

## Chapter 6

## Discussion of Results

## 6.1 Integration and summary of results for individual number 1

Individual number 1 is a single Afrikaans speaking South African male in his mid- thirties. From his competency to stand trial evaluation it was determined that he was not experiencing any medical problems that were related to his crime. He was deemed fit to stand trial and was processed by the justice system. He is currently incarcerated in a facility of the South African Department of Correctional Services. He is of average intelligence as determined by the South African Wechsler Adult Intelligence Scale, and had completed a high- school level education. Since leaving high- school he has been gainfully employed. He reports no familial conflict as a child, only that his mother was a more dominant figure than his father. His parents are still married and he is an only child.

Initial clinical impressions describe a neatly- dressed person, who was well groomed. He came across as reasonably confident during the interview process. One of the strongest initial impressions was that of ‘aloofness’ experienced by the interviewers, this creates the impression of emotional distance in the relationship. During the interviews that followed, no signs of thought content problems or thought process problems were detected. Nor did the individual ever express any subjective psychological problems. The prison system had also not received any complaints about his behaviour. He is aware of and able to recount the events surrounding his crimes.

*Interpersonal considerations:* Interpersonally he comes across as slightly distant and aloof. He appears to struggle for words at times, as if he lacks the vocabulary to express himself, especially

in the realm of emotions. At times he may even be abrupt, possibly due to the anxiety provoking nature of the questions, and this therefore acts as a protective mechanism from anxiety.

He perceives relationships as being distant and unemotional, the perception he creates is that he cannot really understand the purpose of relationships, and therefore at times seems to become easily bored by relationships. He seems void of any internal guideline for interpreting events and relationships, this creates the impression he tries to behave as though he thinks he is supposed to behave, as if he is following a 'manual' on how to behave, without the insight to support his actions. It is almost as if someone were to ask him why he was behaving a certain way he wouldn't be able to explain the social rationale for behaving in that manner. Due to this his social skills are poor. His aloofness may be a means to protect himself from the emotions he keeps under the surface. Since he can be overly sensitive and resistant to the demands of other, he tries to stay aloof, but can also deal with the situation by using a form of dependency as a means to avoid anxiety. It is almost as if there is no 'middle ground' in his relationships. There is either an avoidance of a relationship or a form of dependency where he will be submissive towards others authority, but not an emotional dependence. Being submissive, conceding authority to someone, helps him to avoid conflict and the accompanying anxieties. There is no 'emotional sharing' in this type of dependency, it is more like a protective mechanism. The focus in this type of dependency is not the relationship but rather what the behaviour helps him avoid, that being anxiety.

These behaviours in turn create a vicious circle where he prevents himself from learning and developing more appropriate social skills to deal with problems more effectively, this creates a game- without- end, as he must either avoid relationships or be in the shadow of a dominant

person, whose behaviour helps maintain this pattern. Group settings are largely avoided by this person, perhaps because he has not developed an effective coping mechanism for such settings, and most likely will not venture to do so unless forced into such a setting. In such a setting he would most likely take on the role of the passive, silent observer, whose only contributions would be safe social comments when directly approached, he will most likely go along with what the majority or leader(s) of the group decide. His overall pattern of withdrawal, by the two approaches discussed above, are either the result of, or the cause of his lack of his concern with societal norms. Without any involvement in 'society' by making contact with individuals, there is slight possibility of him developing and learning appropriate norms.

*Diagnostic considerations:* More diagnostically, there are no clear problems which can be discussed as distinct entities. At times antisocial traits seem present, such as mentioned on the MMPI-2, but from his history and the test material there are no clear indications. His emotionless manner and risk-taking behaviour surrounding the crimes, can be forced into an antisocial category, but this may be rather due to societal inclination to pathologise behaviour. The fact that he did commit the crimes can also be seen as antisocial behaviour, yet there is no clear historical pattern in this individual to make a definite conclusion regarding an antisocial personality disorder diagnosis and crime, even murder, is not necessarily an indication of personality pathology. It may be more accurate to say that his personality structure has certain antisocial features.

