

Psychodynamic Differentiations of Homicide*

EMANUEL TANAY, M.D. **

"What is Fate?" Nasrudin was asked by a scholar.

"An endless succession of intertwined events, each influencing the other."

"That is hardly a satisfactory answer. I believe in cause and effect."

"Very well," said the Mulla, "look at that." He pointed to a procession passing in the street.

"That man is being taken to be hanged. Is that because someone gave him a silver piece and enabled him to buy the knife with which he committed the murder; or because someone saw him do it; or because nobody stopped him?"***

I. Introduction

The subject of murder arouses a great deal of interest; therefore, we have a whole industry based upon the fascination with murder. From times immemorial, authors, playwrights, and storytellers have gratified this interest by fictional accounts of homicide.

In contrast to the involvement with murder for entertainment purposes, there is little interest in homicide as it occurs in reality. The scientific community and the public at large have devoted little effort to the study of homicide. A great deal of psychiatric and legal literature has been focused upon the philosophically exciting subject of insanity defense. By comparison the literature on the phenomenon of homicide is insignificant. Most textbooks make no mention of the subject of homicide; nevertheless, psychiatrists are often called upon to express opinions about individuals who have committed homicide. Empirical basis for such psychiatric opinion is frequently limited, since most psychiatrists have no clinical exposure to homicide perpetrators.

When I first began studying homicide perpetrators, I was struck by the fact of how virtuous they were prior to the commission of the act of murder and subsequent to it. The perpetrators were regarded by their friends and relatives as highly moral, upstanding individuals who preached and most of the time practiced inhibition of aggressive activities. I noted that these individuals not only refrained from aggressive behavior but also avoided thoughts which were of an aggressive nature. They were law-abiding to an

*Presented at a meeting of the American Academy of Psychiatry and the Law, New Orleans, Louisiana, October 23, 1977.

**Dr. Tanay is Clinical Professor of Psychiatry, Wayne State University, Detroit, Michigan.

***From Indries Shah, *The Exploits of the Incomparable Mulla Nasrudin* (New York: E. P. Dutton, 1972, p. 112; London: Johnathan Cape, 1966).

extreme. Many of the murderers I have examined never even had a traffic ticket. Their superegos were restrictive and punitive; most expressions of aggression were prohibited and severely punished by guilt feelings and self-imposed suffering.¹

These patients described the cruelty they suffered at the hands of their parents during childhood. Physical beatings were commonplace. Frequently the parents behaved more like torturers than protective figures. Parental cruelty leads to the development of a cruel superego which punishes not only deeds but thoughts and wishes. The need for punishment explains the many sadomasochistic relationships which these people develop. Their inability to express aggression brings about a state of aggressive overload which leads to explosive, uncontrolled discharges of aggression, which in turn are the most frequent cause of homicide.²

The concept of destructive capacity is useful in the discussion of homicidal behavior.³ I use this term to describe the ability of one person to inflict harm upon another human being. This capacity fluctuates and is dependent upon psychic and physical development. The infant has a very limited destructive capacity, even though he frequently develops intense rage. The infant not only lacks physical power, but also has insufficient maturation to use weapons. Destructive capacity of an individual is a relative dimension. A man of medium size can usually inflict considerable harm upon a child or a woman, but without a weapon he might not be able to inflict much damage upon another man. An adult has considerable destructive capacity in relation to a child. Women who kill children do so frequently without the use of any specialized weapons. I have seen a number of cases of children killed by mothers merely by being pushed down stairs or hit over the head with a household item.

The destructive capacity can be sufficient to inflict harm but not adequate to produce death, or it may reach a lethal level. Acquisition of a dangerous weapon automatically produces a lethal level of destructive capacity.

II. Homicide and Ego States

Homicidal behavior, like all behavior, exhibits rich variability. There is a popular tendency to view homicide as unitary behavior. Differentiation of homicide can be undertaken from various frames of reference. I have proposed a categorization based upon ego states of perpetrators. In subsequent work with homicidal patients this categorization proved itself useful.⁴

Homicide is a form of behavior, and all behavior can be divided from the standpoint of the ego into three categories: egosyntonic, egodystonic and psychotic behavior. This division of behavior is applicable to the study of homicide. I speak, therefore, of egosyntonic, egodystonic, and psychotic types of homicide.¹

Egosyntonic homicide is a form of behavior harmonious with the self-image of the killer. It is a slaying which causes the actor no significant internal conflict. The egosyntonic killing meets with the approval of the slayer's superego and often is reinforced by approval of his peers.

