SUMMARY

BY ALYSSA BURNETTE

SEX, MURDER AND THE MEANING OF LIFE

BY DOUGLAS T. KENRICK

QuickRead

FREE BOOK SUMMARIES

Summary of “Sex, Murder and the Meaning of Life” by Douglas T. Kenrick

Written by Alyssa Burnette

Learn about the intersection of violence, lust, and cognition

Table of Contents

Introduction 5

Love Can Literally Make You Crazy 6

Homicidal Fantasies Are More Common Than You Think 10

Final Summary 13

Introduction

My favorite television show is the hard-hitting crime drama *Law and Order: Special Victims Unit*. And because he often sees me watching it, my father frequently remarks that my media consumption is a steady diet of rape and murder. (Which, to be honest, is pretty correct!) But although my family often cites concerns about the effect that crime shows can have on a person's mental health, the truth is that I find them incredibly enjoyable! It's not that I enjoy the spectacle of violence or that I like to see people being sexually assaulted or tortured. Instead, I enjoy the psychological aspect. I like getting into the heads of the bad guys and learning what makes them do what they do. I like interrogating the intricacies of human behavior and identifying the peculiar blend of circumstances that motivates some people to save the world and others to try and set it on fire.

Many people enjoy watching crime shows for exactly those reasons. They're a great source of entertainment for anyone who loves the thrill of the chase as the detectives track the bad guy. And they serve as a sort of psychological exercise who anyone who's interested in understanding why the human mind works the way it does. In fact, any avid watcher of crime shows can tell you that sex, murder, and human psychology are intimately intertwined. And over the course of this summary, we're going to find out why.

Love Can Literally Make You Crazy

For the purposes of this book, we're going to abandon the slow and easy introduction. Instead, we're going to dive right in to the meat of our topic by examining the darker side of sexual attraction. Falling in love and experiencing sexual attraction are two very natural things that happen to pretty much everyone. In fact, they're normal, integral facets of the average human experience. But not everyone experiences them in the same way. For example, most people have-- at one time or another-- experienced the disappointment of having feelings for someone who doesn't feel the same way about you. But as a general rule, when confronted with that harsh reality, most people respect the other person's wishes and go on their way. We might lick our wounds over a pint or a bowl of ice cream; we might lament our bad luck to our friends, but we accept that no one owes us a relationship and move on.

Unfortunately, however, everyone doesn't respond in the same way. Darker responses to unrequited love can occur because some people take rejection especially badly. When we first consider this concept, it's tempting to say that this must only occur in people who are already disturbed or emotionally unstable. (And, in many cases, that's true). But the author observes that inappropriate reactions to romantic rejection can occur in pretty much anyone and that's why it's important to consider our psychological and neurological responses to rejection. For example, have you ever noticed how love is often described in the same terminology as an illness? You are said to "fall in love" the same way you might say you "fell in a hole," and the unexpected intensity of your drop is meant to characterize the depth of your passion. Similarly, you might say that you are "lovesick" or "madly in love" as though love is a mental illness with which you are afflicted. If these thoughts cross our minds, it might occur to us that this is funny wording and nothing more. But would it surprise you to know that "romantic obsession" is actually a real thing which has been diagnosed and treated by mental health professionals over the years?

Surprisingly, it doesn't just occur in creepy cases involving stalkers, as you might expect. In fact, it's most commonly treated as "lovesickness" in those cases when it manifests as depression or loss of appetite after a breakup. In many cases, a breakup might not even be involved; sometimes lovesickness simply occurs after you confess your feelings to someone and learn that they don't feel the same way. This diagnosis has been in place since the thirteenth century, but psychologists and researchers began to flesh it out in the late 1970s and early '80s when mental health professionals noticed the gendered disparity at play in the history of the diagnosis.

For example, when lovesickness was diagnosed in men, it was historically well received and considered to be indicative of masculinity, in keeping with the gendered double standard we discussed in the previous chapter. By contrast, however, when women displayed the same symptoms, male mental health professionals usually accompanied this diagnosis with one of "hysteria" or "moral insanity," designed to shame and silence women for experiencing the same romantic passions as men. Psychologist Dorothy Tennov attempted to dismantle this diagnosis in 1979 by renaming it "Limerence" and describing the diagnosis as a psychological state which produced complete emotional dependence on another person. Tennov argued that it is irrelevant whether those feelings are shared by the object of the sufferer's affection. While in the grip of romantic obsessions, the love interest is all that matters, even if their connection to the sufferer is distant and tenuous.

