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Unmasking the Psyche: The Role of Antisocial Personality Disorder in Serial Killing

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Abstract: This paper explores the correlation between Antisocial Personality Disorder (ASPD) and serial killing, assessing the extent of their association. It examines ASPD's diagnostic criteria, root causes, and the role of neurological deficiencies and genetic factors in aggression. By analysing past research and considering environmental, societal, and psychological influences, the paper seeks to provide a well-rounded answer to the research question: To what extent is ASPD responsible for serial killing?

Keywords: unmasking the psyche, role of antisocial personality disorder, serial killing

INTRODUCTION

During the pandemic, with some free time on my hands, I often caught myself binge watching Netflix shows. One show that stood out to me was *Conversations with a serial killer: The Ted Bundy Tapes*. Hearing Bundy's story from law enforcement officials, psychologists and Bundy himself, I couldn't help but wonder what led him to commit such crimes. Was it something to do with his childhood, or deeper psychological issues? I wondered whether there were others like Ted Bundy and if they shared similar experiences.

As I dug deeper into the concept of criminality, I came across a strong link between mental illness and crime, with Antisocial Personality Disorder coming up repeatedly. Knowing I've always been intrigued by what drives people's actions, I decided to focus my project on the relationship between ASPD and serial killing.

A serial killer is defined as someone who commits at least three murders at different times, with intervals in between. These individuals usually target identical victims, use repetitive methods of killing, and show no signs of remorse (Weber, 2022). Such bizarre behaviours raise questions about their root causes; particularly the role of mental health in driving individuals to commit crimes (The British Psychological Society and the Royal College of Psychiatrics,

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2015). One disorder in particular that is linked to crime is Antisocial Personality Disorder (ASPD), which involves traits such as manipulation, deception, and a lack of empathy (Fisher et al., 2023), traits commonly seen in serial killers.

ASPD diagnosed individuals show repeated signs of aggression and violence; behaviours that may align with the ruthless ways in which serial killers commit their crimes (LaBrode, 2007). This alignment leads to the theory that ASPD is a key explanatory factor in understanding the foundation of serial killing. However, unlike many convicts with ASPD, serial killers exhibit a need for dominance and control, these traits go beyond the diagnostic criteria for ASPD (Miller , 2013). This brings to attention any other factors that may play an equally or more significant role in criminality. To understand serial killing, it is important to acknowledge the array of influences including neurological factors such as brain abnormalities, societal factors such as the role of media, and environmental factors such as childhood trauma on the development of these behaviours. For example, environmental factors such as toxic masculinity may lead to individuals mimicking aggressive behaviours (Huesmann & Taylor, 2006), the impact of childhood trauma may lead to the development of serial killing behaviours (Kumkarial & Tiwari, 2024), or the influence of popular shows such as *Ted Bundy : Falling for a killer* and *You* could lead to violence being glorified.

Evidently, ASPD alone may not be sufficient to explain the irregularities behind the motivations and behaviours of serial killers.

With the sole use of secondary data sources, this report attempts to contribute to a deeper understanding of serial killing, challenging reductionist explanations. By critically analysing the various factors that contribute to serial killing and assessing the strengths and weaknesses of ASPD as an explanation, the report intends to delve into the ways in which human behaviours drive individuals to commit the most disturbing crimes known to mankind.

The hypothesis argues that Antisocial Personality Disorder is a considerable factor in understanding serial killing, however it cannot be a standalone reason by itself.

This paper critically evaluates ASPD's role in serial killing while acknowledging influences such as childhood trauma, societal conditioning, and media exposure. By integrating secondary research, the study aims to challenge reductionist views and provide a nuanced perspective on criminal psychology.

