do.” Three basic versions of this implicit theory were disclosed: (1) general feelings of powerlessness that shaded over into perceived inability to control their sexual behavior; (2) being overwhelmed by aggressive emotions that were externalized as an irresistible force; or (3) being overwhelmed by sadistic sexual fantasies and compulsive urges that were perceived as taking on a life of their own, making it “only a matter of time” until the crime erupted. *Women are sex objects.* “They’re women, sex is what they’re for.” This mindset views women as existing primarily to be at the sexual beck and call of men, not considered autonomous human beings with choices and priorities of their own.

Entitlement. “I take what I want.” Related to the above, this mindset harbors the internal message that the offender deserves sex because he has been aroused by a particular woman (“If she didn’t want it, she wouldn’t be dressed like that”) or were just entitled to take sex if they wanted to simply because they were powerful males (“Hey, if you date a tiger, you’re gonna get bit”).

Women are unknowable. “No one knows what women want.” This implicit theory was relatively rare in the study and was only noted in a few cases. Here, women are viewed as objects of inscrutable mystery and hence suspicion, exacerbating latent feelings of insecurity and inadequacy in these men, which often results in them regarding all women as deceptive and manipulative. This frustration and confusion would then lead to aggression to reassert control and “teach her a lesson” or “show her who’s boss.” Interestingly, the most common means of murder in this group was strangulation, which is a method of killing where the perpetrator has complete domination over the life of the victim to the point where he can literally control her every breath and prolong or shorten her life at will.

5. Sociocultural theories of serial killing

Predisposition is not predestination, and a person’s innate biological temperament and individual upbringing are always played out against the local and national culture in which he or she resides (Miller, 2008, 2012). Culture reinforces adaptively prosocial or antisocial behavioral tendencies which then, in turn, contribute to the interpersonal climate of that very culture, in a cyclical fashion (Anderson, 2007; Miller, 2012; Raine, 2013).

That the influence of the surrounding society cannot be discounted is evidenced by the differing prevalence rates in serial homicide in different regions of the United States (DeFronzo, Ditta, Hannon, & Prochnow, 2007), with California and Florida having between 3 and 5 times the rate of New York, Illinois, Ohio, and Pennsylvania. Something

in the social and cultural environments of these different regions must be contributing to so great a difference in the number of serial killings. Or, perhaps, milder weather in the two high-rate states means that more people are out and about, increasing the potential pool of victims. Related to climate, both states have large tourist industries, with greater numbers of visitors, seasonal workers, and transient residents, facilitating the comings and goings of geographically mobile criminals more so than would occur in the more demographically stable Northeast and Midwest states. More basic to serial killer dynamics per se, a number of theories have been offered to explain these sociocultural factors, the most prominent of which will be reviewed here.

5.1. Trauma control model

Hickey's (1997) *trauma control model* starts by considering the traditional biological, developmental, demographic, and familial factors, including childhood trauma, that contribute to criminality in general and serial homicide in particular. However, in this model, the potential for a sadistic sexual compulsion to become a series of homicidal acts must be disinhibited and activated by *sociocultural facilitators*, which inhere in the values and customs of the surrounding society. For example, an adolescent's aggressive and sexual urges might be sublimated into some form of productive activity (sports, military service) in a closely-knit, values-oriented culture; however, these urges may only be sadistically inflamed and facilitated in a society which glorifies violence and objectifies women through sexually violent videogames and easily available Internet pornography.

Again, all the slasher videos and hard-core porn in the world, titillating to the curious adolescent mind as they may be, is not automatically going to turn an otherwise well-socialized young man into a sadistic serial killer. But for a youth already harboring these dark urges, the cultural facilitators can easily be seen as giving "permission" to engage in the violent act: "It can't be that bad if I played in on my X-Box."

Holmes, Tewsbury, and Holmes (1999) suggest that the contributory role of trauma in the development of budding serial killers need not occur in the remote childhood past of these subjects, but may take place more contemporaneously in the lives of adolescents. In fact, certain segments of the population, such as residents of some inner-city neighborhoods, may be exposed to traumatically stressful events on a regular basis. Breslau and Davis (1992) and Breslau, Davis, Andreski, and Peterson (1991) found that a high proportion of young adults from economically depressed and crime-ridden neighborhoods showed classic signs and symptoms of posttraumatic stress disorder (PTSD). Precipitating events included sudden injuries, serious accidents, physical assaults, rape or attempted rape, threats to one's life, narrowly escaping injury in an assault or accident, and receiving news of the death or serious injury of a close friend or relative. For someone with an innate tendency to externalize traumatic events into sexually aggressive action, these types of experiences might well light the fuse that sparks intermittent explosions of violence.

