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## An Exploration of Trauma Markers in the Artwork of Serial Killers

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AN EXPLORATION OF TRAUMA MARKERS IN  
THE ARTWORK OF SERIAL KILLERS

by

Kiran M. Haynes

A research paper presented to the  
FACULTY OF THE DEPARTMENT OF  
MARITAL AND FAMILY THERAPY  
LOYOLA MARYMOUNT UNIVERSITY


In partial fulfillment of the  
requirements for the degree  
MASTER OF ARTS

May 2017



**Signature Page**

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### **Disclaimer**

The views, opinions, and findings expressed in this research paper are those of the author and do not necessarily reflect the official policy or position of Loyola Marymount University, the Department of Marital and Family Therapy, nor any other affiliated entity. The information provided is designed to be exploratory and broaden current available literature on the identified topic. This research is not meant to be used to diagnose or treat any mental health problems and symptoms discussed in its contents. All sources have been acknowledged and cited in the reference section. References are provided for informational purposes and do not constitute endorsement of other sources. This research was approved by an Institutional Review Board.

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I dedicate this exploration to those with the “dark and twisties,” to those curious of the darker side of the human psyche, to those who constantly ask “why?” and are disappointed in never having enough information, and who long for a deeper understanding.

This research is dedicated to my Nana, who first introduced me to the arts, and who was my biggest inspiration and source of encouragement to pursue a higher education, to my mom, who has been with me every step of the way through this journey, and to my closest friend, who also shares in the dark and morbid curiosities.

In remembrance of Bev Nikas, Tom Hopkins, and Mitzy.

Sometimes the shadows are bigger than what’s apparent, there’s more beneath the surface.

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### Abstract

This research is a qualitative art-based study exploring trauma markers found in the artwork of serial killers through the participation of licensed art therapists trained in the identification and treatment of trauma. The literature review covers a broad range of variables that influence the development of mass murderers, and how art therapy may be useful in working with serial killer populations. The study offers a unique, non-verbal exploration of the trauma experienced by serial killers through the art therapy lens. The three participants provided invaluable data through their responses to a questionnaire and creation of response art that demonstrates evidence of complex trauma, military trauma and traumatic brain injury; all of which were supported by previous research found in the literature. Themes identified through the analysis of the data included: communication, representation, chaos and violence, life and death, and illusion of power. This study demonstrates the importance of understanding serial killers' psychological makeup, the traumas and other experiences that have profound impacts on them, and the contexts in which they develop. This may lead to a better understanding in how to look for the warning signs in their development and artwork; allowing for the potential to prevent such violent behavior with early intervention.

*Keywords:* serial murder, serial killer, trauma, discourse, art therapy, forensic art therapy



**Table of Contents**

|                                       |     |
|---------------------------------------|-----|
| Title Page .....                      | i   |
| Copyright .....                       | ii  |
| Signature Page .....                  | iii |
| Disclaimer .....                      | iv  |
| Dedication .....                      | v   |
| Acknowledgements .....                | vi  |
| Abstract .....                        | vii |
| Table of Contents .....               | 1   |
| List of Figures .....                 | 3   |
| Introduction .....                    | 4   |
| Background of the Study Topic .....   | 6   |
| Literature Review .....               | 11  |
| Introduction .....                    | 11  |
| Prevalence and Statistics .....       | 12  |
| Personality and Other Disorders ..... | 14  |
| Serial Killers .....                  | 16  |
| Exposure to Trauma .....              | 21  |
| Serial Killing .....                  | 24  |
| Art Therapy .....                     | 25  |
| Conclusion .....                      | 32  |
| Research Approach .....               | 33  |
| Methods .....                         | 35  |

|   |    |
|---|----|
| Definition of Terms.....                  | 35 |
| Design of Study.....                      | 39 |
| Results.....                              | 41 |
| Presentation of Data.....                 | 41 |
| Analysis of Data.....                     | 62 |
| Findings.....                             | 71 |
| Conclusion .....                          | 79 |
| Reference List .....                      | 82 |
| Appendices.....                           | 87 |
| Experimental Subject Bill of Rights ..... | 87 |
| Informed Consent Form.....                | 88 |
| Questionnaire .....                       | 90 |
| Letter for Selecting Participants.....    | 91 |
| Serial Killer Biographies.....            | 92 |
| Serial Killer Artwork .....               | 97 |

**List of Figures**

|  |    |
|--|----|
| Figure 1: Participant 1 Response - Danny Rolling .....     | 43 |
| Figure 2: Participant 1 Response - Richard Ramirez.....    | 45 |
| Figure 3: Participant 1 Response - Jeremy Bryan Jones..... | 47 |
| Figure 4: Participant 2 Response - Danny Rolling .....     | 49 |
| Figure 5: Participant 2 Response - Richard Ramirez.....    | 51 |
| Figure 6: Participant 2 Response - Jeremy Bryan Jones..... | 54 |
| Figure 7: Participant 3 Response - Danny Rolling .....     | 56 |
| Figure 8: Participant 3 Response - Richard Ramirez.....    | 58 |
| Figure 9: Participant 3 Response - Jeremy Bryan Jones..... | 61 |
| Figure 10 .....  | 70 |
| Figure 11 .....  | 71 |
| Figure 12 .....  | 71 |
| Figure 13 .....  | 72 |
| Figure 14 .....  | 72 |
| Figure 15 .....  | 73 |

## **Introduction**

### **The Study Topic**

The purpose of this research was to study how trauma(s) impacted the psychological makeup of serial killers and how those experiences were evident in their artwork. The intention was to review the artwork of serial killers and to make connections between the artwork and trauma markers identified in the art therapy literature. The study sought to answer how the trauma markers were evident in the artwork, what common themes existed in the artwork of the serial killers, and what elements in the artwork related to the various types of trauma.

### **Significance of the Study**

Depictions of serial killers in the news and entertainment media are portrayed in a stereotyped, exaggerated and sensational fashion in order to capture the public's eye. This causes the viewers of the socially constructed celebrity status of the serial killer to become captivated by the distorted presentation of the killer, rather than the true dynamics, patterns, and horrific realities of their crimes. Despite the fact that serial killers have become increasingly popular in current media and television, there is little research available on specific contributing factors that impact their psychological makeup. Much of the information on serial killers focuses on the depictions provided by the news and media, but in order to fully understand a serial killer, it is important to consider broader social and historical contexts that give rise to such violence. This study may aid in solving the problem of the stereotyped celebrity monster through deepening the available information on the development and psychology of a serial killer. By understanding their psychological makeup, what traumas and other experiences had profound impacts on them, the contexts in which they developed and how to look for the warning signs in their development and artwork, we may be able to prevent such violent behavior with early intervention.

It was the goal of this study to examine not only social and individual factors that form a serial killer, but to specifically look at the effects of trauma on these individuals. By incorporating art into a study dominated by psychology, criminology and forensics, art therapy can be brought into line with well-established scientific fields. This study may also offer valuable information to developing practices for forensic art therapy in working with prison populations and incarcerated serial killers by better understanding how their experienced traumas have affected their identity formation, artwork, thoughts and behaviors. Serial killers often manipulate the verbal language they use on trial and in interviews. Art therapy offers a unique framework in examining the trauma experienced by serial killers through using a lens that provides an understanding that exists outside of verbal language.

The anticipated findings of this study have the potential to offer greater insight to the psychological makeup of these serial killers and a deeper understanding of how detrimental the effects of traumatic experiences can be on an individual. This study may also offer information that extends beyond these killers as individuals and open avenues for future research into modern phenomena, such as anonymity in mass urbanization, celebrity culture and effects of the media, and cultural frameworks of denigration that lead to targeted violence towards marginalized populations. Societal, political and cultural factors are all crucial considerations in the field of mental health, especially in working with marginalized populations. It was the hope of this study to correlate markers for trauma found in the artwork to specific types of traumatic experiences and the serial killers' behaviors. This may also offer an opening to further research on assessing children and adolescents for signs of being at risk of developing violent behaviors and who may need early intervention and monitoring during their development.

### **Background of the Study Topic**

The term “serial killer” was created by FBI agent Robert Ressler in the 1970s (Whittington-Egan, 2008). However, serial killing has been present for centuries, the first publicized case being that of Jack the Ripper in the 1880s in Britain. In the United States, the earliest documented serial killer was H.H. Holmes in the 1890s. Whittington-Egan (2008) states on the development of the serial killer phenomenon that:

The comparatively recent recognition of the serial killer notwithstanding, he is by no means a new, essentially 'modern', species of homicide monster. It is just that, like the dinosaur in Jurassic times, he has increased and multiplied to crescendo proportions since the 1980s. Serial murder is a growth industry. (p. 325)

The FBI Behavioral Science Unit was the first to create serial killer profiling and “compiled its initial database between 1979 and 1983” (Whittington-Egan, 2008, p. 326) that was organized into divisions of psychotics and psychopaths, and further subdivided into asocial/disorganized and non-social/organized.

Research on the prevalence and statistics of serial killers is limited due to the difficulties in gaining access to subjects, lack of reliability of the information provided by the subjects and the possibility of interviewer bias, especially in examining the perpetrator. Other challenges include problems with data sources, such as incongruent definitions, small sample sizes, samples biased towards well known serial killers and a reliance on biographies and news sources. Data from law enforcement agencies is also often incomplete and unreliable because reporting is voluntary, there is a pressure to not alarm the public leading to incorrect classification of the homicides and the records indicate only known crimes to the police. It is also challenging to accumulate data on serial killers who cross state lines as they may stay outside the detection of

the FBI and therefore, their killings may be classified as random murders within state lines and avoid the classification of serial killer on a national level.

According to the FBI crime statistics, there are an estimated twenty-five to fifty serial killers operating in the United States at any given time, each being responsible for an average of three murders per year (FBI, 2012). The Radford University/FGCU Serial Killer Database states that, “as of November 23, 2015, the database contains information on 4,068 serial killers and 11,680 victims of serial killers” (Aamodt, 2015, p. 1). In the decade of 2000, there were 337 documented serial killers in the US and the decade of 2010 saw a significant decrease to 93 serial killers. The majority of serial killers (average of 98.6) have committed more than five murders and tend to be organized type of killers (Aamodt, 2015). In the United States, most serial murders have occurred in the state of California at a documented total of 1,513 victims, the next highest being Texas at 808 victims (Aamodt, 2015). The highest methods of killing are instances by shooting, strangling and stabbing (Aamodt, 2015). Stabbing is often associated with serial sexual murder and television often portray all serial killers to also be rapists. However, while there is not a significant difference between the two, more victims were not raped during the serial killing than those that were raped (Aamodt, 2015). In connection to sexual violence, the idea of serial killers as vigilantes, Henson and Olson found that “serial killers account for one third of all prostitute killings” (Henson & Olson, 2010, p. 356).

Allely et al. (2014) found that combinations of neurodevelopmental and psychosocial factors, such as brain injuries, childhood trauma or other psychological stress, and having a diagnosis of a mental disorder increased the risk of serial murder. Knight (2006) discussed the development of violent acts as starting with petty crime and violence towards animals in childhood which escalates towards others during adolescence, and further evolves into an

aggressive obsession with death and violence in adulthood. Multiple studies that were discussed by Allely et al. (2014) have found that among violent offenders, developmental problems in adolescence, neuropsychiatric disorders in childhood, as well as learning disabilities and conduct disorder were present factors. Whittington-Egan (2008) also writes that serial killers have often experienced childhood neglect and abuse, traumatic brain injury and show psychopathic behaviors.

Federman, Holmes and Jacob (2009) state that:

The idea of a willful murderer (or a willful manipulator) without mental illness creates a space for the legal and social construction of personal responsibility to overtake an undefined, misunderstood, and reprehensible action that cannot be defined by science or articulated by the subject. (p. 44)

They go on to argue that serial killers' psychopathological behavior is willful and enacted on their own accord, stating that "serial killers are linguistically manipulative, social misfits, cold, without affect, and operate without motive," and therefore, "not Psychotic" (Federman, et al., 2009, p. 45). This contradicts the social construct that serial killers are mentally ill. Henson and Olson (2010) also describe serial killers as "constrained by the societal discourse surrounding serial homicide" (p. 360), further reinforcing the evidence that the serial killer archetype found in mass media has profound effects on the understandings of how their identities form and how they are studied.

Henson and Olson (2010) also found a common act of the serial killers attempting to reject the severity of the archetype by aligning themselves with mental illness, and in doing so, realigned themselves with stigmatized cultural stereotypes. "Goffman (1963) explained this strategy as attempting to pass by disclaiming one social stigma for a less stigmatized



identity... Thus, they were attempting to reject a stigma by simultaneously reinforcing other cultural stereotypes regarding serial killing” (Henson & Olson, 2010, p. 360). Rather than focusing on their behavior as normal, there was a stronger attempt for many of the men to provide excuses and justifications. Although the serial killers in these studies attempt to manage and reframe their stigmatized identities, “highly stigmatized individuals may contribute to their own stigmatization by reifying stereotypes of serial killers” (Henson & Olson, 2010, p. 361). In essence, they reach an aporia in their deconstruction of a serial killer as their argument for normalcy cannot be followed by reifying another stigmatized identity.

In the study of Bartels and Parsons (2009), they state that:

The detailed analysis of a serial killer’s talk has led to the identification of three major discourses: (1) perpetrator as ‘sympathetic’; (2) perpetrator as ‘serial killer’; and (3) perpetrator as ‘driven by sexual fantasy’. The implication of these three discourses is that they construct a seemingly contradictory identity for the perpetrator, which serves the action of mitigating responsibility and obscuring violence. (p. 276)

Bartel and Parsons (2009) agree with Henson and Olson (2010) in that these killers utilize the popular media’s construct of serial killing to explain their behaviors as being in accordance with the serial killer archetype, which serves to manage their identity gap between normalcy and deviancy. They also draw upon the common beliefs that all serial killers were severely abused and maltreated as children, have a mental illness and may be possessed by an evil force, which positions them as victims of circumstance and further serves to mitigate responsibility.

There is minimal research available on mental health services with prison populations and psychopathy and none that specifically address serial killers. One study conducted on psychiatry patients in Istanbul found improvements in patients during the termination phase of

art therapy treatment. Eren et al. (2014) found that some of the highest MMPI scores were evident in psychopathy, and that the MMPI data in the study showed “unusual ideation processes, perceptual peculiarities and the ability to evaluate reality (Sc), difficulties in interpersonal relations, impulse and anger control issues (Pp)” (p. 383); traits that have been socially constructed to be common in serial killers. The results of their study support the hypothesis that “long- term psychodynamic art psychotherapy could be a beneficial tool in the treatment of patients with severe PD” (Eren et al., 2014, p. 383). They also hypothesize that Antisocial Personality Disorder, which is associated with serial killers, may have the potential to be “treated with intense therapy where multiple techniques are involved and the environment is arranged therapeutically” (Eren et al., 2014, p. 383). This creates a possible argument that serial killers could benefit from art therapy, especially when used in a multimodal approach.

### Literature Review

*“You don't understand me. You are not expected to. You are not capable. I am beyond your experience. I am beyond good and evil...I don't believe in the hypocritical, moralistic dogma of this so-called civilized society...I don't need to hear all of society's rationalizations. I've heard them all before.”*

*-Richard Ramirez*

Despite the fact that serial killers have become increasingly popular in current media and television, there is little to no research available on specific contributing factors that impact their psychological makeup. This paper sought to review the current research available on the prevalence, risk factors, development, behaviors and the role of trauma in serial killers' identities. Then, it comes to an end with a review of the current art therapy literature, primarily by David Gussak and his research with forensic art therapy. By understanding their psychological makeup, what traumas and other experiences had profound impacts on them, the contexts in which they developed and how to look for the warning signs in their development and artwork, we may be able to prevent such violent behavior with early intervention.

## An Exploration of Trauma Markers in the Artwork of Serial Killers

### **Prevalence and Statistics**

Research on the prevalence and statistics of serial killers is limited due to the difficulties in gaining access to subjects, lack of reliability of the information provided by the subjects and the possibility of interviewer bias, especially in examining the perpetrator. Other challenges include problems with data sources, such as incongruent definitions, small sample sizes, samples biased towards well known serial killers and a reliance on biographies and news sources. Data from law enforcement agencies is also often incomplete and unreliable because reporting is voluntary, there is a pressure to not alarm the public leading to incorrect classification of the homicides and the records indicate only known crimes to the police. It is also challenging to accumulate data on serial killers who cross state lines as they may stay outside the detection of the FBI and therefore, their killings may be classified as random murders within state lines and avoid the classification of serial killer.

### **Serial Murder**

According to the Radford University/FGCU Serial Killer Database, “As of November 23, 2015, the database contains information on 4,068 serial killers and 11,680 victims of serial killers” (Aamodt, 2015, p. 1). In the decade of 2000, there were 337 documented serial killers in the US and the decade of 2010 saw a significant decrease of 93 serial killers. The majority of serial killers (average of 98.6) have committed more than five murders and tend to be organized type of killers (Aamodt, 2015).

While serial killers are stereotyped to be highly intelligent, that is not always the case. The highest documented IQ of a serial killer is 186, which is considered highly gifted. The

lowest IQ is 54, which is considered cognitively impaired. The average IQ of all documented serial killers in the United States is 94.8, which is average intelligence (Aamodt, 2015).

The stereotype of a serial killer assumes that they do not commit the murders for financial gain, as part of criminal enterprise, such as gang involvement, or to avoid arrest. However, statistics show conflicting information. Highest to lowest motives of serial killing are as follows: enjoyment (thrill, lust, power), financial gain, anger, multiple motives, criminal enterprise, avoid arrest, cult, convenience, hallucinations and attention seeking (Aamodt, 2015).

Both decades of 2000 and 2010 had higher reports of African American serial killers, with Caucasian in second, Hispanic in third, Asian in fourth and Native American as being the least documented serial killers. However, the image of a serial killer being a Caucasian male may result from there being higher incidence (51.7%) of Caucasian serial killers identified since 1900 as compared to African Americans (40.6%), the remaining 7.7 percent consists of Hispanic (6.1%) and Asian and Native American, both at 0.8 percent. While there have been highly publicized female serial killers, such as Aileen Wuornos, since 1900, 92.5 percent of identified serial killers were male and only 7.5 percent were female. Recent research, such as that of Henson and Olson, has found that there may be a correlation between serial killing and military experience, however, statics show that 77.6 percent of male serial killers had no military experience and 22.4 percent did (Aamodt, 2015).

### **Victims and Methods**

The highest methods of killing are instances by shooting, strangling and stabbing (Aamodt, 2015). Stabbing is often associated with serial sexual murder and television often portray all serial killers to also be rapists. However, while there is not a significant difference between the two, more victims were not raped during the serial killing than those that were raped

(Aamodt, 2015). In connection to sexual violence, the idea of serial killers as vigilantes, Henson and Olson found that “serial killers account for one third of all prostitute killings” (Henson & Olson, 2010, p. 356). The number of documented serial murders in the US has significantly declined from 145 in 2000, to 26 in 2015 and the majority of serial murders have occurred in the state of California at 1,513 victims, the next highest being Texas at 808 victims (Aamodt, 2015).