METHODOLOGY

Secondary data sources have been chosen due to their efficiency, depth, and established literature. Analysing data sources ranging over the past three decades allowed the author of this paper to identify existing gaps in research and focus on tiny details, when necessary, through the systematic review, while simultaneously maintaining a broad and evaluative overview of the topic. Reviewing and evaluating over 50 research papers for the synopsis allowed the author to gather information that was relevant and appropriate to the hypothesis. Finally, the paper

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uses an evaluative approach to explore the role of ASPD on serial killing. While there was limited information available due to the niche topic, the research still provides valuable information regarding the research question along with potential areas for improvement.

LITERATURE REVIEW

Although rare, serial killing has intrigued both popular culture and the scholastic world. Research has allowed the human race to deepen its understanding of the topic by challenging inbuilt views of serial killers to be "born evil". Serial killing is usually categorised by the victim count, the motivations, and the duration of the crime, however definitions can vary. Pokel (2000) defines serial killing as killing two or more victims in separate events, on the other hand, according to Leenars et al. (2012) murder is defined by intentional homicide, where there is a purposeful use of force. Through existing research, including the ones mentioned, there has been ample information available on the gore details into the crimes. Numerous research into the murderers' life experiences elucidate the causes that lead to the commitment of these crimes.

Unfortunately, having multiple definitions of serial killing instead of a single agreed-upon definition creates issues in accurately defining the term. By looking into the details of the killer's upbringing, individuals may begin to empathise with their psychopathic characteristics and eventually excuse and justify their behaviours.

Although this paper focuses mainly on ASPD, it is imperative to account for the possibilities of other disorders governing serial killing.



Figure 4.1: "Psychiatric aspects of serial killers." In K. Bhui (Ed.), Psychiatry and crime (p. 52). Royal Society of Medicine Press Ltd. (Credit: Stone, 2007).

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Figure 4.1 shows the frequency of disorders in serial killers, with the most prevalent ones being ASPD and Psychopathy. It is crucial to acknowledge the role of Psychopathy and ASPD in forming aggressive behaviours. While ASPD focuses on irritability, Psychopathy focuses on instrumental aggression (Sheilagh & De Brito Stephane, 2008). With similar characteristics but different diagnostic criteria of the two, this highlights the need for more research on personality disorders. Additionally, researchers may fail to portray how incredibly difficult it is to accurately diagnose these disorders. This may result in misunderstandings and potentially raise sympathy for the killers if explanations are confused with justifications. Keeping these existing gaps in mind, this paper aims to explain the correlation between Antisocial Personality Disorder and Serial killing precisely.

Who is a Serial killer?

Serial homicide, being the rarest type of homicide, makes it challenging to define and study the concept as a whole, despite the innumerable amount of available research on the topic. The crimes serial killers commit are carried out by a compulsion to kill that goes beyond ordinary criminal behaviour (Zydney Mannheimer, 2011). The rarity of these crimes leads to difficulties in understanding serial killing as no singular framework perfectly encapsulates its nuances. Although any definition of a serial killer may be considered valid, having only one single framework would eliminate the confusion caused by multiple definitions (Ferguson et al., 2003). The most prominent definition of a serial killer originates from the Federal Bureau of Investigation (2008) which states that serial murder is "The unlawful killing of two or more victims by the same offender(s), in separate events."

This definition is globally accepted due to its simplicity and clarity however it merely covers just about the surface of the complexities surrounding serial killing.

The term "serial killer" first became popular with Jack the Ripper, a name synonymous with ignominy. With the depths of his crime and his true identity going undiscovered, curiosity grew about who he was, if there were more people like him, and what made him commit such acts (Thompson, 2018). Overtime, the term became associated with other notorious figures such as Ted Bundy, Jeffrey Dahmer, John Wayne Gacy, and Charles Manson (Black., 2013). With these crimes shocking yet fascinating the world, individuals began researching not just their acts but the different factors that influenced them. Holmes and Holmes (1998) developed a system to classify serial killers by analysing 110 cases and conducting interviews. They acknowledged that killers might display traits from multiple categories but argued that a dominant theme usually defines their classification.