Finally, as with innate predispositions to violence in general, it is probably the case that the influence of developmental trauma and the facilitation of sociocultural variables occurs on a continuum, ranging from subjects who would only be spurred to violence by the most adverse and/or permissive circumstances, to those whose sexually sadistic urges are so strong that they will inevitably be acted out, no matter what the personal history and surrounding environment may be.

5.2. Subcultural theory

Indeed, a number of sociocultural theories of serial killing largely dispense with internal psychological factors and focus more exclusively on the role of the social and physical environment. *Subcultural theory* (Wolfgang & Ferracuti, 1967) proposes that exposure to violent influences in the surrounding subculture may facilitate the transition from violent sexual urges to elaborated fantasies and finally to violent sexual

behavior. For example, today's adolescent who harbors sexually sadistic fantasies will quickly discover a smorgasbord of appetizing fantasy material just a few computer clicks away. Again, by itself, no book, no movie, no website, no video game ever turned a boy scout into a murderer, however, the narcissistically psychopathic sexual sadist-to-be may be able to nurture his torture fantasies and more rigorously study the craft of homicide in a culture that demeans human beings in general and women in particular, and that provides the technological means to spend hours a day steeping oneself in violent fantasy material.

5.3. Routine activity theory

Routine activity theory (Cohen & Felson, 1979) focuses specifically on the physical, structural, and social influences that influence a killer's opportunity to commit crimes, including serial murder. These include such factors as:

Availability of appropriate victims. For example, a college town filled with young women is likely to contain more potential victims than a middle-class bedroom community inhabited mostly by families and retirees.

Number of places for concealment. This is for both concealment of the perpetrator himself and for disposal of the victim's body, for example, a wooded rural area or abandoned inner-city district vs. a busy urban shopping district.

Population density. Large urban areas may provide the advantage of more anonymous victims to choose from, while less populated areas may offer fewer targets, but afford greater mobility and concealment of crimes and victims, for example a "torture shack" set deep in the woods or in an insulated basement.

Population characteristics. As noted earlier, larger, transient neighborhoods may afford the killer greater anonymity and opportunity to evade detection than smaller, more settled, closely-knit communities where everyone knows everybody else.

Population demographics. The opportunity for serial murder is generally higher in locales with more divorced women, single mothers, and unemployed women because these are potentially more vulnerable targets due to their being home alone much of the time or without other adults present for protection. Unemployment also means they are less likely to be afforded the insulation of a populated workplace and, if they do go to work, are more likely to depend on potentially less safe public transportation than the relative security of a private vehicle. Single women are also more likely to be relegated to job positions that involve off-hours, relative isolation, and poor security, all of which increase their potential as targets (Maume, 1989; Miller, 1999).

DeFronzo et al. (2007) systematically applied routine activity theory to the study of serial homicide rates and found that the interstate variation in the incidence of male serial killers noted earlier could be at least partially explained by three variables: (1) the percentage of the population living in urban areas; (2) the percentage of divorced people in the state; and (3) the percentage of single-person households. Thus, the common factor in accounting for higher serial murder rates in states like Florida and California appears to be the greater availability of suitable victims.

The lesson for both psychology and criminology is to be careful not to allow attention to psychobiological and individual developmental and familial factors blind us to the role of practical issues such as demography, sociology, and culture, precisely because it is upon these latter factors that social policies can have the greatest day-to-day control — we can improve lighting, make changes in zoning, and provide more police security far more easily than we can change a person's motivation. Accordingly, efforts at crime prevention should target not just

interdiction of offenders, but include preventive efforts to increase the safety of potential victims.

6. Toward a neuropsychodynamic model of serial killing

Serial killing, especially serial sadistic sexual homicide, may be viewed as a nonsocialized and consensually criminalized form of solitary human predation that occurs out of context of, and without the communal validation of, the individual's social group, as would occur in law enforcement or warfare. In essence, like a star football player who is expelled from the team for repeatedly tackling fans, or the rogue cop who habitually and gratuitously brutalizes innocent civilians, the predatory serial killer "doesn't play by the rules." He stalks and kills the wrong people and does not get our permission first. So we stalk and pursue him and try to apprehend him, as part of our law enforcement "manhunt."