One test, the MMPI-2, did mention the possibility of a schizophrenic process, but at no times during the competency to stand trial evaluation, testing or interview process, which lasted over a period of 2 years, were any signs noted subjectively or objectively, therefore the possibility of

psychosis at the time of the crimes and during incarceration cannot be prominently regarded. The most distinct diagnostic features appear to be a pervasive depressive mood, possibly of a dysthymic type, with symptoms of anxiety. Whether these two are part of the personality structure or separate entities is unclear. It is also unclear if they are rather due to the prison environment or not. On the other hand, depression and anxiety are such common features in our society that they could not solely be used to explain the phenomenon of serial murder. It is the authors' supposition that the depressive and anxiety signs are resultant of his ineffective interpersonal style, which could be heightened by the prison context, and should not be seen as separate diagnostic entities, independent of his interpersonal style. He at times experiences somatic complaints, which could be linked to his inability to successfully deal with the sources of his interpersonal anxiety.

## 6.2 Integration and summary of results for individual number 2

Individual number 2 is a divorced Afrikaans speaking South African male in his late thirties. From his competency to stand trial evaluation it was determined that he was not experiencing any medical problems that were related to his crime. He was deemed fit to stand trial and was processed by the justice system. He is currently incarcerated in a facility of the South African Department of Correctional Services. He is of average intelligence as determined by the South African Wechsler Adult Intelligence Scale, and had completed a high-school education plus three years of post-school technical training. Since leaving high school he was employed in various positions on a full-time basis. Since leaving school he has had four jobs averaging a duration of 3 years per job. The only family conflict experienced as a child, was being sexually abused by his brother and his brother's friends from the age of 10 until the age of 15. His parents are still married. He has a reported history of alcohol, cannabis and methaqualone (mandrax)

abuse.

Initial clinical impressions describe a meticulously dressed individual, who came across as confident, yet cautious in his interaction. During the initial contact interview both observers experienced the confident image as a facade, and began to sense a more dependent stance. During the contact interview and the interviews that followed, there were no signs of thought process or content disturbances. There were no problems indicated by Department of Correctional Services personnel and he had the highest level of privileges available to prisoners.

*Interpersonal considerations:* Interpersonally he comes across as a person who is easily influenced by others, this pattern repeated itself in his interpersonal relations before and after his incarceration. It seems as if he is aware that he lacks the interpersonal skills to assert himself in interpersonal relations, and hence has to try and regulate it by withdrawing socially. This social withdrawal is in itself a source of anxiety since he has an emotional need to be with others. It is as if he has two poles of influence, his family on the one hand who represent a positive influence, and other prisoners and other criminal elements before incarceration, on the other hand. Depending on which pole he is leaning to, he thrives on the 'positive' attention he receives. It is as if he must receive 'positive-regard' from some source, like an addiction, and it doesn't matter from which source it comes from when the 'craving' arrives. When he is satisfying his 'craving' from a negative source, such as a person with less than honest intent, it often is accompanied by emotional and sometimes physical abuse, much like a battered spouse pattern of behaviour. When he is receiving his attention from a 'positive' source he is quite able to function in a socially acceptable manner. This individual is currently functioning very well in the prison structure, where he receives regular praise from wardens and the pupils he teaches.

This pattern of behaviour has led to many interpersonal disappointments in the past. It seems as if he has learnt to perceive most relationships in this manner, this also causes him to withdraw, thus preventing him from learning the necessary social skills to effectively develop a relationship. The repeated failures appear to have fostered a paranoid perception of people's motivations. He tends to be very insecure and hypersensitive in relation to others. He has already had one failed marriage. The interpersonal withdrawal has also hampered the development of effective coping skills, thus furthering his already present anxiety. Substances may have been a means to controlling his anxiety and to boost his interpersonal functioning. His expectation of interpersonal failure often precipitates the cycle, thus encouraging him to further withdraw. Any aggression he may experience could be expressed in passive-aggressive means, or directed inwards, fostering self-pity and a sense of personal unworthiness.