They're typology includes -

- Visionary: Driven by hallucinations or voices, these killers believe they are being ordered by higher powers to murder, with their murders being task-focused.
- Mission-oriented: Motivated by a compulsion to eliminate groups they view as undesirable, hence viewing murder as a "purposeful duty"
- Hedonistic: Type of serial killer divided into two groups -

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- Lust killers: Murdering for sexual gratification, usually linked to necrophilia or similar acts
- Thrill Killers: Killing for "thrill" or excitement that dies down once the act is complete
- Power/Control: Pleasured by dominating and controlling their victims, prolonging the process for greater satisfaction (Holmes and Holmes as referenced in (Canter & Wentink, 2004))

In trying to comprehend serial killers, looking at their provocations helps deepen our understanding of their actions. Studies have repeatedly indicated that multiple serial killers have experienced some form of trauma such as physical abuse, emotional abuse and neglect, or witnessed violence growing up. Experiences like these can hinder the healthy growth of emotions, and such disruptions can result in unhealthy coping mechanisms and a feeling of emotional disconnect. Disorders like ASPD or Psychopathy may be more likely to develop under these circumstances (Fisher et al., 2023). It's important to understand the difference between the two disorders when examining serial killers. Many of them exhibit behaviours that match both disorders, but they may not fit explicitly into either category. Psychopathy explains the systematic nature of these crimes as it focuses on emotional detachment (Porter et al., 2021), however ASPD captures the ruthless methods used with its focus on deception and aggression. These behaviours usher as problems during childhood and progress into manipulative and violent behaviours in adulthood, making it difficult to sustain relationships or responsibilities (Bateman et al., 2013). Studying these disorders not only provides insights into the psychological aspects of serial killing, but also prompts considerations about other influences on shaping behaviours.

What is antisocial personality disorder?

According to Shin-Yee Wong, Antisocial Personality Disorder (ASPD) is characterised under personality disorders in the DSM-5; personality disorders are mental health conditions marked by unhealthy behaviours and patterns of thinking that disrupt relationships and daily life. These are grouped into three clusters:

Cluster A, Cluster B, and Cluster C.

ASPD, classified under Cluster B, is defined by traits like impulsivity, a lack of empathy, and a disregard for others. The DSM-5 lists the standards for identifying ASPD by a prolonged pattern of disregard for others' rights, this usually starts in childhood or early teen years and persists into adulthood.

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In order to be diagnosed with antisocial personality disorder a person must exhibit at least three of the behaviours outlined below.

Ι.	Failure to conform to social norms with respect to lawful behaviors as indicated by repeatedly performing acts that are grounds for arrest
2.	Deception, as indicated by repeatedly lying, use of aliases, or conning others for personal profit or pleasure
3.	Impulsivity or failure to plan ahead
4.	Irritability and aggressiveness, as indicated by repeated physical fights or assaults
5.	Reckless disregard for safety of self or others
6.	Consistent irresponsibility, as indicated by repeated failure to sustain consistent work behavior or honor financial obligations
7.	Lack of remorse, as indicated by being indifferent to or rationalizing having hurt, mistreated, or stolen from another



In order to be diagnosed, the person needs to 18 years old and display symptoms of Conduct Disorder (including aggression towards people or animals and causing damage to property) before turning 15 years old.

It is vital to stress that the diagnosis of ASPD cannot be related to any other mental illnesses like Schizophrenia or Bipolar Disorder. ASPD in the DSM-5 is similar to the concept of personality disorders with "dissociality features" in the ICD-11. While both explain similar patterns of behaviours, the ICD-11 focuses more on how much damage is done to a persons' life and relationships (Shin-Yee Wong, 2023).