### **Personality and Other Disorders**

Angilli, Sartori and Donzella (2013) argue that “A clinically classified [schizophrenic] subject, with strong reality dissociation, would not have been able to organize and plan so many independent successful serial murders” (p. 488). They used a battery of tests to measure neuropsychological impairment and social and emotional cognition deficits in a serial killer, KT, which resulted in functioning that was more normative than predicted. KT took a vigilante stance and had the perception that he was cleaning the world; he was given a “psychiatric diagnosis of schizoid and paranoid personality disorder” (Angilli, et al., 2013, p. 487). While KT had high scores on the Schizophrenia scale and increased results in the psychotic triad, there were challenges in diagnosing him as he did not meet all criteria for APD. In studying KT, Angilli et al. (2013) found:

Possibility of a dissociation between emotions and morality...[and] among all categories of serial killers, the missionary type is the most selective with his victims and is usually well integrated within society, and therefore exhibits a phenotype very close to that of healthy individuals. (p. 492)

KT’s scores matched what is labeled a detached psychopathy, which includes a lack of antisocial behavior, making these serial killers increasingly difficult to detect. They found that cognitive

functions remain stable while deficits in affective responses result from a damaged orbitofrontal cortex (Angilli, et al., 2013). In this case study and scientific review, they hypothesize that:

Serial killers may represent a quite separate category of psychopathy, characterized by a lack of antisocial behavior and a high level of emotional detachment, together with selective impairment in social and emotional cognition, a deficit relatively confined in comparison with classic APD. (Angilli, et al., 2013, p. 492)

Similarly, Allely, Minnis, Thompson, Wilson and Gillberg (2014) found deficits in social and emotional affective responses and arrested development in violent offenders. They utilize Jeffrey Dahmer as a case example of the possibility that he suffered from ASD psychopathology, which they based off observations of his obsession with the human body and its biology, reports of him being detached, having deficits in nonverbal communication, and being socially isolated as a child (Allely et al., 2014). They estimate that “more than 10% of serial/mass killers have ASD” and that those estimates are probably an underestimate, but are still “considerably higher than would be found in the general population” (Allely et al., 2014, p. 296).

Federman, Holmes and Jacob (2009) argue that serial killers’ psychopathological behavior is willful and enacted on their own accord:

The idea of a willful murderer (or a willful manipulator) without mental illness creates a space for the legal and social construction of personal responsibility to overtake an undefined, misunderstood, and reprehensible action that cannot be defined by science or articulated by the subject. (p. 44)

Ted Bundy, who has been categorized as an extreme case of antisocial personality disorder, describes guilt as being a mechanism for control, which provides a “conclusion about a psychopath’s chosen inability to feel remorse or any kind of emotion” (Federman, Holmes &

Jacob, 2009, p. 44). Federman, Holmes and Jacob (2009) continue by stating that “serial killers are linguistically manipulative, social misfits, cold, without affect, and operate without motive,” and therefore, “not Psychotic” (p. 45).

## **Serial Killers**

### **Risk Factors and Development**

Allely, Minnis, Thompson, Wilson & Gillberg (2014) found that combinations of neurodevelopmental and psychosocial factors, such as brain injuries, childhood trauma or other psychological stress, and having a diagnosis of a mental disorder increased the risk of serial murder. Allely et al. (2014) also found associations between “neuro-chemical imbalance and aggression” (p. 290), such as low monoamine oxidase A (MAOA) activity, increased serotonin levels in the synapses and heightened levels of dopamine and norepinephrine. Furthermore, they assert that, “there may be a complex interaction between pre-existing neurodevelopmental problems (moderators), environmental insults experienced during development such as head injury or childhood maltreatment (mediators) and serial or mass killing” (Allely et al., 2014, p. 290).

Knight (2006) discussed the development of violent acts as starting with petty crime and violence towards animals in childhood, which escalates towards others during adolescence, and further evolves into an aggressive obsession with death and violence in adulthood. The study discussed by Allely et al. (2014) found that among violent offenders, developmental problems in adolescence, neuropsychiatric disorders in childhood, as well as learning disabilities and conduct disorder were present factors. Whittington-Egan (2008) also concurs that serial killers have often experienced childhood neglect and abuse, traumatic brain injury and show psychopathic behaviors.



### **Identity and Discourse**

Research on the construction of a serial killer “indicated that the men discursively managed their identities by representing a normal self to others (representations of the normal self), acknowledging barriers to normalcy (barriers to normalcy), and explaining their actions as justifiable (vigilante justice)” (Henson & Olson, 2010, p. 353). The serial killers studies articulated the tension experienced between their secretive deviant identity and the normal self they portrayed to avoid detection. “This tendency can best be explained as an identity gap. They were only able to enact their deviancy secretly with their victims. Thus, they maintained incommensurable enacted identities” (Henson & Olson, 2010, p. 353).

Various systems affect development, and “one’s identity is not created in a vacuum but, instead, is a byproduct of societal influences. Indeed, several serial killers in this analysis expressed how social influences (through previous traumatic experiences and communal discourse) helped shape their deviant identities” (Henson & Olson, 2010, p. 357). Henson and Olson discuss how the serial killers in their study responded to their stigmatized identities by creating a deconstruction. The serial killers “expressed two societal influences that influenced the creation and management of their stigmatized identities: previous traumatic experiences and the comparison to the iconic serial killer” (Henson & Olson, 2010, p. 358). The identity gap was managed by taking an expert position on defining serial murder and through deconstructing the serial killer archetype. Henson and Olson (2010) also state that:

First, they articulated their inability to experience life normally due to personality or psychological problems...Second, serial killers attempted to alleviate the gap by expressing how their actions actually served society. Finally, they responded to the

communal discourse surrounding serial killing by constructing themselves as victims of society and circumstances. (p. 359)

The social construction of the archetype is to the benefit of the serial killers. In referencing Michel Foucault's "The Dangerous Individual," Federman, Holmes and Jacob (2009) wrote that "the concept of the dangerous individual involves a shift in focus from the criminal act to the character of the actor, permitting layman and specialists to see the signs of danger and illness everywhere" (p. 45).

### *Representation of the Self*

In the study of Bartels and Parsons (2009) they applied discourse analysis to the speech of serial killers and state that their study:

Has led to the identification of three major discourses: (1) perpetrator as 'sympathetic'; (2) perpetrator as 'serial killer'; and (3) perpetrator as 'driven by sexual fantasy'. The implication of these three discourses is that they construct a seemingly contradictory identity for the perpetrator, which serves the action of mitigating responsibility and obscuring violence. (p. 276)

Bartel and Parsons agree with Henson and Olson in "that serial killers draw upon popular accounts of serial killing to understand their own behaviours" (Bartels & Parsons, 2009, p. 277). However, in the analysis on how male serial killers discursively manage their identities, Henson and Olson argue that "although individuals attempt to negotiate negative communal identities with personal identities, highly stigmatized individuals may contribute to their own stigmatization by reifying stereotypes of serial killers" (Henson & Olson, 2010, p. 361).

The serial killers rely upon dominant discourse of the serial killer archetype found in the media and television (Bartels & Parson, 2009). In the discussion of Dennis Rader, relying on the

language of dominant discourse “serves to construct this as his ‘subject position’ (Althusser, 1971). By positioning himself as a serial killer, Rader is providing grounds to describe his actions as being in accordance with or essential to that category of person” (Bartels & Parsons, 2009, p. 273). In both studies discussed in this section, the serial killers aligned themselves through correlating their behavior with the social construct that serial killers are sexually deviant. Many other serial killers have also described their behavior as a result of having “sexual motivations that involved violent fantasies of death and arousal” (Henson & Olson, 2010, p. 355). Through correlating identity as a serial killer to a sexual act, they place themselves in a passive position in giving into deviant sexual behavior. Rader and the other men studied also avoided the responsibility and severity of the enacted violence by taking a passive position by aligning themselves with a scripted sexual fantasy (Bartels & Parsons, 2009).

One justification to deviant behavior that was unique to the discourse analysis of Henson and Olson was the construct of the serial killer as enacting vigilante justice. They state that “the men discursively managed their stigmatized identities by legitimizing their actions as serving society, thereby making their killings a social service” (Henson & Olson, 2010, p. 356). This served to portray themselves as normal by justifying their actions and identifying themselves as conscious beings. Those who identified themselves as servicing justice often targeted prostitutes, homeless people and other deviant groups, therefore, “displacing blame allowed them to construct an identity that was rational and needed no absolution” (Henson & Olson, 2010, p. 356). In constructing their identity through vigilante justice, they were also attempting to manage the identity gap between deviancy and normalcy.

Henson and Olson (2010) found a common act of the serial killers attempting to reject the severity of the stereotyped serial killer by aligning themselves with mental illness, and in doing

so, realigned themselves with stigmatized cultural stereotypes. “Goffman (1963) explained this strategy as attempting to pass by disclaiming one social stigma for a less stigmatized identity... Thus, they were attempting to reject a stigma by simultaneously reinforcing other cultural stereotypes regarding serial killing” (Henson & Olson, 2010, p. 360). Rather than focusing on their behavior as normal, there was a stronger attempt for many of the men to provide excuses and justifications. Although the serial killers in these studies attempt to manage and reframe their stigmatized identities, “highly stigmatized individuals may contribute to their own stigmatization by reifying stereotypes of serial killers” (Henson & Olson, 2010, p. 361). In essence, they reach an aporia in their deconstruction of a serial killer as their argument for normalcy cannot be followed by reifying another stigmatized identity.

### ***Barriers to Normalcy***

Henson and Olson (2010) describe serial killers as “constrained by the societal discourse surrounding serial homicide” (p. 360). This was evident in Rader’s alignment to the stereotyped construct of a serial killer, he displaces responsibility through having constructed barriers to normalcy in which he cannot avoid enacting deviant behavior (Bartels & Parsons, 2009). Similar to how serial killers represented themselves, they also identified barriers to normalcy as including “biological imperative, emotional detachment, demonic possession, and sexual arousal” (Henson & Olson, 2010, p. 353). The men studied expressed a powerlessness to their deviant selves. This also falls in line with the stereotype of mental illness as the stigma of having a diagnosis within society is seen as a large barrier for normalcy.

The serial killers studied by Henson and Olson constructed themselves as a victim of circumstance, “thereby rejecting the stigma of the evil, predatory, purposeful killer. Instead, the men explained away their behavior because it was out of their control” (Henson & Olson, 2010,

p. 354). They described having biological defects, which were outside of their control. Some serial killers, such as Henry Lee Lucas, discussed how parental influence and childhood trauma formed them into a serial killer. Henson and Olson also discuss the possibility of military experience as diminishing regard for life, thus making one more susceptible to becoming a serial killer. Serial Killers influenced by religiosity, such as Richard Ramirez claim that they committed murder under “demonic possession and Satanism [which] alleviated guilt for killing because the men suggest that the devil made them do it” (Henson & Olson, 2010, p.355). These barriers serve to perpetuate the serial killers’ stance as victims of circumstance.

### **Exposure to Trauma**

Henson and Olson (2010) found that insecure attachments with caregivers, childhood maltreatment, socioeconomic problems and experience in the military were all reasons behind the serial murders, and state “that learning to live in a violent environment programmed him to accept killing as necessary” (p. 357).

### **Types of Trauma**

#### ***Complex Trauma***

Cleary and Luxenburg (1993), as well as Hickey (1997), were both in agreement that “psychological and/or physical abuse was a pervasive characteristic of serial killers’ childhoods” (Allely et al., 2014, p. 290). Knight (2006) focuses her study on sexually motivated serial killers and she asserts that as children, serial killers were aggressive and that many of them experienced abuse, neglect and family dysfunction. Knight (2006) also claims that many “were illegitimate or adopted children and several were sons of prostitutes” (p. 1191). Further supporting that assertion, Allely et al. (2014) discusses serial killers’ connections to “early adoptions, neglect

and abandonment as some of the childhood characteristics possibly accounting for violent crime” (p. 290).

### ***Traumatic Brain Injury***

Both Knight (2006) and Allely et al. (2014) found correlations between traumatic brain injury and serial killers. Knight (2006) asserts that head injuries that may have occurred before becoming serial killers “may be evidence for a neuropsychological basis for their behavior” (p. 1191). In agreement, Allely et al. (2014) claims that head injuries are shown to be more prevalent in the histories of serial killers and that their brains may also be affected by other conditions.

### ***Military***

It has been argued that traumatic experiences in the military may contribute to the enacted deviant behavior of serial killers. “Shawcross illustrated that the “fight or flight” instinct continued to dominate his civilian life. This trauma and the necessity of his military killings, as he explained, diminished his regard for human life (Henson & Olson, 2010, p. 357). Not only may military experience diminish a regard for human life, but the constant hypervigilance and instinctual drives that dominate an individual during war may also make it difficult for them to adjust to civilian life.

### ***Multiple Traumas***

Allely et al. (2014) discuss the controversy that serial killers’ fantasies are possibly rooted in dissociative trauma, stating that their behavior may possibly result “from an overreliance on sexual and aggressive fantasies developed in response to various threats, only some of which may involve child maltreatment” (p. 290). They go on to discuss the case of Richard Ramirez, who had experienced multiple traumatic brain injuries and various

psychosocial stressors and childhood trauma. Richard Ramirez had been diagnosed with temporal lobe epilepsy, and “according to Dr. Ronald Geshwind, a number of people who suffer from temporal lobe epilepsy have altered sexuality and hyper-religious feelings, are hypergraphic (have a compulsion to write), and are excessively aggressive” (Allely et al., 2014, p. 296). Another case of experienced multiple traumas as discussed by Allely et al. (2014) is that of Jeffrey Dahmer. He witnessed domestic violence in his home as a child, his mother was suicidal and his father was absent a majority of his life. Dahmer also experienced a traumatic surgery at almost age four and at age eight was reportedly sexually abused by a neighbor (Allely et al., 2014).

### **Cycle of Trauma**

In the case study of Jeffrey Dahmer provided by Allely et al. (2014), there is a cyclical pattern to trauma both in his family and in his committed murders. It was reported that Dahmer’s father exhibited morbid interests and unusual behaviors, possibly resulting from his own suspected experiences of childhood maltreatment (Allely et al., 2014). It is also believed that the frustration Dahmer felt with his homosexuality “was later channeled into sadistic behavior” (Allely et al., 2014, p. 295). Henson and Olson (2010) also discuss the case of Henry Lee Lucas and his experience of growing up within a criminal lifestyle with his parents. They state that Lucas “had to suffer the shame of the societal stigma of his mother’s prostitution and his father’s physical deformity. He attempted to mitigate the societal stigma of his killing by explaining his childhood victimization” (Henson & Olson, 2010, p. 358). His parent’s traumatic experiences contributed to their criminal lifestyle, which affected the development of Henry Lee Lucas, who continued the cycle by traumatizing his victims.

## **Serial Killing**

### **Victimology**

James and Proulx (2016) found that victims tended to be strangers to the serial killers, they were usually alone when attacked and that victims tended to have high-risk lifestyles. They also found that most serial killers targeted victims who resembled their previous victims and that were the same race as themselves. In a previous study, they found that “the majority of the victims (82.0%) were female and half of all victims were younger than 25 years” (James & Proulx, 2014, p. 594). James and Proulx (2014) also discuss serial murder as a form of vengeance and state:

The feelings of injustice, engendered by their victim stance (63.0%) and associated with grievances against women, appears to support the hypothesis that the motivation for their sexual murders was angered against women, whom they perceive as having rejected them. (p. 605)

In both their 2014 and 2016 studies, James and Proulx found that serial killers often targeted those who they felt had rejected them, discriminated against them, or somehow persecuted them.

### **The Voice of the Crime Scene**

The crime scene of a serial murderer has the potential to speak, especially to those well trained in the recognition and classification of serial killers. Knight (2006) discusses in detail the voice of the crime scene, whether it's organized or disorganized, and understanding the connection that the crime scene has to the personality types of serial killers; which include psychopathic, narcissistic, paranoid and antisocial. Organized crime scenes show intention and premeditated planning, which often correlate to non-psychotic serial killers. Knight (2006) continues on to assert that thrill serial killers focus on the process of killing, which means there is



usually not overkill and that they “are pleasure-seeking persons who take their time to enjoy the act of domination and control over the victim” (p. 1192). In contrast to thrill, the crime scenes of lust serial killers may show evidence of overkill as they tend to gain pleasure from the kill both during the act and after the victim is dead. Knight (2006) elaborates on the lust killer’s crime scene by stating that:

Sex may not be immediately visible, or explicit, which points to the notion that there are many ways in which sex can be a part of the crime. There is normally object and/or penile penetration of the victim, while postmortem mutilation and dismemberment are fairly common.” (p. 1192)

As discussed by Allely et al. (2014), Dahmer’s crime scenes showed evidence of “rape, dismemberment, necrophilia, and cannibalism” (p. 293), which would classify him as a lust killer. They further elaborate that “he made crude attempts to lobotomize some of his victims by injecting muriatic acid into their brains” (Allely et al., 2014, p. 293)

## **Art Therapy**

### **Art Therapy and Childhood Trauma**

Art therapy may be beneficial in working with populations who have experienced trauma, especially in considering the effects of cumulative trauma. This is supported by the findings that “trauma is stored as somatic sensations and images, it may not be readily available for communication through language, but may be available through sensory means such as creative arts, play, and other experiential activities and approaches” (Malchiodi & Perry, 2014, p. 11). It was also discovered that in response to feeling a lack of safety, abandonment, and rage towards others, children who have been subjected to domestic violence often experience hyperarousal, have difficulty with affect regulation, and often times dissociate (Malchiodi & Perry, 2014).

They defined that dissociation in response to excessive childhood trauma as “*structural* dissociation” and that due to their cumulative trauma, “parts of the personality are not integrated in childhood” (Malchiodi & Perry, 2014, p. 127). Inner fragmentation is outlined as when dissociated children:

Have created a hierarchy of alters—self-fragments that hold traumatic memories and emotions. These ‘internal voices tend to be menacing towards the child or others’ (Wieland, 2011, p. 8). Many of these children report that they perceive their primary alter as a disturbing ‘inner voice.’ (Malchiodi & Perry, 2014, p. 128)

Malchiodi and Perry (2014) also found that children in these states do not respond well to verbal therapy and “other interventions are needed to give these children the chance to redefine the relationship between their ‘person underneath’ and their defensive creations” (p. 129). In a case example presented by Malchiodi and Perry (2014), the art therapy interventions used resulted in a sense of mastery and control for the traumatized child, as well as creation of a safe space, increased self-regulation, demonstration of empathy, and improved social interactions.

In connection to Malchiodi and Perry (2014), Hass-Cohen, Noah, Carr, and Richard (2008) discussed the symptoms and effects of a disorganized/disoriented attachment in the dyadic relationship; “the disorganized person controls, punishes others, and may express dissociative behaviors derivative of trauma. Disturbing patterns of behaviors and significantly impaired social functioning may develop, leading to diagnoses such as conduct disorder, [and] antisocial personality disorder” (p. 201). In connection to their experiences using art therapy with those affected by disorganized attachment, they found that:

The visual depiction of the disorganized style evoked strong images of fragmentation and violence. Palette color choices moved to dark and/or were polarized with dominant

blacks and dark grays... The images [were] no longer structured and organized; there [was] an absence of a center characterized [by] fragmentation. (Hass-Cohen, et al., 2008, p. 202)

The fragmentation of the self in traumatized children with disorganized attachments was found by both Hass-Cohen, et al. (2008) and Malchiodi and Perry (2014). Both studies discovered that art therapy interventions have the potential to facilitate integration of the fragmented self and secure attachment.

### *Childhood Trauma and Characterization of Symbols*

Eisenbach, Snir, and Regev (2015) conducted a study comprised of ten women who voluntarily participated between the ages of 24 and 60. They begin by asserting that when cumulative and chronic trauma that occurs in early childhood, “the post-traumatic-defensive reactions eventually become part of the personality structure... In such situations, people experience enormous difficulties integrating the traumatic-dissociative experience into their autobiographical memory sequence” (Eisenbach, et al., 2015, p. 45). They continue by arguing that art therapy is useful in detecting symbolization of childhood trauma and allows for processing of traumatic experiences in treatment (Eisenbach, et al., 2015).

