



## The Pathogenesis of a Serial Killer- A Study Of Development and Methodologies

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### INTRODUCTION

The conventional definition of a serial killer is “a person with a particular psychological motivation for killing *REPEATEDLY*”; who have killed two or more victims in at least two separate standalone incidents, with the murders usually following an identifiable and defined pattern which often comes to be referred to as their ‘signature style’. In broader terms, it is the commission of a series of murders happening at regular intervals and with similar characteristics.

Serial murder is a rare phenomenon, albeit one of the most horrific, comprising less than one percent of all murders committed in any given year. Due to their profound impact on the social psyche, it is crucial to understand the psychological and physiological factors that drive an individual to commit repeated acts of violence. Early detection and prevention are complicated by the fact that these killers usually do not have lucid reasons for their repeated crimes; most of the time they do it for the sake of the act itself, which indeed does not resolve their underlying issues.

The pop culture often depicts them as ‘evil geniuses’ and have given them a cult status as in ‘The Silence of the Lambs’ or ‘Joker’, however, in real life, they hail from a spectrum of IQ ranging from very low IQ to unusual high intelligence. It is notable here that it is the low IQ ones who usually get caught as they are more impulsive.

Serial murders are as old as documented history. Locusta, a professional killer from Rome, best known for poisoning Emperor Claudius, his son Britannicus, and 6 other unnamed victims in the first century CE, is claimed as the first ever documented serial killer. Even though fewer when compared to the west, especially the USA and Canada, Indian crime scene too has its own share of serial killers, from Thug Behram in the pre-colonial era, to Cyanide Mallika and Jolly the notorious female serial killers, and Amardeep the youngest serial killer; they hail from the busiest cities to the remote villages with few demographic similarities. Since they are far and few in numbers compared to other crimes and other countries, the research into the pathology of an Indian Serial Murderer is lacking, although their methodologies are as scary as any other.

### METHODOLOGY

Most of the serial killers act alone, although there are rare instances when they work in pairs. While working in pairs, one of them operates as the dominant and the other assumes the submissive role. As in their murders, their pairing is also about control and submission.

When it comes to the modus operandi, a serial killer rarely shoots the victims, preferring to strangle, stab, hang or beat them to death; methods which apparently give them a greater sense of personal control and power over the victim than when killing from a distance. Moreover, they choose methods which allows them to enjoy the act of murder. Unlike an impulsive one-time murderer, a serial killer purposely camouflages the crime scene by meticulously altering it, leaving minimal clues unless otherwise intended to deviate, and often moves the body from the site of killing. This explains why most of them avoid apprehension for a longer period than other murderers.

Yet another remarkable character of these murderers is the tendency to collect ‘trophies’ aka objects belonging to the victim; they relive and relish the act of murder through these trophies, and they may also act as a trigger for future killings.

Rather than material gains, the serial killers look for psychological gratification and are motivated by the need for sex, albeit deviant, thrill-seeking, anger, financial gain and attention; hence the difficulty in identifying and capturing them.

Most of them limit their operations to well defined geographic areas within their comfort zones that are often defined by an anchor point as in their place of residence, employment, or residence of a relative. As their confidence grows and they avoid detection, they might spiral out and move from place to place looking for their victims.

**VICTIMS:**

A serial killer selects the victims based on Availability, Vulnerability and Desirability. The victims they find most appealing are the vulnerable groups, whose disappearance would be least likely to gain notice. Hence, their prime targets are sex workers, runaways, single women, and transients and in majority of cases, absolute strangers. Majority of the killings happen after meticulous planning to avoid detection and capture and the bodies are difficult to find and identify.

**SERIAL KILLERS vs OTHER MURDERERS:**

The gratification a serial killer receive from the act of murder is what primarily differentiates them from incidental or circumstantial killers. They have a near pathological *NEED* to commit murder unlike those who kill to serve a criminal interest.

In defining serial killers, researchers and law enforcement generally use "three or more murders" as the baseline, considering it sufficient to provide a pattern without being overly restrictive.

In broad terms, serial killers are distinguished from mass murderers and spree killers using the 'time element'. Mass murders involve multiple victims from a single episode which is often attributed to a psychotic surge or revenge or supported by a criminal intent. Spree killers also have multiple victims, but across separate, yet related episodes. However, they do not have the 'cooling off period' between the murders and they are less methodical and random unlike serial killings.