ASPD involves a repeated pattern of violent behaviour responsible for disruption in society, hence leading to legal intervention. Diagnosed individuals may show little or no regard for laws or rules, and use others for personal gain. Nonetheless it should be noted that not all individuals with ASPD engage in such behaviours (Black, 2013). While the disorder has both genetic and environmental influences for its development, the biological factors seem to play a more significant role. Due to this prominence of the biological aspect, various researchers have classified ASPD as a neurodevelopmental disorder (Sahar, 2024). ASPD not only affects the ones diagnosed but also the ones around them. ASPD relationships may fall apart as these

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individuals have a tendency to exploit others, and being prone to impulsive decisions leads to frequent conflicts and arguments. While some may engage in high-functioning forms of ASPD where they can manipulate social situations for personal gain, others diagnosed may simply find themselves constantly in trouble with the law (Marzilli et al., 2021).

Development of ASPD

ASPD may be influenced by factors such as genetics and neurological issues that someone may have developed growing up, or may be a result of the interactions between early life challenges and other societal influences (Fisher et al., 2023).

Rautiainen et al. in their analysis establish a link between genetics and the development of ASPD. This study included twin and adoption studies showing a 50% rate of heritability. Other genetic studies on ASPD focus on two main genes, 5-HTT and Monoamine Oxidase A (MAOA) which are linked to impulsive and aggressive traits (Ma et al., 2016). Additionally, hormonal changes such as fluctuations in testosterone have been linked to aggressive behaviours (Batrinos, 2012). A recent study also found that the SLCO3A1 gene might increase the risk of developing ASPD by affecting hormonal regulation (Li et al., 2023), hence proving the role of biological factors in ASPD development.

In research conducted by Hofhansel et al, (2020) it was found that people with ASPD have less grey matter concentration in areas of the brain like the frontal lobe. Since the frontal lobe is responsible for decision-making and impulse control, this could explain why ASPD diagnosed individuals struggle with managing emotions. Likewise, dysfunction in the amygdala; an area for emotional processing, can lead to fear responses and reduced empathy (Raine & Yang, 2006).

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Figure 7.1: "Gray matter volume loss in subjects with Antisocial Personality Disorder (N=26) compared to controls (N=25) corrected for false discovery rate at P < 0.05." (Credit: Tiihonen et al., 2008).

Figure 7.1 shows the loss of grey matter in individuals with ASPD, further proving the influence of biological factors in influencing serial killing behaviours since this loss of matter would result in a lack of control of emotions and impulse, leading to reduced empathy and increased aggression. Advances in brain imaging like the one mentioned above, confirm the link between brain deficiencies and ASPD symptoms. Studies also focus on factors such as neglect, abuse or violence at home that can affect a child's brain development responsible for emotions and empathy (Katembu et al., 2023). This lack of nurture can make it hard for someone to empathise with others' suffering, a trait linked to ASPD (De Wit-De Visser et al., 2023). Situations before birth, including issues like substance abuse, alcoholism, or malnourishment during pregnancy, further increase the risks of the child developing ASPD later on in life (Disney et al., 2008). Finally, poverty, limited education, constant stress from a lack of resources, or being influenced by violent friends can lead to normalised violence and may encourage antisocial behaviours (de courson et al., 2023; Faris & Ennet, 2012). In the author's purview different combinations of these factors explain ASPD and it's essential to examine how these traits interact and influence the behaviours of serial killers.

Link between ASPD and Serial Killing

There are no exact numerical figures establishing the link between ASPD and serial killing, however the link between ASPD and crime cannot be overlooked. "Nearly one-third of incarcerated in prison were found to have antisocial personality disorder", as quoted by Seid

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Muhammad et al., (2022). ASPD involves the absence of emotions and a lack of empathy. This sense of separation increases the possibilities of murder allowing the killers to view their victims as objects rather than human beings. This absence of empathy leads serial killers to carry out their acts repeatedly without feeling any guilt (Saladino et al., 2021). The deceptive and controlling behaviours of serial killers allow them to manipulate and subdue their victims for psychological gratification (Layder, 2023). Serial killers also show ritualistic patterns of killing and may enjoy the act itself (Schlesinger, 2010), and these actions are associated with ASPDs characteristics of impulsivity which may develop into an urge for satisfaction. Those diagnosed are inclined towards aggression as they struggle to control their anger; serial killers take this tendency to an extreme by resorting to violence as a means to fulfil their desire for lust or dominance (Malizia, 2017).