Through a Jungian approach, Eisenbach, et al. (2015) found seven symbols emanating from the artwork of their ten participants; red and black color combination, figure and ground, decomposition, forest, death, body in fetal position, and body-tree. Of the seven symbols, red and black color combination, figure and ground, and decomposition were the most prevalent with nearly all participant art exhibiting these symbols (Eisenbach, et al., 2015). The authors described the red and black color combination as opposing forces of being passive and active, or triggering and assert that “the increased use of these two colors together in art works may

express a conflict in the participants' psyches" (Eisenbach, et al., 2015, p. 48). Eisenbach, et al. (2015) found that the figure and ground symbol was evident either in that the figure lines were emphasized, or there was no differentiation between figure and ground, the second possibly resembling "depersonalization and a de-realization phenomenon characterized by feelings of numbness and changes in time and space perception" (p. 49); which are indicative of fragmented parts and dissociation. In addition, Eisenbach, et al. (2015) state that:

The trauma is connected to the concrete penetration of body and psyche among victims of sexual assault. Thickening of contours is thus a symbol that may reflect the inner psyche's aspiration to create a barrier to protect the body and psyche from this terrifying painful invasion, whereas blurring the borders between figure and ground may convey the lack of such a barrier. (p. 49)

The symbol of decomposition is aesthetically related to modern 20<sup>th</sup> century art in the rise of abstract-expressionism and cubism. Eisenbach, et al. (2015) states that "the decomposition symbol apparently articulates the post-traumatic experience, where the whole breaks into fragments. Dismantling reality, life or the body is part of the traumatic experience for trauma victims" (p. 50). They also hypothesize that this symbol is an attempt to make sense of these fragmented parts by recreating their reality in a way that is more coherent. In relation to the change in an individual's perception of their reality, according to Jungian theory, the death symbol "represents the unseen facet of life" and often "there is a change from one state of consciousness to another" (Eisenbach, et al., 2015, p. 52).

### **Art Therapy and Traumatic Brain Injury**

In relation to traumatic brain injury (TBI), Hass-Cohen, Noah, Carr, and Richard (2008) found that "damage or dysfunction in the dorsal and orbital areas is associated with impairment

in empathic behavior and antisocial behaviors” (p. 70). The changes in behaviors, personality and cognitive functioning that TBIs may cause, there may be negative impacts to daily living skills and relationship to family, social groups, and community” (McGuinness & Schnur, 2013, p. 253). The authors also noticed that, due to physical and psychological trauma, “clients’ sense of identity (McGraw, 1999) suffers as a result” (McGuinness & Schnur, 2013, p. 253). If executive functioning is impaired due to a TBI, clients may lose the ability to self-regulate, control social interactions, and may lose the ability for introspection (McGuinness & Schnur, 2013).

Newer theories on mirror neurons have shown that empathy may be created, or reconstructed:

Therefore the actions of each individual in a relationship can shape or mirror a response to their own previous action as well as the anticipation of the others’ reaction. We feel that this anticipation is the same anticipation that is vital to understanding creative apperception. We found by improving executive functioning skills while using creative apperception and empathy, identity can be reconstructed with clients. (McGuinness & Schnur, 2013, p. 256)

These observations make the therapeutic relationship increasingly important in fostering empathy and restructuring identity and behavioral patterns. In response, McGuinness and Schnur (2013) stress the importance of using a multimodal approach combining creative apperception and mirror neuron theory in order to increase cognitive and affective skills with adults who have sustained a TBI.

### **Art Therapy and Prison Populations**

In working with prison populations, David Gussak uses the art therapy assessment of a person picking an apple from a tree combined with the Beck Depression Inventory-Short Form and the Adult Nowicki-Strickland (ANS) Locus of Control (LOC) Scale (Gussak, 2009). In his study, “The drawings were used for a pre-test–post-test comparison, and were assessed using the Formal Elements Art Therapy Scale” (Gussak, 2009, p. 7). Many of the art directives David Gussak (2009) uses with prison populations involve creating items of containment and “became especially important in that it reinforced a need for a private space, a rare commodity in prison” (p. 8). This is similar to the work of Eren, Ogunc, Keser, Bikmaz, Sahin, and Saydam (2014), in their use of psychodynamic art psychotherapy for personality disorders. Their results supported that “art/drawing work was used to contain and transform the primitive representations and intense transferences projected to the therapy/therapist to a therapeutic work in the psychotherapy process of 17 patients” (Eren et al., 2014, p. 383).

Another use for art therapy with inmates connects to their need “to learn to adapt given very little resources” (Gussak, 2009, p. 8). In the research, many of the art directives used by David Gussak (2009):

Emphasized this shortcoming, and taught the inmates the strength of turning the detriment into an asset. This also provided an apt metaphor for the participants; in an environment where identity is removed and conformity is the norm, each person can create extremely different forms using exactly the same materials. (p. 8)

This works to support inmates’ individuality and ownership of their identity within the prison setting.

The results of David Gussak’s work with using art therapy in prison settings support the benefits of art interventions with inmates. Gussak (2009) asserts that:

It was not until the recent set of studies that a change in LOC in the participants was systematically assessed. The results of the ANS revealed significant change in score from external to internal LOC in the male and female inmates who participated in the art therapy sessions. This may indicate that art therapy may have been instrumental in changing the LOC of the participants from external to internal. (p. 10)

In connection to the benefits of art therapy, Howie, Paula, Prasad, Sangeeta, Kristel, and Jennie (2013) assert that “the act of creating art has been directly linked to aggression, sexuality, and escape...creating art may provide a safe outlet and expression of these libidinal urges” (p. 329). Similarly, the changing of the locus of control in Gussak’s (2009) work with prison populations may correlate to the work of Eren et al. (2014), whose study included seventeen patients in the Social Psychiatry Service of the Istanbul University and found that “hostility and impulse control issues had decreased significantly at the termination phase of [art] psychotherapy” (p. 382). Eren et al. (2014) also found that some of the highest MMPI scores were found in psychopathy, and that the MMPI data in the study showed “unusual ideation processes, perceptual peculiarities and the ability to evaluate reality (Sc), difficulties in interpersonal relations, impulse and anger control issues (Pp)” (p. 383), all traits that have been socially constructed to be common in serial killers. The results of their study support the hypothesis that “long- term psychodynamic art psychotherapy could be a beneficial tool in the treatment of patients with severe PD” (Eren et al., 2014, p. 383). They also hypothesize that Antisocial Personality Disorder, which is associated with serial killers, may have the potential to be “treated with intense therapy where multiple techniques are involved and the environment is arranged therapeutically” (Eren et al., 2014, p. 383). This creates a possible argument that serial killers could benefit from art therapy, especially when combined with other treatment methods.

### **Conclusion**

In conclusion, this review found that it was a common factor discussed by all authors reviewed that research on serial killers is limited due to difficulties in gaining access to subjects, lack of reliability of the information provided by the subjects, and the possibility of interviewer bias, especially in examining the perpetrator. Other challenges include problems with data sources, such as incongruent definitions, small sample sizes, samples biased towards well known serial killers and a reliance on biographies and news sources. The review also found that there is need for future research into modern phenomena, such as anonymity in mass urbanization, celebrity culture and effects of the media on violence and mental health, and cultural frameworks of denigration that lead to targeted violence towards marginalized populations. As was made evident by Gussak and Cohen-Leiberman (2001) and Eren et al. (2014), there is a need for increased research in not only forensic art therapy, but for the field of art therapy as a whole. As found in the studies of Henson and Olson (2010) and Bartels and Parsons (2009), serial killers often manipulate the verbal language they use on trial and in interviews. Art therapy offers a unique framework in examining the trauma experienced by serial killers through using a lens that provides an understanding that exists outside of verbal language, making research in this area even more crucial. By better understanding how serial killers' experienced traumas have affected their identity formation, artwork, thoughts and behaviors, valuable information may be contributed to further developing practices for forensic art therapy in working with prison populations and incarcerated serial killers.



### Research Approach

This was a qualitative research study, which took a bottom – up approach. The emergent quality of this analysis approach was well suited in the research of art therapy as my intention was to explore trauma markers that emerged from the artwork of serial killers. Both Saldana (2011) and Rosaline (2008) agree that a qualitative approach allows for a greater understanding of human processes and for the analysis of that manifest and latent content of the visuals. A qualitative approach was also better suited for the study of serial killer art placed in context of biographical data and connected to the responses of art therapists examining markers for trauma since it is descriptive. Saldana (2011) also describes how art may be utilized as data by stating that:

The arts are not just products, they are also epistemological processes – in other words, *ways of knowing through personal inquiry and aesthetic expression*. Art forms are media and rich metaphoric modes of communication that can provide insightful meaning when words alone are insufficient. (p. 15)

Objectivity was created through triangulation, or “enabling the use of different researchers, samples, time frames, methodological approaches, etc., to provide us with greater faith in the qualitative findings” (Barnham, 2015, p. 840). Qualitative research may also take a phenomenological approach “and argue that the qualitative task is to give an account of how respondents see the world *from their point of view*” (Barnham, 2015, p. 841). This approach allowed respondents to identify and expand on variables that were most prevalent to them, rather than having preset variables. Qualitative research incorporated description, analysis and interpretation. Saldana (2011) asserts that:

Description remains firmly rooted in the data themselves to present a ‘factual’ account of the fieldwork observations to answer the question...Analysis presents a systematic expansion beyond description that identifies key factors and relationships to explain how things work...Interpretation reaches out for understanding or explanation beyond the particular study to find broader application and meaning. (p. 29)

This approach was more practical in developing a greater understanding of how trauma may have impacted the psychological makeup of serial killers. Rosaline (2008) states that “qualitative methods can help us to understand apparently illogical behaviours” (p. 13), much like the behavior of serial killers.

In her book that discusses qualitative research in connection to arts-based research, Leavy (2015) asserts that “art and science bear intrinsic similarities in their attempts to illuminate aspects of the human condition. Grounded in exploration, revelation, and representation, art and science work toward advancing human understanding” (p. 3). It was the goal of this study to take a qualitative approach to explore the serial killers’ art for representation of trauma markers in order to better understand how trauma affected their psychological makeup. Qualitative research allowed for visual images to be “treated as a source of data for analysis, as well as a way of eliciting data, and representing findings” (Rosaline, 2008, p. 17). In this study, the serial killer artwork was treated as a source of data that the art therapists analyzed. Elicited data were taken from the art therapists’ responses to the questionnaires and their own response art, which was then compiled to represent the findings.

## **Methods**

This section begins by defining key terms and concepts found in and used throughout this paper. It will then discuss qualifications for participants in the sample, how they were initially contacted, their involvement in the research, and what bias they may have towards the research topic. This section finishes with an outline of the process with which the data were collected and analyzed through a qualitative approach.

### **Definition of Terms**

#### **Serial Killer/Murder.**

While there are many variations to the definition of serial murder, the primary consensus is that “serial murder is the killing of three or more people over a period of more than 30 days, with a significant cooling-off period” (Knight, 2006, p. 1190).

#### **Sexually Motivated Serial Murder.**

Knight (2006) defines sexually motivated serial murder as:

The killing of three or more victims over a period of more than 30 days, with a significant cooling-off period. The sexual nature of the crime, which may – or may not – be explicit, is perverse and sadistic and reflects an aggression that is particularly destructive, pathological and rooted in violence fantasies that are acted out on the victim. (p. 1193)

#### **Trauma.**

The American Psychological Association defines trauma as:

An emotional response to a terrible event like an accident, rape or natural disaster.

Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms

like headaches or nausea. While these feelings are normal, some people have difficulty moving on with their lives. (“Trauma and Shock,” n.d.)

The Australian Psychological Society states that “the word ‘trauma’ is derived from the Greek term for ‘wound’. Very frightening or distressing events may result in a psychological wound or injury - a difficulty in coping or functioning normally following a particular event or experience.” Jaffe, Legal & Dumke (2005) state that

Regardless of its source, an emotional trauma contains three common elements: it was unexpected, the person was unprepared, there was nothing the person could do to prevent it from happening. It is not the event that determines whether something is traumatic to someone, but the individuals experience of the event, and it is not predictable how a given person will react to a particular event. (p. 1)

From a neurobiological perspective, “scans reveal that trauma actually changes the structure and function of the brain, at the point where the frontal cortex, the emotional brain and the survival brain converge” (Jaffe, Legal, & Dumke, 2005, p. 2).

### **Complex Trauma**

Wamser-Nanney and Vandenberg (2013) define complex trauma as:

Complex trauma events have been defined as chronic, interpersonal traumas that begin early in life (Cook, Blaustein, Spinazzola, & van der Kolk, 2003). The complex trauma definition has been examined in adults, as indicated by the Diagnostic and Statistical Manual of Mental Disorders (4th ed.; DSM-IV) field trial; however, this research was lacking in child populations. (p. 671)

**Victimology.**

Merriam Webster online dictionary defines victimology as “the study of the ways in which the behavior of crime victims may have led to or contributed to their victimization; the claim that the problems of a person or group are the result of victimization” ((n.d.). Retrieved November 29, 2016, from <http://www.merriam-webster.com/dictionary/victimology>).

**Psychopathy.**

Merriam Webster online dictionary defines psychopathy as a “mental disorder especially when marked by egocentric and antisocial activity” (“Victimology,” n.d.).

**Personality Disorders.**

The DSM-5 (2013) defines personality disorders as:

A personality disorder is an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual’s culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time, and leads to distress or impairment. (p. 645)

**Forensic Art Therapy.**

Forensic Art Therapy (FAT) “is nontraditional art therapy, extending its application beyond evaluation and treatment” (Gussak & Cohen-Liebman, 2001, p. 124). Gussak and Cohen-Liebman (2001) expand on forensic art therapy by stating that:

FAT is developing into a specialization within art therapy that juxtaposes art therapy on standard forensic procedure and protocol. The result produces a hybrid that is fundamentally investigative yet has clinical overtones. FAT is fact-finding. When confined to a forensic process, it is a method that assists in the acquisition of goals and objectives that are advanced by the elicitation of information, the corroboration of facts,

and the assessment of credibility. FAT integrates art therapy theory with the law to facilitate the disposition of legal disputes. (p. 125)

**Discourse.**

For the purpose of this study, discourse will be considered through Michel Foucault:

Discourses, in Foucault's work, are ways of constituting knowledge, together with the social practices, forms of subjectivity and power relations which inhere in such knowledges and relations between them. Discourses are more than ways of thinking and producing meaning. They constitute the 'nature' of the body, unconscious and conscious mind and emotional life of the subjects they seek to govern. Neither the body nor thoughts and feelings have meaning outside their discursive articulation, but the ways in which discourse constitutes the minds and bodies of individuals is always part of a wider network of power relations, often with institutional bases (Weedon, 1987, p. 108).

**Discursive Psychology.**

As outlined by Bartels and Parsons (2009):

Discursive psychology is an approach to the study of phenomena such as cognition and mental states that aims to move the analytical and theoretical focus from individual internal processes to situated interaction (Hepburn and Wiggins, 2005; Potter and Edwards, 2001). In other words, rather than focusing on how or whether an individual's talk reflects the true nature of inner events (i.e. an expression of thought, knowledge or feelings), discursive psychology investigates how these inner events are handled and managed in discourse via the use of various rhetorical devices. (p. 269)

**Fantasy.**

Bartels and Parsons (2009) define fantasy as:

Fantasy is defined by Prentky et al. (1989: 889) as ‘an elaborated set of cognitions (thoughts) characterized by preoccupation (or rehearsal), anchored in emotions, and originating in daydreams’, and sexual fantasies specifically involve cognitions or images of a sexually arousing or erotic nature (Schlesinger, 2004). (pp. 267-268)

### **Design of Study**

**Sampling.** The PI sampled individual male and/or female adult subjects, working as licensed professionals in the field of Art Therapy, who voluntarily participated in looking at the artwork of serial killers and responding to a questionnaire. The goal was to have approximately 5-7 subjects in this study. The faculty sponsor aided in the initial contact of subjects for voluntary participation. It was required that subjects have a mental health license, be a registered art therapist, and have a background in trauma identification and treatment. It was also preferred that they have some familiarity with legal and judicial systems. Some bias that may have resulted in sampling art therapists who are trauma-informed was their own feelings towards serial killers as the perpetrator and they may have had a bias as to not look at the serial killers as also victims of trauma.

**Gathering of Data.** The PI accessed public domain records of serial killer artwork online to provide a packet for the art therapists. The packets included instructions, consent forms, questionnaires, copies of serial killer artwork (3-5 images in 8 ½ x 11” format), and a short biography of the serial killers that were mailed to the five participants. The PI remained cognizant of word choice and drew on art therapy assessments found in the *Handbook of Art Therapy* (Malchiodi, 2003) in formulating the questionnaire provided to participants in order to minimize bias.

The participants were required to sign the consent form, and complete a questionnaire related to the serial killer artwork. Participants were also asked to make response artwork that represented their understanding of how the trauma affected this person. Questionnaires and response art were returned by mail to the primary investigator at the university for analysis.

**Analysis of Data.** Data analyzed in this research consisted of text from questionnaires and art responses from art therapists using a qualitative approach. The PI completed all coding by hand. Following vertical coding of each individual participant's response, the PI organized the responses by serial killer and used horizontal coding to narrow responses into emergent properties and categories. The PI then coded the response artwork and the artwork of the serial killers through the same organization of vertical and horizontal coding used with the textual data.

In analyzing the data, the PI based initial trauma markers and significant properties on those relating to the literature of Eisenbach, et al. (2015); red and black color combination, figure and ground, as well as decomposition and death. Other sources that influenced the initial coding process were the art assessments referenced in the *Handbook of Art Therapy* (Malchiodi, 2003). Throughout the initial coding of responses, the PI primarily gave attention to the use of color, line quality, integration, symbolism, space usage, emotional content, self-image of the artist, logic and perseverance. The PI then coded for development, identity and psychopathology. All three participants identified connections between these properties and concepts to the imagery; unhealthy attachment styles, arrested development, antisocial personality, sociopathy, distancing from reality and the persona of a stereotypical serial killer. Properties, concepts and categories were distilled into five emergent themes. During the coding process, the PI also relied on intercoder reliability with a research cluster of four other individuals in order to further minimize bias and increase reliability in trauma markers and emergent themes that were discovered.



## Results

This section begins with a presentation of the data, which opens with an introduction to the process of data collection. Following the presentation of data, a review of the data analysis is provided. Finally, this section finishes with the findings, which elaborate on the significance of the results found through this research. A phenomenological approach was taken by use of discursive psychology and Foucauldian theory in connecting the results and the literature to theory and discourse to discern patterns across data and literature.

### Presentation of Data

The primary investigator was an MFT art therapy trainee, guided by a faculty sponsor throughout the research process. Ten potential participants for this research were contacted during February 2017 through e-mails (*Appendix 4*) sent by the faculty sponsor, Dr. Paige Asawa. Five out of ten potential participants responded and voluntarily agreed to be a subject in this research. Packets were mailed to the five participants. The contents included a cover page, list of packet contents, the research background, instructions, potential risks and benefits, measures for confidentiality, aftercare information, Experimental Subject Bill of Rights (*Appendix 1*), Informed Consent Form (*Appendix 2*), three serial killer biographies (*Appendix 5*), nine images of serial killer artwork (*Appendix 6*), three questionnaires (*Appendix 2*), art supplies, and drawing paper.