In the case of a serial murder, there is a well-organized and defined time gap which may vary from weeks to years and the killings are often well organized and the victims usually belong to a specific category and the reasons for the kill can usually be pegged to psychological factors rather than any other criminal intent.

They are also very distinguishable from professional assassins, military combatants and terrorists who kill exclusively for financial, political, or geographical gains, whereas serial killers kill for the act.

Holmes and DeBurger, in 1988, put forth 5 key elements to differentiate serial killing from other multiple murders:

1. A serial killer operates over a fixed interval – it can be a span of weeks, months, years, or decades.
2. The murderer usually operates alone, although a partner (usually submissive) is involved in rare instances.
3. The victim is a stranger, and no previous relationship exists between the perpetrator and the victims.
4. The murders are not acts of passion and they are not precipitated by the victim i.e., the victim does not contribute to the act at all.
5. Fiscal motivations are absent.

**THE EMERGENCE:**

While exploring the reasons behind the emergence of a 'serial killer', it can be generally agreed that social, genetic & environmental factors all play a role and usually it is a combination of all these which alters a normal human's psyche into that of a serial killer.

Childhood experiences have a profound effect in moulding the character and the outlook of a person. Individuals who are exposed to severe stress or abuse in the childhood might become 'desensitised' which in turn might make them 'less emotionally and physiologically responsive' to the needs of others to a point of callousness and apathy. If the abuse or mistreatment originates from a person in a place of love or trust, as from a parent/guardian, it can pervert their sense of morality, turning them bitter and they may seek revenge elsewhere.

An individual who was traumatized as a child tends to avoid or fail at human relationships as an adult. They will develop a 'fear of rejection' which may provoke in the fledgling serial killer an urge to 'eliminate' any objects of his affection prior to entering a relationship with them to avoid the frightening possibility of being abandoned, humiliated, or otherwise hurt, as in childhood. The victim, on the other hand, may be totally unaware of this fixation the perpetrator has with them as most of the relationship happens in the mind of the perpetrator.

Vulnerable children, who are powerless to prevent or evade the mistreatment may cope by creating a new virtual reality to escape into where they have absolute control over circumstances. According to Garrison (1996), in this fantasy world, *"the child becomes sociopathic, because the normal development of the concepts of right and wrong and empathy towards others are retarded, because the child's emotional and social development occurs within these self-centred fantasies. A person can do no wrong in his own world and the pain of others is of no consequence when the purpose of the fantasy world is to satisfy the needs of one person"*. Eventually, as the child grows, the boundaries between fantasy and reality blurs and he may start fantasising about dominance, control, sexual conquest, and violence, eventually leading to murder without remorse.

Mental health disorders are often linked to serial killers and their behaviour usually deviate greatly from the usual norms of human morality and behaviour. The serial killers usually share the traits of people with psychopathic disorders like lack of empathy, superficial charm, impulsivity, deceitfulness, lack of emotions or shallow emotions, lack of accountability for their actions along with lack of remorse, and anti-social behaviour.

When the childhood trauma is combined with a genetic predisposition to psychopathic behaviour, the person can be at a higher risk.

In addition to all the factors, a predisposition to violence in culture can be a great influence. Some also idolise 'notorious' killers and are influenced by them for their deeds of perceived vigilante justice. Some are motivated by a strong desire for fame as a way of validating and spreading their crimes, other are there who enjoy instilling fear in the society.

The trigger to kill can emerge at any age, while some start too young as in the case of Amarjeet Sada, also known as "India's Youngest Serial Killer," who shocked the world with his horrifying crimes at a very young age. He came from a dysfunctional family and was exposed to neglect, domestic violence, and disturbing content at a young age. His is indeed a classic case of psychiatric disorder aligned with environmental factors. He showed classic early warning signs including cruelty to animals, fascination with fire-setting, and a lack of appropriate emotional responses to disturbing situations; and a violent and neglectful environment likely desensitized him to violence and normalized deviant behaviour. The absence of appropriate mental health support and social services in his community failed early identification of his behavioural issues and hindered any chances of intervention or treatment, creating one of the youngest serial killers in history. Yet, it remains to be noted down that it is virtually undetectable to recognize them until they begin the killings.

