Making Sense of Self-harm:

Exploring the Cultural Meaning and Social Context of Non-suicidal Self-injury

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May 2013

Abstract

Non-suicidal self-injury, more popularly referred to as 'self-harm,' has become a well established and somewhat haunting presence within late-modern western culture, however in marked contrast to the recent history of its cultural power and social presence, its clinical analysis and scientific exploration have proven confused, fragmented, and faltering. I argue here that these problems arise from a tendency to model self-harm as an individual psychopathological mechanism, an approach which tends to overlook the meanings and contexts which embed and pervade it as a cultural pattern, a social phenomenon, and a personal practice. By contrast I explore self-harm as a late-modern idiom of personal distress and emotional dysphoria, and argue that in order to make sense of it we must try to understand its meaning and not just its mechanism. I pursue this more situated exploration of self-harm through my research question: what are the discursive conditions of possibility which allow 'self-harm' to take on the meaning that it has in late-modern culture, and which allow it to exist as a meaningful category of action, and 'the self-harmer' to exist as a meaningful category of person. To help in this exploration I identify the key concepts and systems of meaning used to represent and understand self-harm across the multiple social sites in which discourse about it is produced. I do this through a cultural sociological approach especially influenced by Foucault's archaeological method, and work with a hermeneutic analysis of a range of data, including non-structured interviews, psycho-medical texts which represent expert systems of knowledge governing understandings of self-harm, and popular representations in magazines, newspapers and other media. In this way I address the very conditions upon which self-harm can exist and work as a meaningful idiom in late-modern culture, or in other words: I seek to make self-harm make sense.

For Serena

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Introduction

Beginning a Conversation

First Encounters

> [We must] replace the starting point in a supposed thing . . . located within individuals, with one located . . . within the general communicative commotion of everyday life - John Shotter *Social Accountability and the Social Construction of 'You'* (1989: 136)

The first time that I encountered self-harm, or what might more technically be referred to as 'non-suicidal self-injury' (NSSI) (Tantam and Huband, 2009), was in a female prison in the north of England. At the time I was working for the prison's forensic psychology department and as a newly trained ACCT assessor (Assessment, Care in Custody, and Teamwork) I had been called out to interview a woman in her mid-twenties who had injured herself that morning. When I arrived on the wing it was mostly empty as by this time the prisoners had left to attend work or education in other buildings within the prison grounds. There was just one figure in a white t-shirt and jogging bottoms, stood at the far end of the corridor and with her blond hair pulled back into a pony tail to reveal her face which was bright red. I couldn't see why her face was so red but clearly she had damaged it in some extreme fashion. For a moment we stood and regarded each other down that long corridor and I felt a flare of anxiety in my stomach, a voice inside me repeated 'don't let it be her, don't let it be her'; but of course it was, and a few minutes later whether I liked it or not we were sitting in a small side office and preparing to begin the interview.

I was anxious because I had only completed my training a few days earlier and this in fact was my first call out. As an ACCT assessor it was my job to talk to this young woman, who I will call 'Fiona,' to explore her problems and reasons for self-harming with her, to assess the level of risk that she posed to herself, and then to write a report with recommendations for a care plan to be carried out on the wing. Back on my desk, which sat in an office in an entirely different building and which now felt to be a very long way away indeed, there was a small stack of photocopied booklets that I had been given on the two-day training course, heavily annotated and highlighted, and on a shelf nearby there were several psychiatric and clinical psychology textbooks. Just

half an hour before I had been looking at these as if preparing for an exam and they had seemed at the time to radiate a comforting sense of professionalism and a kind of armour of expertise, but this had all fallen away as soon as I sat down opposite Fiona.

An officer on the wing had told me that Fiona had managed to smuggle a plastic knife from the prison canteen back to her cell and she had used this to scrape off nearly all the skin from her face. Her eyes and mouth were all that was left that was not red and sore, and behind the damaged skin it was almost impossible to discern any kind of facial expression. Fiona it seemed had violently removed her mask with a plastic knife as a kind of resistance to the regime she was trapped within, perhaps saying that the prison made her faceless, and a number rather than a person. But her act had also served to strip me of my own mask, the air of comfortable expertise that I had tried to cultivate on the way over to the wing, an air of expertise that I had imagined to be like that of a psychiatrist but which in all honesty was little more than the expertise of an engineer examining a faulty machine. Faced with Fiona I could no longer sustain it, I could no longer believe in it, and the control that was usually effortlessly guaranteed by the keys hanging from a chain that was attached to my belt was simply and suddenly gone. And so we sat and faced each other and there was silence. The clipboard and interview schedule existed as one possible response to this silence and indeed an escape from it, a bureaucratic shield that I could hide behind and an automatic process that hardly required my presence anymore than that of a questionnaire. But somehow I felt that I couldn't run or hide with Fiona simply staring at me, challenging me to 'get it,' to understand the point behind her injuries. The only other option it seemed was to drop the pretence of expertise and simply ask her what was wrong; to begin and work at sustaining a conversation rather than a formal structured interview, and though it began falteringly and awkwardly, it did begin nonetheless.

It was a simple moment of course, nothing earth shattering in itself, but reflecting back on it now it seems to me that this moment may have changed a great deal of things for me. For example it is possible for me to locate in precisely this moment the change that steered me away from the narrow neurocentrism that I had previously been so interested in, and that led me away from a mechanistic psychology to a more meaning-based one, and which would eventually lead to my leaving psychology altogether and

pursuing cultural sociology instead. It is also possible for me to locate in this moment the beginning of a conversation, slow and faltering, that has continued on since then not just between me and Fiona, or any of the other hundreds of self-harmers I have interviewed over the years, but between myself and self-harm itself; self-harm as a practice, as a culturally powerful trope of 'personal distress and emotional dysphoria' (Littlewood, 2002), and as a social phenomenon that seems curiously resonant with the discourses, tensions, and pressures of late-modern western[1] culture. And it is most definitely possible to locate in this moment the very beginnings of the research described and distilled within this thesis.

Self-harm is deeply prevalent in prisons, especially female ones, and over the years that I worked as an ACCT assessor I met so many people, first women and then men when I went to work in a different prison, who cut into their arms or legs, or occasionally their face; or who would tie ligatures around their necks and throttle themselves though with no intention to die; who would scratch, burn, or bang at their limbs; who would deliberately drain off their own blood or else poison themselves, or else insert objects into their bodies. I met people, men and women, who self-harmed to vent off anger and frustration; or to make themselves feel real and shock themselves back to reality during a dissociative episode; or who self-harmed to control racing thoughts and anxiety; gain attention; or calm down during a manic episode; express feelings of self-loathing, guilt, and shame; demonstrate a kind of ascetic or stoical attitude; or else, and perhaps ultimately, just to feel some sense of control in an environment where there was no real control beyond the boundaries of their own skin. It was usually a private act but sometimes it was public; it was normally something someone did to themselves though on occasion I had met women who harmed each other by mutual consent; and though it was common enough across the prison it was also noticeably that if you had a wing of prisoners with a low rate of self-harm and introduced a new prisoner who was a 'prolific' self-harmer then the practice would spread rapidly, rates for the whole wing would increase, and an element of

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[1] In this thesis the term 'western,' following a well established if somewhat general and inaccurate academic tradition, is used to denote both the socio-historical complexes of late-modernity, and the hegemonic discourses that characterise these complexes; principally 'the largely middle-class, North American/Northern European discourse of public and professional life' (Strathern, 1996: 38). I use the term 'late-modern' in preference to 'post'-modern and in order to indicate the social structures of contemporary capitalist society.

competition would emerge. Indeed, as private as it might normally be self-harm in the setting of a female prison can be a matter of great pride, and prolific harmers often had to be kept apart so as to break up competitions between them, pushing the frequency of their acts, the severity of their injuries, and daring each other to get closer and closer to crippling or lethal episodes *and yet still survive*.