The following data presented was gathered through the participant responses to the qualitative survey and organized through review by the primary investigator. Each participant response is further organized by their response to each individual serial killer. Their responses consisted of reflecting on ten questions and the provided art directive “Create art that represents

your understanding of how life experiences affected this person.” The serial killer artwork and sample questionnaire may be found in the appendices.

### **Participants.**

Participants were licensed professionals in the field of Art Therapy, who voluntarily participated in looking at the artwork of serial killers and responding to the questionnaire. Three of the five participants who volunteered returned their packets for inclusion in this research. The final three participants were adults residing in California, who have a mental health license, are registered art therapists and have a background in trauma identification and treatment.

#### ***Participant 1***

##### ***Danny Rolling***

Participant 1 used words to describe the art as “dark, absent of color, scratching, twisted, entangled, demented, death, satanic, devil and evil.” Observations made by this participant were that there was “a lack of color,” and that the art had a “complex composition” of entanglement and effective use of perspective. They considered the most important parts of the art to be that it seemingly depicted someone who was “very traumatized” and that “it is important to understand how art represents our psyche.” Participant 1 titled this serial killer’s art “Dark Hole,” “because [they thought] the artist is in a dark hole that they will never get out of.” They also thought that “the art is about the artist’s traumatic past and how it has skewed his perspective of reality.” This participant identified that feelings evoked for them by viewing the art were “sad, scared, and angry that someone could suffer so much abuse and then inflict that same torture and abuse on other people.” They continue that “it makes [them] wonder how people can lose their moral compass and not be able to see the pain that they inflict on other people.”

Participant 1 utilized black and red markers to create their response to the provided art directive on a horizontally oriented page. The art appears to represent a spider's web done in black marker with a spider in the middle of the web drawn in red marker. The participant drew thick black lines behind the web that have a scribble-like quality to them and appear as if the participant was pressing down on the marker hard while drawing. In the bottom right corner, there are also four black lines that have a mix of lines and dots with a jagged and straight quality. While the lines extend over all of the page, there is a lot of empty space left between the lines.



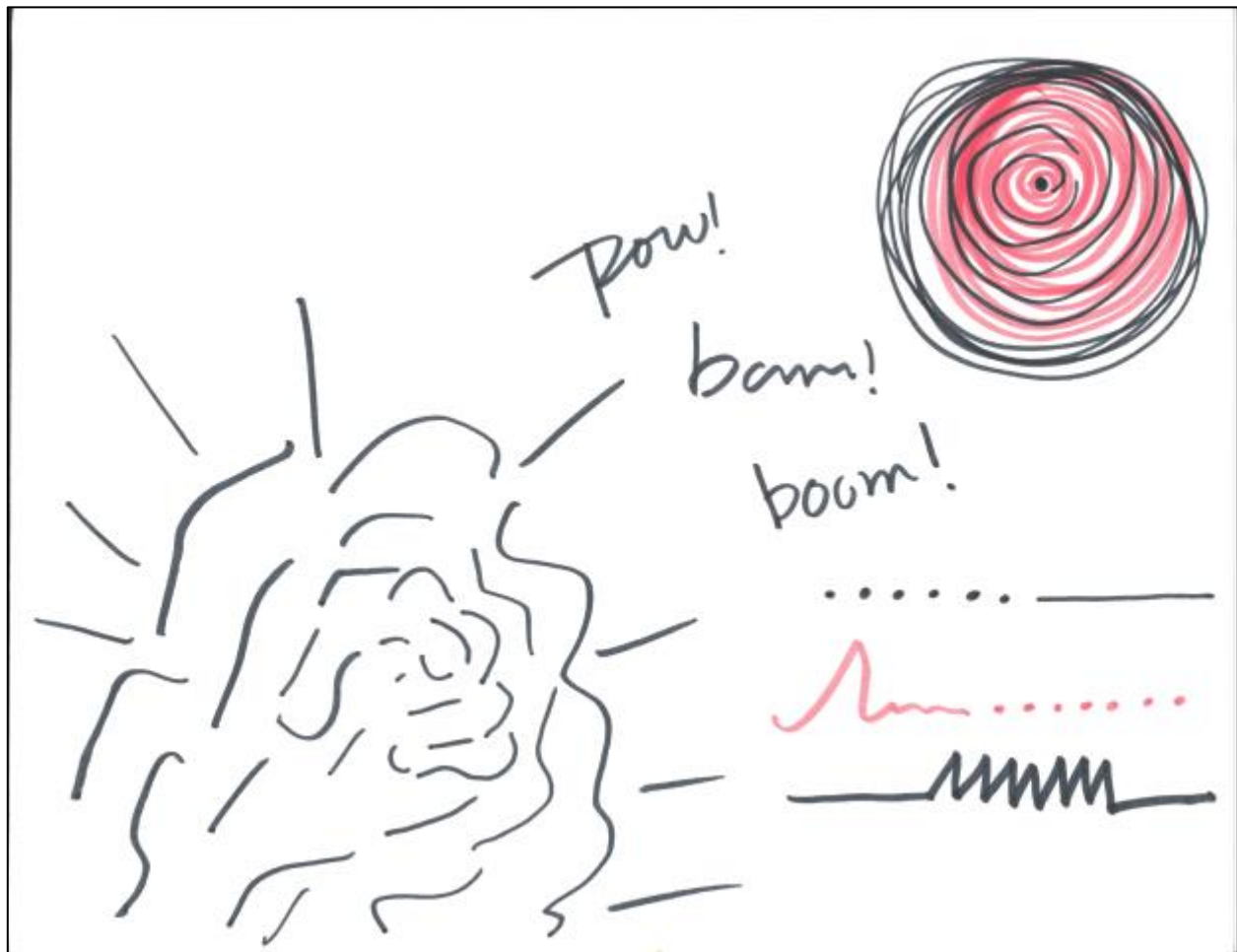
*Figure 1: Participant 1 Response - Danny Rolling*

***Richard Ramirez***

Participant 1 used words to describe the art as “death, pain, suffering, evil, satan, rebellion, injury, trauma, roulette, risk, and playing a game.” Observations made by this

participant were that all this serial killer's art "[had] skeleton imagery," and that "[the artist] uses death as a theme." The participant also noted that there was "similar line quality" in all three pieces and that "all of the mouths are open and look like they are screaming." The art reminded them of "a heavy metal band album" and that there were "commercial qualities." This participant was most interested by "the red skull image...because it looks like the artist might be trying to articulate his own traumatic memory of his brain injury," and noted in reference to all the art, "they all have dark themes of death and suffering." They considered the most important parts of the art to be "the pain that is depicted in all of the faces." Participant 1 titled this serial killer's art "When Darkness Wins," because they thought that "it seems like the images are depicting when evil wins over good." They also thought that "the art is about the artist's suffering and brain injury as well as their need to be a risk taker."

Participant 1 also used the red and black marker in their art response to Richard Ramirez with a horizontal orientation of the page. They drew a spiral type figure in the upper right corner with a combination of red and black. Black spiral lines appear to contain that of the red. The participant drew a formation of squiggle lines in the bottom right corner that appear to create a round form that has straight lines that extend in a radius around it. Between the radiating straight lines and the spiral form, the participant wrote "pow!" "bam!" and "boom!" in a vertical list that moves in a slight diagonal direction. In the bottom right corner, they used the black marker to draw six dots ending in a thin straight black line. Underneath the black dots and lines, they used the red marker to draw a jagged line that ends with seven red dots. At the bottom, they drew a combination of jagged and straight lines and dots with both red and black marker. Many of the lines are thin and have a controlled quality. There is a lot of empty space on the page.



*Figure 2: Participant 1 Response - Richard Ramirez*

***Jeremy Bryan Jones***

Participant 1 used words to describe the art as “safer, demonic, bloody, twisted, deviant, scary, sexual, angry, attention-seeking, power struggle, dominant and submissive.” Observations made by this participant were that “the artwork is very dark and twisted, although it is nicely rendered. The balance of color, line, shape and form make the art aesthetically pleasing, although the content is difficult to look at.” The art reminded them of “nothing [they] have seen before, but does have a commercial quality as if it was an advertisement.” In reference to the appearance of the art, they commented that “the balance of color and composition is very strong. It is clear that the artist has an artistic eye and spent time making sure that the image was powerful.” They

considered the most important parts of the art to be the content as “it allows the viewer to see the artist’s distorted view of reality.” They would also ask the artist “about his need for dominance and what that meant to him.” Participant 1 titled this serial killer’s art “Mom Eater,” “because there is a cannibalistic quality to the content.” They also thought that “the art is about the relationship between him and his mother and/or female figures in his life and how he is seeking their attention.” The participant thought this “because of the male and female dominant and submissive power play in the imagery.” In acknowledging what feelings were evoked for them by viewing the art, the participant responded “I feel disgusted and scared for this person. I feel that this person is very sick and has a skewed perception of reality.”

Participant 1 continued their use of the red and black marker with similar line quality throughout all three of their art responses to each serial killer. In their response to Jeremy Bryan Jones, the page is oriented horizontally and they used the black marker to draw a face with simple line quality, with broken sections in the line of the face. The face has hair that is drawn with the black marker and made of overlapping triangular forms. Facial features are comprised of simple lines and shapes that have a controlled quality to them. The eyes are filled in with red, which is the only color included in the facial features. Where a mouth would be, there is a filled-in black circle surrounded by thick spiral lines. Extending from the black circle is a text bubble with “help!” written in cursive. Beneath the face, a solid black line was drawn across the entire page. This black line intersects a fluid form drawn primarily with the red marker and positioned on the left and center portions of the page. Above the fluid form, there are seven red drops that have a thin black line outlining the left side of each drop.



*Figure 3: Participant 1 Response - Jeremy Bryan Jones*

### ***Participant 2***

#### ***Danny Rolling***

Participant 2 used words to describe the art as “detailed, cryptic, intricate, depressed, angry, agitated, trapped, mystical, dark, [and] evocative.” Observations made by this participant were that “the first two pieces of art have the character that is looking at the viewer, attempting to evoke a response.” They commented that the first piece reminds them of art created by someone who is mentally ill, the second being evocative of drug use in the 60s, and “the third piece of art is almost reminiscent of a pane from a graphic novel.” This participant wrote they were most interested “in the presence of all the detail, the message is pretty coherent and dark.

Each piece has a lot of emotion.” In reference to the appearance of the art, they commented on the lack of color, possible use of a black ink pen, that the composition was well done and that “the main character is usually being right of center and drawing your eye to them.” They considered the most important parts of the art to be:

“the fact that each of these pieces seems to talk about the artist. The first one seems to take a look at his background, the main character middle of the piece perhaps being his father. There are a lot of mystical images in this piece. The second piece is perhaps a self-portrait, but I don’t know. Whoever he’s depicting is miserable. The third piece is actually a little humorous. It’s like sneak attack! The zombie king seeks revenge!”

Participant 2 would “entitle the first one, The Dragon’s Innards, the second one would be entitled Dementia, the third one I would call Sneak Attack!” They also thought that the serial killer art is about:

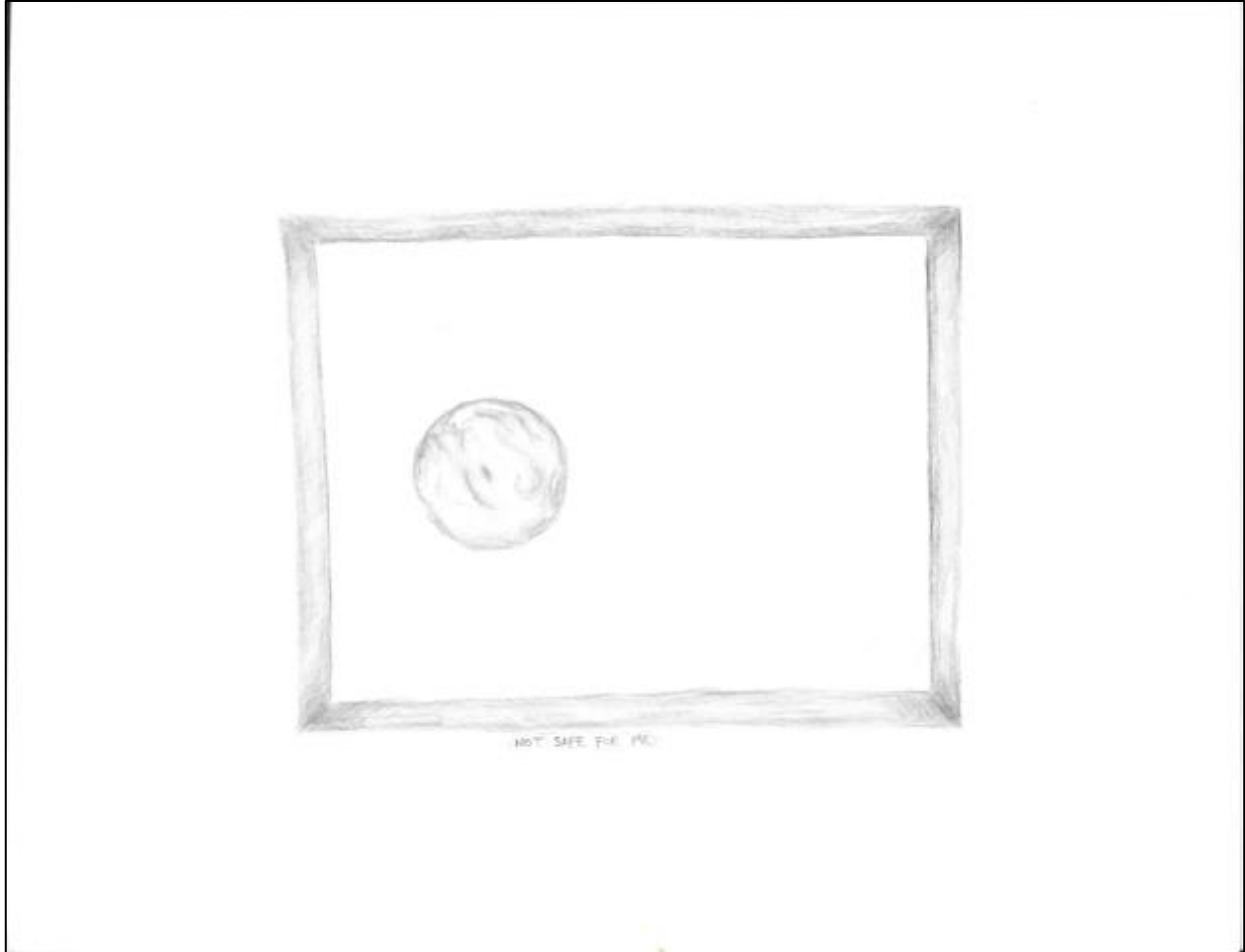
“a reflection on his personal history and his current state, the first one seems more historical, the second one seems more a comment on his being when he was killing people and being violent, the third one perhaps is what he wants to do with his captors or prison guards.”

In acknowledging what feelings were evoked for them by viewing the art, participant 2 responded “I’m disturbed by the images in that I can see a personal connection with art that is made by my family member. I’m also entertained by the images. Which maybe is also a little disturbing.”

Participant 2 used a black pencil to draw a frame in the center of the page, which is oriented horizontally. The frame has darker shading in all four corners. The shading is effective in making the frame appear three-dimensional. Within the frame, towards the left and center of



the page is a circular form with various shading effects. On the bottom outside of the frame, the participant wrote “NOT SAFE FOR ME” and it appears they used more force on the pencil in their writing. There is a lot of empty space as most of the page was left blank.



*Figure 4: Participant 2 Response - Danny Rolling*

***Richard Ramirez***

Participant 2 used words to describe the art as “adolescent, pained, gaps, sketch, colorful, vivid.” Observations made by this participant were that:

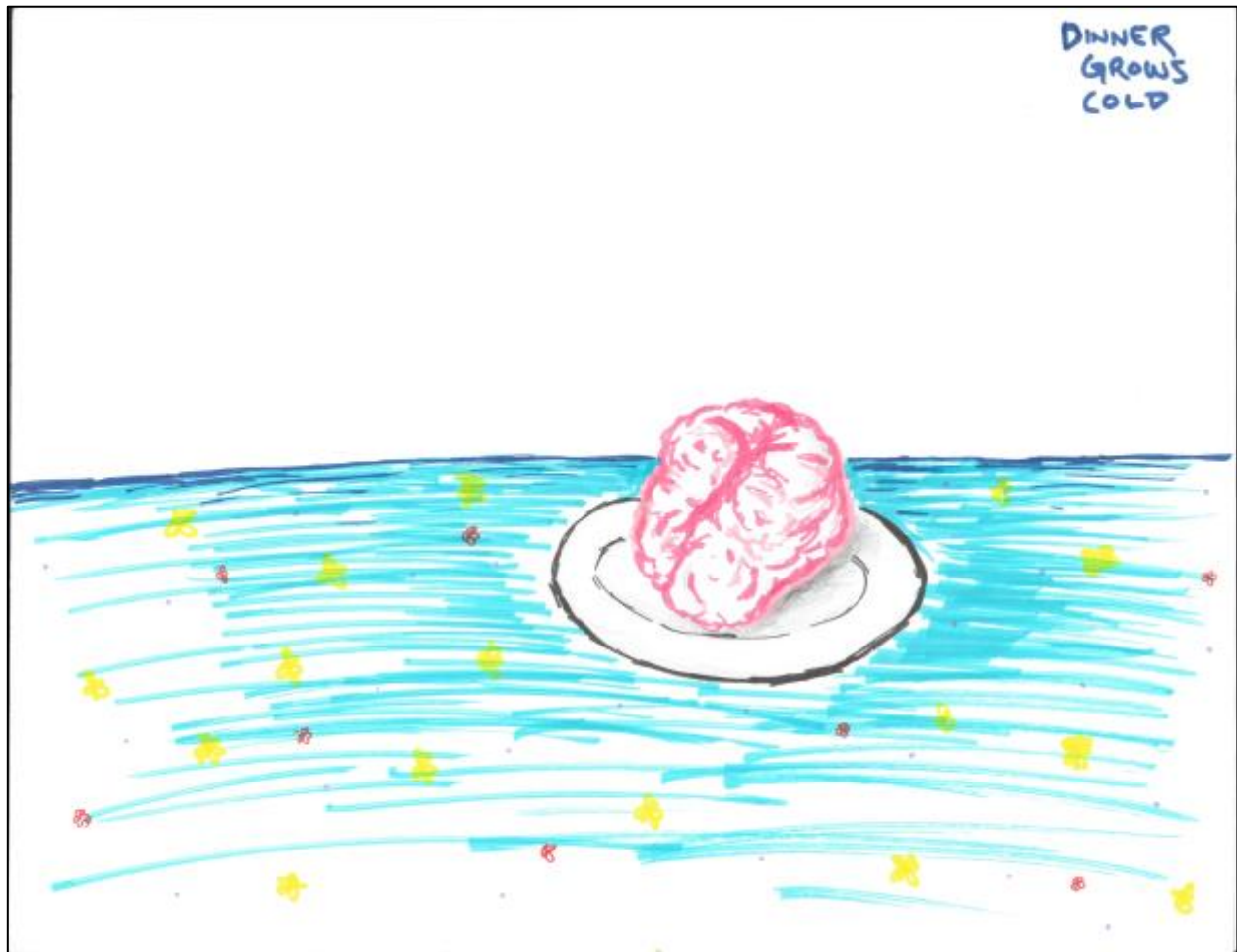
“Each image has an open mouth in it. The first two seem to be open and shouting in some kind of pain. The last one is open in a kind of rock star having fun kind of way. He really took the time using color in the first two images.”