*Diagnostic considerations:* Diagnostically, there are no clear problems which can be discussed as distinct entities. While the possibility of schizophrenia was mentioned on one test, the MMPI-2, there were never any thought process or content disorders detected. Upon enquiry as to the experiencing of auditory hallucinations the individual mentioned that he had once experienced what could best be described as a hypnagogic hallucination, when he would hear someone call his name just before falling asleep. It is possible that his strong paranoid ideas with regards to relationships, could have elevated this scale. Depression and anxiety seem to be strong themes, there is also a history of two suicide attempts in his past, and treatment for what he termed as "stress" and "insomnia". The anxiety he experiences seems to be chronic, it is quite possible that he reacts to his anxiety with somatic complaints, having been treated for ulcers since the age of 16. It is unclear whether the anxiety is a diagnostic entity separate from his depression or not. It is also unclear whether the depression and anxiety would exist in the absence of his poor

interpersonal skills, as one test, the MCMI-III, succinctly mentions “anxiety seems to play a strong role in this person’s life, this can be possibly generated by the conflict between his history of disappointment with others and a need for reinforcement from others”. There also appears to be mention of a traumatic incident, separate to his overall anxiety, that could still be having residual effects, although this was never specifically mentioned in the interviews held. It therefore appears as if the main thrust of any diagnostic considerations lie in the realm of personality, characterised by social withdrawal as a means of coping, not choice, suspicion of others, and long standing depressive outlook. Alcohol and narcotics have been used in the past, these may have been with the intention of moderating anxiety, or providing him with the feeling of control in interpersonal relations that he lack when not under the influence of a substance.

### 6.3 Case similarities and literature comparison

It is not the intention of this research to generalise its results, but to rather act as a starting point in compiling interactional data on individuals who commit serial murder, and to begin making descriptions with a scientific reference point in the form of standardised research tools in the form of psychometric tests and interviews. There do however appear to be certain strong similarities between the two individuals described here. While most literature seems to focus on psychosis or psychopathy as a means of describing serial murder, these may not be the only avenues to explore. Both these individuals seem to be troubled by depressive moods and anxiety. Also, restricted patterns of interpersonal behaviour appear to be prevalent in both individuals. While the motivation may differ, they both seem to be highly ineffective in interpersonal situations, and withdrawal acts as a means of trying to cope with the difficulties experienced when faced with, or when trying to avoid, such situations. This is hampered by dependency needs experienced by both individuals. While feeling inadequate, they both desire some form of

acceptance from an outside source, and may therefore enter into a submissive type of relationship. While individual number 1 may do so to avoid the conflict and anxiety accompanying interpersonal relations, individual number 2 may enter a dependent position to obtain the emotional 'connection' he needs. Therefore the reduction of anxiety seems to govern a large part of these individuals' interpersonal behaviour.

While both have elements that can be a criteria for the description of antisocial personality disorder, there are other criteria that are not 'present'. There is also no strong evidence, in these two individuals, of any form of psychosis. Perhaps it would be more accurate to say that, much like with any population in our society- male, female, black, white, young and old- one would have an incidence of mental disorders, yet not all members of that class will have a mental disorder. One should therefore be careful about trying to ascribe labels that appear in one individual, to all individuals, as if there is only one 'right' or accurate explanation. Human behaviour is far too complex and our environment far diverse to accurately pinpoint criteria to define who or what a serial murderer is.

There are certain characteristics that are shared with the literature on serial murder. Similar to McElroy (1999) who stated that amongst the psychological features of 36 men convicted of sexual offences, 81% had substance abuse histories, 61% mood disorders, and 36% anxiety disorders, out of these two individuals both had mood disorders in the form of depressions of varying degrees and anxiety was a strong feature in both. Wallace et al. (1998) also states that substance abuse is closely associated with violence. Only one of the two individuals here reported having a history of substance abuse. Milton (1997) reports that individuals who commit sexual homicide experience lifelong isolation and a lack of heterosexual relationships, in this study both

experienced interpersonal isolation. Meloy (2000) and Myers and Blashfield (1997) indicate that most individuals who commit serial murder experience cluster A traits- schizoid, paranoid, schizotypal being more common. These two individuals experienced traits that could be best described as avoidant, schizoid, and paranoid, thus overlapping with Meloy and Myers & Blashfield's statements. Meloy also states that most weren't sexually abused, which is the case with one of the individuals in this study. Myers and Blashfield also say that of 14 juveniles who committed sexual homicide under the age of 18, twelve had displayed Axis I pathology such as substance abuse, anxiety and dysthymia. In this study both experienced anxiety and depressive symptoms, and one experienced substance problems. Furthermore, most experience psychotic features but not consistently enough or seriously enough to warrant a diagnosis of a psychotic disorder, a similar pattern was experienced here with both individual's having schizophrenia being mentioned on at least one of their tests, but no clear consistent psychotic features being reported in the other tests and interview situation. Furthermore, in contrast to much of the literature, catathymia was not reported, there were no violent fantasies reported, no reports of animals being tortured or killed, and no history of a conduct disorder during childhood nor adolescence.