Though it had seemed strange and disturbing to me at first it soon became familiar over time, just something that the prisoners did; something to be accepted as an ordinary part of prison life, and perhaps understandable as a kind of power play, as a kind of reaction to a loss of control where all that is left to control is your own body. But when I mentioned this to a friend once, and she replied 'so what prison is it that people are in who self-harm out in society?' I really began to think about it again. Initially because it suggested that our society felt like a prison to enough people that they had turned to their own bodies as the only site of control and agency left to them, and in this way had begun a widespread form of mental disorder as a response to this social imprisonment. And then later I thought about it because I wondered what kind of a subjectivity it is that can equate life in a 'free society' to being stuck in a prison, and why it is that turning aggressively one oneself seems to make so much sense to this kind of subject, and in this kind of culture.

As I thought more about these issues and the fundamental enigma of self-harm and its popularity in our culture, my mind turned back to Fiona and our conversation on that day. It occurred to me that self-harm was not just best understood through a methodology of conversation, but that more fundamentally it can be understood as a social phenomenon and a cultural pattern of meanings which is itself made up of such conversations. Conversations that is between prisoners and ACCT assessors, or more generally between 'experts' and their clients and patients, between self-harmers, and between their friends and family, conversations between representations in books, newspaper and magazine articles, in movies, on television, and in songs, conversations between bodies of expert knowledge and the technologies that articulate them, between different sets of institutional interests, between government reports and policy papers, and between the regime of psycho-medical knowledge and the public awareness that grows around this regime and changes it even as it reflects and reproduces it (Hacking, 1995, 2002). I came to think about self-harm as something that

emerges out of this 'communicative commotion of everyday life,' as a kind of knot of meaning and action in the 'webs of significance' (Geertz, 1973) that surround and pervade us. And as such a knot I began to think about it as something that cannot be reduced to a static and substantive 'thing' at work within us like a virus or a short circuit in the brain, but rather as a living and changing product of the complex facilitating background of meanings and social relations that culturally embeds and contextualises it. And I realized that the only way to come to understand self-harm, to perform the work of interpretation that Inglis describes as 'the effort we . . . make to catch hold of and shake into an intelligible version of itself the strange estrangements of other people' (2000: 2) was in fact to join this conversation; to engage with the multiple texts that make up the cultural web or knot of self-harm and to try to understand them by placing them in ever broader ensembles of cultural meaning and social context; the very webs of significance from which they in their turn are woven (Geertz, 1973). And in this way to come to understand the very conditions upon which such acts as self-harm can exist and work as meaningful acts in our lives, and as a meaningful practice in late-modern culture. Or in other words: to make self-harm make sense.

Thesis Outline

Chapter One 'What do we Mean by Self-harm?'

In chapter one I argue that self-harm is often reified in the way it is approached by clinicians and researchers into the symptomatic expression of an inner substantive, a 'thing' that sits within the body and brain and causes self-harm. This 'objectivist' perspective organizes both common bio-medical and psychological approaches to thinking about self-harm and is often supported by an appeal to an assumed identity with practices of self-mutilation drawn from both the historical and ethnographic record. The reasoning is that if self-harm has everywhere and always been present then it must be part of our nature and not our culture. However, noting typical problems that the objectivist perspective has in making sense of self-harm and its curious and uncanny capacity to disturb and haunt both experts and public alike, I ask whether it is time to re-think some of these basic assumptions. Returning to the

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argument that self-harm is trans-cultural and trans-historical I engage with Armando Favazza's classic work *Bodies Under Siege: Self-mutilation and body modification in culture and psychiatry* (1996). I argue that while self-mutilation may be a reasonable category for the loose and general observation of behaviours, an example of what Gilbert Ryle (1971) calls 'thin description,' it is not a category built on understanding the meaning or import of such actions.

'Self-mutilation' then is to self-harm as 'self-starvation' is to anorexia nervosa, and mixing these up causes a great deal of problems – just as not all people who self-starve (Gandhi for example) can be described as anorexic so not all self-mutilation is self-harm. In particular such confusion leads to a pervasive tendency to reify self-harm as something like a natural kind and so *look* past cultural meaning and social context in trying to understand such actions, fitting into the culturally prevalent asymmetric binary that, as Geertz pointed out, maintains 'culture is icing, biology, cake . . . difference is shallow, likeness, deep' (2000: 53). Indeed the objectivist approach to such 'idioms of personal distress and emotional dysphoria' (Littlewood, 2002) such as self-harm, as part of a broader tendency to physical and bio-psychological reductionism, struggles to account for *meaning* as a structuring force in the formation and function of human action in general let alone the esoteric social texts of 'psychopathology' and 'mental illness.' In contrast to this perspective then I argue that in order to understand and make sense of self-harm, in order to make it less uncanny and haunting, we must address the dimension of meaning, use a less 'thin' and a much 'thicker' form of description, and treat self-harm as a 'symbolic action' (Burke, 1989; Alexander, 2003).

Chapter Two 'The Problem of Good Understanding'

In chapter two, having established that my key issue here is *meaning*, I proceed to ask *what kind of meaning* is implicated and what kind of hermeneutic, or 'good understanding,' is required. In order to answer this problem I note that while the objectivist perspective is powerful and influential it is nonetheless a *tendency* which effects representations and understandings of self-harm rather than a discrete school of thought about it. Likewise while most texts and representations are heavily

influenced by objectivism they also commonly often code a second discursive tendency that also exerts a powerful influence on representations of self-harm: this being a subjectivist discursive tendency. Subjectivism influences representations of self-harm in a number of ways but reflects people's ongoing interest in the personal and the meaningful despite the objectivist problem with meaning. This of course is again organized through an asymmetric binary which while it allows both tendencies, implicitly favours formulations of mechanism over meaning and biology over personal life. The subjectivist tendency is most strongly represented in texts of self-harm which derive from music, the emo subculture, and self-harmer's own accounts, especially their poems.

Given that this second tendency, unlike objectivism, actually focuses on meaning I explore it as a possible approach to understanding self-harm but find that while objectivism sees self-harm as everywhere and always speaking a 'common language' (Plante, 2007), subjectivism sees self-harm as an almost entirely private language. Here then, as might be expected, I briefly explore Wittgenstein's objections to such private languages and so try to demonstrate why self-harm cannot be understood in these terms. Apart from anything self-harm is more than a so-called private experience but rather stands as a personal practice articulating a cultural pattern of meanings and values, and of course it is also a social phenomenon.

I follow this analysis with a more general critique of the 'hermeneutics of suspicion' (Ricoeur, 2004) reflected in the focus on inner and causal substantives in both objectivism and subjectivism. From this critique I argue that what is needed is a hermeneutics of *context* – a centrifugal logic pushing out from the pattern under study so that it can be placed in layer upon layer of context and in this way brought to a richer and fuller understanding.

I pursue this more situated exploration of self-harm through *my research question*: what are the discursive conditions of possibility which allow 'self-harm' to take on the meaning that it has in late-modern culture, and which allow it to exist as a meaningful category of action, and 'the self-harmer' to exist as a meaningful category of person. To help in this exploration I identify the key concepts and systems of meaning used to represent and understand self-harm across the multiple social sites in which discourse

about it is produced and analyse these using a hermeneutic approach rooted in cultural sociology and Foucault's archaeological method, especially as it has been interpreted by Susan Bordo in her concept of 'axes of continuity.'.