In considering the developmental level of the serial killer, Participant 2 repeatedly made references to adolescence and teenagers, and stated that “the character holding up his finger is a big adolescent fuck you.” Participant 2 wrote they’re “interested in the innocence in art, innocence and anger at the same time. It makes sense in reading about his history with the traumatic brain injuries that he would have some sort of arrested development.” They considered the most important parts to be “the quality and developmental level,” also stating “again it makes sense with [traumatic] brain injury and also remembering back to the toxin exposure he experienced in utero. The drug use and bright colors of the images also make sense of his use of hallucinogens.” In titling the art, they stated “I would entitle the first one, my skull is on fire, the second one, do you want to play? And the third one, fuck off.” They also thought that the art:

“shows different parts of [the artist], the first one perhaps speaks of drug use, another brain [injuries] they experience, the second one I think that we are seeing his perspective looking at the temptation of a gambling game played with the image of death. The third one seems to be a self-portrait. I think it’s interesting that it seems that there are jagged teeth in the eyeballs of the third one.”

Participant 2 utilized various colored and black markers to create their response to the serial killer Richard Ramirez. The page is oriented horizontally and there is a darker blue line with a sketch-like quality along the center of the page. Above this line is empty space with “DINNER GROWS COLD” written in small lettering with the dark blue color marker in the upper right corner. Below the dark blue line, the participant used a bright turquoise colored marker to create multiple overlapping straight lines that are concentrated towards the center and diminish towards the edges of the page. Over the turquoise lines are small yellow flower-looking forms and even smaller red flower forms disbursed throughout the bottom half of the page. There

are also small lavender dots drawn on the bottom half of the page. Towards the center of the page, slightly skewed to the right, there is what appears to be a brain drawn in two different shades of pink sitting atop a plate. The brain intersects the dark blue line that is drawn across the middle of the page and slightly moves into the empty space above. Most of the line quality throughout the response piece has a sketch-like quality to it, with some control in line quality shown in the writing, the yellow and red flowers and the lavender dots.



*Figure 5: Participant 2 Response - Richard Ramirez*

***Jeremy Bryan Jones***

Participant 2 used words to describe the art as “detailed, sophisticated, evocative, creepy, disgusting, intelligent, colorful.” Observations Participant 2 made about the artist were that “he is

definitely expressing himself and trying to get a reaction from the viewer” and that “he embraces his creepy side and the part of him that was previously described as ‘a likable’ and ‘fun guy’ emerges again in the art. He’s definitely having fun in creating these pieces.” The art reminded them of “Stephen King’s *It*, some kind of medieval representations of the devil with a tinge of anime. The last one reminds [them] of a face that’s the stereotypical very 1950s clean-cut young man.” Participant 2 wrote that what interested them most was the artist “is committing to this persona of being the explosive sociopath. He’s basically saying in each of the images that he is going to destroy others and have fun in the process” and continued that “the last image is interesting in thinking about the unhealthy attachments he had with women.” In reference to the appearance of the art, they commented that “he uses color and composition in a really professional manner.” They comment on the use of color in “the blues, pinks and yellows of the first image are so ironic because they’re such primary colors of innocence but a praying child is about to be attacked.” The participant continued to describe the composition in the piece with the child as “interesting because the devil figure is connected to some entity that remains off the page.” They also wrote that “the color and composition of the clown piece is like a traditional portrait, but it’s dripping off the page and the clown is escaping his space. The final piece has a very dramatic and disturbing use of color.” This participant considered the most important parts of the art to be “the seeming attitude behind the pieces, you don’t see depression, but anger and antisocial personality definitely. The artwork is very creepy and the fact that it seems manipulative.” They wrote that they would title the first art piece “don’t look now,” the second “delicious,” and the third “ruined.” They also stated:

“I don’t know what they are about, I wonder if it’s about his full on negative side and an embrace of feeling evil. It seems like he’s trying to show that he has the control in each of the images, there’s no remorse.”

In acknowledging what feelings were evoked for them by viewing the art, Participant 2 responded “I am creeped out when looking at these pieces. It seems like the artist is trying to display his power.”

Participant 2 utilized colored pencils in creating their response to Jeremy Bryan Jones. The page is oriented horizontally. There is a lot of empty space left on the page with the concentration of drawings mostly centered in the middle of the page and slightly to the top. Towards the top of the page, this participant drew three forms that appear to be clouds that have a sketch-like quality to them. Below each of the three clouds are small repeated dots drawn in various colors of red, orange, blue and yellow. Below the clouds and dots, Participant 2 used blue, black and brown pencil to draw a house with a square body and triangular roof. At the bottom center of the house is a small door with a yellow door knob on the left center side of it. There are two square windows drawn above the door, both spaced equally apart from all edges of the square that makes the body of the house. To the right of the house are two stick figures drawn in black colored pencil. The figure closest to the house is composed of five lines that make up the body with a circle for the head on top, with a black and red circle that is placed where a mouth would be. The figure to the right of the first figure is composed of three lines that make the arms and torso, with a triangle at the bottom of the three lines that has been filled in with a dark blue color, and an empty circle on top for the head. To the right of the figures, appears to be a tree. The trunk is shaded in with brown, and extends up in different directions, resembling branches. The use of green shading for foliage further extends the top portion of the tree outward

from the branches. There are no roots to the tree and the bottom of the trunk appears to disappear into the page as the shading becomes lighter. Below the two figures and tree, the participant wrote in green “EVERYTHING IS FINE OR ‘LOOK MA! ACID RAIN AGAIN!’.” The overall line quality of this response piece appears controlled and done with a lighter weight on the pencil. The lines that create the two stick figures are darker and appear to be heavier weighted.



*Figure 6: Participant 2 Response - Jeremy Bryan Jones*

### ***Participant 3***

#### ***Danny Rolling***

Participant 3 used words to describe the art as “disturbing, troubling, chilling, creepy, misogynistic, sinister, and depraved.” Observations made by this participant were that:

“this artwork appears to depict thematic issues of containment, or lack therefore. I can see anger and rage present, but at least in some cases, it seems self-directed, such as the words ‘fuck you’ written backwards as if directed back to the artist.”

The art reminded them of “graphic novels, or video games you might see in the fantasy genre.”

This participant wrote that what most interested them about the art was the central figures, powerful emotions being depicted, and that two of the figures “hold the gaze of the viewer” and questioned “a dialogue with the self, perhaps?” In reference to the appearance of the art, they commented that “there is a distinct lack of color in this artwork. This along with the highly stylized, cartoonish depictions, create a distancing effect.” They titled this serial killer’s art “Losing the Battle” because “with each image the central figure is more and more consumed with rage.” They also thought that the art is about “the struggle for and ultimate loss of containment. It is about rage and hatred for the self, which unknown and unprocessed, becomes acts of outward violence towards others.” In acknowledging what feelings were evoked for them by viewing the art, participant 3 responded “strong feelings of sadness, a sense of loss.”

Participant 3 utilized black and gray markers to create their response art for Danny Rolling on a vertically oriented page. They drew a portrait composed of various lines, shapes and patterns. There are fluid and curving lines that overlap and intersect at different points to form the figure’s hair around the face. The eye on the right is made of a circle with thin lines radiating from the pupil to the edge of the circle. The eyes are formed of ovular shapes with lines radiating from the pupil. Above each eye is a formation of small clustered circles that are contained above the eyes by two thick grey sketched lines that appear to be eyebrows. The nose is drawn with simple and loose lines with the gray marker. The mouth is drawn in the black marker and is done with fluid, curving and overlapping lines that are turned downwards towards the two ends of the

mouth. The portrait appears stylized and contains a lot of empty space. Participant 3 used the black marker to fill in the space around the figure with curving black lines that appear to mimic the curves and fluidity of the lines in the figure's hair. These black lines extend off the edges of three sides of the page and appear to create movement in the image.



*Figure 7: Participant 3 Response - Danny Rolling*

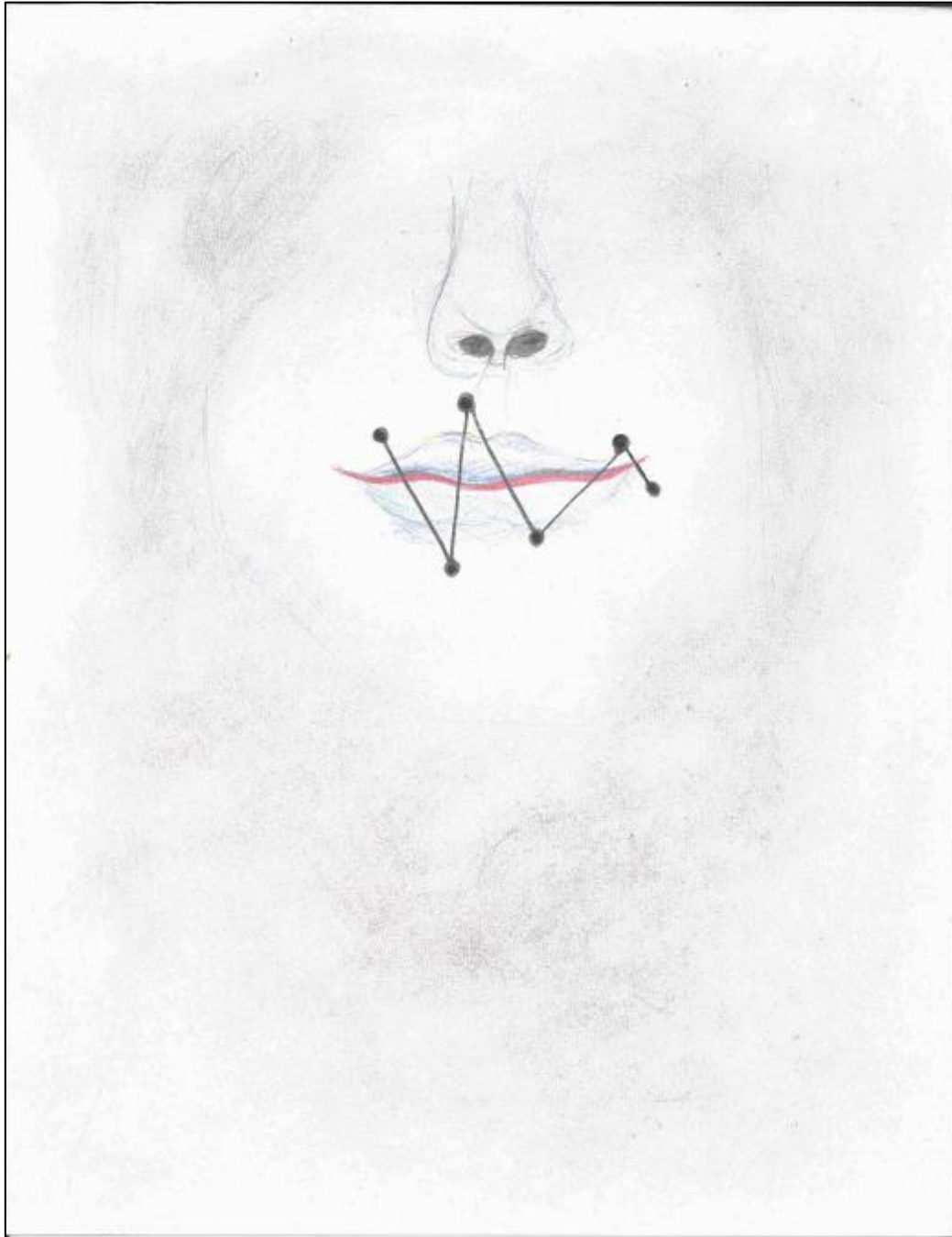


*Richard Ramirez*

Participant 3 used words to describe the art as “childish, cartoonish, menacing, simple, unsophisticated, acrimonious, spiteful.” Observations made by this participant were that “this art appears to latch on to simplistic, or rudimentary symbols of evil or bad luck” and continued on to observe the presence of “skulls and skeletons, 666, pentagram and snake eyes.” The art reminded them of “drawings you might see from a teenager scribbled on a notebook or adorning a high school bathroom stall.” This participant responded that they were interested that “in each drawing the central figure has a gaping, open mouth.” In reference to the appearance of the art, they commented that “the color red is prominent in two of the images. In addition, there is a great deal of empty, unused space.” Participant 3 would ask the artist “what would you add to these images if you could? What sounds do these figures make? Screaming? Speaking? Laughing? Are they expelling out? Or are they taking in?” They titled this serial killer’s art “Worst Possible Outcome” and stated “this is inspired by the image of the skeleton rolling two dice, where each comes up as a one (snake eyes). This is the lowest, worst roll you can have.” This participant further explained their title by writing “curiously, it is the skeleton that is afflicted with bad luck, although the position of the dice indicates the viewer shares this fate.” They also thought that the art is about “a surface level of expression of a connection to evil through clichéd symbolism. However, the open mouths coupled with the empty spaces imply something of significance, yet unsaid or unexpressed. Perhaps even undiscovered.” In acknowledging what feelings were evoked for them by viewing the art, participant 3 responded “irritated, annoyed, irked, defensive, and on-guard.”

Participant 3 used mostly colored pencil with minimal use of a black marker on a vertically oriented page in creating their art in response to Richard Ramirez. There is a light

shading of what appears to be a mix of the black, blue and violet colored pencils over most of the page with a greater concentration of the shading around the top and center of the page. In the center of the shaded area, there appears to be a white face shown from the bridge of the nose down. Drawn over the mouth, it appears that the participant used the black pencil to draw five zig-zag lines that connect six dots.



*Figure 8: Participant 3 Response - Richard Ramirez*

*Jeremy Bryan Jones*

Participant 3 used words to describe the art as “disturbing, troubling, chilling, creepy, misogynistic, sinister, depraved.” Observations made by this participant were that:

“this art appears to be intended for shock value, and it is shocking. It seems to express delight in the depiction of violence, or in the threat or possibility of violence. There appears to be a distinct hatred of women present here.”

The art reminded them of “the over-idealized images from the 1950s (the praying child, the clown portrait, the grinning man) with the added malevolent twist of the artist.” This participant found interesting that “this art appears to depict menace, violence, and literal consumption that is damaging and irretrievable.” This participant commented that “compositionally, the images tend to expand over the edge of the page, or over boundaries with very little concern for containment.” They considered the most important parts of the art to be “the depiction of violence and consumption because it is so undeniably, unmistakably present. It is as if the art is screaming it at you.” Participant 3 would ask the artist “about the figures depicted, both the aggressors and the victimized” and “with whom do you most identify in this picture?” They titled this serial killer’s art “Broken Beyond Repair” because “it describes the result of the acts of violence being depicted here (or being threatened) for both the victim and perhaps the perpetrators as well.” They also thought “it is possible this art is saying something about the need or drive to ‘consume’ or commit acts of violence at the expense of others and the willingness to violate boundaries to do so.” They continued “it seems to show a gleefulness at the idea of taking something over-idealized and destroying it” and speculated that “it appears to be an expression of anti-social tendencies.” In acknowledging what feelings were evoked for them by viewing the

art, Participant 3 responded “uncomfortable, worried, awkward, embarrassed, disgusted, troubled, and fearful.”

Participant 3 utilized various colors of markers to create their response art to Jeremy Bryan Jones. The composition appears to create an effect where the page could be oriented in any direction. The dark blue marker is centrally prominent in creating a large looping form that continues off two sides of the page and is broken in sections by a gray line and a purple line and sections that have been colored in by red and light blue. The fluid purple line appears to interweave with all colors that were included in this piece and be most prominent on towards three sides of the page. The gray line curves throughout the piece, moving over the edges of the paper, and alternates between wider and thinner sections, creating a fluid appearance that effectively breaks up other forms on the page. The light blue color is mostly concentrated along one side of the page and outlines a circular form that is drawn in one of the corners. Red is the second most prominent color within the circular form and is intersected by dark blue, gray and dark green lines. The dark green line is the thinnest and is repeated in a fluid form that is drawn with squiggle lines extending from the circular form and continues behind the other intersecting lines. This fluid figure is composed of red, pink, gray, purple, light blue, dark blue, light green, and dark green. There are thin black lines that separate all the colors within this fluid form. there is empty space between the intersecting fluid lines and forms.



*Figure 9: Participant 3 Response - Jeremy Bryan Jones*

## **Analysis of Data**

Data collected through participant responses for this research permitted the PI to correlate specific themes and evidence of trauma to the visual properties found in the artwork of the three serial killers. Intercoder reliability testing was in line with this correlation and further clarified the connecting themes in the participant responses and serial killer artwork. This may provide grounds for the importance of utilizing art therapy for assessment and identification of trauma that could be indicative of the potential for extreme and chronic violent behavior.

### **Research Questions**

#### ***How were the trauma markers evident in the artwork of the serial killers?***

In reference to Danny Rolling, Participant 1 asserts that “the art is about the artist’s traumatic past and how it has skewed his perspective of reality.” In connection to this assertion, Participant 2 echoed this observation and added that there is a presence of “a lot of mystical images” and questioned if one of the pieces was “perhaps a self-portrait.” Elements that have been connected to trauma that participants identified in the artwork of Danny Rolling were darkness, the absence of color, a combination of red and black, entanglement, images relating to death, figure and ground, negative emotional content, fantasy, and containment, or lack thereof. The imagery created by the participants in response to the artwork of Danny Rolling paralleled the manifestation of the elements related to trauma that the participants had identified in their textual responses.

In connecting the red and black combination marker to Richard Ramirez, Participant 1 thought the art was “about the artist’s suffering,” as well as his “need to be a risk taker,” which shows a duality in representation of the serial killer between passive and active positions. Participant 2 also noted that the artwork of Richard Ramirez seems to “show different parts of

himself” and found similar contrasts between active and passive positions in the depicted figures as two of them “seem to be open and shouting in some kind of pain,” but the third figure and its open mouth resemble a “rock star having fun.” Connecting to a distance from reality, Participant 2 continued to comment on an art piece by Ramirez and stated “I think it’s interesting that it seems that there are jagged teeth in the eyeballs,” which connects to decomposition and death as a trauma marker. Both Participants 2 and 3 noted a “simplistic” and “adolescent” quality to the art and identified a regressed developmental level, which may be connected to the multiple traumas Ramirez had experienced. Other trauma markers identified by participants in the artwork of Ramirez included empty space, line quality, a combination of red and black, skull imagery relating to death, figure and ground, and negative emotional content.

Participant 2 noted that the final piece of Jeremy Bryan Jones also contained the red and black trauma marker and commented that it “has a very dramatic and disturbing use of color.” This combination of red and black can also be found in the clown image by Jones, which Participants 1 and 2 note issues of containment, or a lack of boundaries, where “the clown is escaping his space.” There was also a note of “literal consumption” by Participant 3 in reference to the graphic imagery by Rolling that incorporates misogyny with red and black color combination, a lack of ground line, strong emotional content and thin line quality. All three participants noted the presence of other markers for trauma, such as images and symbols relating to life and death, destruction, line quality and integration.

Relating to trauma, the participant art incorporated issues of safety, life and death through images relating to lifelines, black holes, spider webs, containment and confinement, emptiness, and the color use of black, white and red. The contents of black holes, spider webs, lifelines, entanglement, center of chaos and imprisonment were particularly evident in the response art

created by Participant 1 (Figure 1). Participant 2 created art that was reminiscent of a moon or the Earth enclosed by a frame with the words “NOT SAFE FOR ME” written outside the lower portion of the frame (Figure 4). This imagery was evocative of a lack of safety, the duality of chaos, containment, confinement, humanity, and emptiness. The response art created by Participant 3 (Figure 7) was particularly evocative of humanity, a split from reality, issues of containment, voyeurism, confusion, and fixation. There was a prevalence in the conflict between internal and external chaos evident in the participant art through contents related to entanglement, central points of chaos, imprisonment, humanity, confusion and fixation.