Au contraire, one of India's most notorious & oldest documented serial killer, Thug Behram, was triggered by an older acquaintance, a man 25 years elder to him, who introduced him into the Thuggee cult of that era. He was feared for his signature style of execution, without spilling a drop of blood and using just a coin and a handkerchief. He personally strangled around 251 people and led nearly 900 to death & witnessed the murder of a similar number. He used to lure his victims using charm and manipulation to gain their trust.

#### **FACTORS THAT INFLUENCE THE DEVELOPMENT OF A SERIAL MURDERER:**

There is indeed a definite link between early childhood trauma and developing mental health disorders such as psychopathy later in life. It is noteworthy that not all children who are abused develop psychopathy, nor have all psychopaths been abused as children nor do they go on to become serial killers when these factors occur simultaneously.

The evolution of an individual into a serial killer is kind of unique and do not follow a well-defined or identifiable pattern. While it is definite that physiological as well as environmental factors are key, we cannot precisely delineate which plays a bigger role and which will trigger and who will be triggered.

The way each individual process a given situation is unique and it varies with age and circumstances; the question exists why some gravitate toward violence; which can be defensive violence or aggressive, psychotic or psychopathic, reactive or predatory.

Does gender and age play a role in determining a serial killer mind-set? Although female serial killers are not unheard of, majority of the serial killers are men, with a ratio of 19:1. The usual motivations for a female serial killer are described as a call for attention, addiction, or the result of psychopathological behavioural factors. They murder for material gain, more than men, and usually get close to their victims; hence, the traditional cultural image of the "black widow".

Juvenile serial killers are also very rare, but not unheard of. There are three main categories that juvenile serial killers can fit into - primary, maturing, and secondary killers. In their case, all factors, social, genetic and environmental come together for the final push.

The factors that lead to the development of a serial killer can be widely categorized under 'social, psychological & biological factors':

#### **Social Elements:**

Childhood experiences and exposure play a crucial role in forming an individual's cognition of the world. Socio-economic and environmental factors have a great influence in character formation. An inadequate environment and over exposure to abuse and violence from home can lead to assimilation of similar behaviour.

The absence of a nurturing environment and abuse or witness of abuse by a parent/guardian can trigger a genetic predisposition to violence and aggression, on the other hand, even a person with a genetic predisposition can keep that tendency in submission if the social environment is nurturing. Several studies in the USA stated that an influential father/father-figure during childhood can prevent/reduce violent and aggressive behaviour during adulthood.

A rejection by a parental figure or a loved one is a recurring theme in the childhood history of serial killers. Other social traumas which can precipitate matters include repeated humiliation and abandonment and unhealthy relationships with significant adults. Insecure and fearful parental attachment styles can also be a trigger for violent behaviour.

**Psychological Elements:**

Psychology and crime are closely linked, and psychological problems can often lead to an affinity to crime and antisocial behaviour. Mental health disorders like hallucinations, delusions, or schizophrenia are often noted in the files of serial killers. Children who have undergone unbearable traumatic experiences at a young age are at a higher risk of developing psychological disorders and a violent home/social environment can trigger a psychopathic tendency to kill.

Many of them exhibit symptoms of psychosis or bipolar disorder, and the killings usually start with a psychotic breakdown, it is very rare that they are ill enough to be declared legally insane.

**Biological/Genetic Elements:**

Psychophysiology, brain activity, and genetics all can be indicators to a predisposition to criminal behaviour.

Genetically, the variant of an enzyme called monoamine oxidase A (MAOA) – nicknamed ‘The Warrior Gene’ is often associated with aggressive and risk-taking behaviour. This enzyme has a key role in breaking down the neurotransmitters responsible for positive emotions – such as noradrenaline, serotonin, and dopamine, so a variation in its levels (too high or low) can affect the moods & behaviour negatively.

Neurotransmitters are responsible for conducting electrochemical impulses within and across regions of the brain and the body and an imbalance of these systems have been linked to many psychiatric disorders. Hormonal imbalance is a documented cause behind belligerent and hostile acts. Abuse, violence and neglect in childhood can result in the permanently low levels of serotonin turning those children into violent criminals as serotonin has a key role in modulating brain activity including regulation of emotional state and a low serotonin level can result in the onset of impulsive and aggressive behaviour. Dysfunctions in dopamine levels are also a predisposition to serial killing. Likewise, an abnormally high level of testosterone has also been linked to excessive aggression and impulsiveness.