Most of the convicted killers diagnosed with the ASPD exhibit similar behaviours. Jeffrey Dahmer's calculated and distinct approach to murder and control his victims (Higgs, 2012), stems from the detachment associated with ASPD, and Ted Bundy's charm and manipulative tactics to lure his victims reflect the nature of ASPD that played a role in his murders (Pedneault, 2013). Hence the author believes there is a strong correlation between ASPD and serial killing, however ASPD is not the standalone catalyst. Rather, it creates a psychological environment that increases the likelihood of these behaviours. These manipulative and antisocial traits are closely linked to the behaviours shown in serial killers, this establishes a connection between the two, however it does not solidify it.

Other factors that influence Serial Killing

Childhood Trauma and Abuse

Studies indicate a strong correlation between childhood trauma and violent behaviour. Abuse, neglect, or exposure to violence during formative years can impair emotional development and foster antisocial traits (Suman et al., 2023).

Genetic and Neurological Influences

Neuroimaging studies reveal that individuals with ASPD exhibit reduced grey matter in the prefrontal cortex, affecting impulse control and empathy (Tiihonen et al., 2008). Additionally, hormonal imbalances, particularly elevated testosterone levels, have been linked to aggressive tendencies (Batrinos, 2012).

3. Societal and Media Influences

Media portrayals of serial killers, such as in You or The Ted Bundy Tapes, may contribute to the glorification of violent behaviours, encouraging "copycat crimes" (Licausi, 2017). Additionally, cultural factors like toxic masculinity can normalise aggressive behaviour (Huesmann & Taylor, 2006).

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Figure 8.1: Forms of abuse that contribute to the development of serial killers (based on information from Suman et al., 2023)

CONCLUSION

Based on the evidences provided above it can be concluded that Antisocial Personality Disorder is a key explanatory factor of serial killing, however it may not be a sufficient explanation by itself. The characteristics of serial killing correlate to those of ASPD however there are significant differences between these two that need to be taken into account. While ASPD provides a structure for recognising characteristics among killers such as a lack of regard for societal norms, impulsive actions, and a lack of empathy in their behaviour, ASPD alone cannot elucidate homicides as it fails to consider the impact of psychological elements, environmental circumstances and the deliberate calculations in numerous instances of serial murders. As the results suggest, there are countless factors that need to be taken into account to fully explain serial killing and the behaviours that prevail alongside it, considering there was a significant link between these behaviours and childhood trauma.

In conclusion, ASPD serves as a perspective for grasping some facets of the killers' actions; it ought to be viewed as just <u>one</u> component of a comprehensive interpretation.

Gaps in Research and Future Scope

- **Interaction of Factors:** Most research isolates genetic or environmental influences rather than examining their combined effects.
- Lack of Female Serial Killer Studies: Existing research primarily focuses on male serial killers, limiting generalisability.

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- **Absence of Primary Research:** Future studies should include forensic psychologist interviews to enhance credibility.
- Focus on Prevention: Research on ASPD rehabilitation and early intervention remains limited.

Strengths and Weaknesses

Strengths:

- Thorough research and structured analysis.
- Balanced evaluation of ASPD's role in serial killing.
- Integration of real-world case studies.
- Critical assessment of multiple perspectives.

Limitations:

- Limited primary data sources.
- Lack of quantitative statistics on ASPD prevalence in serial killers.
- Challenges in accessing full research articles due to paywalls.

Reflections

Conducting this research refined my ability to critically analyse sources and structure a wellsupported argument. Initially, I believed ASPD to be the primary explanation for serial killing, but through deeper exploration, I realised the importance of multiple contributing factors. This project has reinforced my interest in forensic psychology and will serve as a foundation for future studies in criminal behaviour.

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