

Research Paper

A Study on The Relationship Between of Childhood Trauma and Antisocial Personality Disorder in The Formation of Serial Killers

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ABSTRACT

This paper intends to understand the relationship between antisocial personality disorder and childhood trauma. A serial killer is an individual who has committed atleast three murders over a period with some time in between, called a ‘cooling – off period.’ Serial killers are always suspected to have some form of mental disorder, such as psychopathy, sociopathy, and sexual paraphilia, to name a few. One such disorder is antisocial personality disorder, which is a mental disorder characterized by lack of empathy, irresponsible behavior and manipulative nature, all in varying degrees of severity. ASPD may be linked to environmental factors, such as those problems arising the family, especially during childhood. The childhood traumas may be physical abuse, emotional or psychological abuse, or even sexual abuse. The trauma plays a large role in formation of the morals in an individual the child grows up to be. This research aims to draw the relationship between childhood trauma, antisocial personality disorder and serial killers by in depth case analysis of the various serial killers in history over time.

Keywords: *Serial Killer, Antisocial Personality Disorder, Childhood Trauma, Emotional Abuse*

Antisocial personality disorder (ASPD) is a mental disorder wherein an individual has an impulsive nature characterized by lack of empathy, lack of sense of responsibility and manipulative actions. ASPD may range from occasional misconducts to committing serious crimes.^[1] ASPD generally begin showing symptoms in children by the age of 11 to 12 years, and peaks between 24 and 44 years, with a gradual decrease beyond that level.^[2] ASPD is also seen prominently in assault and violent crimes.^[3] In cases of ASPD in juvenile convictions, the disorder is most frequently seen in those associated with conduct disorder. ASPD generally coexists with other mental disorders.^[4] One of the most common

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features associated with ASPD is the impulsive nature of an individual. The impulsivity ranges in a mild form from reckless behavior to violent, almost criminal tendencies. In severe cases, criminality and lack of empathy is noticed. Causes of ASPD can vary from genetic, physiological to environmental. Environmental causes of ASPD include family environment and childhood trauma, which will be discussed here. ASPD is a serious and persistent mental health problem that can have catastrophic effects for both the person suffering from it and those around them. Therapy for ASPD may include psychotherapy, medication, and behavioural treatments, though engaging those with ASPD in treatment can be difficult.

A pervasive pattern of disdain for and violation of the rights of others, commencing in infancy or adolescence, as demonstrated by at least three of the following diagnostic criteria for ASPD:

1. Failure to conform to social norms regarding lawful behaviour, as seen by regularly doing acts that constitute grounds for arrest
2. Deception, as evidenced by frequent lying, the use of aliases, or duping people for personal gain or pleasure
3. Instability or a failure to plan ahead
4. Irritability and aggression, as evidenced by multiple physical fights or attacks
5. reckless disregard for one's own or others' safety
6. Persistent irresponsibility, as evidenced by an inability to maintain consistent work conduct or pay financial responsibilities on a regular basis.
7. Indifference to or rationalisation for hurting, mistreating, or stealing from another person indicates a lack of remorse.

Childhood trauma is defined as any negative experience or event that a kid may encounter during their development years that causes considerable distress or disturbance to their psychological, emotional, or physical well-being. Abuse (physical, sexual, or emotional), neglect, witnessing marital violence, parental divorce or separation, or the death of a loved one are all examples of traumatic experiences. Childhood trauma can have long-term and severe consequences on a child's development, manifesting in a variety of ways throughout their lives. Childhood trauma can cause challenges with emotional regulation, low self-esteem, anxiety, depression, substance abuse, physical health problems, and relational problems.

It is critical for children who have experienced trauma to seek professional care and support, since early intervention can dramatically boost their chances of healing and recovery. Children can benefit from therapy, medication, and other forms of support to overcome the harmful consequences of trauma and develop healthy coping skills.

According to the FBI, a serial killing as a 'series of two or more murders, committed as separate events, usually, but not always, by one offender acting alone.'^[5] An offender who commits such a crime is called a serial killer. Serial killers are different as compare to mass murders and spree killers as the latter two usually occur at a short range of time with a higher body count. Serial killers often have some type of 'cooling off' period, which refers to the time period they lie dormant. However, this has been deemed as more or less invalid, since there is no legal or fixed definition for a cooling off period.^[6] Serial killers existed from the medieval period when people were attributing serial killings to mythological creatures such as vampires and werewolves.^[7] Serial killers were predominantly active during 1970s right up to 2000s, when it was known as the 'Golden Age of Serial Murders.'^[8] Famous serial

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killers in this time period include Ted Bundy, John Wayne Gacy, Jeffrey Dahmer, Aileen Wuornos and Richard Ramirez. Serial killers often have a specific method of committing a crime, a method they frequent use to select their victims and kill them; this is called *modus operandi*, from the Latin word for ‘way of operating’. Serial killers have often been associated with psychological disorders and psychopathy is commonly seen in them.^[6] Serial killers are often also resulted from a childhood trauma, either sexual, emotional or physical trauma, most often by their own family members.^[9] A large number of serial killers have no sense of empathy or remorse since ‘they do not know how it feels like to be loved.’ This stems from the lack of attention, love and care they receive from their family.