Helen Fisher, a biological anthropologist, expounded on this theory by asserting that love can literally act as a drug. In fact, her studies of people in love discovered that romantic feelings activate the same portion of the brain that responds to cocaine usage. This indicates that the feeling of being in love is extremely addictive like a drug; we pursue contact with the object of our affection or think about them constantly because it rewards our brains with a hit of happy chemicals like endorphins and dopamine. Her results prompted additional researchers to get in on the study of love. Internationally renowned scholars William Cupach and Brian Spitzberg conducted their own analysis and concurred with Tennov and Fisher's

findings. However, they went on to elaborate and conclude that romantic obsession isn't always about your feelings for that person.

Rather, due to a process that Cupach and Spitzberg call "goal linking," it might be about something more. According to their research, goal linking occurs when we link a smaller, more easily achievable goal like finding love with something more complicated, like conquering our low self-esteem or finally practicing self acceptance. Our hope is that if we can achieve the smaller goal, we can also accomplish the bigger, overarching goal. However, these desires aren't always conscious in our minds, so we don't realize that's what we're doing. This also makes us extra reluctant to let go of our romantic obsessions because we fail to realize why they have such a strong hold in our lives.

Although there is no singular cause or formula that would allow us to identify which specific people are likely to respond in a particularly bad way, the author's research points to a few key commonalities that are likely to be present in people who have violent responses to unrequited love. In some cases, it's highly possibly that these individuals had a fragile sense of self to begin with. Perhaps they were already very sensitive people or felt as though they didn't have a lot going for them in life. No matter what their extenuating circumstances were, romantic rejection often intensifies their personal struggles and causes them to become overwhelmingly self-absorbed.

As a result, they struggle to see the other person's side of the story or accept that, as tragic as it is, it's possible that they just might not be what that person needs or wants right now. Instead, they can only see the tragedy that is happening to them and they become obsessed with the cycle of rejection and pain that characterizes their experience. This usually results in one of two types of responses: masochism or narcissism. In the case of the former, the jilted lover will become depressed and despondent. They may be obsessed with stalking the object of their affection on social media, asking mutual friends for updates, or any other small way of "staying in touch" that allows them to continue believing they have a connection with this person. Even though they know this "connection" isn't real or even the same thing as being

in a relationship with that person, they may be unable to stop as a result of issues like goal-linking or limerence, as we discussed in the previous chapter. They may feel unlovable or spiral into depression, but these feelings often don't motivate the person to let go of their obsession or pursue an attainable partner.

Narcissism, by contrast, is where we start to see the really creepy stuff that becomes the stuff of thrillers. People who experience narcissism as a result of romantic rejection generally don't start out with clinically diagnosed narcissism. They might be otherwise rational people who succumb to narcissistic thinking and behavior as a result of being rejected. But because unrequited love can severely distort your perspective if you let it, people who fall on the narcissistic end of the romantic rejection spectrum may be angry and want to make their love interest suffer for rejecting them. Alternatively, they may truly believe that their behavior is appropriate because it mimics examples of socially acceptable romantic gestures.

For example, sending your partner flowers at work is romantic. But it's a bit creepy if that person isn't expecting them, doesn't know who you are, and doesn't know how you found out where they work. It's even worse if they've explicitly told you to leave them alone! Someone who's thinking clearly would recognize this and acknowledge that someone else might find this would be disturbing or scary. But if you're blinded by narcissism or romantic obsession, you might not notice when you descend into truly scary, Joe Goldberg-level territory! (Fans of the popular television series *You* will understand that reference). And that's exactly why it's important to maintain a healthy relationship with friends, family, or even a therapist who can lovingly provide you with an honest assessment of your behavior. An honest and reliable support network should also enable you to get help if you need it.