Neurodevelopmental problems along with stressful/traumatic events and environmental factors can act as a trigger to serial killing. Serial killers are assumed to have a greater need for stimulation as compared to a normal individual, their low dopamine levels motivate them to seek stimulation and reward, eventually leading to compulsive pleasure-seeking acts. When combined with other psycho-social factors this can lead to acts of violence and serial killing.

Brain structure itself has a role in determining one’s personality. Malformations of the brain structure, either congenital or because of trauma, can alter the mood and trigger maladaptive behaviours like violent episodes of rage and outburst intertwined with kind and neutral state of functioning. Specifically, a deformed prefrontal cortex due to head trauma during childhood or prenatal years may result in violent behaviour.

A classic case is that of the serial killer, Fred West, who suffered a serious head injury in a motor vehicle accident when he was 17 years old. Post this event, he developed a severe phobia of hospitals had frequent angry outbursts. Two years later, he fell from a height of two floors and sustained another head injury. Afterwards, he became extremely moody with episodes of blackout when he raped and killed. His head trauma is said to have injured the amygdala - the brain structure that deals with fear and aggression – leading to an absolute lack of fear and increased aggression, which eventually led him to turn into a serialist.

Serial killings often have a history of mental illness including psychopathic behaviour, paranoid schizophrenia, depression and such. The famous case of Raman Raghav (India) is an example of such a serial killer who was suffering from paranoid schizophrenia and was unable to understand the nature and illegality of his acts.

**FEATURES OF A SERIALIST:**

The psychology of the serial killer has a frightening allure, and, in most cases, the signs and clues are so microscopic that they go unnoticed even by those around them. Their down-spiral usually begins as early as infancy and continues through childhood and into adulthood. The trigger and killings can start at any point during childhood to adulthood.

Most of them are disadvantaged socially and have parental issues. Early identification and prevention are so complicated and difficult as there is no single psychological or personality profile that can box-in all serial killers, but they unfailingly share some recurring traits, like a history of criminal involvement, it could even be petty crimes, from early childhood and on keen observation signs of psychopathic personality and hallucinations can be identified. Often bullied or socially isolated as children, they create a virtual reality which is more bearable for them and it might eventually blur the reality and turn into full-fledged hallucinations, a world where they have absolute authority and control over situations.

Serial killers have a predisposition to engage in fetishism, partialism or necrophilia, which are paraphilias that involve a strong tendency to experience the object of erotic interest, almost as if they are physical manifestations of the body itself.

MacDonald triad of behaviours - animal cruelty, fire setting, and bed wetting – are often exhibited by future serial killers in their childhood.

Some of the character-defining features described commonly in the serial killers include lack of empathy, charm, impulsivity, deceitfulness, shallow or absent emotions, lack of responsibility and remorse, an intense craving for power and control, failure to distinguish reality and fantasy, a desire for revenge and apathetic anti-social behaviour. Most of the serial killers demonstrate some or all of these characteristics and behaviours.

- **Lack of empathy:** Failure to understand the emotions of other people and a failure to be compassionate and recognise the impact of their actions on others.
- **Superficial charm:** Purposefully and deviously charming and charismatic, with the intent to manipulate.
- **Impulsivity:** Act impulsively without considering legal or moral consequences
- **Deceitfulness:** Skilled in deceit, through lies and manipulation; an uncanny ability to evade suspicion for an extended period shows a versatile and cunning nature.
- **Shallow emotions:** Limited emotional range & fails to feel deep sadness, guilt, or remorse. They often display a disturbing calmness during arrest and interviews, demonstrating hollow emotions.
- **Irresponsibility:** Do not acknowledge responsibility for their actions and blames other people or circumstances; a tendency to scapegoating.
- **Lack of remorse:** Failure to feel regret or remorse.
- **Desire for control:** They prefer "hands-on" murder techniques such as strangulation, stabbing, or beating over shooting which provide them with a greater sense of personal control over their victims.
- **Rich Fantasy Life:** They tend to indulge in fantasy and as the crimes escalate, they find it difficult to distinguish fantasy from reality. Detachment for such people is something in philosophy called 'praecox': the person in front of you feels like a wall or an object, and you feel completely detached and stony.
- **Fascination for power:** They are fascinated by the possibility of power and control over other humans and this desire often reflects in the mode of killing and in the practice of a 'signature style'.
- **Desire for Revenge:** They have a strong desire for revenge, albeit misplaced or displaced, either against specific group of individuals or against society as a whole.
- **Antisocial behaviour:** Exhibits antisocial behaviour, including criminal acts, aggression, and disregard for societal norms.