REVIEW OF LITERATURE

In a study conducted by Garcia – Baamonde, et. al., it was found that serial killers generally tend to display signs of psychopathy and antisocial personality disorder; however, they were not mutually inclusive of one another. It was noted that psychopathy was common in serial killers as compared to ASPD, which was generally seen in delinquency. However, most serial killers had demonstrated the presence of ASPD in them.^[51]

According to LaBrode’s study, there are risks of violent behavior including serial killing when an individual suffers from ASPD, however, there is no complete certainty that all of the serial killers suffered from ASPD or that all the ASPD patients had serial killing urges. There was also a lot of serial killers who have not shown any form of ASPD, with prime example including the infamous BTK Dennis Rader.^[52]

There is a combination of both sociological and psychological factors that are common among serial killers. Serial killing is present across all demographics. They all chose victims that they know will be unable to defend themselves and that they could have control and power over, and they all gained something from their killings.^[53] Most serial killers have experienced “abuse, trauma, insecure attachment, loss or abandonment of a parent or caretaker, antisocial behavior, head injury, and low arousal levels” which this study also predicts.^[54]

Antisocial serial killers are not able to experience love or empathy because of family rejection during their early childhood, they are unable to postpone and/or control their desires, they pursuit is instant gratification. These serial murderers are not acting from external motivations like money, but to pursue the thrill of the kill. In short, individuals with antisocial personality disorder can’t control their tension and anxiety well, they are hardly to perceive the harm of their behavior to the victim for their apathic emotion, which make them more likely to commit terrible crimes, even become the serial killers.^[55]

People with certain characteristics, such as arrogance, deceitfulness, a physical disability, a strong desire for wealth, a lack of compassion, an uncontrollable urge to control others, and a tendency to seek attention, will be analyzed in relation to specific parts of the brain, including the frontal lobe, hypothalamus, limbic system, ventromedial prefrontal cortex, and amygdala. The study will explore both psychological and environmental factors that trigger these areas of the brain, as well as the importance of family history, guilt, and past traumas.^[56]

Childhood trauma can affect children in their lifetime, and those with personality disorders caused by their childhood experiences are more likely to commit a crime. ASPD is known to be the disorder that causes the highest crime rate, and children with helicopter parents have a

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higher risk of depression. Online bullying, as well as high rates of crime in low-income households, are strongly linked to bipolar disorder. Mental and natural or different medicines, for example, mental social treatment and electroconvulsive treatment can be utilized to lessen crime percentages. There is an extremely close connection between personality disorder, childhood trauma, and criminal ways of behaving, and these problems can be treated after the conclusion. Future studies should focus on the sources of childhood trauma and solve this problem, while also balancing society.^[57]

A study by Mullen et al. (2004) found that 77% of the serial killers they examined had experienced severe childhood trauma, including abuse, neglect, and witnessing violence. These findings suggest that childhood trauma may be a significant risk factor in the development of serial killers.^[58]

The interplay between childhood trauma and ASPD in the development of serial killers is complex and multifaceted. One possibility is that childhood trauma may lead to the development of ASPD, which in turn increases the risk of violent behaviour. Alternatively, it is possible that individuals with a predisposition towards ASPD are more vulnerable to the effects of childhood trauma, and may be more likely to develop violent behaviour as a result.^[59]

From the minute they enter the evaluation session until they leave, it is essential to watch the people being evaluated closely during the expert examination. The individuals under study frequently repeat their pattern of mental functioning, especially when it comes to the way that this pattern shows up in Relationships between individuals are a diagnostic criterion that can be used. It is feasible to spot some clues that point to a disturbed personality with antisocial or even psychopathic traits in the expert-subject relationship itself. Individuals who lack empathy are often referred to as psychopaths.^[60]

For this research undertaking, the researcher utilised a case study method. A case study is "the study of the particularity and complexity of a single case, coming to understand its activity within important circumstances," according to Stake (1995). The researcher's choice to use the case study approach is backed by the depth to which each case has to be studied in order to understand the various emotions and behaviours displayed by each subject.^[61]

Scope of the Study

Serial killers are continuously on the rise. In the modern day and age, we cannot determine the presence of serial killers in our vicinity; any individual can turn out to be a cold – blooded murderer. Hence, from this study, we aim to determine if antisocial personality disorder and childhood trauma plays a vital role in the formation of serial killers.