Chapter Three 'The Methodology of Making Sense'

In chapter three I explore the methods by which a hermeneutics of context may be pursued, centring on the work of Hans-Georg Gadamer (1989), and working these methods toward a set of interpretive strategies suitable for cultural sociology. It contains at its core the idea that all knowledge production is the outcome of a 'dialogue' or conversation between interpreters and those multiple texts, things or people, which are being interpreted. For Gadamer we approach texts through the interpretive framework of our 'prejudices' (a word he intended in a non-pejorative sense), which is to say those representations and ways of making sense that provide a 'horizon of understanding'; a horizon upon which a particular world appears from the perspective of a particular 'life-world' (Shutz, 1967). At each failure of understanding, each failure to match these horizons together, there is recourse to questions and answers and the unmatched ideas are subsequently revised so that a new bridging horizon can continue to be built. Gadamer called this the 'fusion of horizons' and considered it to be the very process by which an understanding emerges with each moment of fusion helping the conversation to continue to its next moment of fusion.

Here I also describe my methods for recruiting participants to the study and how I went about interviewing these participants given the sensitivity of the subject and the traditionally poor uptake of participation for qualitative research on self-harm. One strategy that I pursued was to offer different modes of interview including interviews in person, by telephone, and by email. These options were designed to address some of the issues that participants may feel around social anxiety, communication anxieties, and power issues. In the end a number of people opted for the non-traditional alternatives and remarked that if these options hadn't been available they probably wouldn't have participated in the study. In this chapter I also examine the ethical issues connected with this kind of research and work through a basic ethical strategy.

Chapter Four 'Mapping the Social World of Self-harm'

In this chapter I set about describing the social history and cultural distribution of self-harm, exploring the social sites and texts from which representations and understandings of self-harm emerge. I note that the first recognisable historical mention of self-harm is Karl Menninger's 1938 book _Man Against Himself_ which begins a slow development of the contemporary concept of self-harm as a 'coping mechanism' for negative thoughts, emotions, and memories and which acts as an attempt to relieve feelings that may otherwise lead to suicide. As this conception slowly forms through a series of publications and moral panics I note that psychology increasingly implicates itself into the discourse on self-harm as the issue of motivation becomes increasingly central to defining it. Self-harm is normally understood to be when someone more or less deliberately hurts themselves and without suicidal intent, consequently the diagnostic critieria of the emerging bio-psychiatry struggled to position self-harm. However by the 1980s interest in the practice had begun to increase and by the 1990s it had, in Favazza's (1998) words, 'come of age' with a series of celebrity confessions, newspaper and magazine articles, increasing public attention and more frequent appearances in film and on television.

Charting the emergence of the contemporary concept of self-harm from the clinic and out into the broader culture enables me to map out the social world of self-harm, by which I mean those various social sites through which discourse about self-harm is produced and circulated. In exploring this map I also attempt to tackle the issue of how to perform a hermeneutic analysis on something that both articulates a general set of meanings and yet also encodes a number of different ideas, associations, values, and interpretations. These considerations lead me to a description of Susan Bordo's concept of 'axes of continuity' which are 'streams or currents' of meanings and values (2003: 142) that flow from the broad discourses characteristic of a particular culture to converge, intermingle, configure, and manifest in the particular patterns of practice and meaning which are characteristic of that culture and which crystallize and embody it. I use this concept of an axis of continuity to connect the key discourses, codes, and tropes of self-harm to their sociocultural conditions of possibility. For this research I propose a schema of three axes: the ontological axis, the aetiological axis, and the pathological axis.

Chapter Five 'The Ontological Axis'

In this chapter I explore the first axis of continuity which organizes ideas and beliefs about what kind of ontological structures must exist for self-harm to perform the function that it is understood to perform. I identity a key thematic discourse describing a kind of *expressive imperative* - the idea that you have to express your feelings otherwise there will be an internal build up of negative affect like steam building inside a pressure cooker. Through this discourse self-harm is positioned as a mechanism of emergency externalization allowing for the effective release of trapped emotion and helping return the self-harmer to a state of calm. Through the analysis of this expressive imperative I argue that some of the basic ontological structures described as feeding into the meaning and function of self-harm are essentially psychodynamic in nature and represent an attempt to balance what Kenneth Gergen (2000) sees as the two fundamental dimensions of late-modern subjectivity, an emotional romantic self, and a rational modernist self.

While much our psychology obsessed culture seems to have pursued a focus on the emotions in the three decades (Furedi, 2004) I argue here that this emphasis masks a deeper ambivalence and that such a focus on emotions in fact works to emphasise the importance of the modernist self as a necessary regulator and 'processor' of what is understood to be otherwise raw and natural affect. In understanding the expressive imperative through a recourse to a basically psychodynamic model of psyche and subjectivity at work as a powerful influence within our folk and professional psychologies, I then try to contextualise this psychodynamic self by broadening the scope of the study to the very structures founding the modern psychological individual and the emergence of what Durkheim called 'the cult of the individual' (2008 [1912])

Chapter Six 'The Aetiological Axis'

If the ontological axis organizes ideas about what ontological structures make up the necessary biological and psychological architecture of self-harm, what kind of subject and what kind of self is capable of self-harm, then the aetiological axis organizes ideas about what kinds of conditions and factors make it likely. I begin with the key thematic

discourse of *traumatic estrangement* noting that it can be represented along a spectrum of more or less objectivist and subjectivist representations with psychological trauma and its associated dissociations at one end, and a kind of traumatic rupture between self and world at the other. Self-harm is often thought to be the product of early traumas and while this may be true for a good deal of people who self-harm it is by no means true for all, however even in these cases there is a sense of a traumatic estrangement from others, from language, from the world around them, and eventually even from themselves.

To help me make sense of this theme I turn to ideas coded into it dealing with the relationship between the 'real,' meaning the pre-symbolic or unsignified, and the processes of representation. Indeed trauma is often framed as a kind of overwhelming of the systems of signification by an intrusion of 'reality' that cannot be 'processed,' which is to say that it cannot be thought through or put into words. In many subjectivist representations however the 'real' wells up inside the self-harmer, not necessarily because of a traumatic incident but more because language has failed the authentic 'real' of the inner self and so there is no way to communicate this inner plenitude to others. In either case issues of authenticity and the 'real' are at play and while these help me to make sense of traumatic estrangement, to help me make sense of the tangled dynamics of the authentic 'real' I turn to the key issue and central concern of control.

Many self-harmers understand and explain their practice on the basis of control though here again we might note a difficult ambivalence since self-harm can be represented as a kind of stoical or ascetic technique, and a method of self-control, it can also just as easily be represented as a wild eruption, a habit, an addiction, and a loss of control. But while it may not be possible to exactly pin down the allegiance of self-harm in such dynamics I argue that this is not because we are missing some essential piece of the puzzle but rather because self-harm is supposed to be ambivalent and confused. It is not so much an agent of control or an enemy of control as it is an exaggerated crystallization of our culture's modernist obsession with control and mastery, and especially self-control.