Egodystonic homicide differs from egosyntonic homicide by the fact that it occurs against the conscious wishes of the perpetrator. Moreover, such

killings meet with disapproval by the conscience of the slayer himself and his peers. A mother who kills her child does not view the act as justifiable, nor is there a segment of population which is supportive of her behavior. A husband who kills his wife in a rage frequently finds the act beyond belief and engages in various psychic mechanisms of undoing the deed. He experiences guilt and meets almost universal disapproval.

Psychotic homicide occurs as the result of a breakdown of reality testing and is based upon delusional or hallucinatory distortion of reality. Not all homicides committed by psychotics are to be considered psychotic homicide.

All homicides are the result of some conflict, and differentiation can be made based upon the nature of the underlying conflict. It is useful to differentiate between conflicts which are rooted in the characterological structure of an individual and conflicts which are the result of some unique relationship in the life history of the individual.

A homicidal sociopath is in perpetual conflict with society and will engage in homicidal behavior as long as there is no significant change in his basic personality organization. On the other hand, there are relationships which lead to homicidal behavior as the result of decompensation and breakdown of the existing psychic structures. The intense, ambivalent relationship of a sadomasochistic marriage falls into this category. The anti-social criminal engages in violent behavior due to his personality structure. The masochistic husband kills his wife as the result of a breakdown of the existing defense structure which was responsible for the maintenance of the sadomasochistic relationship.

The first behavior was due to structuralization of aggression, whereas the latter was the result of destructuralization. Examples of structuralized aggression are duels, warfare, professional armed robbery, etc. Structuralized, rational, egosyntonic aggression can be controlled at times by the victim through the victim's behavior. For example, in an armed robbery surrender of the goods leads to cessation of the aggression. In a duel acceptance of humiliation puts an end to the lethal threat. In other words, humiliation can be exchanged for annihilation. In organized warfare surrender leads to the end of hostilities. In ritualized, structuralized aggression the reality principle still prevails.

Disorganized aggression, on the other hand, cannot be controlled by symbolic response. A disorganized mob will not be diverted from its destructive effort by a white flag. Similarly, an individual in a dissociative state will not be satisfied by symbolic reaction.

III. The Aggressophobic Personality

The homicide perpetrators of the egodystonic type show certain personality features which I call the aggressophobic personality. Such individuals are rigid, moralistic, and highly conflicted about their own aggressive strivings. Their aggressive feelings and impulses are repressed and come to conscious awareness only when packaged in protective layers of rationalizations. An aggressophobe is a person who has an overdeveloped superego. His ego constantly yearns for superego approval but never fully achieves it. The dependence of the ego upon the superego is a continuation

of the child's dependence upon parents for approval and acceptance. The homicide perpetrators of the egodystonic type are individuals whose superego is demanding, cruel and unpredictable in its approval. Their superego is very much like the parents that these people had as children. The aggressophobe shows an inability to express aggression on all levels. Absence of aggressive phantasies is very typical. Frequently these individuals are even unable to comprehend questions about phantasies, since they have to deny ever having indulged in such activity. Their repressed aggression is projected upon others and, therefore, paranoid preoccupations take the place of aggressive phantasies.

A middle-aged executive was involved in an accident caused by a drug-intoxicated teenager. He suffered some physical injury from which he quickly recovered, but then developed psychosomatic symptoms and anxiety attacks. In psychotherapy it developed that the major conflict was about his rage toward the drug-using girl who caused the accident. Ultimately, he recovered the memory that while sharing the ambulance with this girl he experienced intense homicidal rage towards her, which he repressed. An important clue to his personality structure was the design of his home. It was of a ranch type construction with three "safety stations," one at each end and in the middle of the house. A safety station, he explained, was an especially designed small closet containing a telephone, a fire extinguisher and a gun loaded and ready to use. He lived in a low-crime suburb and never was victimized by a criminal. He was highly preoccupied with crime. He read avidly the accounts of criminal activity in nearby Detroit and other major cities throughout the country. The reality of crime in these cities was a displacement object for his own hostility.

The aggressophobe was recognized by Shakespeare when he has the Danish prince say to Elsinore: "Thus, conscience doth make cowards of us all." The fearful preoccupation with crime and expectation of an outside attack are the hallmarks of these individuals. This is not to minimize the reality of crime in American society; on the contrary, the reality of these dangers provides a good protective covering for the expression of displaced aggression.