***What elements in the artwork relate to the various types of trauma?***

There were certain elements in the serial killers’ artwork that participants identified as being evocative of complex trauma, chemical and/or drug exposure, and traumatic brain injury. In reference to the complex trauma Rolling experienced, Participant 2 speculated that one of the main characters is representative of his father and stated that they would have titled that piece “The Dragon’s Innards.” Participant 1 further supports this speculation in identifying the abuse Rolling was victim to and asserted that the serial killer’s art is representative of severe trauma. In further possible connection to complex trauma, Rolling’s artwork was also identified to contain high amount of negative emotional content, a lack of color, compartmentalization, de-realization, fantasy, and a lack of containment.

In regards to traumatic brain injury, Participant 1 identified the image of the red skull by Ramirez being emblematic of his trauma. Participant 2 reiterated the importance of the red skull and further elaborated on a connection between the traumatic brain injuries, with the addition of toxin exposure while in utero, to a possibility for arrested development; which is reflected in the quality of the imagery created by Ramirez. Participant 2 also connects these traumas and



Ramirez's drug use to the use of color in his imagery. In combining the use of color, empty space and skulls with gaping mouths, Participant 3 further supports the presence of identifiers for the traumatic experiences that negatively impacted Ramirez.

The artwork of Jeremy Jones was identified as evocative, disturbing, troubling, sinister, sexual and containing power struggles. All three participants noted the presence of misogyny, a threatened violence, and a power struggle between male and female figures in the art. This may connect to the possibility of complex trauma, especially since similarly to participants' responses to Rolling, they noted the presence of the red and black color combination, de-realization, fantasy and a lack of containment. In reference to the image with the red and black color combination, Participant 1 commented that "there is a cannibalistic quality to the content." Also referring to this image, Participant 3 stated that Jones seems to express "antisocial tendencies," which may be correlated to the experiences of childhood trauma, and also stated that there is "a gleefulness at the idea of taking something over-idealized and destroying it." They also speculated that the depicted acts of violence are not only threatened towards "the victim [but] perhaps the perpetrators as well."

### ***What are the common themes in the artwork of the serial killers?***

Themes were discovered through properties that were identified and grouped into categories from which the common themes emerged. Participants relayed experiencing discomfort in viewing the serial killer artwork, and being concerned about issues of safety, voyeurism, power struggles, stereotyped personas and humanity. In the textual data gathered, some other categories that emerged were religion in the context of good versus evil, unhealthy attachments, violence directed by the perpetrator both towards the victims and themselves, as well as a sense of an internalized chaos resulting in externalized violence. All three participants

also repeatedly described emotional content within the art as being rage, hatred, suffering, disturbed, remorseless, enjoyment and evocative. Emotions evoked by viewing the art for participants were fear, anger, discomfort, sadness, irritation, disgust, wonder and curiosity. Analysis of participants' visual response data echoed what was identified in the textual data (Table 1).

In connecting to issues of safety, power struggles, attachments and violence, participant 1 and 3 responded to the presence of misogyny in the art of Jeremy Bryan Jones. They related properties in the serial killer art that were evocative of attention-seeking and violence to the unhealthy attachments Jones had with his mother and other women in his life. They also found the artwork of Jeremy Bryan Jones was difficult to look at, but offered a glimpse of "the artist's distorted view of reality," which connect to categories of a duality of chaos and serial killer stereotypes. Participant 2 discussed the emergence of Jeremy Bryan Jones' identity in the artwork by commenting that the artist was purposefully being evocative in the creative process and that he "embraces his creepy side and the part of him that was previously described as 'a likable' and 'fun guy' emerges again in the art." In further connection to the serial killer's identity and personality, Participant 3 also noted a "gleefulness" in the threat of violence, as well as "an expression of anti-social tendencies." The artwork of Jeremy Bryan Jones was demonstrative of the concepts involving evocativeness, emotional content, culture, stereotypes, psychology, chaos, violence, red and black combination, humanity, reality perceptions, life and death, safety, containment, power struggles, victim and perpetrator, and voyeurism.

In connection to emerging categories of power struggles, safety, humanity, death, violence and a duality between internal and external chaos, Participants 2 and 3 make note of specific visual properties and their evoked responses. Connecting the viewer, art and creator,

Participant 2 discerned the involvement of the viewer in artwork by Ramirez in which their interpretation of the art suggests that the viewer shares the same ill fate as that of the skeleton. This imagery incorporates death in the image of the skeleton, and issues of safety and containment in the concept that the ill fate of the figure may be transferred to or shared by the viewer. This may also be the artist asserting his own power and forcing the viewer to share in his trauma and “fate.” Participant 3 also noted the killer artists’ threat of violence towards others, as well as themselves in the artwork of Danny Rolling by stating “I can see anger and rage present but at least in some cases, it seems self-directed, such as the words ‘fuck you’ written backwards as if directed back to the artist.” Participant 3 then connects this internalized hatred for the self with trauma and development and stated that if left “unknown and unprocessed, becomes acts of outward violence toward others.”

### **Themes**

The five themes found common across all data sets were communication, representation, chaos and violence, life and death, and illusion of power. The frequency and rate of occurrence of these themes within the textual data closely matched the grand total occurrence of themes. The frequency in the visual data differed from the overall total in that themes with a heavier weight in visual and sensorial, rather than verbal communication and properties, became more prevalent. Following a description of each of the five themes, visual graphs demonstrate the prevalence and frequency of occurrence for the themes in the overall data and then for the textual and visual data separately.

### ***Communication***

The theme of communication is about what the art does-, or attempts to- communicate. This involves the relationships of the viewer and the creator to the art product, and in turn, the

relationship of the viewer to the creator. Communication contains properties of manipulation, emotional content, and of being evocative in nature.

Communication occurred in the presence of voyeurism and dialogue that was generated between the serial killer art and the participant in their role as a viewer, which allowed for a manipulative intent of discursive identity formation and an internalized negative self-concept to surface from the serial killer art. Participant 3 connected the presence of voyeurism in the communication between the art, its creator and the viewer, by remarking that the figures “hold the gaze of the viewer” and questioned “A dialogue with the self, perhaps?” Participants 1 and 2 echoed the presence of voyeurism and expanded on the evocative nature of the gaze, as well as the ability to observe the serial killer’s distorted perceptions of reality. The evocative nature and distancing from reality was acknowledged by all three participants and found common across all three serial killer artists.

### ***Representation***

Representation as a theme incorporates artistic formal elements, their implied significance, the appearance of the figures in the art, and what the art is reminiscent of, or what it resembles. All three participants noted elements relating to representation in the art of Richard Ramirez that were significant in identifying a regressed developmental level. Other identified elements relating to this theme included issues of containment and boundaries through visual composition and line quality in the art of Danny Rolling and Jeremy Bryan Jones. The theme of representation carries significance in trauma identification and cultural considerations, through the quality and complexity of the formal elements, the style and depiction of figures, what the art is reminiscent of, and any cultural tropes that are evident in the art.

### ***Chaos and Violence***

The red and black combination marker for trauma is categorized under the theme of chaos and violence due to the representative attribute of the trauma marker to be of conflict, tension between passivity and activity, and the threat of violence. Chaos and Violence as a theme was supported in the data through the properties of color, perseveration of spirals and dots, cannibalism, explosiveness and entanglement. The results found in this study conjure the existence of a center of chaos and a duality between internal and external chaos. The internalized chaos manifests in external acts of violence as specifically identified by Participant 3 who connected an internalized hatred for the self with trauma and development.

### ***Life and Death***

The theme of life and death incorporates the trauma marker of death into concepts of the unseen, a change in states of consciousness, issues of safety and the dichotomy of victim and perpetrator. The identified theme of life and death integrated issues of safety, humanity, and changes in states of consciousness through the features that were identified by the three participants in their responses to the serial killer art. These features included empty space, voids, abyss, surrealism, blood, existentialism, as well as dualities in the use of color and perspective, and the concept of cannibalism and pleasure.

### ***Illusion of Power***

The illusion of power as a theme integrates the trauma marker of figure and ground through shared categorical concepts of enforcement of- or lack of- differentiation, as well as derealization, dissociation, defenses, barriers, protection, containment and skewed perceptions of reality. The illusion of power as a theme illustrated the importance of containment, boundaries, power, and the dichotomy of victim and perpetrator. It was expressly evident in the composition,

perspective and line quality of art by Danny Rolling, the elicited content, line quality and perspective in art by Richard Ramirez and in the graphic content, perspective, contrast, composition and line quality of art by Jeremy Bryan Jones.

Figure 10

Prevalence of Themes Across All Data

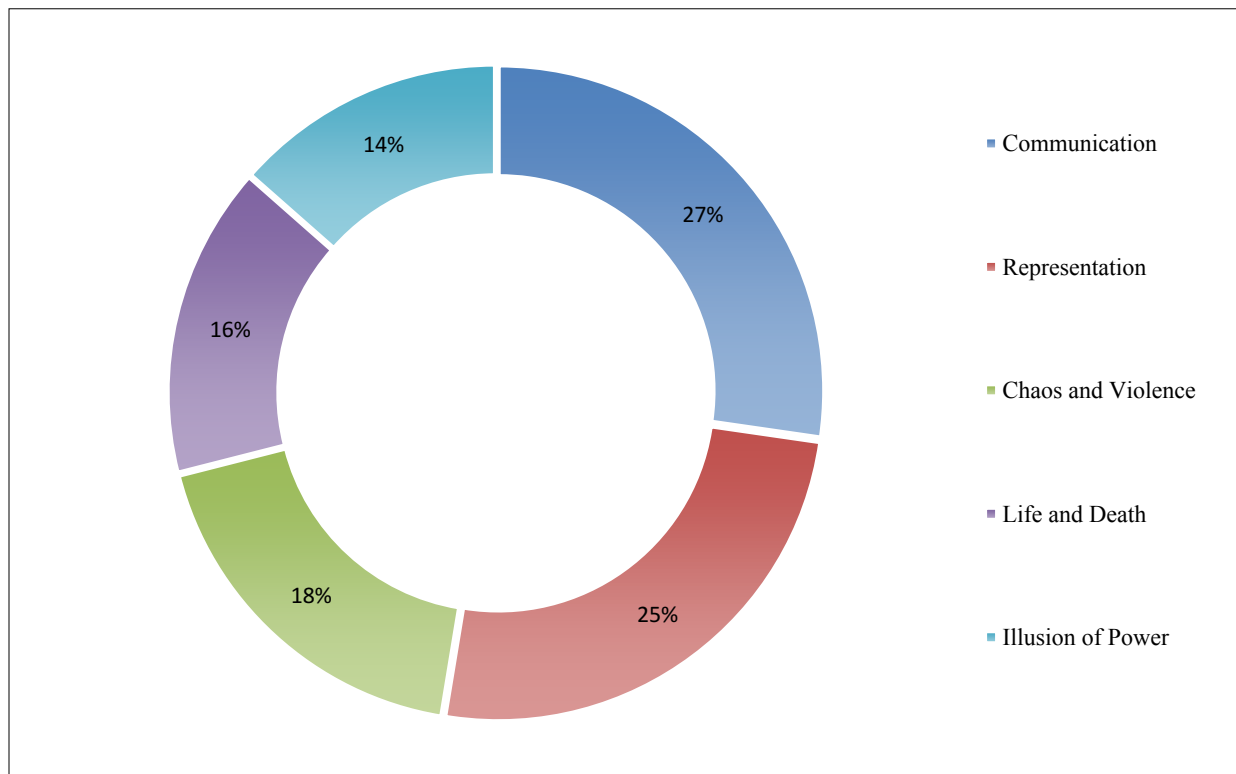
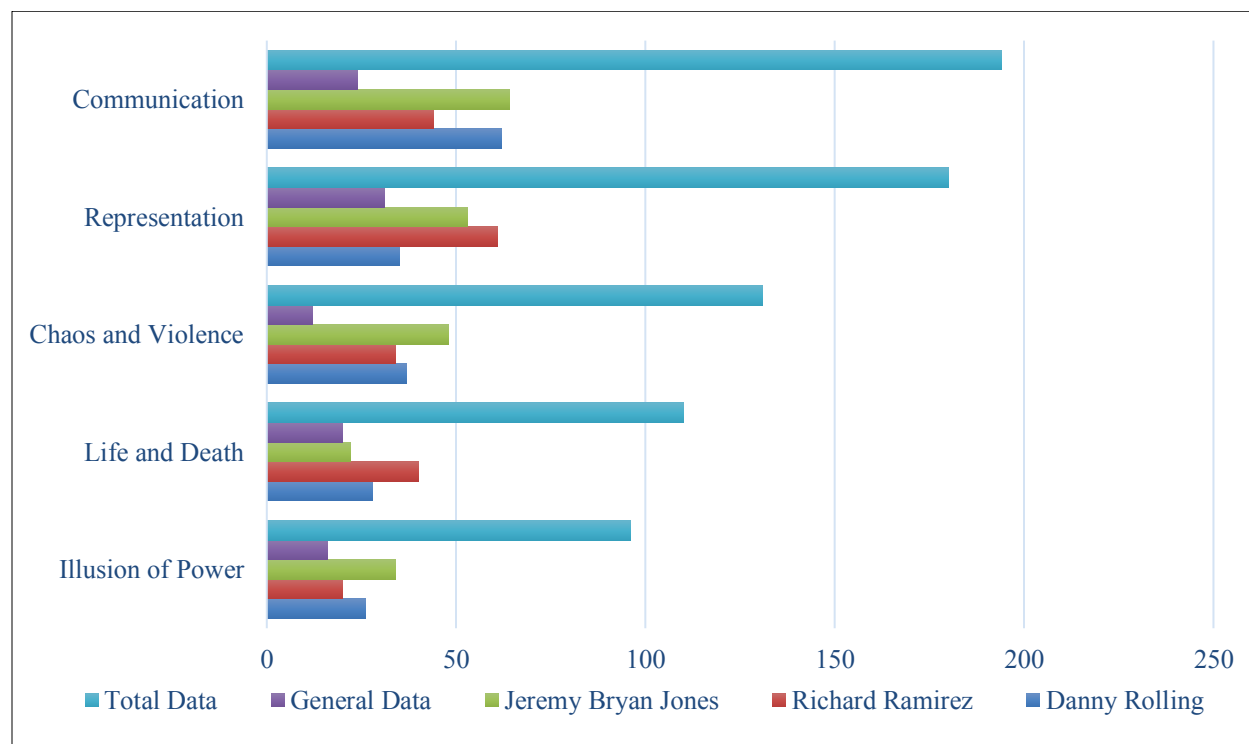


Figure 11

*Frequency of Themes Across All Data*

Note. Information combined from frequency of themes across textual data (Figure 14) and frequency of themes across visual data (Figure 15).

Figure 12

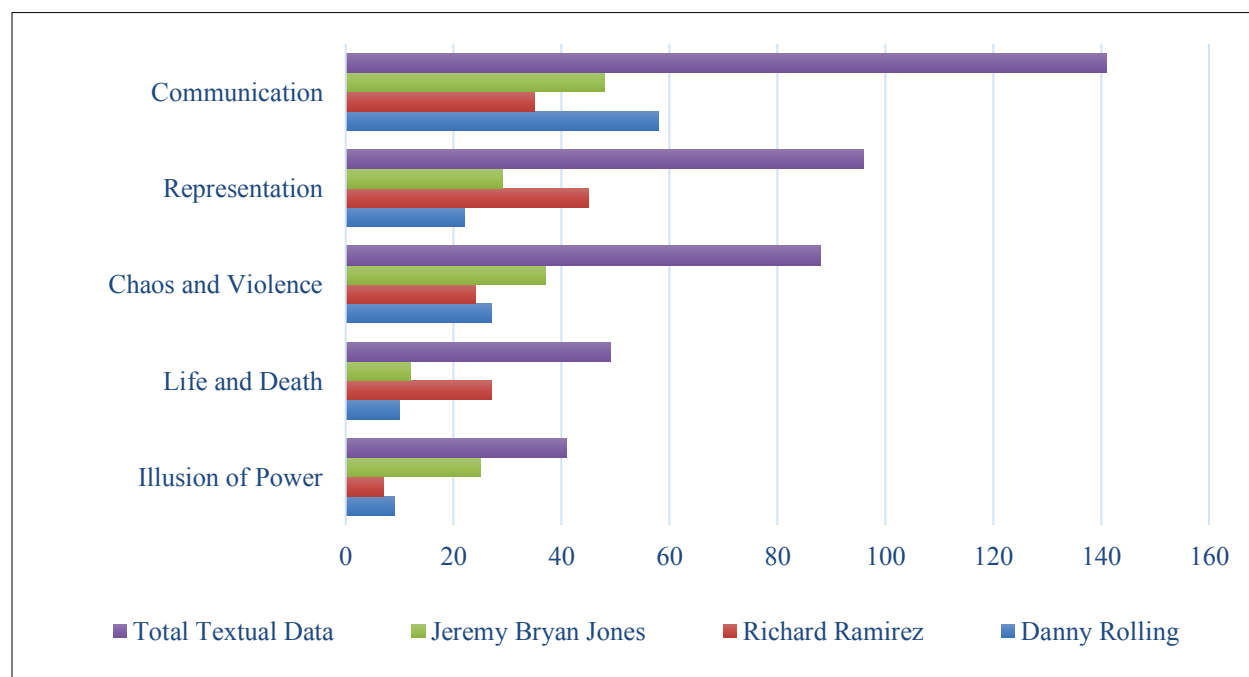
*Frequency of Themes Across Textual Data*