Chapter Seven 'The Pathological Axis'

While the ontological axis groups and organizes ideas about those ontological structures which facilitate self-harm, which make it a possible and even at times a necessary function for *this* kind of subject; and the aetiological axis organizes ideas about what happens within the context of these ontological structures to make self-harm appear in some instances of this kind of subjectivity but not others, the two together nonetheless do not describe its effects and experience *beyond the symptoms and functions* of self-harm that they identify. They do not describe what it is like *to be* a self-harmer, the *content* of the practice as such, and it is this area of meanings that this third axis organizes and describes. Since these effects and experiences also describe the common living shape of self-harm for the self-harmer, and as such are most often recognised in the expert literature as symptomatic indicators of it, I have referred to it as the *pathological axis*.

The key thematic discourse here is that of self-persecution which describes a moral economy of self-examination, judgement, and punishment in the light of idealized standards which are nonetheless taken as normative expectations. This helps code into the self-harmer's experience a sense of deep responsibility and the inevitability of failure. Indeed self-harmers tend to see themselves as intensely guilty. Interestingly, in the restitutive function of self-harm as self-punishment there is however a sense that within this moral economy there is a constant striving for a kind of salvation, an ideal and a hope of authentic selfhood through which the taint of guilt and failure will have been purged and a new stable and happy sense of self can emerge. This theme of self-persecution with its constant self-vigilance and self-policing lends itself particularly well to an analysis through Michel Foucualt's (1991) concept of a disciplinary society where 'disciplinary power' is essentially the power through which subjects mould themselves in the light of their visibility and exposure to others as mediated by expert knowledge systems. In modernity and late-modernity our lives can be characterised by this disciplining of the self into its expected structures and a state of constant self-surveillance to maintain this structure.

Having described the processes of disciplinarity I then try to put them into the context of the modernist obsession with 'project' and the idea that in modernity selves are

supposed to be made by themselves, that the self and the body is something to be worked on and worked over as part of a process of self-making. Again there is detectable in this the disciplinary logic that through the internalization of social codes the subject becomes their own prison guard forever pushing toward the *shoulds* and *oughts* of self-making. But in its late-modern form this structure of project has become deeply problematic since it is particularly characterised by the ideal of the authentic self which perhaps can never really be attained and so guarantees dissatisfaction and a sense of personal failure.

Chapter Eight 'Self-harm and Gender'

In this final chapter before I pull my thoughts together in the conclusion I argue that all three of the axes of continuity are deeply gendered structures and that the double-bind of balancing the modernist against the romantic sense of self asymmetrically impacts on feminine subjectivity. This is not to say that self-harm is only a problem for women, far from it, but the practice is certainly gender coded and associated with the feminine. Here I use filmic texts referencing self-harm as a way to explore these broad cultural patterns connecting madness to women and exploring the lattice work of double-binds that characterise feminine subjectivity in late-modernity. Again the disciplinary logic at work in processes of subjectification is highlighted since it provides an analysis of how a subject, by suturing themselves into impossible and contradictory standards, individualizes the resulting conflict and so turns aggressively on themselves in acts of self-punishment.

Chapter One

A Question of Meaning

Introduction

> And they came over the strait of the sea, into the country of the Gerasenes. And as he went out of the ship, immediately there met him out of the monuments a man with an unclean spirit, who had his dwelling in the tombs, and no man now could bind him, not even with chains. For having been often bound with fetters and chains, he had burst the chains, and broken the fetters in pieces, and no one could tame him. And he was always day and night in the monuments and in the mountains, crying and cutting himself with stones - *Gospel of Mark* 5: 1-5 (Douay-Rheims Bible, 2003)

> Whether carried out in the socially sanctioned context of tribal initiation rites, . . . the modern piercings common to Western adolescents, or the self-cutter's visual proclamation of internal struggle, the damaging of one's skin has spoken a common language across time and culture – Linda Plante *Bleeding to Ease the Pain* (2007: 7)

The disturbing effect of an 'unclean spirit' as recorded in Mark's gospel raises an interesting question of meaning and categorization, namely: to what extent can we detect in this story an early account of what we now call 'self-harm'? Is it possible to recognise in this two-thousand year-old description exactly the same *kind of phenomenon* as that articulation of personal distress and emotional dysphoria that since the 1990s has become such a well established if somewhat haunting presence in our culture, and which leads contemporary people to cut, burn, bang, and poison themselves apparently in an effort to experience and express a sense of 'internal struggle' (Babiker and Arnold, 1997; Tantam and Huband 2009; Adler and Adler, 2011)? Typically the significance of this question lies in its perceived capacity to settle a fairly standard debate over the nature of 'minor psychiatric illnesses' or what the psychiatrist and anthropologist Roland Littlewood calls 'dissociations of our customary consciousness' (2002: xi). This concerns whether a given illness category like 'self-harm' is best understood as something like a natural kind (Zachar, 2000), which is to say as some definite and discrete *thing* that has presumably always existed even if it has only recently been recognised by medical science (De Vries et al, 1983; Conrad and Schneider, 1992); or alternatively if it is better understood as a historically specific and socially resonant pattern of meaning and action, less a timeless *thing* then than a

situated cultural practice, a sort of ritual of deviance and disorder (Gaines, 1992). It is a debate that has been well rehearsed with respect to hysteria, anorexia nervosa, and any number of retrospective diagnoses made by historically minded psychiatrists and medically minded historians (Showalter, 1991; Shorter, 1992; Bordo, 2003). But as interesting as it may be, its answer is nonetheless more often assumed than argued, and Mark's gospel account typically stands as one of the evidential exhibits in the historical and ethnographic record invoked by Plante and similar writers when they claim that self-harm is a definite 'thing' that has everywhere and always been present, and as such has also everywhere and always 'spoken a common language.'

Of course this assumption only reflects a much broader cultural logic; the same logic that lies behind the contemporary professional and public popularity of bio-genetic determinism (Rose *et al* 1990; Nelkin and Lindee, 1995; Martin, 2004; Tallis, 2011) and which has been succinctly described by Clifford Geertz as the idea that 'culture is icing, biology, cake . . . difference is shallow, likeness, deep' (2000: 53). Under the influence of such logic it makes perfect sense to us to look for explanations of human behaviour by *looking past* the diverse patterns of action and experience that make up the actual empirical matter of our lives, and that therefore describe historical and cultural diversity and to search instead for something more permanent and universal. Invoking the common vertical analogy implicit in Geertz's metaphor we tend to do this by digging down, assuming the empirical patterns of life to be the manifest products of so many *underlying* and substantive 'things' which are at work *below* the level of personal consciousness, cultural meaning, and social context[2] (Elias, 1978; Ricoeur, 2004; Derrida, 1991). Indeed from this point of view the reasoning behind claims such as Plante's makes perfect sense. Here we can detect a search for repeating *forms* of action and experience emerging out of the empirical pattern of human life, the reification (Lukacs, 1971; Taussig, 1980) of these forms into substantive entities that are assumed to underlie and thus explain them, and their subsequently being positioned in relation to the complex and variable *content* of everyday life through an

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[2] To clarify I take 'culture' to signify semiotic and discursive systems of meanings and values (Geertz, 1973) that represent the shared means of making sense common to a given community of people (Inglis, 2004); and 'society' to signify the patterns and processes of relationships and interactions which structure such communities (Elias, 1978). I take these two concepts to be utterly interconnected and interdependent, and yet to possess some degree of relative autonomy with respect to one another (Alexander, 2003).

implicit asymmetric binary, as the primary is related to the secondary, the necessary to the complementary, and the facts of the matter are related to personal prejudice and local colour (Littlewood, 2002; Timimi, 2002).