Homicidal Fantasies Are More Common Than You Think

If, like me, you're a fan of crime shows, you might often find yourself watching a particularly dark episode and wondering, "What on earth could make someone do that to another human being?" As you watch uniquely depraved acts of violence, it's easy to assume that the people who are capable of such horrific actions belong to another species entirely. It's easy to separate them from ourselves and our fellow human beings by saying things like, "He's a monster" or "She's a soulless killer." But what about other, more relatable moments of violence that are routinely depicted in crime shows? For example, in an episode of *Law and Order: SVU,* a six-year-old girl is revealed to be positive for gonorrhea. The detectives, understandably, are committed to tracking down the person who raped a six-year-old child and gave her an STD.

In order to perform their due diligence, they are required to confront every male person with whom the child might have had contact, including her teachers and male relatives. So, in the course of their investigation, the detectives gently ask her father if he had anything to do with her assault and infection. The father (who is revealed to be completely innocent and is just a kind dad who loves his kids) is outraged by the question and punches a detective in the face. This is also an example of a violent action, but most people don't watch that sort of scene and exclaim, "Wow, what a monster!" Why? Because we can understand his action better than we can understand senseless rapes and murders. The average viewer can put themselves in the father's shoes and sympathize because most people would be outraged at the mere suspicion that they had sexually assaulted their own child.

So, why is this example relevant? Well, it's relevant because it touches on a universal truth that has been uncovered by the author's research: homicidal tendencies are more common than we think! Although we

might not want to admit it, many of us have been angry enough to fantasize about harming-- or even killing-- another person. That condescending co-worker who humiliated you in a meeting? Maybe you've thought about what you would do if you could get him alone in a dark alley sometime. Your mother-in-law who criticizes you without pause? Maybe you've fantasized about how nice it would be to shut her up for good. You may even have voiced your thoughts to someone else in a moment of rage by saying something like, "Oh, I could just kill him!" or "I'd like to wring his neck!"

But even if these thoughts do occur to us, most people are stable and rational enough to refrain from acting on them. As the dust settles on our anger, we think about the very real pain, shame, and legal consequences that would result from our actions. Killing your mother-in-law might be satisfying for a moment-- but then you'd eventually have to realize that you killed your partner's mom, which would make your partner very sad and permanently damage your relationship with them. And in the end, we acknowledge that homicide isn't nearly as acceptable or rewarding as our darkest thoughts might imply. Some people might even go on to feel deeply ashamed of these thoughts and wonder why on earth they ever had them in the first place. But the author's research shows that you have nothing to be embarrassed or upset about. In fact, 76% of men and 62% of women have fantasized about killing someone at one point or another!

However, the author's research also indicates that men are 90% more likely to act on these fantasies than women. Now, that's not to say that all men are inevitably homicidal; far from it! Instead, the author's research simply points to a primal, genetic predisposition. In the animal kingdom and in our records of early man, it is almost always the males of any species who engage in violent behavior for necessary purposes. Whether that violence is to protect their family, to attract a mate, or to provide food, the males of any species have a long history of necessary violent behavior. The author's research shows that this history is hardwired into human evolution; our genetics remember the evolutionary survival mechanisms

that have furthered the human species. So, when we feel threatened in a meeting or in our search for a prospective mate, it's understandable that homicidal thoughts might arise. Thankfully, however, human beings have evolved so that we control ourselves and decline to act on every impulse that crosses our minds!

Final Summary

Homicide and sexual violence are both common-- but horrific-- parts of human life. While the author absolutely does not attempt to justify or excuse any form of violence, he does believe that there is a moral imperative to study and understand the origins of violent human behavior. His research has therefore concluded that psychology, neuroscience, and the study of evolution can help us to understand some of the more baffling and horrifying actions of human beings.

For example, he posits that our genetics remember the evolutionary survival mechanisms that have furthered the human species. This explains why we often wrestle with primal urges, such as the temptation to prove our dominance through violence or attract a prospective mate. It also explains why we sometimes engage in unhealthy thoughts or behaviors while pursuing a romantic partner and why love and sexual attraction can literally make us crazy. Understanding the science and evolution behind these behaviors can help us to make better choices and make the world a better place.