METHODOLOGY

Objectives

1. To understand the relationship between antisocial personality disorder and childhood trauma.
2. To understand the relationship between childhood trauma and psychology and occurrence of serial killers.

A total of 12 case analysis on various serial killers was done to understand the influence of childhood trauma and antisocial personality disorder on the formation of serial killers. Since

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the data was from previously existing records, it was safe to point out that the data collection was secondary in nature. The case analysis focused mainly on the psychological and childhood aspects of the serial killers, to understand how it could have played a factor in the voracious serial killers they were identified to be in the day and age.

DATA ANALYSIS AND DISCUSSION

Aileen Wuornos

Aileen Carol Wuornos was an American serial killer who killed seven men in Florida in 1989 and 1990, claiming they raped or attempted to rape her while she was working as a prostitute.^[26] She was born as Alien Carol Pittman in Rochester, Michigan, on February 29, 1956. She was daughter of Diane Wuornos and Leo Dale Pittman. Between December 1989 and September 1990, the bodies of several men were found murdered along the highways of northern and central Florida.^[27] Wuornos confessed to the murder of all six men, claiming that she was picked up by the men when she was working as a highway prostitute, and shot them in self-defence after they attempted to sexually assault her.

Wuornos's father, Leo Dale Pittman, was a child molester and a sociopath who was strangled in prison in 1969. Wuornos was pregnant at age fourteen. Shortly thereafter, she dropped out of school, left home and took up hitchhiking and prostitution.^[26] Wuornos had a prior conviction for armed robbery in 1982. Aileen's mother Diane Wuornos, was 15 years old when she married Aileen's father, Leo Dale Pittman, on June 3, 1954. Less than two years later, and two months before Aileen was born, Diane filed for divorce. Wuornos never met her father, because he was in prison for the rape and attempted murder of a seven-year-old girl when she was born. Leo Pittman was considered to be a schizophrenic, and was convicted of sex crimes against children, was in and out of prison, and hanged himself in prison in 1969.^[27] In January 1960, when Aileen was almost 4 years old, Diane abandoned her children, leaving them with their maternal grandparents, Lauri and Britta Wuornos, who legally adopted Aileen and her older brother Keith on March 18, 1960. At age 11, Wuornos engaged in sexual activities in school. She was doing cigarettes and drugs also. She had also engaged in sexual activities with her own brother. She claims that she was sexually assaulted and beaten as a child by her grandfather, an alcoholic. He used to force her to strip out her clothes. In 1970, at age 14, she became pregnant, having been raped by a friend of her grandfather.^[26] Wuornos gave birth at a home for unwed mothers, and the child was placed for adoption. A few months after her baby was born, Wuornos dropped out of school at about the time that her grandmother died of liver failure; Wuornos and her brother subsequently became wards of the court. When she was 15, her grandfather threw her out of the house, and she began supporting herself as a prostitute and living in the woods near her old home.

Wuornos was convicted of the murder of Richard Mallory after a jury trial in Volusia County and was sentenced to death.^[26] At trial, the State was allowed to introduce similar crimes evidence about Wuornos' commission of several other murders. Within two weeks of her arrest, Wuornos and her attorney had sold movie rights to her story. Investigators in her case did likewise. The case resulted in several books and movies, and even one opera on the life of "America's first female serial killer."

Belle Gunness

Belle Gunness, a serial murderer who lived in the late 19th and early 20th centuries, was of Norwegian and American descent. While the details of her early life are not widely known, it is known that she was one of seven children raised in a tiny rural village in Norway. Her

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father physically abused her mother, and she came from a poor household with a troubled marriage. Although it is unknown if Belle was subjected to major abuse or trauma as a child, several historians and psychologists have hypothesized that her challenging upbringing may have influenced her subsequent antisocial conduct.

It is challenging to draw firm conclusions regarding the impact of Belle's early experiences on her conduct because she was considered to be a very private person and avoided discussing her history or personal life with people. Regardless of her origins, serial murderer Belle Gunness is renowned for her horrifying acts. She is thought to have murdered at least 14 people, including her own children, two husbands, and several partners. With the promise of marriage or employment, she was known to entice her victims to her property where she would then kill them and dispose of their remains.

While it is impossible to say with certainty how much Belle Gunness's upbringing affected her behaviour, it is evident that she exhibited many of the typical characteristics of an antisocial personality disorder, such as a lack of empathy, manipulative behaviour, and a disregard for other people's rights.