Similar to Ansevics and Doweiko's (1991) findings, both were in their late twenties when the murders began, both had approximately 13 years of education, and both individuals had IQs falling in the normal range. What was dissimilar to their findings were, both were NG- Church members, as opposed to Roman Catholic and Born Again in their study, neither had a history of family violence, one had a history of sexual abuse where Ansevics and Doweiko reported that 9% had a history of sexual abuse. Neither reported using violent pornography, and neither had a sexual fetish.

Meloy (2000) states that most victims are not consensual sexual partners but in one case in this research one victim was. Furthermore he reports that victims tend to be of the same race, where these individuals both had people of different races as their victims.

## 6.4 An interactional conceptualisation of serial murder

### 6.4.1 Reciprocal causality

Because each behaviour in an interaction functions as both cause and effect, linear relationships are difficult to pinpoint and may be arbitrary. They are primarily a matter of how the interactants perceive or punctuate their interaction. Therefore, how the serial murderer and the investigator, or profiler punctuate the interaction will determine what they see. A cyclic pattern has been described in certain serial murder cases, whereby a build up of anxiety leads to a catathymic condition whereby the anxiety is released through the murder. While cyclic in nature it only relates to two factors; anxiety and murder. What events take place in between, the perceptions and interactions and other behaviours are largely ignored. While sounding like a very plausible explanation it does not however address the situation where, after arrest, serial murderers stop killing. If one replies that the fact that there are no women present in prison so therefore the opportunity to kill is denied, then one is implying that the situation has an impact on the person and the outcome of his behaviour, that is, the environment can help or hinder in the creation of a murder. If the concept of catathymia implies an uncontrollable build up of anxiety then what happens to that anxiety in prison? Does it not exist, is it not acted upon, is it displaced? If it can be displaced, or not acted upon then are we as researchers missing key factors in our understanding of serial murder. Is it because of the way that researchers punctuate serial murder that only certain explanations become plausible?

#### 6.4.2 Communicational concepts

All behaviour is a message. A victim would perceive the serial murderer's behaviour as meaning one thing while an investigator, society or academic would perceive it as meaning another. Depending how one defines the system one may determine different messages from the murder. The serial murderer may receive a certain message determined by how he or she punctuates the interaction. With the killing of the victim he may receive the message "I am powerful" or "I am successful", this is reinforced by any benefits he or she receives from committing the murder. These benefits may be intrapsychically in the form of reduced anxiety, increased anxiety that relieves boredom, or sexually, or by the gratification received from notoriety in media reports.

If one expands the system to include the criminal justice system the message can include one of a meta- commentary of "the criminal justice system is ineffective". An even larger system would include society where the message may be one of "what state is society in that such murders can take place".

If one looks at the roles that each individual plays in serial murder, each is only defined by the actions of the other. A 'killer' without a victim is not a killer, likewise, a victim is only a victim if there is an attacker. To further illustrate this point here is an example. In a hostage situation there are two factions; the hostage takers and the hostages. The relationship is defined as such because one group (the hostage takers) wants to forcefully retain another group (the hostages) against their will. The relationship and therefore definition would change dramatically if the hostages all threatened to commit suicide. The hostage takers would have to change their roles to caretakers to ensure that the hostages survive, since without hostages they cannot be hostage takers. These changes in the relationship change the definition of the relationship. In relation to

serial murder, the victim must be unwilling to die, and the killer must kill, otherwise the role-players haven't played their part. These roles therefore form certain interactional patterns of behaviour, in accordance with the 'rules' of that relationship.

If one looks at these interactional patterns, one can begin to define them in terms of complementary and supplementary relationships, of which there appear to be elements of both. By continual exchanging of messages the relationship is defined, as one member tries to gain control over the definition and therefore the relationship. In terms of serial murder the killer gains control over the relationship by means of force that leads to the violent capitulation of the victim. This is complementary in that the killer is in a one- up position over the victim who is in a one- down position. It is only through the overt use of force that the killer creates this definition. This definition is complementary in nature. It can be hypothesised that this indicates a rigidity of the killer's system.