A person suffering from cancerophobia or bacteriophobia utilizes these preoccupations because they represent understandable and acceptable symbols of danger. The primary danger which the aggressophobe faces is the possible failure of his effort to contain his mounting, repressed rage. He expresses aggression primarily in an explosive fashion; therefore, he is forever on the brink of losing his rigid defenses and developing uncontrolled rage. Crime, communists, fascists, racists, blacks and Jews are but a few of the assorted projections which allow the aggressophobe to smuggle some aggressive contraband past the watchful superego. The aggressophobe is forever in search of good hate objects, *i.e.*, a seal of approval from the superego for expression of aggression. On a more personal level, the aggressophobe acquires love objects which are also good hate objects. It is rather common in the practice of psychiatry to see the passive, paranoid, masochistic man married to an aggressive, hysterical, sadistic woman. On the other hand, we frequently see the marriage of a masochistic woman to a sadistic, alcoholic man who beats her and fails to provide for the family, but

whom she loves in spite of it. These sadomasochistic relationships are important factors in occurrence of many homicides.

IV. The Sadomasochistic Relationship (SMR)

A sadomasochistic relationship is based upon an aggressive attachment between two or more individuals. It is most frequently encountered in a dyadic group, namely, in marriages, between parents and children, business partners, and siblings. Such a relationship can also exist between an individual and an institution (church, corporation, military), and even between a person and his pet.

The aggressive behavior which occurs between individuals involved in SMR does not lower aggressive tension. On the contrary, one can observe instead an ever-increasing, positive balance of aggression leading to higher levels of aggressive tension. SMR is a defense against open expression of aggressive drive and its derivatives. Aggression is gratified indirectly through a variety of defensive maneuvers like masochism, moral sadism, imposition of sacrifices upon the self and others. SMR is a social reaction inasmuch as it occurs between two or more individuals.

It should be emphasized that aggression, particularly in its sexualized form, produces an effective bond between individuals and leads to symbiosis. Benedek describes symbiosis as a relationship based upon a "mutual instinctual need." She states:

There has been little written in psychoanalytic literature about the psychodynamics of 'being in love.'⁵

This might be quite true, but there is much more literature on the state of "being in love" as a bond between individuals than about the state of "being in hate." The vicissitudes of the libidinal drive are much more extensively described and understood than the vicissitudes of the aggressive drive, particularly as a bond between individuals.

SMR often leads to catastrophic conflict, a term I use to describe a conflict which exceeds the adaptive capacity of an individual. It can be resolved only through structural changes in the environment or personalities of those involved in it.

V. Homicidal Behavioral System

The concept of psychobiological behavioral systems has been introduced by Bowlby. SMR is a psychobiological system designed to bring about homicide. Bowlby differentiates between functions and causes of a system. He writes:

The immediate causes of a system's activation are one thing; the function of the system is quite another. Functions are the special consequences that arise from the way a system is constructed; causes are the factors that lead the system to become active or inactive on any one occasion.⁶

Not all SMRs lead to homicide. This is not due to the absence of the

system, but is attributable to environmental conditions. The predictor controlled anti-aircraft gun is a system designed to destroy aircraft within a certain range. In the absence of aircraft within the specific range, the system remains inactive. In studying the lives of homicide perpetrators one discovers that they have lived with homicidal potential for years or even decades. The homicidal behavioral system did not achieve its functional goal because the environment failed to provide the activation. We have then two major components in homicidal behavior, namely, the psychobiological behavioral system designed to bring about homicide, and the environmental component which provides the necessary conditions for the system to achieve its function.

Clinically, we encounter most frequently two varieties of homicidal behavioral systems: the intrapsychic and the interpersonal homicidal systems. The first variety refers to intrapsychic organization which is designed to bring about homicide under suitable environmental conditions. The second category is the function of a relationship between two or more individuals. Significant change or dissolution of the relationship without any change in the individuals destroys the functional capacity of the interpersonal homicidal behavioral system. The resolution of the relationship might occur through the occurrence of homicide, separation or natural death.

VI. Homicidal State

It is helpful in clinical investigation of homicide to distinguish two phases leading to homicidal behavior. First, the preparatory phase, which encompasses the psychosocial history of the perpetrator, the victim, and the history of their interaction, if any. The second phase involves the study of the actual homicidal state. In this phase the subject engages in behavior designed to bring about the death of the object as the result of having developed a homicidal state.

Homicidal behavior system when activated leads to a homicidal state which is a clinically recognizable condition characterized by the breakthrough of homicidal impulses through the defenses and inhibitions. These impulses gain control of the psychic apparatus either through the breakdown of the usual defenses or through development of psychotic defenses. The homicidal state can be arrived at through intrapsychic activation or as the result of interaction with a significant person. It is, therefore, useful to distinguish between intrapsychic homicidal state and reactive homicidal state. Reactive homicidal state results from interaction between perpetrator and victim. Individuals who enter homicidal state for intrapsychic reasons are less likely to be controlled by the behavior of the victim.