Charles Manson

The majority of Charles Manson's youth was marked by abuse and neglect. Kathleen Maddox was Charles Manson's mother.^[11] Charles Maddox was born to a 16-year-old girl named Kathleen Maddox. He never met Manson's father, who was never shown in the image. At first, Kathleen, his mother, didn't give him a name. "No Name Maddox" was the name he went by. "No Name Maddox" didn't receive his full name, Charles Manson, until Kathleen wed a guy named William Manson.^[12] After being found guilty of stealing for robbing a man who "looked wealthy," Kathleen was given a prison sentence. She remained behind bars till Manson was eight years old for a number of years. In 1942, Kathleen was let go. Critics said that Charles and Kathleen spent a lot of time with "unreliable guys in sultry settings" when she was released. Then, his mother was detained for stealing for a second time. Manson started robbing local stores, becoming a state ward, and was then committed to the "Gilbaut School for Boys."^[13] Manson left the reform school because he was dissatisfied there in order to find his mother. Once more, his mother welcomed him in. In an interview, Manson claimed to have a special dislike towards moms, according to O'Neill. Manson fled the school and began robbing establishments to get cash. He was detained as a result and taken to a penitentiary facility. It didn't take long for Manson to escape the centre and resume his spree of robberies. At the age of thirteen, he was eventually apprehended for the third time and sent to "Indiana Boys' School." Manson alleged that over the three years he attended the school, he was sexually assaulted, raped, and physically assaulted.^[14] At the age of 16, Manson and two other lads broke into the school, stole a car, and crossed state lines. Manson was apprehended and sent to yet another "Training School for Boys" until being arrested at the "National Bridge Honor Camp" for raping a little child while holding a knife to his throat.^[15] After leaving, Manson was transferred to several reform programmes and arrested for similar offences. Manson was labelled "anti-social" and as having experienced "psychological trauma" in 1954.

Dennis Nilsen

Dennis Nilsen was a British serial killer born on 23rd November, 1945 in Strichen, Scotland. He was born in a mixed family; his father, Olav Magnus Moksheim, was a Norwegian who immigrated to Scotland post German occupation of Norway, while his mother, Elizabeth

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Duthie Whyte, was a Scottish.^[16] The parents had three children, with Dennis being the second one, and were divorced by 1948.^[17] Elizabeth's parents, who were initially not very supportive about her marriage to Olav, accepted her and the children very warmly. Dennis eventually became extremely close to his grandfather, whom he considered as a hero^[18]. His grandfather passed away in 1951, and he was allowed to witness the burial process; his grandfather's death was a major contributing factor to his social withdrawing. Soon, Elizabeth moved out of her parent's house into an apartment with her children and eventually married a builder named Andrew Scoot, with whom she had four children. Although Nilsen shared a somewhat strained relationship with his stepfather, he eventually respected him.

Nilsen's childhood trauma generally originated from his resentment towards his family. His parents were not close, with his father being away for months at the time. Nilsen also shared a strained relationship with his older brother, who resented and humiliated him, especially about his sexual orientation^[19]. He was generally closer to his sister Sylvia, who he cared for, and Nilsen realized that his attraction towards his classmates were due to the fact that they shared many features with his sister.^[19] Nilsen however, as stated earlier, was closest to his grandfather. Dennis was six when his grandfather passed away, and his strict mother allowed the young boy to see the grandfather, who was 'sleeping'. Nilsen waited for his grandfather to return, however, eventually came to know and accept that his grandfather would never come back. The death eventually metaphorized as an 'emotion death' of young Dennis Nilsen. Growing up, Nilsen was socially withdrawn, and was often described as antisocial; however, he did not display signs of animal cruelty or conduct disorder, which is generally considered common in serial killers. However, Nilsen engaged in alcohol to cope up with his emotions, and soon joined the army as a cook, where his alcoholism continued. Nilsen, after leaving the army worked as a police officer and a job interviewer.

In 1975, he began a live – in relationship with David Gallichan at 195 Melrose Avenue; the relationship was deteriorating at a rapid speed due to the contrasting personalities between the two individuals^[20]. Gallichan eventually left the residence by 1977 after ending their relationship^[20], and this point was generally regarded as another catalyst for Nilsen to commit the murders. Nilsen committed the murders to prevent his 'lovers' from leaving; this was seen something similar to Jeffrey Dahmer, and based on the modus operandi, psychological aspects and the choice of victims, Nilsen was often referred to as the 'British Jeffrey Dahmer'. Nilsen ended up murdering twelve young men and boys, and attempted to murder seven others.

Edmund Kemper

Edmund Kemper is a notorious American serial killer and necrophile who was active in the 1970s. He was diagnosed with antisocial personality disorder, which is characterized by a pervasive disregard for the rights of others and a lack of empathy. Kemper exhibited a range of behavior consistent with this diagnosis, including a history of criminal activity, a lack of remorse or guilt for his crimes, and a tendency to manipulate and exploit others for his own gain. He also displayed a propensity for violence and aggression, particularly towards women.^[21]

It is important to note that not everyone with antisocial personality disorder becomes a violent criminal like Kemper, and that there are many factors that contribute to the development of criminal behaviour. Nevertheless, Kemper's case is often studied as an extreme example of the link between personality disorders and criminal behaviour.