#### PROFILING:

Psychological profiling is a crucial tool in identifying and apprehending serial killers. The criminal profiling process is defined (by the FBI) as a technique to identify the perpetrator of a violent crime by identifying the personality and behavioural characteristics of the offender based upon an analysis of the crime committed. Criminal profiling is an in-depth analysis of the crime scene and finding common patterns with previous incidents. It helps to identify the choice of victims, manner, time and location, types of the crime, communication from the suspect and the condition of the crime scene. However, the drawback is that it can start only after the killings have started.

#### CLASSIFICATIONS:

The psyche of identified serial killers have thus been documented and narrowed down to the most minuscule details in the hopes of understanding what factors contribute to transforming a "man" into a "monster" only to conclude that the triggers and the contributing factors are as diverse as their reasons and methodologies. Undoubtedly, they have fascinating back stories which could be the reason for the society's morbid interest in them and the number of documentaries, series, and movies on their lives.

#### Organized & Disorganized Serial Killer:

A broad classification by the FBI Behavioural Unit classifies the serial killers as 'organized' and 'disorganized'.

#### The Organized Serial Killer:

The organized serial killer possesses average to above-average intelligence, have good social skills, and have a reasonably stable employment history. The murders are usually well-planned and methodical, and they leave behind a well-organized crime scene. They also lead very organized lives, and the

trigger often emerges in the form of a failed intimate relationship or financial/employment problems. The murders are premeditated and often using a weapon. They tend to refrain the victim to establish dominance and control. Their victim selection usually follows a pattern with a basic common characteristic. They usually have a stable or controlled mood.

#### **The Disorganized Serial Killer:**

The disorganized serial killer have below-average intelligence, poor impulse control and negligible social skills. The murders are impulsive and disorganized and leaves a chaotic crime scene. They usually leave biometric or body fluid as evidence and at times the weapon itself. They usually operate in and around their residential area and kill opportunistically rather than preplanned. The murders usually follow a sexual or sadistic act.

#### **The Mixed Killer:**

This is a category which was added later on to cover the serial killers who couldn't be clearly demarcated as an organized or disorganized serial killer and possess characteristics of both. While the crime and victim may be preplanned, the execution fails leaving behind a trail of clues and chaos at the crime scene and the murder escalates into extreme acts of violence.

#### **Holmes & DeBurger Classification:**

Holmes and DeBurger proposed yet another categorization, classifying them into four, albeit poorly defined sections.

#### **The Visionary Killer:**

They are motivated to kill by auditory or visual delusions and hallucinations, is opportunistic in selecting victims, and leaves a messy crime scene. They believe that some higher authority has ordered them to terminate some people.

#### **The 'Mission-oriented' Killer:**

They are pragmatic in orientation and are keenly focused on the act of killing for a purpose in the belief that they are doing the society a favour by eliminating some people. They seek to improve the world according to their own biased and self-serving standards and target specific categories of individuals.

#### **The Hedonistic Killer:**

They seek thrill and enjoy committing murders and is further narrowed down into the lust killer, the thrill killer, and the creature-comfort killer. They are motivated by personal enjoyment, pleasure, or gain, and carefully chooses the victims based on predetermined criteria and generally leaves a tidy crime scene.

- **Lust Killer:** Murder seeks sexual gratification, but not through traditional sexual acts. They gain pleasure from the act of murder and later on seek sexual pleasure from deviant acts including masturbating over the dead victim, cannibalizing, dismembering, indulging in necrophilia.
- **Thrill Killer:** They seek pleasure from the act itself and hence, extends the act with various forms of torture and sadism. Once the victim is dead, they lose interest in the murder.
- **Creature-comfort Killer:** They usually kill for creature comfort, including money, business gains, and other material rewards that would be realized by the murder of the intended victim. Women serialists usually fall into this category. Their ultimate intent to kill rests in material gains. The killings are preplanned, organized and focused. After a murder, a comfort killer will usually wait for a period of time before killing again to allow any suspicions by family or authorities to subside. They often use poison, most notably arsenic, to kill their victims. Female serial killers are often comfort killers, although not all comfort killers are female