In evaluating a person who was in a homicidal state, the essential question is whether the causative circumstances have been resolved. The capacity to develop homicidal state is the main issue in assessment of homicidal danger. Absence of overt homicidal behavior is not indicative in itself of change of intrapsychic organization. Penal institutions, parole boards, and even psychiatrists fail at times to differentiate between behavior and intrapsychic changes. An institutionalized individual with an intrapsychic homicidal

system may show no overt homicidal behavior in a structured setting of a jail or hospital. If no intrapsychic changes have occurred, separation from the institution will lead to reoccurrence of homicidal behavior. One encounters such cases rather often in forensic psychiatry.

There are individuals who as a result of their basic personality makeup easily enter a non-specific homicidal state. These are the "dangerous killers." The overwhelming majority of homicide offenders are of the interpersonal variety, where the dissolution of the conflict-ridden relationship terminates homicidal risk.

Attempted homicide by a spouse, for example, is not likely to be the end of the homicidal risk. It might, in fact, be followed by a delayed homicidal or suicidal act, or psychotic disintegration. We have, then, the seemingly paradoxical result that a person who attempted homicide can be a higher homicidal risk than the person who has committed a homicide. Homicide can resolve the homicidal behavioral system whereas attempted homicide might exacerbate it. The intrafamilial conflict is not likely to be resolved by attempted homicide since it rarely leads to appropriate reaction on the part of society or the family. The conflict structure remains unchanged after the attempt. The potential for reoccurrence of homicidal behavior, therefore, is very high. At times, however, attempted homicide might, on a psychic level, represent a completed homicide even though no physical death has occurred.

VII. Consequences of a Homicidal State

Development of a homicidal state does not invariably lead to homicide. Non-lethal termination is still possible. Homicide occurs if the terminating forces are of lesser magnitude than the homicide forces.

The outcome of the homicidal state depends in a large measure upon the following three dimensions: (1) duration of the homicidal behavior, (2) degree of discrimination in the choice of the homicide object, and (3) the degree of organization of the homicidal behavior.

1. *Duration of Homicidal Behavior*

Homicide is an episodic discharge of aggression. It occurs in spite of a variety of inhibitory factors. This is true even when the particular homicide is socially approved, as in killings committed by soldiers or policemen in the line of duty.

Anthropological and psychological data indicate that there is almost universal inhibition of homicidal behavior. At the same time, homicide appears to be prevalent in all known societies. We are then dealing here with an interplay of forces which brings about the occurrence of homicide. Let us assume that the homicidal impulse has gained ascendance and a homicidal behavior is in progress. The following four possibilities of termination exist: (a) external control, (b) discharge of aggression (internal control reestablished), (c) behavior of the victim, and (d) death of the victim.

a. *External Control*

Many episodes of homicidal behavior are terminated by the presence or appearance of a controlling force. Frequently the subject himself invites control. It is not uncommon for an enraged individual to exclaim: "Hold me or I'll kill him."

b. *Discharge of Aggression*

Homicidal behavior will cease without bringing about death if the aggression has been spent in homicidal activities short of killing the victim. I recall many cases where the victim survived because the perpetrator exhausted his aggressive resources in inflicting multiple stabbings or blunt instrument blows. It is obvious that the more primitive the homicidal technique which is used the more likely it is to bring about exhaustion of the aggressive energy in the subject prior to the death of the object. Bowlby states:

No action persists forever. The factors that cause behavior to cease are clearly just as complex as those that cause it to start.⁷

c. *Reaction of the Victim*

Once the homicidal episode is in progress the victim is not entirely without control. At times the victim further stimulates the homicidal tendencies of the attacker, whereas at other times the victim brings about cessation of the homicidal behavior. Here the time element is of crucial significance. If the homicidal episode is of very brief duration, the victim has minimal, if any, influence upon the outcome.

d. *Death of the Victim*

In most instances of homicidal behavior the murderous impulse is specific, *i.e.*, directed towards a particular object, and the death of that person terminates homicidal behavior, rendering the subject harmless. There are, however, exceptions to this specificity which are seen in psychotics, in prolonged periods of dissociation, and in psychopathic killers. In such states, the homicidal potential is non-specific and persistent.