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Edmund Kemper's childhood was marked by significant trauma, which many experts believe contributed to the development of his antisocial personality disorder and his eventual turn towards violent criminal behaviour. Kemper's parents divorced when he was young, and he was raised primarily by his mother, who was emotionally abusive and belittling towards him. Kemper later described his mother as "a real piece of work" who would frequently ridicule him and call him a "weirdo" or a "freak." Kemper also had a difficult relationship with his father, whom he idolised but who was largely absent from his life. When Kemper was 10 years old, his father remarried and moved away with his new wife, leaving Kemper alone with his mother.

Kemper's childhood trauma was further compounded by his struggles with bullying and social isolation. He was a large and awkward child, and his peers frequently teased and taunted him. These early experiences of emotional abuse, neglect, and social rejection likely contributed to Kemper's feelings of anger, frustration, and powerlessness, which he later acted out through violent criminal behaviour. However, it is important to note that not everyone who experiences childhood trauma becomes a violent criminal, and that there are many other factors that contribute to the development of criminal behaviour.^[22]

Harold Shipman

Harold shipman was one of the United Kingdom's most prolific serial killers – and his victim count may have reached over 200 people in over 20 years. He lived in a middle-class neighborhood and was an aggressive athlete. Traumatic incident that may have shaped his life was the death of his mother, when he was 17 years old. Her death came in a manner similar to what later became Shipman's own modus operandi as in the later stages of her disease, she had morphine administered at home by a doctor.^[28] Shipman witnessed his mother's pain subside in light of her terminal condition, up until her death. The memories of her treatments clearly stuck with shipman throughout his later life. Harold Shipman graduated from grammar school and pursued an education in medicine.^[29] In college, shipman also started to dabble in various controlled substances. He even injected himself with morphine to see what his mother went through her treatments. Shipman had a great reputation in the early days of his career. Ironically, he was known to save many lives.^[28] Over 450 people died while under the care of Shipman. Due to his prestige and trustworthy reputation in the field, he wasn't caught until 1998.^[29] Surprisingly, majority of the victims were elderly women. This came to the notice and he was arrested on September 7, 1998. Four years later, Shipman hung himself in his jail cell. Since Shipman has passed away and he never admitted to any serial killings, we may never know exactly how many people he killed.

Jeffrey Dahmer

Between the years 1987 and 1991, Milwaukee saw its most infamous killings.^[30] The murders of seventeen young men and adolescents were committed in a horrific manner by a resident. That individual was Jeffrey Dahmer. Born as Jeffrey Lionel Dahmer on 21st May, 1960 to Lionel H. Dahmer and Joyce Annette, Jeffrey was the older son of the couple.^[31] The reports of his infancy vary, with some claiming that Jeffrey was neglected as an infant while others claimed he was loved and cared, albeit his mother being argumentative and depressive.^[32] When he turned about 4 years old, he started showing distance and eventual lack of empathy towards his family.^[31] He demonstrated that in his school as well, often appearing lonely and detached, although it was noted that Jeffrey did have friends in his elementary school. His parents had moved locations constantly, and by 1966, they were

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living in Doylestown in Ohio. It was around here that Dahmer showed interest in chemistry and dead animals.^[31]

Dahmer started displaying increased signs of ASPD between the ages of 10 and 15, when he became socially withdrawn and his lack of hobbies in anything other than the dead animals became increasingly noticeable. When he started high school at Revere High, he was seen as a social outcast due to his lack of proper social interaction with other students.^[33] It was here that Dahmer increasingly began consuming alcohol, which hindered his social personality even more, causing him to be increasing antisocial.^[34] Despite his lack of social skills or increased interest in thanatology (which was eventually seen as a cause for his lack of empathy), Dahmer was described by his teachers as polite, smart, and was a competitive tennis player. Dahmer was occasionally also called as the class clown, antics which he performed in order to get money for his alcoholic consumption.^[33]

John Haigh

John Haigh's childhood was very disturbing mainly due to his parents. They were strict religious parents who drove him crazy with religious fantasies. He was cold hearted and separated himself from the people. His father built a high fence around the house to keep out snoopers and any social interaction with the outside world. Haigh's parents belonged to the Plymouth Brethren, a purist and anticleric group of Christians. The sole kind of entertainment was Bible stories. It was even prohibited to engage in any form of sport. Haigh Sr. believed that the world was "bad" and that the family should stick to themselves. It is perhaps not unexpected that the young Haigh grew preoccupied and horrified by obtaining a similar "sign of the devil" due to the slightest misdemeanor since his father had also told him that the blue mark on his own head had been the result of him "sinning" in his youth. He was told that his mother had no 'mark' because she was an angel. He began to believe he was unbeatable.