Figure 13  
Frequency of Themes Across Visual Data

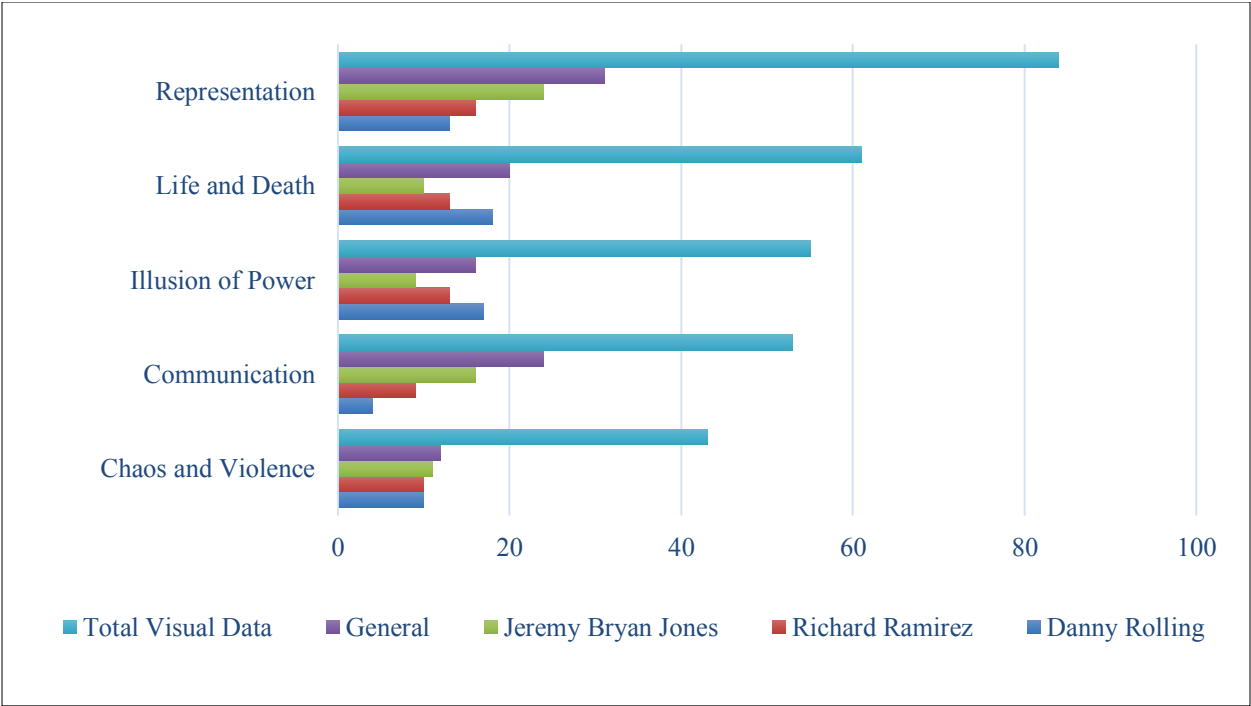
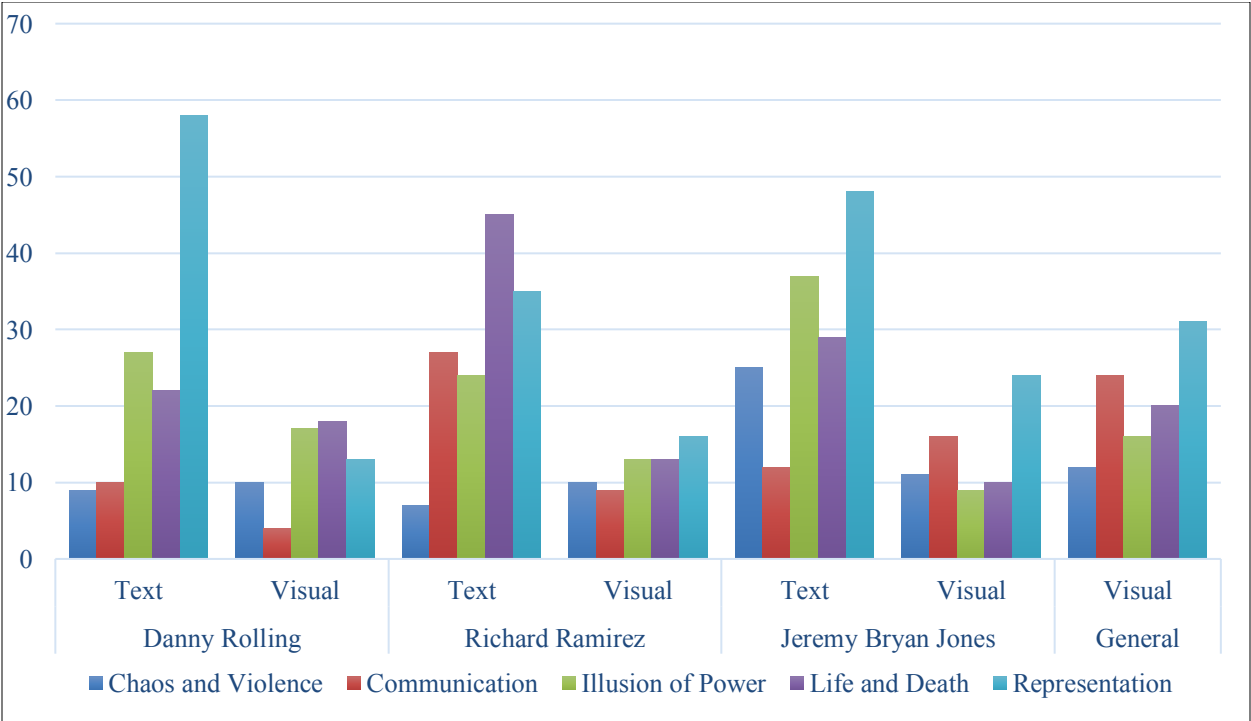
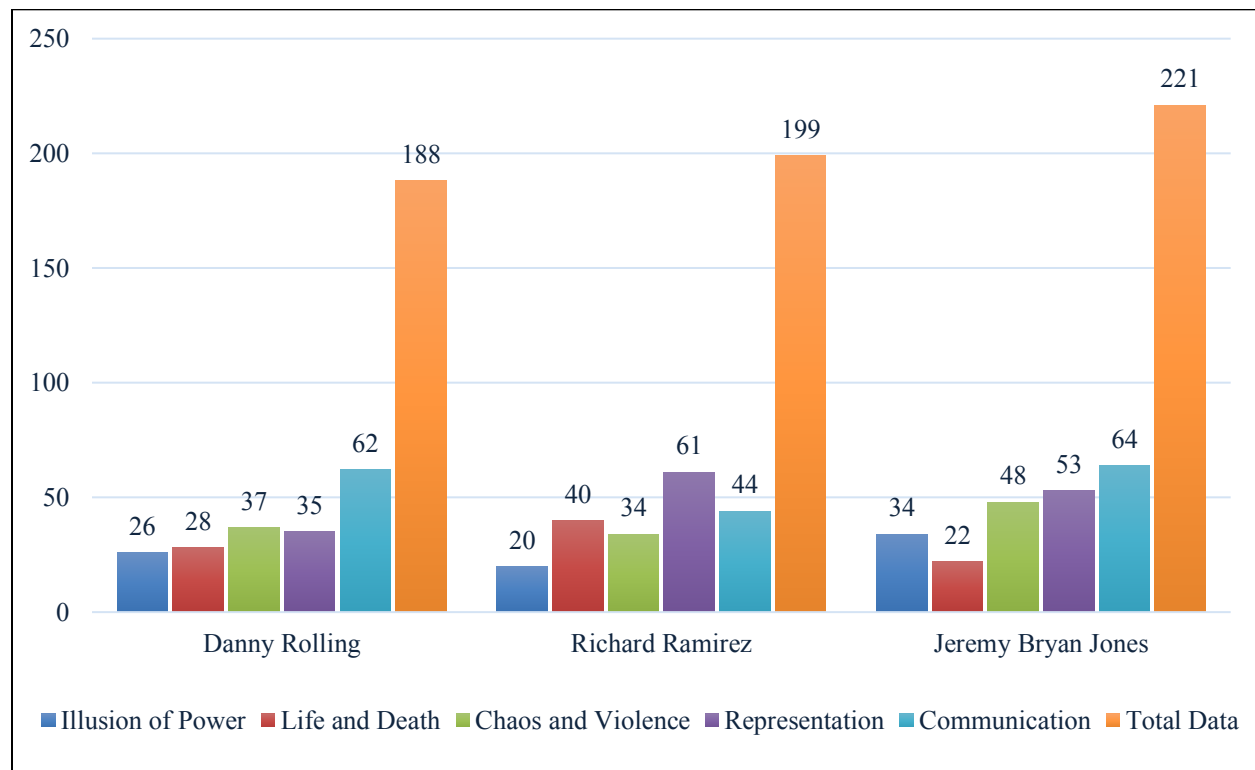


Figure 14  
Comparison of Visual and Textual Data



Note. There were variations in the frequency at which the themes occurred, or were evident, between the textual and visual data.



*Figure 15**Prevalence of Themes Per Serial Killer*

*Note. It was anticipated that, given their known trauma histories, Danny Rolling and Richard Ramirez would yield a higher number of responses than Jeremy Bryan Jones. However, Jones produced the highest amount of response.*

## Findings

In exploring how trauma affects the psychological makeup of serial killers and how such experiences are evident in their artwork, the results of this research supported the manifestation of both general and type specific markers for trauma in the art that were consistent with the art therapy literature on trauma. General trauma markers based on the literature by Eisenbach, et al. (2015) that were evident in the data included the red and black color combination, lack of figure and ground differentiation, and images relating to decomposition and death. Type-specific markers supported evidence of traumatic brain injury, substance and toxin exposure, and complex trauma through imagery of exploding skulls, evidence of arrested development, images relating to unhealthy parental attachments, entanglement, and an internalized hatred of self.

There was also evidence of properties in the art that support specific themes found common across all data sets, such as communication with the presence of voyeurism, representation through stylistic elements, chaos and violence by way of trauma markers, life and death with the presence of a dichotomy between victim and perpetrator, and an illusion of power through issues of containment and skewed perceptions.

### *Communication*

The theme of communication found within the art served a purpose to provide the serial killers with a means to discursively form their own identities. Foucauldian discourse assumes the subject is self-aware, poses free will, and is therefore capable of self-governance. The serial killers as self-governed subjects was supported by the literature where it found that serial killers mitigate responsibility and bridge their identity gap through drawing on the dominant discourse and the serial killer archetype, as well as in defining their own subject position as being aligned with a victim role (Bartels & Parsons, 2009; Henson & Olson, 2009; Federman, Holmes & Jacob, 2009). The same literature also found that serial killers represent themselves through use of three discourses of appealing to emotions, aligning the self with the serial killer archetype, and being compelled by sexual fantasy in order to mitigate responsibility and conceal violence (Bartels & Parsons, 2009). Through correlating identity as a serial killer to a sexual act, which may be seen in the art of Jeremy Bryan Jones, they placed themselves in a passive position of giving into deviant sexual behavior. Henson and Olson (2010) also established a common act of the serial killers attempting to reject the severity of the stereotyped serial killer by aligning themselves with mental illness, and in doing so, realigned themselves with stigmatized cultural stereotypes; a finding that echoed the results of this study in the personification of horror and serial killer tropes in the art. However, by reaching an aporia in the dissolution of their archetype

as a basis for normalcy, they are once again fixed within boundaries of discourse as their argument cannot be followed by reifying another stigmatized identity.

The concept of the constructed subject was also repeated in the art through participant identification of the gaze in the artwork of all three serial killers. The gaze was utilized to construct the art in a way that communicated the voyeuristic tendencies and behaviors associated with the serial killer archetype. This construct also reflected on the Foucauldian arts of existence, which outlines that the subject constructs themselves through their conduct and aesthetic properties in the act of looking, seeing and being seen. However, the gaze created an assertion where not only was the subject and their product each constructed, but also the viewer. Since the gaze works outside of boundaries, it allowed for a sort of communication between the art product, the creative subject, and the viewer. The result of being able to view the serial killer's distorted perceptions, combined with the participant question "A dialogue with the self, perhaps?" also posed a further layer to the lack of boundaries with the gaze in that the creator, product and viewer seem to interchangeably construct each other, creating a sense that the viewer becomes the subject; that there is a piece of the serial killer archetype in everyone.

### ***Representation***

As outlined by Eisenbach, et al. (2015), formal elements such as color combination, line quality, composition and perspective are all important in identifying markers for trauma. The formal elements, quality of representations and resemblances to other cultural knowns made a cultivation of knowledge, and identification of properties of trauma possible through the framework of discourse. The Foucauldian arts of existence emphasize the aesthetic value and stylistic criteria subject constructs for making understanding of their life and experiences. Since

these constructs are defined by the episteme and discourse, the identified trauma markers were relevant in combination with lived experience situated within culture and time.

### ***Chaos and Violence***

This theme was also sustained by the literature of (Eisenbach, et al., 2015) through the incorporation of the red and black color combination as a marker for trauma. This marker is associated with conflict, a tension between passivity and activity, and the threat of violence towards victims and the perpetrators as well. The trauma marker also features inner fragmentation, which is a state in which Malchiodi and Perry (2014) support the use of art therapy as an individual with a fragmented self does not respond well to verbal therapy.

### ***Life and Death***

The theme of life and death pertained greatly to lust serial killers, which comprise the majority. As discussed by Allely et al. (2014), there are sometimes cannibalistic qualities to the lust kill, which was found in identification of consumption in the imagery of Jeremy Bryan Jones. The authors also outline how lust serial killers often show evidence of overkill and they gain pleasure from the killing both during the act and after the victim is dead. They also assert that evidence of sexual pleasure may not always be obvious and may appear in forms of body mutilation and dismemberment, qualities of which were found in the art of Danny Rolling.

### ***Illusion of Power***

This theme was also supported by the research (Eisenbach, et al., 2015) in the incorporation of the figure and ground marker for trauma, which addressed de-realization, skewed perceptions, dissociation, issues of containment and boundaries. From a Foucauldian perspective, power is a relation where the exercise of it is strategic, meaning that once there is a relative power, there is the potential of resistance; a conflict that was supported in the results of

this research. As found in the theme of communication, the serial killers' attempts to discursively form their identity resulted in reification of their stigmatization, the exercise in power of people and self-identity fixates boundaries. One illustration of this was found in Rolling's clown portrait where there is an appearance of escaping and moving outside boundaries with little containment. However, as defined by Eisenbach, et al. (2015), the visual aspects of thick contours and stark contrast between the black, white and red provided evidence for a restricting, a confinement that prevents movement. This acts to maintain the serial killers' entrapment in a stigmatized archetype.

### ***Discussion of the Findings***

Considering the known histories of each of the three serial killers utilized in this research, it was interesting to note which serial killer's artwork yielded more data from participant responses. It was anticipated that, given their known trauma histories, Danny Rolling and Richard Ramirez would yield a higher number of responses than Jeremy Bryan Jones. While there has been no documented trauma or abuse in the past of Jones – other than speculations of physical and emotional abuse, sexual perversion, and known substance use in his family – his art received the largest amount of response to markers for trauma and in properties of the themes illusion of power, chaos and violence, and communication (Figure 15).

There was a variance in the prevalence of themes between the visual and textual data (Figure 14), which is likely due to the properties of each theme in association to sensate versus cognitive experience. While the textual data matched the total average occurrence of properties pertaining to each theme with themes of higher correlation to language and discourse, the visual data differed in having a higher prevalence of themes relating to abstract concepts. This supported the assertion of using creative therapies in identification and treatment of trauma, such

as art therapy, since “trauma is stored as somatic sensations and images, it may not be readily available for communication through language, but may be available through sensory means” (Malchiodi & Perry, 2014, p. 11).

To better understand a serial killer, it is important to consider discourse in terms of broader social and historical contexts that give rise to such violence. According to Foucault (1981), “there is no prediscursive providence which predisposes the world in our favor. We must conceive discourse as a violence we do to things” (p. 28). Cultural frameworks of denigration may contribute to the serial killers’ internalized hatred of the self that was identified in the results, which also connects to the fragmentation of the self as defined by Malchiodi and Perry (2014). The violence and trauma that these individuals experienced are often recapitulated into outward acts of targeted violence towards marginalized and easily accessed populations onto which the killers project.

These findings support the need for the development of a profile for early recognition, as well as the development of a treatment model for early intervention. The research also conveys the importance of cultural competency and the need for a deeper discursive comprehension in identification of serial killers and treatment of related symptoms and behaviors. The literature further supports the importance of early recognition, especially in terms of improved treatment outcomes for populations relating to the symptoms and behaviors of serial killers (Allely, et al., 2014; Eisenbach, et al., 2015; Eren et al., 2014; Gerard, et al., 2014). The existing art therapy literature also supports the use of art therapy with populations involving violence, trauma and personality disorders, which could aide in developing a model for early intervention (Eisenbach, et al., 2015; Eren et al., 2014; Gussak, 2009; Hass-Cohen, et al., 2008; Howie, et al., 2013; Malchiodi & Perry, 2014; McGuinness & Schnur, 2013).

### Conclusion

*“The deepest wound doesn’t originate from weapons of forged steel,  
but heart to heart comes the dirty deal.”*

*- Danny Rolling*

Despite the fact that serial killers have become increasingly popular in current media and television, there is little research available on specific contributing factors that impact their psychological makeup. Much of the information on serial killers is either speculative, or focuses on the depictions provided by the news and media. In order to fully understand a serial killer, it is important to consider broader social and historical contexts that give rise to such violence. This study was able to draw connections between the serial killer archetype, sociocultural factors, traumatic experiences and discursive power struggles that impact a serial killer’s development and existence; further contributing to the dismantling of the stereotyped celebrity monster.

The bottom-up approach of qualitative data analysis facilitated the emergence of five themes, which included: communication, representation, chaos and violence, life and death, and illusion of power. The utilization of discursive psychology and Foucauldian theory also allowed participants to identify and expand on variables that were most prevalent to them, rather than having preset factors which could have led to increased bias. This approach also made it possible to expand an attentiveness to the traumatic experiences and psychological developments that led to a manifestation of seemingly illogical and severe life-time violence. The findings in the literature and data of this research supported the use of an art theoretical framework in assessment of trauma with those exhibiting-, or possessing the potential to exhibit- antisocial tendencies due to the sensate memory coding of trauma that works outside of cognitive

processes. Not only was art therapy relevant in the assessment of trauma in application to serial killers, but also in its function outside of verbal language, which the literature found to be manipulated by the serial killers in mitigating the weight of responsibility for their detrimental and irrevocable violent acts.

The literature found that research on serial killers is limited due to difficulties in gaining access to subjects, lack of reliability of the information provided by the subjects, and the possibility of interviewer bias, especially in examining the perpetrator. Other challenges include problems with data sources, such as incongruent definitions, small sample sizes, samples biased towards well known serial killers and a reliance on biographies and news sources. In this study specifically, obtaining quantity of participant responses was a challenge. An increased sample size may have increased the validity of the data and provided increased depth to the findings. Whilst the primary investigator maintained no personal contact with participants and was cognizant of word choice in the packets provided to participants, there is still a possibility of the investigator's bias to influence participants' responses. Even though intercoder reliability was utilized, bias may have also occurred in the analysis of the data as the PI held a strong intrigue with this topic. The use of licensed art therapists as participants, as well as the PI and intercoder group being students in clinical art therapy masters program, may have also facilitated possible bias in the results of this research. These different factors that give potential to increased bias make further study in this topic progressively important.

This study demonstrated the importance of understanding serial killers' psychological makeup, what traumas and other experiences had profound impacts on them, the contexts in which they developed and how to look for the warning signs in their development and artwork; allowing for the potential of future research to formulate an assessment and treatment model to



prevent such violent behavior with early intervention. The results of the data supported the findings in the literature review that there is a need for further research in modern phenomena, such as anonymity in mass urbanization, celebrity culture and effects of the media on violence and mental health, and cultural frameworks of denigration that lead to targeted violence towards marginalized populations. By better understanding how serial killers' experienced traumas have affected their identity formation, artwork, thoughts and behaviors, valuable information may be contributed to further developing practices for forensic art therapy in working with prison populations and incarcerated serial killers. Future studies should also incorporate the phenomenon of the discursive creation of the serial killer archetype and how this impacts their identity formation and conceptualization of violent acts.

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## Appendices

### Appendix 1

#### Experimental Subject Bill of Rights

#### LOYOLA MARYMOUNT UNIVERSITY

### Experimental Subjects Bill of Rights

Pursuant to California Health and Safety Code §24172, I understand that I have the following rights as a participant in a research study:

1. I will be informed of the nature and purpose of the experiment.
2. I will be given an explanation of the procedures to be followed in the medical experiment, and any drug or device to be utilized.
3. I will be given a description of any attendant discomforts and risks to be reasonably expected from the study.
4. I will be given an explanation of any benefits to be expected from the study, if applicable.
5. I will be given a disclosure of any appropriate alternative procedures, drugs or devices that might be advantageous and their relative risks and benefits.
6. I will be informed of the avenues of medical treatment, if any, available after the study is completed if complications should arise.
7. I will be given an opportunity to ask any questions concerning the study or the procedures involved.
8. I will be instructed that consent to participate in the research study may be withdrawn at any time and that I may discontinue participation in the study without prejudice to me.
9. I will be given a copy of the signed and dated written consent form.
10. I will be given the opportunity to decide to consent or not to consent to the study without the intervention of any element of force, fraud, deceit, duress, coercion, or undue influence on my decision.