The neuropsychodynamics of serial killing depend upon the subtype. Impulsive, violent, disorganized murders probably involve sudden episodes of disinhibition related to weakened frontal lobe control over limbically-evoked violence or the ability to postpone it, deflect it, or conceal the crime afterwards. Personality correlates would probably involve some permutation of antisocial and schizoid dynamics.

However, the planning and calculating capacities of the frontal lobes appear to work only too well in the cunningly efficient organized subtype of predatory serial killer, who shows, if anything, uncommon cleverness in stalking victims and eluding capture. Here, hyperactive temporal lobe-limbic mechanisms may give the behavior its stereotypical, repetitive, and driven quality. By this account, the predatory serial killer is literally a limbically-kindled engine of destruction. He will not stop and does not want to because nothing in life could possibly replace the thrill of dominating and destroying another human being. His intact cognitive planning skills are utilized in the service of his well-honed murderous craft, which he justifies to himself by his sense of superiority and by his disdain and hateful contempt for his inferior victims. His personality correlates probably involve combinations of narcissistic, psychopathic, and schizoid traits; he is the lone killer (in some cases, with an accomplice; see Part I) who is more clever than all of us; he is "entitled" to kill, and, aside from his penchant for a specific type of brutal murder, he may or may not fit the classical pattern of antisocial personality.

The sexual element of serial killing derives from the limbic fusion of sex and aggression that occurs commonly in many forms of normal sexual play, that becomes magnified during the rape frenzies of warfare or individual sex crimes, that may become permanently warped by an abusive but hypersexualized maternal upbringing, and that remain a stable feature in the neuropsychodynamics of the serial killer. Sexuality necessarily entails vulnerability, and that vulnerability can either be shared for the purposes of enhanced human intimacy, or exploited for the infliction of human cruelty and horror.

Finally, sociocultural factors provide the soil in which the developing serial killer germinates his sadistic fantasies and cultivates the means to carry them out. Large populations containing many anonymous, vulnerable, and marginalized victims, steeped in a cultural ethos that glorifies power and violence, especially sexual violence, will have higher rates of serial homicide than more closely-knit, values-oriented societies. It must be recognized, however, that even the most morally edenic society will always contain a few members whose selfish pursuit of their own satisfaction will eventually lead them to prey on others.

Thus, when we study serial killers, that very twinge of mixed fascination and revulsion we feel should remind us that the human capacity for empathic attunement to others is precisely what allows the police detective or FBI agent to kiss his wife and kids goodbye, and then go off to work where he will try to "think like a criminal" in order to heighten the chance of capturing and removing those true predators who's own sadistic pleasure is their only imperative.

7. Forensic aspects of serial killing

"SW,E?" When my students begin to choke under the weight of multiple, competing theories of any phenomenon, I invite them to ask the question that soon becomes stylized under the above abbreviation: "So what, Einstein?" In other words, what are the practical implications and applications of our scholarly understanding of the topic we are discussing, that is, how does it help us deal with this phenomenon in real life? This is what William James called the "cash value" of an idea. For the topic of serial killing, the two main areas of application that are usually discussed concern: (1) investigation of serial murders and apprehension of the perpetrators through some type of offender profiling; and (2) the role of the serial killer's neuropsychodynamics to questions of legal responsibility and culpability, that is, the insanity defense.

8. Behavioral profiling

Information from books, TV shows, movies, true and fictionalized accounts, and the media's general fascination with the dark side of human behavior all have combined to produce an explosion of interest in the field of criminal profiling over the past decade (Douglas & Olshaker, 1995, 1998; Hazelwood & Michaud, 1999; Innes, 2003; McCrary & Ramsland, 2003; Michaud & Hazelwood, 1999; Ressler & Schachtman, 1992, 1997; Vorpapel & Harrington, 1998). In academia, too, a growing number of masters and doctoral programs are allowing students to do research and dissertations in this area (Dowden, Bennell, & Bloomfield, 2007). Behavioral profiling research is being accepted for publication in prominent psychology and criminal justice journals and, indeed, the *Journal of Investigative Psychology and Offender Profiling* is entirely devoted to this topic.

However, a number of critics have expressed concern that the popularity and enthusiastic application of what has variously been termed *behavioral profiling*, *psychological profiling*, *offender profiling*, or *criminal profiling* have far exceeded the evidence for its scientific validity (Dowden et al., 2007; Hicks & Sales, 2006; Kocsis, 2009; McCann, 1992; Muller, 2000; Palermo & Kocsis, 2005; Snook, Eastwood, Gendreau, Goggin, & Cullen, 2007).