It is said that a watershed moment in the boy's development occurred when Haigh realised that no such blemish would appear despite lying or engaging in other questionable behavior. He began to believe that he was invincible and could get away with anything. Claims of being plagued by Gothic, nightmarish dreams in which trees transform into crucifixes weeping blood must be treated with skepticism. Haigh was later revealed to be a manipulative and compulsive liar, willing to say anything to get out of a bad situation. At the time of his arrest for murder, his personal inquiries into what may happen to him if he was determined to be insane indicate that Haigh was aware that being 'bonkers' and damaged by his childhood could work in his favour in court. In 1934, Haigh stopped attending his parents' church and married Beatrice Hammer, a 21-year-old woman he scarcely knew. Despite being pleased with Haigh's politeness and attractiveness, she was wary of his nature and married him on July 6, 1934. Although the marriage lasted only approximately four months, Haigh's parents permitted the couple to reside with them until Haigh was arrested and sentenced to prison for fraud in October 1934.

John Wayne Gacy

In the study of American serial killers, John Wayne Gacy Jr. is a name that will live in infamy. Gacy is an intriguing subject when attempting to study the pathology of a serial murderer due to his diabolic method of murder and multiple victims.^[47]

To completely comprehend John Wayne Gacy's homicidal aim, one must first examine his early childhood. His father, John Gacy Sr., abused him physically and mentally during his

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childhood. Gacy's father was a serious alcoholic who was disappointed in his son for his lack of masculinity. Gacy chose gardening and cooking as a child, which were associated with feminine roles, over fishing, athletics, and other traditionally male pursuits. As a result, Gacy was frequently chastised and abused by his father.^[47] Gacy struggled with his sexual identity since he was a child, but he went to Illinois, married, and raised a family to hide his homosexual urges. Gacy succumbed to his homosexual inclinations when he sodomised a young kid, despite the layers of cover he wore throughout his heterosexual family life. He was sentenced to ten years in state jail but served only 18 months. During Gacy's detention, his father died of liver cirrhosis because of his drinking addiction. Gacy appeared to snap upon learning of his father's death, believing his father perished because of the embarrassment of Gacy's sodomy conviction. He became more hostile towards other inmates and suppressed his sexual impulses for young guys even more.^[43]

Following his release, Gacy relocated to Chicago and attempted to begin his life, eventually becoming a well-respected member of the community. He was a wealthy businessman who had his own construction company and had close relationships to community and political leaders. Gacy also staged block parties for youngsters, when he dressed up as Pogo the Clown. Pogo the Clown was a persona Gacy created to gain the trust and respect of his people.^[44]

In an interview, Gacy explained how wearing his costume reverted him to a juvenile stage. Despite his apparent success, Gacy would lure young men and boys to his home, where he would detain, rape, and murder them. Gacy described committing his killings while dressed as Pogo the Clown, establishing the gruesome picture of a killer clown that people connect Gacy with today. Gacy's murder spree lasted six years without eliciting much suspicion from authorities or colleagues.^[49] It changed when he raped and murdered a well-known and respected member of the community. The youngster was last seen with Gacy, prompting authorities to investigate and finally unearth the large number of victims buried beneath Gacy's home.^[45]

The Pogo the Clown persona exemplifies John Wayne Gacy's ability to influence the people with whom he engaged. His talent to manipulate and charm was so effective that parents eagerly encouraged Gacy to connect with their children. John Wayne Gacy's manipulatively seductive personality, horrible murders, and subsequent lack of remorse for his crimes all point to an antisocial personality disorder. John Wayne Gacy had ASPD-like personality traits such as superficial charm. This was demonstrated by his ability to acquire his victims' trust and then exploit it to bind, rape, and kill them.^[46]

Gacy also showed emotional instability, another ASPD feature, in his marriages, which led to the breakdown of the relationships. The video recorded talks with Gacy while he was in detention revealed his feelings of grandiosity and lack of sorrow. He talked about the murders without feeling, rather in a laundry list style, adding to the alienation he felt towards his conduct. His inflated ego matched his ambition to grasp positions of power. These manipulative tendencies and apparent disrespect for human life are symptoms of an antisocial personality disorder.^[48]

Raman Raghav

Raman Raghav was a notorious serial killer who operated in Mumbai, India in the 1960s. There are several speculations about his childhood trauma, but no definitive information is