#### **The Power/Control-Oriented Killer:**

They seek to control and dominate their victims and impose their power on the victims. They enjoy the process of murder and use force to subdue and torture their victims which gives them a sense of power and control. leaving them with feelings of powerlessness and inadequacy as adults. Many power- or control-motivated killers sexually abuse their victims, but they differ from hedonistic killers in that rape is not motivated by lust (as it would be with a lust murder) but as simply another form of dominating the victim.

Both these profiling categories – Organized/Disorganized and The Visionary/Hedonist/Mission-oriented/Power-oriented – are ultimately inadequate because they are inconclusive and exclude the identification of multiple suspects that are potentially dangerous.

## REASERCH & DATA:

Professor Michael H. Stone from Columbia University studied 89 male sexual serial killers and reported that 87% met the criteria for psychopathy and 88% also had a sadistic personality disorder, and they received sexual gratification from hurting others. In yet another study among 36 German serial killers, 86% had at least one personality disorder with 36% meeting the criteria for psychopathy.

The famous Neuroscientist, Jim Fallon, states that the MAOA gene is more common in men and may be the reason for more serial killers in this gender. However, this gene alone is not normally enough to drive someone to kill. A study by Dr Fallon among 70 random people (serial killers and regular), showed that the three high-risk factors – MAOA gene, foetal overexposure to serotonin & brain anomalies - could exist in someone without leading to murder and his hypothesis is that the fourth factor, exposure to extreme violence at a young age, before puberty could be the trigger that pushes someone to commit murder.

Jim Fallon has further colluded that genetic predisposition paired with a family history of violence and a childhood devoid of love and affection is what all serial killers have in common, in addition to a desire for control, which could emerge from a childhood trauma or violence they had no control on.

A study among convicted serial killers revealed that 42% of them suffered from physical abuse in childhood against 74% who suffered psychological abuse. Almost 37% of them witnessed sexual abuse by people of authority while 43% were sexually abused themselves by a person holding a parental/guardian role. A small percentage of serial killers were found to be 'accident-prone children' often suffering head trauma. Most of them struggled with maintaining social relationships.

The neuropsychologist Debra Niehoff states that, "The brain perceives and interprets, but the biochemical alterations triggered by experience continually update this circuitry, shaping worldview in accordance with conditions" (2003).

Serial killers, according to Jack Levin, often go through a childhood marked by the absence of any nurturing relationship and hence, have a poor self-image. They often come from families where the parents were absent or ineffective, where authority was not defined or was abused and allowing them to engage in destructive behaviour undeterred.

The research hence conclude that serial killers are not born with the tendency to kill; the desire emerges on occurrence of a series of environmental as well as internal factors.

## THE INDIAN SERIAL KILLER:

The world used to portray a stereotypical serial killer as a middle-aged white male monster, an aftermath of extreme physical/psychological abuse and a depraved and lonely childhood, which was inefficient and far from truth, as they span over all ethnicities and nationalities. This profiling also unduly delayed the chance and identification of monstrosities committed by serial killers from other ethnicities and backgrounds.

Indian crime scene had its own share of delays and lack of expertise in tackling these horrific crimes; however, we are catching up. There is a recent emergence of morbid fascination among the people about this category of killers and their crimes. Society seems to be averted and fascinated at the same time by them. Some of the most famous ones are briefed below.

**Raman Raghav aka Sindhi Talwai:** One of the scariest amongst them haunted the streets in and around Mumbai during the 1960s, murdered around 41 people during his killing spree. His childhood fits a stereotypical profile of a serial killer, with neglect and witnessing abuse.

**Charles Sobhraj:** Aka the "Bikini Killer" or "Serpent". He operated during the 1970s. He lured and murdered vulnerable tourists across the "Hippie Trail," leaving a trail of death and deception. He was known to be charismatic and manipulative. Like Ted Bundy, he was known for being an extremely good looking man, that's how he got away with most everything he did.

**Thug Behram:** He was active during the 19th century and was part of the notorious Thuggee cult, responsible for a staggering number of murders by strangulation with a piece of cloth and a coin. His trigger was an influential adult 25 years elder to him.