Perhaps it is little wonder then that in apparently discovering a repeating form like self-harm, seemingly present in both contemporary and Biblical psychiatry, we quickly move like Plante to assume the presence of something more natural than cultural and something that while subject to historical variation in content always remains the same in essence; something therefore which speaks a 'common language' irrespective of who is practicing it or indeed where and when it is being practiced. And of course more often than not this is how self-harm has been represented, not as a meaningful pattern of content but as a mechanical expression of form determined by an underlying realm of biological and psychological facts. But as sensible and culturally dominant as such *objectivism* may appear it has nonetheless typically struggled to make sense of self-harm (Tantam and Huband, 2009; Chandler *et al*, 2012). In fact far from submitting to such an approach this haunting practice has seemed to actively resist it; appearing less as a ready and transparent object of knowledge characterized by an intrinsic unity and a timeless essence (Young, 1997), than as a troubling supplement (Derrida, 1991), always carrying more meaning than can be accounted for, and spilling through accepted categories to place treasured assumptions under a deconstructive strain (Derrida, 1976). In this first chapter I want to explore this typical objectivist approach to self-harm and examine some of the reasons why paradoxically it both characterizes what we mean by 'self-harm,' and yet at the same time seems unable to make sense of it. In doing this I shall highlight the importance of trying to understand self-harm as a *meaningful* package of semantics and pragmatics, or what cultural sociology likes to call a 'symbolic action' (Burke, 1989; Alexander, 2003), and so introduce the primary concern of my thesis.

<u>Deconstruction, Disturbance, and Definitions</u>

Of course when I describe self-harm as carrying a 'deconstructive' capacity I do not mean the analytic process often associated with this term but rather much more specifically the process that Derrida (1976, 1991) intended by it; which is to say a 'force

of dislocation' (Derrida, 1978) inherent to semiotic systems through which there is a slippage of meanings between different conceptual objects which have been conventionally organized through the asymmetric binary so as to map a difference of value onto a difference of grammar (McQuillan, 2000; Royle, 2000). Deconstruction disturbs the effect by which such differences are taken as differences of nature rather than of culture and convention, upsetting the sense of neat boundaries that cordons off a typically more valued object or concept from its typically less valued binary opposite, demonstrating the interdependence of the two, and often revealing multiple social complexities and responsibilities which are normally covered over by this division in grammar and value between them (Royle, 2000; Deutscher, 2005). Perhaps the best example of the deconstructive power of self-harm is the often commented upon, and I believe very telling, difficulties that have dogged attempts to develop an adequate definition and terminology for it.

Framed as a discrete and particular 'thing' separate from the person who performs it, self-harm *should* be subject to a definition that 'cuts nature at the joints', and which separates essential form from circumstantial content. However in practice it has confounded the definitional apparatus of medical and psychological taxonomies with the result that the literature, both professional and popular, has demonstrated a remarkable fetish for producing new definitions and terminology (Kilby, 2001: 126), to the extent that Muehlenkamp (2005) for example was able to count over thirty-three different terms currently in use. Traditionally disagreements have proliferated over what self-harm actually is, what it should be called, which particular practices should be included within it, and which should not (Sutton, 2005; Chandler *et al*, 2011) and this definitional confusion has generated acute problems. Different research programmes have deployed different definitions and so in some significant sense have not only cut up the empirical continuum of human life differently, projecting onto it their own preconceptions and prejudices (Armstrong, 1983; Gadamer, 1989), but have also collected data only pertinent to these preconceptualised forms. The result is a problematic incommensurability that has frustrated any attempt to build up a general picture or meta-analysis of self-harm as a broad social phenomenon, and which further means that virtually any answer to questions of scale, distribution, or typical features

must either be met with uncertainty or else suspicion (Eisenkraft, 2006; Claes and Vandereycken, 2007).

One fundamental problem that runs through this confusion is that each term or definition that has been proposed is actually an attempt to re-state in psycho-medical terms what we *already mean*, and what we already mean to indicate, by 'self-harm' in the broader culture. In other words they are attempts to restate a cultural pattern of public meanings and everyday social use but through a language that is radically different from this and which is predicated precisely on *looking past* such patterns in favour of the kind of seemingly objective factors which are allowed to count in objectivist discourse, because of course they are assumed to underpin and determine the empirical pattern. But this is to place the cart of definition and categorization before the horse of empirical observation and description. 'Self-harm' as a cultural pattern of meanings tied to the practice of NSSI is a socially constructed category and as such carries and reflects social norms and values, but these are precisely what are supposed to be ruled out as defining characteristics and suitable demarcation criteria for the purposes of scientific and medical categorization. For example, compare a typical type of self-harm, say cutting the back of the forearms with a razor blade, with a more general practice like smoking cigarettes. While the former is uncontroversially defined as pathological and categorized as 'self-harm', the latter is considered relatively normal; a perhaps unfortunate if popular habit but certainly not clinically categorized as 'self-harm' or framed as evidence of mental illness. Yet arguably smoking is by far the greater example of someone inflicting actual physical harm upon their body and indeed the same argument may be made for drinking alcohol or even eating sugary and fatty foods. Such behaviours are not categorized as 'self-harm' despite the degree of actual physical harm caused by relatively normal levels of consumption and so cannot be distinguished from it on the basis of an objective calculus of harm caused.

Nor can this confusion be so easily cleared up by a resort to psychological function. A great deal of normative alcohol consumption for example can easily be framed as an act of self-poisoning indulged in at the end of a stressful day as a means of affect regulation (Sher and Grekin, 2007). Indeed many people drink, smoke, and eat to achieve these same goals but *without their level of consumption, or reasons for doing*

so, being considered psychopathological. And this is not to even mention the complex feelings of guilt, shame, and self-hatred that can be caught up with particular kinds of food and drink consumption and which can appear to be significantly similar to the psychological complexes characteristic of self-harm (Frost, 2001). So neither the abstract calculus of harm caused to the body, nor the psychological logic of the emotional pressure valve, can be used as a means of defining self-harm without at the same time failing to distinguish it from those normative practices which (for the moment at least) fall outside of its label, and even outside of clinical authority. And in the absence of such 'objective' criteria each objectivist definition becomes subject to a kind of definition creep in which the attempt to ring-fence a desired target group of 'deviant' behaviours (while leaving out normative behaviours no matter how harmful they may be) causes categorical boundaries to break down and the meaning of 'self-harm' to seep through, implicating social locations and cultural practices not normally coded as deviant let alone pathological; practices such as tattooing, piercing, wearing high heels, cutting finger nails, going to the gym, and even staying in dysfunctional relationships (Farber, 2002).

What we are left with then, is a collection of objectivist terms and definitional structures circulating a single *general* idea which while subjectively and culturally particular, remains technically fuzzy and objectively elusive. It is an idea that people seem to be proficient at using but unable to accurately define. Otherwise put: 'self-harm' is a socially constructed category and not a natural kind. If we want to define self-harm in accordance with some abstract and objective calculus of pathology then we are left with an apparently intractable problem. How do we objectively distinguish between the deviant and the normative where no objective criteria seem to make sense? *How do we make a value judgement without reference to values?* And this is the very nub of the issue. Self-harm simply *is* that sub-category of behaviours in some way harmful to one's own body which are *socially evaluated as deviant, and culturally coded 'self-harm'*; so while cutting your forearms counts as self-harm, drinking, comfort eating, and smoking do not.