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available.^[35] According to some sources, Raman Raghav was born into a poor family in Tamil Nadu, India. His father was an alcoholic and abusive, and his mother worked as a maid. It is believed that Raman Raghav was subjected to physical and emotional abuse by his father during his childhood, which may have led to his mental instability later in life.^[36] Other sources suggest that Raman Raghav suffered from a head injury during his childhood, which could have contributed to his violent tendencies. However, there is no concrete evidence to support this claim.^[37] It is also speculated that Raman Raghav was exposed to violence and crime at a young age, which may have desensitized him to the consequences of his actions. He reportedly ran away from home at a young age and spent time in juvenile detention centres before eventually moving to Mumbai.^[38]

Raman Raghav, also known as "Psycho Raman", was a notorious Indian serial killer who operated in Mumbai during the mid-1960s. He is believed to have killed at least 41 people, mostly homeless or pavement dwellers, using a blunt object such as a rod or a stone.^[40] While Raman Raghav was never officially diagnosed with antisocial personality disorder (ASPD), his behaviour exhibited several characteristics commonly associated with the disorder.^[39] ASPD is a mental health condition characterized by a pervasive disregard for the rights of others and a lack of empathy or remorse.

Some of the traits that Raman Raghav exhibited which are commonly associated with ASPD include:^{[41][42]}

1. Impulsivity and aggression: Raman Raghav were known for his impulsive behaviour and violent outbursts.
2. Lack of remorse: He showed no remorse for his crimes and seemed to derive pleasure from the suffering of his victims.
3. Deceitfulness: Raman Raghav was known to lie and manipulate others to get what he wanted.
4. Irresponsibility: He showed a consistent disregard for social norms, rules, and laws.
5. Recklessness: Raman Raghav exhibited a reckless disregard for the safety of others, as evidenced by his brutal attacks on random strangers.

Surinder Koli

The Nithari serial murders, also called the Noida serial murders were a series of gruesome serial murders of children (and one adult), which occurred between 2005 and 2006 in Nithari village of Uttar Pradesh. The two suspects of the serial murders were businessman Moninder Singh Pandher and his domestic help Surinder Koli, alias Satish. Pandher was acquitted, while Koli was sentenced to death.

Surinder was born on 4th April 1975 in Uttarakhand, where he studied up to 7th standard. His childhood was pretty normal. He was the third child of the five born to a lower middle – class family; his father passed away while his mother (as of 2012) is alive and shares a cordial relation with him. Koli also shared a cordial relationship with his younger brothers, while he was not very close to his older brother. According to sources, Koli was the breadwinner of the family; he used to send the family money after working in Delhi. Neither him nor his family members ever experienced any form of psychiatric disorders. Koli however, was sexually abused once as a child and had started having thoughts of necrophilia since young. He was apparently emotionally charged during the time of murders; however, he did not display any symptoms of antisocial personality disorder. The sexual abuse he faced as a child, did not have dire traumatic consequences on his psychology.^[50]

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Ted Bundy

Ted Bundy was born to a single mother named Louise Cowell on November 24, 1946, in Burlington, Vermont. His mother moved to Philadelphia to live with her parents after giving birth to him in a home for unmarried mothers. Samuel and Eleanor Cowell, Bundy's grandparents, who he believed were his parents, raised him.^{[23][24]}

Bundy attempted to make friends since he was a shy, quiet child. He apparently endured peer bullying as well, which increased his feelings of alienation and rejection. Bundy felt abandoned and unsupported since his mother was focused with her own issues, such as her battle with alcoholism, and his father was not there in his life.^[23] Bundy learned that his sister was actually his mother when he was a teenager. He felt confused and betrayed by his family after learning this information. Bundy attended the University of Puget Sound in Tacoma, Washington, after finishing high school.^[23] There, he got involved in student council and worked for a suicide hotline. He started showing early indicators of his eventual aberrant conduct at this time, like stalking and peeking into women's windows. Early exposure to pornography and other sexual materials may have led to Bundy's eventual sexual deviancy because of this.

Although Bundy never received a particular mental health diagnosis, several experts think he may have possessed psychopathic or sociopathic traits. These circumstances can contribute to a lack of empathy and a higher propensity for violent action. According to sources, Bundy showed an early indicators of behavioral issues as a child, such as animal abuse and stealing. These actions could be a sign of psychological problems or a lack of sympathy.^[24]

Bundy's father, who did not get engaged in his life until he reached the age of an adult, and he had a strained relationship. Feelings of fear and rage may have been worsened by the absence of a strong male role model.^[24] Childhood experiences with violence included watching his grandfather violently attack his grandmother, which introduced Bundy to aggression. This kind of violence exposure has a systematic desensitization effect and may raise the likelihood that a child may act violently in the future. Lack of supervision: As a child, Bundy was often left unattended, which may have influenced his risky actions and poor impulse control.^[25]