## Appendix 2

### Informed Consent Form

#### LOYOLA MARYMOUNT UNIVERSITY

### Appendix 1 – Informed Consent Form

Date of Preparation 11/06/2016

#### **Loyola Marymount University**

An Exploration of Trauma Markers in the Artwork of Serial Killers

- 1) I hereby authorize Kiran Haynes to include me in the following research study: An Exploration of Trauma Markers in the Artwork of Serial Killers.
- 2) I have been asked to participate in a research project that is designed to explore how experiences of trauma may contribute to the psychological makeup of serial killers. The responses to this survey and artmaking component may take up to 2 hours to complete. I will have 4 weeks to complete the survey and artwork and return it to the primary investigator.
- 3) It has been explained to me that the reason for my inclusion in this project is that I am uniquely qualified in trauma treatment and my professional capacity as an art therapist to understand trauma markers in artwork.
- 4) I understand that if I am a subject, I will receive a packet containing a return addressed and stamped envelope, copies of serial killer artwork, and a questionnaire requiring both written and art responses. I understand that there will be a due date in which I will be requested to return the completed packet.

The investigator(s) will contact me through E-mail for a reminder of the due date, follow-up and to answer any potential questions regarding my participation.

These procedures have been explained to me by Kiran Haynes.

- 5) I understand that my response artwork will be photographed. It has been explained to me that these photographs will be used for research purposes only and that my identity will not be disclosed. I have been assured that the photographs will be destroyed or returned to me after their use upon the completion of the research project. I understand that I have the right to review the photographs taken as part of the study to determine whether they should be edited or erased in whole or in part.
- 6) I understand that the study described above may involve the following risks and/or discomforts: emotional discomfort relating to the content in the serial killer artwork and as a result of my art response.



- 7) I also understand that the possible benefits of the study are an opportunity to contribute to research in an area of study that currently has limited resources.
- 8) I understand that the faculty sponsor, Dr. Paige Asawa, MFT, ATR-BC, who can be reached at (310) 338-7646 will answer any questions I may have at any time concerning details of the procedures performed as part of this study.
- 9) If the study design or the use of the information is to be changed, I will be so informed and my consent reobtained.
- 10) I understand that I have the right to refuse to participate in, or to withdraw from this research at any time without prejudice to (e.g., my future medical care at LMU.)
- 11) I understand that circumstances may arise which might cause the investigator to terminate my participation before the completion of the study.
- 12) I understand that no information that identifies me will be released without my separate consent except as specifically required by law.
- 13) I understand that I have the right to refuse to answer any question that I may not wish to answer.
- 14) I understand that in the event of research related injury, compensation and medical treatment are not provided by Loyola Marymount University.
- 15) I understand that if I have any further questions, comments, or concerns about the study or the informed consent process, I may contact David Moffet, Ph.D. Chair, Institutional Review Board, 1 LMU Drive, Suite 3000, Loyola Marymount University, Los Angeles CA 90045-2659 at david.moffet@lmu.edu.
- 16) In signing this consent form, I acknowledge receipt of a copy of the form, and a copy of the "Subject's Bill of Rights".

Subject's Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

### Appendix 3

#### Questionnaire

#### LOYOLA MARYMOUNT UNIVERSITY

##### Questionnaire: (Serial Killer Name)

Please print or write responses legibly, or type and print your responses. Please keep together each of your responses, with the corresponding biography and serial killer artwork paper clipped together.

1. What words (list of adjectives) would you use to describe the art?
2. What observations can you make about the art?
3. What does the art remind you of?
4. What interests you most about the art?
5. What can you say about the use of color and composition in the art?
6. What do you think is the most important part of the art? Why?
7. What questions would you ask the artist about the art?
8. What title would you give the art? Why?
9. What do you think the art is about? Why?
10. What feelings are evoked for you by viewing the art?

Consider the art directive below and create art.

- Create art that represents your understanding of how life experiences affected this person.

**Appendix 4****Letter for Selecting Participants**

Dear \_\_\_\_\_,

I'm contacting you with a request to participate in a second year research project focused on how trauma(s) impact the psychological makeup of serial killers and how those experiences are evident in their artwork. Should you decide to participate in this research you will be provided with a packet of information that will include instructions, consent forms, questionnaires, a short biography of the serial killers and examples of their artwork. In addition, you will be provided art materials to make response artwork. The process should take about an hour and you will be provided a return envelope to mail your responses back to the university.

Please reply back to this email with any questions you may have.

If you would like to participate, please reply back to this email and include your mailing address and a participant packet will be mailed to you.

Best regards,

Paige

## **Appendix 5**

### **Serial Killer Biographies**

#### Serial Killer Biographies

*These biographies of three different serial killers were informed by multiple sources that were accessed through public domain records or in published books.*

#### **Danny Rolling “Gainesville Ripper” (1954 – 2006)**

Danny Rolling was born in 1954 to Claudia and James Rolling and was the oldest of two sons. He experienced lifelong emotional and physical abuse from his father, who was a retired police lieutenant. Rolling was referred multiple times for mental health services, but never followed up with those services for fear of retaliation by his father. His father reported hating children and Danny and his brother were consistently told that they were unwanted from birth. At age five, Danny’s father tired him up six times during a six-month period and “Rolling related stories of childhood beatings, being handcuffed and his father holding a knife to his throat” (Leusner, 1994). At age six, Danny found solace in the relationship he had with the family dog. Within months, his father beat and tortured the dog to death and Danny’s only friend died in his arms. Danny’s father refused to comfort and show affection to his sons and would not allow their mother to be affectionate with the boys. Danny failed the third grade multiple times and was reported to have aggressive tendencies and poor impulse control by his teachers. He began drinking at age 11 to escape the domestic violence he was subjected to at home. When he was twelve, he reported running away from home and sleeping in the woods where he masturbated

while having sexually violent and sadistic fantasies of controlling and killing people. He began engaging in voyeuristic acts by spying on women in their homes when he was fourteen. At age fifteen he attempted suicide by cutting his wrists, which he had witnessed his mother do four years previously during a violent fight with his father. His mother had left his father multiple times with Danny and his brother, but always returned where the cycle of domestic violence continued and became increasingly violent each time she left. He dropped out of high school and enlisted in the Air Force where his substance use escalated with alcohol, cannabis and LSD. While in the air force, Danny was diagnosed with a personality disorder and was honorably discharged. He then returned to Shreveport where he married Omatha who was pregnant with his daughter. The stress of supporting his family led to his reengagement with drugs and he quickly began showing impulsive and violent behavior. His marriage soon ended after he held a gun to his wife's head after she threatened to leave him. After the divorce, he began committing armed robbery and raping women. He served multiple sentences in the Alabama and Mississippi prisons before being released in 1988, after which he began committing serial murder. The Gainesville clinical psychologist reported that "Rolling has a borderline personality characterized by violent mood swings, impulsive and self-destructive behavior, narcissism and anti-social feelings" (Leusner, 1994). It was during his psychiatric assessment that Danny Rolling stated "the deepest wound doesn't originate from weapons of forged steel, but heart to heart comes the dirty deal" (Leusner, 1994).

### **Richard Ramirez "Night Stalker" (1960 – 2013)**

Richard Ramirez was the youngest of five children. Ramirez's mother worked in a boot factory and was constantly exposed to toxic chemicals and fumes while pregnant with him, and the

“chemicals from work seemingly caused her body to reject the pregnancy” (Smith, p. 92). His father was from Mexico and grew up impoverished, strictly Catholic, and as a parentified child due to the death of his own mother, and developed a “rigid seriousness that carried over to the regular beatings the children received” (Smith, p.68). At first, Richard was a witness to the abuse his father inflicted on his three older brothers. As he grew, he quickly became the target of his “father’s increasingly hairline temper” (Smith, p. 145). When Richard Ramirez was two years old, a dresser fell on him, causing a traumatic brain injury that required thirty stitches. His second brain injury occurred when he was playing in a park with his older sister and he began experiencing grand mal seizures in the fifth grade. He was described as a class clown and despite an “occasional lapse in discipline, he was a decent enough student who tried to stay out of trouble” up until the seventh grade when his grades and performance drastically fell and he began isolating himself (Smith, p. 129). As a teenager, Ramirez was greatly influenced by his cousin who returned from the Vietnam war and he was captivated by the gruesome stories and graphic polaroid films his cousin would share with him. It was this cousin that also introduced Ramirez to cannabis and other drugs. At age thirteen, Ramirez witnessed his cousin shoot his wife in the head and later described “entering the blood-soaked apartment as a ‘mystical experience’” (Smith, p. 178). It was after this event that Richard’s father sent him to Los Angeles to visit his older brother, and it was then that he decided to move from Palo Alto to Los Angeles. As Ramirez grew, so did his drug habits and he could be found “venturing out into the desert to hunt, imagining Satan was accompanying him” while under the influence of hallucinogens (Smith, p. 217). Between the ages of thirteen to eighteen, Ramirez experimented with multiple drugs, engaged in voyeurism, attempted to rape a woman and engaged in petty crimes. At

eighteen, he boarded a bus and moved to Los Angeles, where his crime spree and degree of violent behavior quickly escalated into the infamous serial killer known as the Night Stalker.

**Jeremy Bryan Jones / John Paul Chapman (1973 – present)**

Jeremy Jones grew up in Oklahoma, had a sister and was described to have a healthy and supportive upbringing in a middle-class home where his mother was a florist and his father was a carpenter. It was reported that “his family had some documented issues with drug involvement; his mother and step-brother were arrested in Oklahoma on drug charges” (Johnson, p. 240). “High-school friends tell of a handsome, likable, fun guy, a good buddy whose personality gradually changed as he developed a drug habit that escalated rapidly and quickly took complete control over his life” (Johnson, p. 241). The first documented involvement with the law for Jeremy Jones was in 1990 at 16 years old when he was found fighting with another student, when the student’s mother tried to intervene, Jones assaulted her. From his teenage years through adulthood, Jeremy Jones was reported to be a drug user with a history of impulsive, sensation-seeking and delinquent behavior. During his trials, it was reported by multiple people working his case that he displayed unhealthy attachments with his mother and girlfriend, reportedly being over-reliant on their approval and opinions of him. From his psychological assessment, psychiatrist Dr. Charles Herlihy stated that “According to the profile, Jones suffers from severe depression and has an Anti-social Personality. Herlihy described him as explosive and a sociopath who is incapable of adjusting to a normal life” (Montaldo, 2012).

**Citations**Danny Rolling

Leusner, J. (1994, March 16) Mother Tells Of Change In Rolling. Retrieved February, 2017, from [http://articles.orlandosentinel.com/1994-03-16/news/9403160343\\_1\\_rolling-claudia-prison](http://articles.orlandosentinel.com/1994-03-16/news/9403160343_1_rolling-claudia-prison)

Richard Ramirez

Smith, J. (2016). *The Night Stalker Killer: Life of Serial Killer Richard Ramirez* (1st ed.). Maplewood Publishing.

Jeremy Bryan Jones

Montaldo, C. (2012, October 26). A Psychological Profile of Jeremy Bryan Jones. Retrieved February, 2017, from <http://crime.about.com/od/serial/p/jeremyjones2.htm>

Johnson, S. (2007). *Blood lust*. New York: Pinnacle Books.



## **Appendix 6**

### **Serial Killer Artwork**

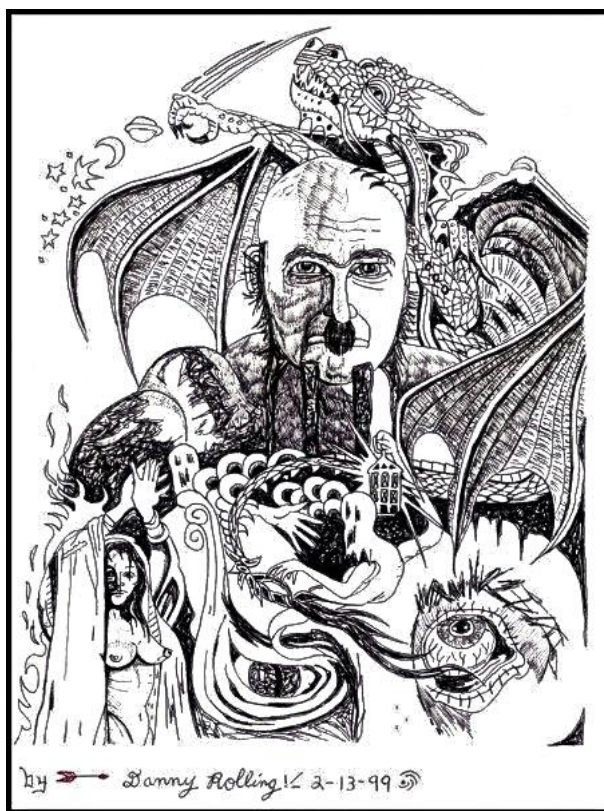
#### **Serial Killer Artwork**

**Disturbing and graphic imagery may include violence, satanic symbolism and nudity.**

**Imagery may be triggering. View at risk of your own discomfort.**

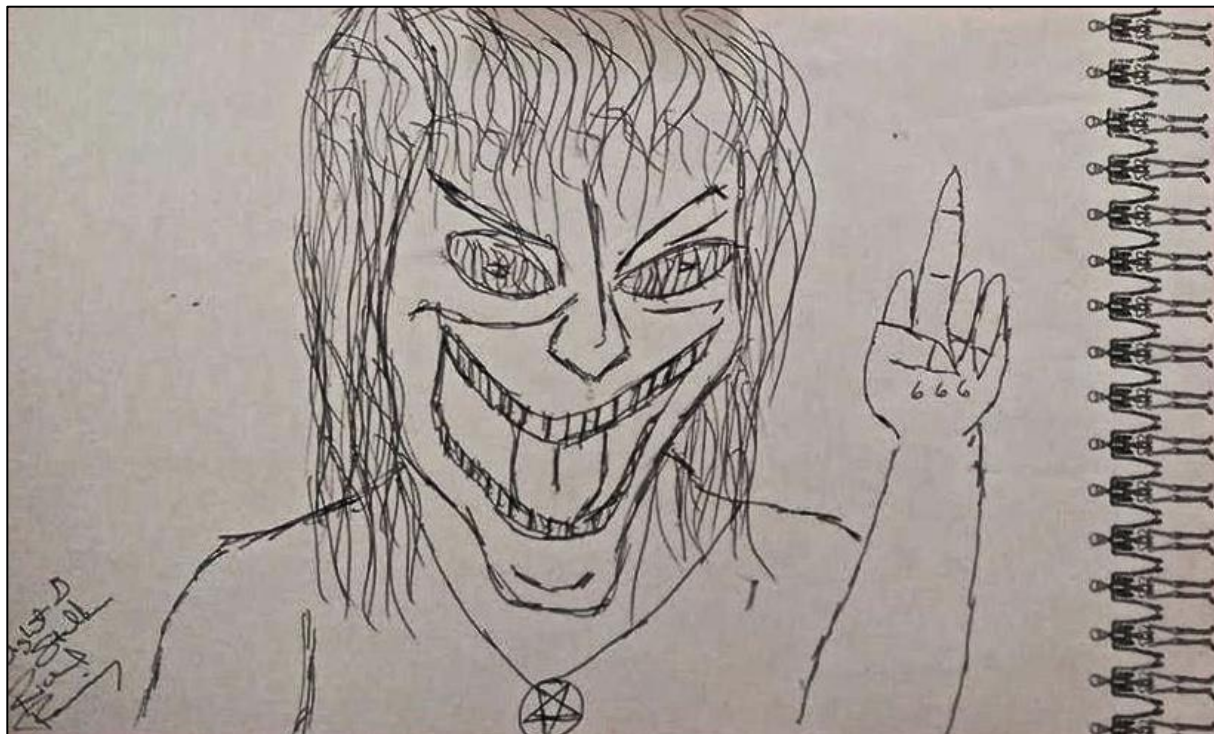
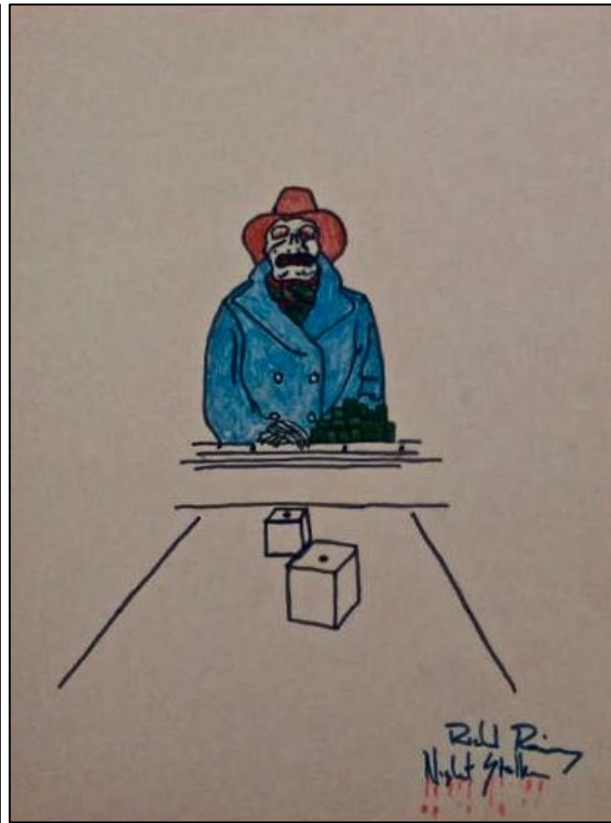
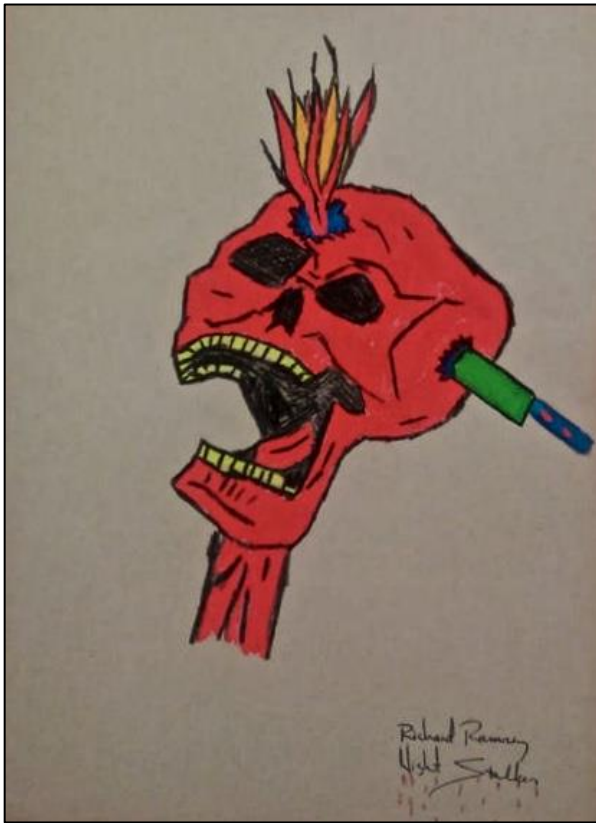
# Serial Killer Art:

## Danny Rolling



**Serial Killer Art:**

**Richard Ramirez**





**Serial Killer Art:**

**Jeremy Bryan Jones**