From the standpoint of homicide prevention it is of great significance to ask the question: What accounts for the failure of termination of the homicidal behavior prior to the death of the victim? Obviously, I am assuming, for the purposes of this inquiry, that the homicidal behavior is already in progress. Clinical experience and theoretical considerations provide a rather simple and self-evident answer to this question. A highly sophisticated weapon, usually a firearm, shortens the homicidal episode to a point where death becomes the only significant possibility of termination of the homicidal attack. To put it differently, the speed of implementation of the homicidal impulse and the magnitude of destructiveness associated with the use of firearms render intrapsychic and interpersonal factors practically inoperative.

It is apparent that all terminating stimuli exert little if any influence if the duration of the homicidal episode is reduced to a few seconds required to pull the trigger.

2. *Degree of Discrimination in the Choice of the Homicide Object*

The perpetrators of homicide are popularly viewed as promiscuous creatures possessed by unspecific homicidal tendencies. The term "murderer" or "killer" carries with it a certain non-specific connotation. It implies a person devoid of human qualities of reverence for life of his

fellow beings. In reality, most murderers are even more specific than lovers towards a particular person. They do not kill just anybody, but a very specific person with whom they have an intense love/hate relationship. Outside of this relationship they are harmless and free of homicidal tendencies. On the other hand, there are those who are afflicted by diffuse, non-specific murderousness. The incidence of homicidal "promiscuity" is rather low and constitutes a small proportion of homicides. Murder is, by and large, a highly personal affair. The relationships which lead to homicidal outcomes are characterized by a high degree of exclusiveness, namely, husband-wife relationships, lovers, child-parent relationships, and other intimate involvements. It should be emphasized that exclusiveness is not limited to libidinal aims alone, but includes also aggressive aims. The exclusive relationship has practically a monopoly on gratification of libidinal and aggressive needs. This is particularly true in sadomasochistic relationships which are characterized by a high degree of dependence and exclusiveness. Inasmuch as the legal system is act and not status oriented, it fails to distinguish between homicide perpetrators who are non-specific in their homicidal aims and those who are very specific and sporadic in their homicidal behavior. Homicide can be divided into specific and non-specific varieties based upon the method of selection of the homicidal object.

3. *The Degree of Organization*

It is a uniquely human quality to be destructive or protective on a symbolic level. Animals do not generally engage in intraspecific killing because they recognize their own on a concrete level. Human beings, however, can form symbolic friends and enemies. Two hundred million Americans have a symbolic union with each other. At the same time, an American can have a sense of animosity towards sixty million Germans or eight hundred million Chinese. This symbolic capacity can turn millions of unknown people into brethren or millions of strangers into enemies. Aggression on that level is egosyntonic and dependent upon the developmentally higher psychic functions. Organized, ritualized aggression often can be controlled by the victim through symbolic behavior. On the other hand, disorganized, unstructured, egodystonic homicidal behavior, once developed, is generally outside of the control of the ego because it is dependent upon ego disintegration. The termination of the homicidal activity will occur either as the result of external controls or some event which reestablish functional sufficiency of the ego.

Prognosis of an individual who has committed homicide or shown homicidal state depends upon the assessment of the degree of reactivity and the degree of specificity of the homicidal behavior. Random selection of the homicidal object based upon intrapsychic factors is indicative of severe pathology and a high likelihood of repetition.

In this connection, it should be emphasized that it is erroneous to assume that a performance of an act increases the likelihood of its repetition. All that can be said is that engaging in certain behavior generally affects the probability of reoccurrence in either direction, *i.e.*, it may decrease or increase chances of reoccurrence. This certainly applies to homicidal behavior. Some individuals are more likely to kill again because they killed

once, whereas others are less likely to kill for the same reason.

References

1. Tanay E: Psychiatric study of homicide. *Am J Psychiat*, 125:9, Mar 1969
2. Tanay E: Jack Ruby: A psychodynamic study of murder. Reprinted from *Excerpta Medica International Congress Series No. 150*, Proceedings of the IV World Congress of Psychiatry, Madrid, Spain, September 1966
3. Tanay E: *The Murderers*, The Bobbs Merrill Company, Inc., New York, 1976
4. Tanay E: Psychiatric aspects of homicide prevention, *Am J Psychiat*, 128:7, Jan 1972. *D Neuro and Psychiat*, p.451, Dec 1971
5. Anthony EJ and Benedek T: *Parenthood: Its psychology and psychopathology*, Little Brown and Co., Boston, 1970
6. Bowlby J: *Attachment and loss*, Vol. 1, Basic Books, Inc., New York, 1969
7. *Ibid.*