At the heart of this failure of definition then lies an unwillingness to accept the role that norms, values, and cultural meanings play in constructing and filling out the categories of deviance and pathology (Rhodes, 1996; Kleinman, 1991; Littlewood,

2002). In its refusal to be defined on 'objective' grounds self-harm reveals itself to be *constructed* on social ones instead, thus dissolving the 'aura of factuality' (Geertz, 1973) that shrouds bio-medicine and prevents people from seeing it as a cultural system encoding power relations, social norms, and public values (Kleinman, 1991; Rhodes, 1996; Foucault,2003). Self-harm then carries a deconstructive capacity in precisely this sense – it demonstrates that the problematic subjectivity supposedly expelled from medical and scientific categories are nonetheless actively at work in-forming them, and that some 'objective' categories of pathology are infected by such subjectivity and indeed are based in cultural evaluations of deviance (Conrad and Schneider, 1992). Furthermore this deconstruction highlights the process of reification that turns such an evaluation into a medical fact rendering it a-political, a-social, and a-historical (Taussig, 1980). So rather than face the realization that such categories of psychopathology are, as Kleinman argues, 'the outcome of historical development, cultural influence, and political negotiation' (1991: 12) it becomes easier to create a fetish of continual re-definition and deferral of meaning.

Perhaps this deconstructive capacity is the reason why self-harm is so typically represented in both the professional and public literature as being at once a 'thing' that produces cuts, burns, and bangs in seemingly much the same way that the cold virus produces sore throats and runny noses, and yet at the same time it is represented as something almost irreducibly *other*; as something which doesn't quite fit, something peculiarly mysterious and difficult (Arnold, 1995; Favazza, 1996). As Jane Kilby describes it '[t]here is something particularly hard to witness here . . . The act of harming one's own skin by cutting it up and tearing it apart speaks with a 'voice' so sheer that it is virtually impossible for anyone to bear witness to' (2001: 124). Francis notes how this effects '[t]he typical clinician (myself included)' who 'is often left feeling a combination of helpless, horrified, guilty, furious, betrayed, disgusted, and sad' (1987 quoted in Favazza, 1996: 289). Such sentiments are not unusual and equally describe the ambivalent framing of self-harm in broader social contexts beyond the clinical relationship, representing it as something that *ought* to make sense but which stubbornly refuses to, as what Pierce (1977: 377) describes as a 'confusing and confused' practice, and as something strangely bothersome and troubling. But if such confusion suggests an error in our capacity to understand and make sense of self-harm

then we may be guided by Kafka when he argues that '[a]ll human errors are impatience, a premature breaking off of methodical procedure, an apparent fencing-in of what is apparently at issue' (1994: 3). And if the fence of psycho-medical objectivism has failed to contain self-harm then it is only sensible to return to the structure of substantivist assumptions that corralled it in the first place and re-examine them with more patience, in the hope of locating just such a premature breaking off of our methodical procedure.

Self-mutilation in Cross-Cultural Perspective

In fact just such a breaking off point might be found in the fact that Plante, and virtually every other writer that claims self-harm is a trans-cultural and trans-historical phenomenon that everywhere and always speaks a common language, does not do so on the basis of original research but rather through a reference to a single, and singularly important, text: Armando Favazza's 1987 book *Bodies Under Siege: Self-mutilation and body-modification in culture and psychiatry* (2nd edition 1996). In the pages of this book there is ample material for identifying forms of repeating action and practice emerging out of the complex patterns of human life; in fact no less than a global and historical survey of what Favazza labels 'self-mutilation' being 'the direct, deliberate destruction or alteration of one's own body tissue without conscious suicidal intent' (1996: 225). It is a practice that he sees as 'an integral part of the human experience' (introduction for Strong, 1998: x) and which he identifies throughout diverse strands of the human adventure from myths to shamanic rituals, religious asceticism to psychotic self-attack, initiation rites to identity markers, and of course the kind of contemporary western 'deviant self-harm' that I am interested in here.

And as far as this goes it represents no real problem since self-mutilation *so defined* really does appear across remarkably different cultures separated by both geography and history. The problem, and the methodological impatience, only happens when the category 'self-mutilation' is turned into a different *kind of category* altogether. As Favazza defines it 'self-mutilation' is a necessarily loose and highly generalizable *observational* category whose definition is characterized by what Gilbert Ryle called

'thin description' (1971); which is to say a description recording little more than the observable physical facts of a human action, or what Littlewood evokes as 'the bare bones of some choreography seen from the outside' (2002: xi), but not its meaning or its import (Geertz, 1973).[3]

As just such a thin and loose concept 'self-mutilation' can quite legitimately be used to enclose the many and diverse practices that Favazza lists, in the same way that a similarly thin category like 'running behaviour' might also be quite successfully used to enclose a number of ethnographic examples of people running in different cultures or historical periods. However in the case of self-mutilation this successful application of a general *observational* category is then typically and mistakenly taken to necessarily imply a single universal structure or mechanism which underpins it and therefore *explains* it. It is as if the universality of 'running behaviour' were to be used to argue that there is an underlying mechanism innate to human nature that makes us run and so explains such acts of running. To do so of course would be to overlook the significant qualitative difference between running for the bus and running in the Olympics. But arguably it is exactly this mistake of *looking past* meaning and context that characterizes Plante's statement, her misunderstanding of Favazza, and his own misunderstanding of the implications of his method, and which therefore works to cover over the qualitative difference between say a British teenager who self-harms behind the locked door of her bedroom, and a North American Shaman who self-mutilates as part of a public religious ritual.[4] As a rupture of methodical procedure it might seem like a small point but its impact is huge as it carries us along without justification or evidence from *observation* to *explanation*, and from patterns of *content* to assumptions of *form*. In both cases the former is fenced-in in terms of the latter and self-harm goes from being a particular self-mutilatory practice, to simply being one manifest example of 'self-mutilation.'

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[3] Arguably by invoking intention Favazza's definition goes beyond the strict limits of a thin description but such an invocation amounts to little more here than identifying that the act is a self-inflicted act rather than an accident, or that it is carried out with the approval of the person to be mutilated, and that it does not amount to a suicide attempt. Nothing of the meaning or purpose of the act is implied in this definition and so I think it is reasonable to count it as a thin description.

[4] It is worth noting in passing that the anthropologist Serena Heckler, when attempting to explain 'self-harm' to members of the Shuar community of the Ecuadorian Amazon, was only able to gain expressions of puzzlement as to why anyone would intentionally hurt themselves. Self-harm would appear to be an alien concept to her informants who nonetheless have traditionally practiced physical ordeal and self-mutilation as part of their shamanic rituals (personal communication).

And this is precisely the problem with this unfortunately typical kind of methodological impatience; it works from far too easily overlooked assumptions which are all the more influential for being implicit. In Favazza's work, and that of Plante and several others, there is an acknowledgement of, even a fascination with, cultural meaning and social context – these factors are not denied at all and Favazza even goes as far as arguing that '[self-mutilation] can be understood most fully by examining the cultural context . . . in which it occurs' (1996: 84). But this fascination somewhat covers over, even I suspect often to the authors themselves, the action of the asymmetric binary I mentioned before, which works implicitly to position the sociocultural icing as secondary to the bio-genetic cake, and which therefore does not deny the sociocultural as such but rather *looks past* it; it is included so long as it is not used to explain the form, nature, or existence of the practice itself but rather only the variable content that clothes it in context.