Changes in parental figures: Throughout his childhood, Bundy's mother had a string of erratic relationships with men, depriving him without a reliable male role model. His later struggles with forming healthy relationships may have been worsened by the upheaval in his familial relationships.^[25]

Ted Bundy is often described as having exhibited characteristics of antisocial personality disorder (ASPD), which is a mental health condition characterized by a pervasive pattern of disregard for and violation of the rights of others. Some of the key behaviors and traits associated with ASPD that Bundy exhibited include:

1. **Impulsivity:** Bundy was known for acting impulsively, engaging in risky behaviors and making decisions without thinking about the potential consequences.
2. **Lack of empathy:** Bundy demonstrated a significant lack of empathy for his victims and showed no remorse for his actions. He was often described as charming and charismatic, but this was thought to be a mask to hide his lack of empathy and his true intentions.
3. **Deceitfulness:** Bundy was known for being a skilled liar and manipulator, often using his charm and intelligence to deceive those around him.

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4. **Aggression:** Bundy exhibited aggressive behaviors, including violence toward his victims and others. He was known to have a history of violence, including assaulting a classmate when he was younger
5. **Irresponsible behavior:** Bundy had a history of failing to take responsibility for his actions, often blaming others or external factors for his behavior.
6. **Recklessness:** Bundy engaged in reckless behaviors, including stealing cars and engaging in high-risk sexual behavior.

Overall, Bundy's behavior and actions were consistent with the diagnostic criteria for antisocial personality disorder. However, it is important to note that not everyone who exhibits these traits or behaviors will go on to commit violent crimes, and that many individuals with ASPD are able to function in society without engaging in criminal behavior.

MAJOR FINDINGS

1. **Childhood Trauma:** Numerous studies have discovered a link between traumatic experiences as a youngster and the emergence of antisocial behavior, including the potential to become a serial killer. Traumatic experiences during early development might involve physical, sexual, or emotional abuse, neglect, or other negative events. Such trauma may contribute to the emergence of ASPD and have long-lasting impacts on a person's psychological and emotional health.
2. **Adverse Childhood Experiences (ACEs):** Specific types of childhood trauma called Adverse Childhood Experiences (ACEs) have been recognized as potential risk factors for the emergence of antisocial behavior and later criminality. ACEs can encompass a variety of situations, including parental substance abuse, marital violence, mental illness, neglect, and physical, sexual, emotional, and other forms of abuse. High ACE scores have been linked to a higher chance of committing crimes, such as serial murders.
3. **Neurobiological Factors:** Some research suggests that childhood trauma may have an impact on the neurobiological development of individuals, leading to changes in brain structure and function. For example, alterations in areas of the brain involved in emotional regulation, impulse control, and empathy, such as the prefrontal cortex and the amygdala, have been associated with both childhood trauma and ASPD. These neurobiological changes may contribute to the formation of antisocial behavior, including serial killing.
4. **Antisocial Personality Disorder:** One of the hallmarks of ASPD, a personality disorder, is a chronic pattern of disdain for and violation of others' rights. Impulsivity, violence, a lack of regret, and a disrespect for social norms and conventions are among the behaviours that people with ASPD frequently exhibit. Some studies have discovered a higher prevalence of ASPD in those who kill repeatedly, indicating that it may play a role in the development of serial killers. Aside from extra risk factors like childhood trauma, not all people with ASPD turn into serial killers.
5. **Interaction between Childhood Trauma and ASPD:** It has been proposed that the interplay between ASPD and childhood trauma may raise a person's risk of developing into a serial killer. Because of their weak emotional regulation, poor impulse control, and lack of empathy, people with ASPD may be more likely to engage in violent and criminal behavior, including serial murdering. Childhood trauma may also contribute to the development of ASPD.

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It is crucial to remember that serial killers are an uncommon and complex phenomenon, and a variety of reasons may play a role in their emergence. Research has found several potential risk factors, including childhood trauma and ASPD, in addition to genetic susceptibility, environmental effects, and individual traits. Further investigation and professional advice are essential if we are to fully comprehend the intricate interactions that may lead to the development of serial killers.

CONCLUSION

From the case studies we have analyzed, we can determine a few things from the study. Firstly, it is important to understand that psychopathy and antisocial personality disorders are not the same and not mutually inclusive to each other in cases of serial killers. However, a large number of serial killers have in fact, demonstrated signs of ASPD, which includes emotional manipulation, impulsive behavior and lack of empathy towards others. However, it should be noted that not all serial killers had ASPD, yet they had gone out to be gruesome killers. Prime example includes Surinder Koli, on whom a study has been mentioned above. Therefore, it is safe to conclude that not all individuals who develop ASPD will turn into serial killers although precautions may be taken.

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