The murders may seem in contrast to the interpersonal behaviour described in this research. Where this research describes an almost dependent person in interpersonal interaction, thus placing the killer in a one- down position in his or her normal interpersonal interactions, the murders forcefully alter that position, by means of, and resulting in, the death of the victim. This can indicate an inability to allow new information, the victim, and his or her effect on the killer, to be integrated into the system of the killer. This leads to an ineffective interpersonal style where the killer makes use of an ineffective attempted solution to solve his 'problems'.

### 6.5 Ideas regarding serial murder as part of man's social order

One of the aims of the research, as mentioned in chapter 4, was to “investigate the findings and formulate ideas of possible theoretical explanations of serial murder as part of man's ‘social order’” (Haley, 1967).

To arrive at a more definite conclusion for this statement, it seems essential that the total social system needs scientific investigation and scrutiny, rather than concentrating on ‘parts of the whole’ that is, certain elements within the system, such as the crime or the perpetrator's behaviour. From an interactional point of view the question needs to be answered in order to arrive at an understanding of serial murder and society, that is, what function does serial murder serve in society, not only in its immediate environment, but in society as a whole.

This study's literature survey and research endeavour suggests certain links between serial murder and society. Some of these are the fact of the psychological impact (anxiety, depression, phobias, interpersonal problems and post- traumatic stress disorders) on society; that the perpetrators are most often males and the victims in society are most often females; that the relationship between victim and assailant is usually that of a stranger.

Without specific support to arrive at definite conclusions on these points, one can say that in general:

- i) The effect of serial murder can not be ignored; that it has major psychological effects, and even a pathological impact on society;
- ii) the murderer has a voice, which is generated by the media and its tools of communication, written word (newspapers) the spoken word (radio) and visually,

as means of interaction, and

- iii) that it is not only the serial murderer as an individual, or his or her family which is pathogenic, but that the whole social system, where serious crimes are committed regularly, that is pathological.

#### 6.6 Critique and recommendations on the research

This research, like many other in the field of serial murder, is hampered by certain limitations. Firstly, the limited size of the research sample prevents generalisation of the results. Secondly, the context of the correctional facility can play a role in the way that information is shared between the researcher and participant.

In terms of recommendations, similar studies using the actual individuals who commit serial murder should be conducted to help determine if these are patterns of behaviour that occur frequently in other such individuals. Secondly, comparison between different population groups would be necessary since serial murder is committed by people of various racial backgrounds. These results should then be compared to determine if there are any universal patterns of behaviour.

#### 6.7 Recommendations regarding the field of serial murder

A more thorough investigation into the interpersonal background of these individuals could shed new light on this phenomenon. Examining these individuals family interaction could also prove to be fruitful by placing the individual's behaviour in a broader context. This would also allow researchers to determine if there are any patterns of interaction unique to the development of a person who commits serial murder. Such an approach would ideally involve members of a multi-

disciplinary team including psychologists, social workers, psychiatrists, anthropologists and sociologists. It is suggested that each team member then focus on viewing the problem from their unique viewpoint, since the researcher's experience is that if one person tries to juggle these roles it makes integrating the collected information extremely difficult.

## 6.8 Conclusion

Durkheim (British Centre for Durkheim Studies, 1994) states that as society becomes more diverse and parameters become broader, as is the case with rapidly changing societies, it becomes more susceptible to crime. This has been evidenced in South Africa in the move from an apartheid to post-apartheid society. The overall increase in crime and possible ineffectiveness of government services to manage the problem had made boundaries become blurred. This helps create a sense of anonymity which makes a ripe playing field for serial murder. Thus a change in the ecosystem leads to new phenomenon appearing or mutating. Furthermore, serial murder, according to Jenkins (1994) has become politically, emotionally and financially important. The label of serial murderer supersedes any other labels a person might have, creating a mythological image, an image which cannot 'die'. This mythological image, in a capitalist society, becomes very useful: it sells newspapers, movie tickets, books and even contributes to academia in such 'noble' causes as Doctoral research. It becomes even more useful in self development for the researcher if he or she publishes articles in scientific journals. Clearly serial murder has become too powerful to ever die, its usefulness extends beyond individuals until it creates a life of its own. So, although its face may change, all involved contribute to its existence. Thus with our noble facades we too become predators for our own benefit.