8.1. Origins and processes of behavioral profiling

The term *behavioral profiling* is generally understood to refer to "a technique for identifying the major personality and behavioral characteristics of an individual based upon an analysis of the crimes he or she has committed" (Douglas, Ressler, Burgess, & Hartman, 1986, p. 405).

Some form of profiling has always been a part of law enforcement criminal investigation. However, efforts by the Federal Bureau of Investigation (FBI) to develop and implement a formal and systematic process for crime scene profiling began only as recently as 1978, with the formation of the FBI's *Behavioral Science Unit*, or BSU, which evolved into the *Profiling and Behavioral Assessment Unit* (Annon, 1995; Douglas et al., 1986; Geberth, 1990; Hickey, 1997; Homant & Kennedy, 1998; McCann, 1992; Pinizzotto, 1984; Ressler et al., 1988). The profiling process was developed specifically to deal with cases of serial homicide and serial rape. The FBI currently has 12 full-time profilers who collectively are involved in about 1000 cases per year. In addition, many state and local police, typically FBI-trained, apply profiling to an unknown additional number of cases. With some slight differences in approach, profiling has also become popular in Canada, Great Britain, and the Netherlands (Dowden et al., 2007; Palermo & Kocsis, 2005; Wikin, 1996).

In cases of serial homicide, behavioral profiles typically involve a number of specific steps (Geberth, 1990, 2006; Kocsis, 2009; Miller, 2012; Turvey, 1999). These include: (1) survey of the crime scene and analysis of crime scene staging; (2) development of a victimology profile; (3) development of an offender profile. The model is based on the

idea that a particular offender will leave identifying signatures (see Part I) and other clues that will assist trained profilers in developing a psychological and behavioral description that can lead to his identification.

8.2. Validity and usefulness of behavioral profiling

Despite the emphasis on psychology, however, most research and education on profiling is done by law enforcement investigators, not psychologists, and tends to take a case-study rather than an empirical approach. Profilers as a group have not articulated a uniform theory of human behavior that guides their investigations, and it is often unclear as to whether they are trying to reconstruct the personality of a given offender or merely generating a loosely connected series of psychologically descriptive statements concerning the interpersonal style and the underlying motives of the suspect (Dowden et al., 2007). Nevertheless, over the past two decades, a number of forensic psychologists have examined the empirical basis for the behavioral profiling approach.

Profilers themselves like to assert that up to 50% of serial homicide cases are solved with the aid of behavioral profiling techniques (Holmes, 1989). However, aside from a few well-publicized successes, there have been quite a number of cases where such profiles have proven to be inaccurate, unhelpful, or misleading in solving crimes (Innes, 2003; Jeffers, 1992; Muller, 2000; Rossmo, 2009; Snook et al., 2007). This has led the pendulum of opinion to swing in the other direction, with some critics asserting that behavioral profiling is little better than astrology (Ainsworth, 2001), while others take a more middle ground in the debate over whether behavioral profiling is mainly a highly skilled art (Douglas & Burgess, 1986; Rossi, 1982; Turvey, 1999; Vorpagel, 1982; Vorpagel & Harrington, 1998) or should aspire to be a replicable, scientific technique (Canter, 2004; Kocsis, 2003a,b, 2010; Palermo & Kocsis, 2005).

8.3. Research on behavioral profiling

Pinizzotto (1984) surveyed law enforcement officers who had asked the FBI's BSU to develop a total of 196 offender profiles to assist in their investigations. Most of the officers reported that the FBI profiles were of some use in focusing their investigation, but less than half considered the profiles to be significantly helpful in solving their cases, and in only 17% of cases did the profiles directly lead to the actual identification of a suspect.

A subsequent study (Pinizzotto & Finkel, 1990) compared the skill and accuracy of five different groups in evaluating a previously solved murder case and rape case in which the outcome was known: (1) "expert profilers" (instructors in the FBI's BSU); (2) "trained profilers" (police personnel who had undergone training from the BSU); (3) police detectives with no formal training in profiling; (4) psychologists; and (5) university students. The expert and trained profilers were found to write longer and more detailed offender profiles and their profiles were ranked higher in overall usefulness by an independent panel of detectives. However, the profiles of the expert and trained profilers were actually the *least* useful in predicting the actual characteristics of the murderer, although they did somewhat better than the other groups in predicting the rapist's characteristics.