The consequence of the asymmetric binary in a text as fascinated with culture as Favazza's is precisely the kind of confusions and tensions that I have already noted as typical of self-harm discourse in general. For example despite his stated commitment to the sociocultural he also states that self-mutilation is a 'distinct disorder of impulse dyscontrol' (1996: 287), which is to say a psychiatric illness relating to the failure of the individual's bio-psychological system, one which he sees as being 'unleashed' by 'neurophysiological mechanisms' and which he maintains will, when discovered, be found to be basically the same in animals as in humans (1996: 76), even leading to its eventual treatment by medication (1996: 70). Ethnographic sensitivities are somewhat overwhelmed here by psychiatric instincts (Scheper-Hughes, 1989) and Favazza even goes as far as fencing-in the general anthropological category 'self-mutilation' within the terms of those discourses more properly associated with the more specific category characteristic of his own culture, namely 'deviant self-harm.' Consequently, for example, he reductionistically describes Moroccan head slashing as 'castration anxiety' (1996: 92), and Aboriginal subincision as a *folie communiquée* deriving from a psychotic innovator (1996: 186). The category confusion here is the same as if Gandhi's political acts of self-starvation were explained on the basis of an underlying anorexic tendency. While a loose, generalizable, and thin category such as 'self-starvation' might legitimately contain both, such a category is not reducible to either the political

hunger strike or anorexia nervosa and cannot be interpreted in terms suitable to only one. Indeed what is lost in the rush to substantives is the insight that practices of self-mutilation are not only differently interpreted by different cultures but also differently constructed – they are qualitatively different acts.

Objectivisms Medical and Psychological

Of course this tendency to *look past* exerts itself well beyond Favazza's text and is precisely that typically pointed out by those voices in psychiatry (Littlewood, 1990; Tew, 2005), anthropology (Kleinman, 1991; Young, 1997), philosophy (Hacking 1995, 2002; Bordo, 2003), sociology (Horwitz, 2003; Scheff, 2007), and the survivors movement (Pembroke, 1996) that have critically engaged with bio-psychiatry and the common reductionistic and substantivist assumptions of western psychopathology. Indeed it is because of the pervasive influence of this 'looking past' and these assumptions that self-harm despite its cultural 'coming of age' (Favazza, 1998) and its being an undeniably complex phenomenon with multiple meanings (Tantam and Huband, 2009; Adler and Adler, 2011) is still, in its basic sociocultural framing, at root a medical concept – which is to say a category of illness. This is not to say that the concept or category of self-harm is the product of medical science as such, or the possession of medical institutions and authorities. In fact it has taken seven and a half decades since Karl Menninger's first clinical observations of something recognisably like 'self-harm' for it to be finally and officially accepted as a form of mental illness, as it soon will be in the fifth edition of the Diagnostic and Statistical Manual (DSM V) due for publication in 2013. But while it is certainly true that until now bio-medicine as an institutional complex has been somewhat ambivalent about laying claim to special authority over it, or privileged knowledge about it (Favazza, 1996), the point is that regardless of this medical *discourse* has nonetheless exerted a tremendous influence on its basic conception, framing, representation, and understanding.

This of course should be little surprise given the social power and cultural authority enjoyed by medical discourse in our society and culture (De Vries *et al*, 1983; Horwitz, 2003; Scheff, 2007). A fact well illustrated by the tremendous energy and passion typically poured into efforts by patient groups and interested physicians to have any

number of practices of personal distress officially recognised as 'real' problems, which for these purposes means at root bio-medical problems - the product of physical disease or structural dysfunction whether this is understood to be genetic, biological, or psychological in nature (Showalter, 1991; Hacking, 1995). The unfortunate corollary to which is that those practices or idioms which do not have this recognition risk being seen as the factitious, malingering, or hysterical posturing of an indulgent imagination, and as being 'all in the head.' However the influence of medical discourse in the basic framing of self-harm goes far beyond this need for official recognition by medical and psychiatric bodies, but rather involves the way that the social authority and cultural power of the medical, its 'aura of facticity' and its nested position within the even greater social authority of natural science, influences the way we see and make sense of the world so that a personal practice and cultural pattern like self-harm, and indeed all such idioms of emotional distress, typically tend in the first instance to be interpreted and constructed as self-evidently *pathological* behaviours and *clinical* problems (Kleinman, 1991; Conrad and Schneider, 1992; Johnstone, 2000; Littlewood, 2002).

Michel Foucault's (2001, 2002) concept of 'discourse' is particularly useful here since it ties the manifest configurations of our lives, our practices, technologies, social institutions and structures, and even our modes of subjectivity, not just into webs of meaning but into *patterned* webs of meaning; webs which imply differences in knowledge and authority and which therefore describe relationships of power and of influence (Cousins and Hussain, 1984; Hall, 1992; Mills, 1997). Discourse not only allows a meaningful world to appear for us but helps regulate what is said about this world and who may say it, what is commonly recognised as truth and authorized knowledge, and what is taken to be nonsense, folly, or falsehood (Laclau and Mouffe, 1990). In other words 'discourse' helps us to understand that every institution and very 'regime of knowledge' (Foucault, 2002) implied and articulated by such institutions are, irrespective of how necessary or useful they may be, also sociocultural and political institutions and regimes of knowledge inescapably caught up in both webs of meaning and webs of power (Simons, 1995). According to Foucault then, these social institutions reflect our values as surely as they reflect our knowledge, because value and knowledge are irreducibly enmeshed and are both made manifest in our dominant

beliefs and our prevalent modes of social organization and forms of life. 'Discourse' is an idea that gets at this enmeshment. It can, and simultaneously does, refer to a group of statements about a given subject (in this case self-harm), the conventions of meaning which organize and regulate such statements (calling it an 'illness' for example), and the kind of knowledge and values they express (that 'illness' implies the 'medical' which by extension implies the patient's need for expert help, 'expert' here implying both professional training and institutional authority).

Consider for example that those disciplines and institutions which *have* typically laid claim to authoritative knowledge about self-harm, disciplines such as clinical and much general psychology, psychotherapy, counselling, social work, and now of course psychiatry, conventionally seek to *draw upon the cache of social authority invested in bio-medicine* precisely by adopting its discourses, its symbols and codes. As such they can all too easily work as satellites orbiting a bio-medical core of paradigms, terminology, organizational logics, and technologies (Stainton Rogers, 1991; Rose, 2007). And it is because of this discursive and institutional positioning then, that representations and understandings of self-harm tend to reflect and reproduce the assumptions and prejudices of these various health-related disciplines and their medicalized perspectives; while in turn such assumptions help support the social regulation of what may be said about self-harm with sense and authority, and indeed *who* may say it. The empirical consequence of this cat's cradle is that it is difficult, in fact almost impossible, to even talk about self-harm without calling it an 'illness' or a 'condition' and by so doing slip into the whole order of assumptions which underpins the use of such terms. Indeed we are culturally ill equipped to talk about practices of personal distress in general without engaging in medical discourse of some kind (Johnstone, 2000; Scheff, 2007).

Of course having said all this it is important to stress exactly that which the concept of discourse allows us to model so well, which is the fact that such objectivism stands as a broad discursive *tendency*, strongly *influencing* representations and understandings of self-harm but by no means constituting a discrete school of thought, except perhaps in the most extreme forms of bio-psychiatry where self-harm has been explained with reference to serotonin deficiency (Simeon et al, 1992), abnormal psychophysiological response (Haines et al, 1995), and even disturbances in glucose metabolism (Westling

et al, 2009). Other perspectives and models do of course exist, hegemony is not homogeny after all, and the strong objectivist approach has in fact been subject to a robust critique for its social, political, and personal effects (Breggin, 1993; Tew, 2005) as well as its empirical veracity and truth (Horwitz, 2002; Rapley et al, 2011). But my aim here is not to cast objectivism as an ideological bogeyman but rather only to indicate the power of its influence, its pervasiveness, and its persistent tendency therefore to limit ideas and restrict debate (Kleinman, 1991; Parker *et al*, 1995; Johnstone, 2000). For all the criticisms and caveats that have been voiced from within the health disciplines (Tew, 2005) the fact remains that it is hegemonic in the true and technical sense (Gramsci, 1992), which is to say that it influences even those who are critical of it, and remains a convention of reading and understanding self-harm and mental disorder in general that is assumed a lot more often than it is questioned.