**Surinder Koli:** His gruesome acts were committed on the streets of Noida during 2000s, targeting young children.

**Auto Shankar:** Gowri Shankar, operated in Chennai during the 1980s. He was as famous for his notorious and heinous murders as he was for his ability to evade law.

**Renuka Shinde:** She broke the gender stereotype of serial killers to become India's first documented female serial killer and targeted women. Operating in the 1990s, she poisoned numerous victims and brought attention to the complexities of female criminality.

**Stoneman:** Like Raman Raghav, he operated in Mumbai in the 1980s. Still unidentified, he bludgeoned his victims to death and unsurprisingly his victims were the most vulnerable group, the homeless.

**Darbara Singh:** Aka "Vampire of the Bagri tribe," he terrorized rural Punjab and had cannibalistic tendencies, mapping India on the official crime scene of Cannibalistic serial killers.

**Mohan Kumar:** He terrorized Kerala during the early 2000s, his story highlights the law-enforcements challenges in tackling serial killers in a society where taboos and stigma can hinder investigations. His heinous acts brought to light the importance of psychological profiling to Indian law enforcement.

**Cyanide Mallika:** K.D. Kempamma, exploited and killed vulnerable women for financial gain. Deceitful and charismatic by nature, she posed as a government official, and poisoned numerous victims with cyanide. She would gain the trust of the victim and in an act well concealed as an act of piety, would request them to consume holy water or prasad which would be laced with cyanide poison.

An in-depth study of their diverse backgrounds reveals the failure of profiling in early identification and brings out the sad truth that the profiling can start only after the first 2 kills. Yet another challenge is the time gap between the killings, wider the gap, tougher the identification.

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## CONCLUSION:

There is no concrete theory to explain neither the psychology nor the actions of serial killers. Unfortunately, we are yet to identify and prevent it before the first kill. Criminological and sociological research has helped us with a better understanding of serial killers, and we have determined ways to deter such criminal actions, however, it usually happens after the first 2 kills at the least.

Most serial killers derive great thrill and a sense of contentment from the act of killing. Most of them hide in plain sight as normal people with families and homes, some are gainfully employed, and appear to be contributing members of the society. They are so adept at manipulation and deception that they can carry on these personalities for decades and blend into the social fabric, while seeking out the next target.

It is a sad truth that most of them are insecure individuals, traumatised in their childhood and they develop a morbid compulsion to kill, which stems from a fear of rejection or abandonment as it happened in their childhood.

There is no generic template to paint a serial killer; they differ widely in all aspects, making detection even more complicated. They differ in the factors that trigger them, the motivations for the kills, the behaviour at the crime scene and the in the IQ. The higher the IQ, the tougher the apprehension.

Some of the commonalities are a lack of remorse, delusions of grandeur, impulsiveness, and predatory behaviour; they are all expert manipulators. They are all convinced that their reasons to kill are well justified.

Pre-emptive action is impossible; we cannot study millions of people to collect prospective data to sieve out the few who may become serial killers. Also, the lack of comparison group studies which also hinder progress in this area of research. The impact of trauma or failure differs widely from person to person. Given the same circumstances, one individual may cope with a stressor or trauma and come out with a positive and giving mindset, whereas another may come out with a destructive mindset. Moreover, what causes stress and trauma in one person may be different from another person's definition of the same. What may be a factor or trigger to kill for one individual, may not be a trigger for another. As each individual and their response are as unique as fingerprints, it is impossible to scan the entire humanity to identify potential serialists.

- A predisposition to serial killing have biological, social, and psychological elements in play and cannot be limited to a single characteristic or trait.
- The development of a serial killer involves a combination of all these factors, which unfortunately, in a rare circumstance, confluence in certain individuals.
- There are no discernible combinations of traits or characteristics which will help identify a serial killer from other violent offenders.
- In short, there is no generic template for a serial killer.
- Serialists are driven by motives or reasons justifiable only in their perverted minds.
- Serial killers have no demographic or ethnic identities, they come in all colours, genders, ages and ethnicities.
- Violence and sexual gratification are inexplicably intertwined in the psyche of majority of these killers.

Given their unique and extremely complicated and convoluted minds and the unpredictability of human nature, we are still far from the path to identify specific pathways of development that produce serial killers.

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