For their part, 70% of a group of 152 police psychologists surveyed by Bartol (1996) voiced serious skepticism about the validity and usefulness of the criminal profiling process. However, in another study (Torres, Boccancini, & Miller, 2006), simply changing the nomenclature from *criminal profiling* to *criminal investigative analysis* yielded a sharp increase in perceived scientific validity among respondents (Torres et al., 2006). Although the authors did not address this, it may be that in recent years, the term "profiling" has accrued an unfortunate burden of prejudice, having been used pejoratively to describe unwarranted stigmatization of certain ethnic groups, and this attribution may have unfairly tainted the term in other contexts as well.

Skeptical or not, might psychologists' unique training and knowledge of human motivation confer an advantage in using the profiling process more effectively? Kocsis, Irwin, Hayes, and Nunn (2000) directly compared the profiling skills of psychologists to that of police officers, and found that the only significant differences were that psychologists more accurately predicted the offender's physical features and offense behaviors. Bennell, Jones, Taylor, and Snook (2006) categorically assert that psychologists have no special insight into the criminal mind nor any special skills with regard to criminal profiling. They point out that in other forensic contexts, such as psychological evaluations for the courts, psychologists typically show marked disagreement with one another and specialized training seems to have no appreciable effect on the accuracy or usefulness of their reports (Bartholemew, 1981; Skeem & Golding, 1998).

This, however, may be generalizing from a few sensationalized "battles of the experts" that receive glaring media attention and that are dramatized on TV cop-and-lawyer shows. In my experience as a forensic examiner, it is rare for truly honest and objective evaluators to come up with diametrically opposed conclusions in evaluations for competency to stand trial or mental status at time of offense (insanity defense). Examiners may disagree on the precise diagnosis (schizophrenia, disorganized type vs. schizoaffective disorder) or the exact relationship of the clinical criteria to the legal standards (subject was delusionally paranoid at the time of the offense but was able to understand his actions vs. subject was unable to disobey command hallucinations).

However, most assessments of the same subject will yield a rough consensus because the examiners are using well-validate principles of psychological investigation combined with their own knowledge and experience to produce a credible assessment (Miller, 2012, 2013). The same probably applies to skilled criminal profilers: of course they are not *always* right, and different profilers may disagree on assorted details, but it would be surprising if, given the same data and using the same methods, they came up with gapingly-wide diverging profiles, especially on a consistent basis.

At present, the evidence for the overall validity of criminal profiles in solving serial homicides and other crimes appears weaker than at first suggested by the initial flush of enthusiasm (Hicks & Sales, 2006; Homant & Kennedy, 1998; Palermo & Kocsis, 2005; Rossmo, 2009); and behavioral profiling will no doubt ultimately be found to occupy a middle ground somewhere between preternatural infallibility and worthless psychobabble. In the meantime, most serious researchers and practitioners agree that the majority of crimes are solved by the proper practices of scientific forensic analysis and thorough detective work. In some cases, offender profiling may yield useful clues, but these should be seen as pieces of the larger puzzle that can occasionally yield useful information, and should rarely if ever be relied on to the exclusion of traditional evidence collection and analysis.

9. Serial killers and the insanity defense

Are serial killers mad or bad? Given the absolute level of raw evil that these crimes entail, it is understandable that sheer moral revulsion would militate against any sentiments of leniency or mitigation. However, this is a practical question that courts have to address: are there circumstances where a serial killer would be considered legally insane at the time of committing his crimes?

9.1. The insanity defense

Despite isolated media accounts of flagrant abuses of the insanity defense letting hard-core criminals go free, in reality, the defense of *not guilty by reason of insanity* (NRGI), or *not guilty by reason of mental disease or defect*, or simply the *insanity defense*, is raised as an affirmative defense in about one out of every 100 felony cases. In about half of these, the defendant is so obviously disturbed that both prosecution and defense agree to adjudicate the case as NGRI without trial. In another

quarter of these cases, the two sides come to an agreement during the trial, and so in only one-quarter of one percent of felony cases – one in 400 – does a TV-style “battle of the experts” ensue. That is because the law sets a relatively high legal bar with regard to a person’s criminal responsibility (Miller, 2012, 2013; Slobogin, 2007, 2010).

9.2. Insanity defense standards

A basic tenet of the American legal system is that, to be justly punished for a crime, a defendant must be proven to: (1) have actually committed the offense in question (*actus reus*); and to (2) have had the mental capacity to have committed the act consciously, knowingly, and purposefully (*mens rea*). The two major principles that guide insanity evaluations in the United States are the M’Naghten test and the American Law Institute (ALI) test; different states employ one or the other standard.

According to the M’Naghten test, in order to establish a defense on the grounds of insanity: “It must be clearly proved that, at the time of committing an act, the party accused was laboring under such a defect of reason, from disease of the mind, as to not know the nature and quality of the act he was doing, or if he did know it, that he did not know he was doing wrong.” In 1962, the American Law Institute drafted the Model Penal Code, which came to be known as the ALI test: “A person is not responsible for criminal conduct if at the time of such conduct, as a result of mental disease or defect, he lacks substantial capacity either to appreciate the criminality (wrongfulness) of his conduct or to conform his conduct to the requirements of the law.”

The chief differences between the standards is that M’Naghten is a purely *cognitive test*, according to which the defendant either did not know what he was doing during the commission of the crime, or else he could not distinguish right from wrong. ALI preserves the right–wrong standard but provides a *volitional prong*, i.e. even if the defendant understood what he was doing, and that it was wrong, he was substantially powerless to control himself. What both standards share is a fairly strict set of exclusion criteria to invoke a NGRI defense, as well as the requirement for presence of a recognized medical, neurological, or psychiatric disorder to account for the purported cognitive or volitional impairment. Clinically, there are very few mental disorders whose symptoms are sufficiently disabling to produce such an exculpatory level of impairment. Most qualifying syndromes would fall into the category of severe psychosis or some type of brain injury.

9.3. Are serial killers insane?

Note that the mere presence of a diagnosed mental disorder, no matter how severe, is not sufficient by itself to establish legal insanity. The disorder must directly impair the defendant’s ability to understand what he is doing, to comprehend that it is wrong, or to restrain himself from carrying out the act. As noted earlier, the cold, calculated, predatory manner in which the organized serial killer carries out his murders points, if anything, to extraordinary premeditation and planning. In addition, his orgasmic enjoyment of sadistic acts on the victim shows that he knows exactly what he is doing and wishes to do it as much as possible. The only conceivable theory for an insanity defense might be that the sadistic serial killers has a pronounced deficit in empathy, the kind of “moral insanity” or neuroemotional blind spot often described in the classic psychopath. In such a defense, the psychopathic serial killer is constitutionally incapable – due to a defective limbic system, say – to appreciate the wrongfulness of any act because he lacks the very biobehavioral substrate for a conscience. He is no more culpable for his acts than would a blind man who stumbles into another person and knocks him into traffic.

In practice, however, a diagnosis of psychopathy or antisocial personality disorder is virtually never successfully invoked as an insanity defense for any type of crime. If anything, depictions of the heartless, ruthless, predatory, and sadistic behavior of such a defendant is far

more likely to be considered an aggravating factor, seen as rendering the defendant impervious to rehabilitation and at especially high risk for reoffending (Palermo, 2004; Raine, 2013).

Some dissenting voices (Morse, 2008; Zavaliy, 2008) have recommended utilizing the weight of genetic and psychobiological data as evidence that psychopaths, which would include the remorseless serial killer, are truly incapable of controlling their behavior or understanding the true nature and quality of their actions, and are thus essentially “incurable.” Far from resulting in their release, however, these authors recommend using that information as grounds for indefinite preventive detention (*Foucha v. Louisiana*, 1992; *Jones v. United States*, 1983; *Kansas v. Crane*, 2002; *Kansas v. Hendricks*, 1997). To date, this argument has yet to be presented in an actual court case; however, it would be fascinating to hear such a court’s ruling on this matter, as it would open up an entire new universe of implications and complications of the “bad brain” defense for serial killers as well as others who are deemed incorrigible psychopaths (Miller, 2012).

10. Summary and conclusions

Part I of this two-part article described the demographics, patterns, typologies, and motives of different subtypes of serial killers. Here, in Part II, we have seen that the development of nascent serial killer, particularly the serial sadistic sexual homicide offender, involves a “perfect storm” of neurobiological, psychodynamic, and sociocultural factors to produce what is essentially a motivationally driven engine of destruction whose fusion of sex and aggression for maximum satisfaction will relentlessly express itself until the perpetrator is either dead or confined. Efforts to utilize theories and data about serial killers to develop behavioral profiles useful in identifying offenders have so far met with only weak success. Although characterized by varying degrees and types of psychopathology, few serial killers would ever meet the strict standards of cognitive and volitional impairment sufficient to successfully pursue an insanity defense. Our society seems to recognize that this singular species of offender may be a little mad, but we still consider him to be unspeakably bad. Like the sharks mentioned in the introduction to Part I, we may find these predators fascinating, but we do not want them anywhere near our own safe and peaceful swimming areas.

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