This kind of influence becomes evident precisely when we move away from the more reductionist and *naturalistic*, bio-medical end of the objectivist spectrum toward theories and models which, in their content and orientation at least are more *personalistic* and psychological. Here a focus on cognitive and affective *function* as opposed to underlying organic *structure* is often thought to guarantee against reductionistic materialism (Claes and Vandereycken, 2007) and militate against the blunter elements of objectivism. However this trust is perhaps misplaced since such functions can also be used to formulate the same core objectivist and substantivist assumptions typical of more naturalistic models, that there is some inner mechanism at work on a more primordial level than that of the total, socialized person, and indeed in both the essential project remains the same: track down and identify that 'thing', disease or dysfunction, which sits at the core of the behaviour, and work out its mechanism – how *it* produces self-harm.

Take for example the influential 'affect regulation model' (Suyemoto, 1998; Crouch and Wright, 2004) which figures self-harm as a kind of pressure valve responsible for releasing and thus managing the build-up of negative emotions. Such emotions are typically thought of as welling-up in the individual's psychological system, perhaps as a consequence of trauma, and subsequently becoming stuck inside this system through some failure in the natural mechanism of expression which would normally release them. Under such circumstances self-harm engages more or less automatically as a

kind of emergency mechanism of expression, releasing the negative affect and returning the individual to a more peaceful state of mind and body. Though in this model there is certainly more focus on the person, their experiences and feelings, than in many bio-psychiatric theories, this focus nonetheless covers a more basic explanatory resort to the mechanics of a universal bio-psychological architecture of structures and systems. In this case a theory of circulating affect plus a kind of logic of externalization, or what I call in chapter five the 'expressive imperative,' forms the basic structures which serve to ground the mechanism, while the pressure-valve effect provides the description of its function and thereby the very mechanism itself. As such personal meaning and context are included in this model but only as secondary factors, after the fact of the basic system and causal mechanism, and strictly related as specific content to essential form. The actual thoughts and feelings of the self-harmer are only examples of the kinds of thoughts, feelings, and personal biographies that *can* operate through this system and activate this particular mechanism. So, despite the emphasis on psychological function and a focus on the more personalistic elements of specific cases this model is still fundamentally objectivist; meaning is still secondary to mechanism and self-harm is still formulated as a physically determined behaviour rather than a complex social action.

Meaning and the Natural Body

The sliding scale of objectivism then can incorporate not only bio-genetic but also bio-psychological substantivism, and is perhaps best thought of as a perspective that locates the cause and essence of illness, and often enough *all* human behaviour, within the innate biological architecture of what Shilling (2003) calls 'the natural body' - by which he means that common physical inheritance of structural anatomy and morphology that the medical and physical sciences tend to understand as 'the body' in and of itself (Haraway, 1990; Turner, 2008). Of course the Cartesian dualism of body and mind (1996 [1647]), onto which that of form/content can be mapped and from which the idea of the natural body has developed, is deeply familiar and is widely recognised as a key influence in the formation of western subjectivity (Taylor, 1992; Seigal, 2005). But as materialist discourses gained social power and cultural authority

during the modern period mental disorder came increasingly to be modelled after somatic disease, and was seen less as a spiritual or moral failure than as the product of dysfunctions in the natural body and its brain (Shorter, 1997; Porter, 2003; Foucault, 2009). This colonization of the mind by the materialist, objectivist, and reductionist paradigm of the natural body has of course only continued in late-modernity (Shilling, 2003; Turner, 2008) so that today's scientific psychology stands as a discipline far more clearly related to Descartes' *res extensa* and animal passions than to his *res cogitans* and the non-physical spirit (Noe, 2010; Tallis, 2011).

As such the contemporary discourse of the natural body incorporates not only the overtly medical body of anatomical maps, medical statistics, and post-mortem examination (Hahn and Kleinman, 1983; Frank, 1990; Freund and McGuire, 1999) but also a supposed basic package of innate tendencies in thought, feeling, and behaviour which are often described as 'human nature' (Rose *et al*, 1990; Rose and Rose, 2001). But it is not at all clear that explanations rooted in the natural body and its human nature can account or allow for meaning in the life and actions of a subject in anything but a secondary or purely epiphenomenal manner. Edmund Husserl (1970[1901]) for example argued over a hundred years ago that the natural body lacks 'communicative intent,' that medical signs and symptoms as well as other such involuntary bodily expressions as understood by the objectivist paradigm, can 'only *mean* in the sense of indicating' (1970: 275 my emphasis), of being read by one who knows how to see in the surface play of epiphenomena the effects of the inner substantives (Sullivan, 2002). In fact for Husserl such behaviours cannot strictly count as *meaningful acts* of communication at all since they are a purely indexical medium with no intentionally communicative intelligence; which is to say that there is no agent behind the sign and hence no true meaning to it, any more so than a flower 'means' to attract insects by blooming a certain colour. But while Husserl didn't rob his subject of meaning, since he was engaged in a phenomenological rereading of Descartes and as such had reserved a place for *res cogitans*, in the years since and in the growing social popularity and influence of bio-genetic and neurological determinism the role of this *res cogitans* has been radically reduced if not entirely denied (Rose *et al*, 1990; Tallis, 2011). And as such Husserl's model of the flesh as essentially meaningless is now implicitly if perhaps unintentionally generalized, to include not only the body but also the mind embodied

as brain, or brain-as-near-universal-cause (Noe, 2010). It follows then that the behaviours of the human subject, including self-harm, must also be understood by this paradigm to be *essentially* meaningless.

Of course this is not to say that meaning is completely denied in medical and objectivist discourse, but rather that the tensions inherent in Husserl's logical conclusion are mitigated in practice by the operation of the asymmetric binary, the maintenance of an implicit and uneven dualism between a primary realm of the physical and causal, and a secondary realm of the personal, social, and cultural. It is because of this asymmetric binary that the unpalatable conclusion of objectivist semiotics need not be faced squarely, but rather some semblance of the *res cogitans* is allowed to haunt the texts as long as it claims no causal significance. And this approach seems to be largely successful *as long as one doesn't look too closely*; but if you do look closely then you will see the kind of ambiguities and ambivalences which are particularly evident in self-harm literature. Take for example the common tension between the objectivist logic that underpins the modelling of self-harm as a discrete 'thing' that ought to be susceptible to complete and satisfactory definition without remainder on the one hand, and the tendency to acknowledge the fact that empirically self-harm appears as a multidimensional, multifunctional, and hugely overdetermined act which cannot be explained through a focus on a single cause or function, on the other (Favazza, 1996; Babiker and Arnold, 1997; Tantam and Huband, 2009). These two representations are more often than not present in exactly the same texts (see Miller, 2005; Plante, 2007; and of course Favazza, 1996 for examples of this) and the tensions between them covered over by the asymmetric binary which argues here that while self-harm can be *explained* on the basis of a fairly narrow bio-psychological mechanism, it must nonetheless be *understood* as appearing in diverse and multiple ways in different people's lives precisely because their lives are so different. In other words there may be one 'disease' but many 'illnesses' (Kleinman, 1991).

In fact this epistemological division of labour between *explanation* and *understanding* runs through psychiatry and clinical psychology as a result of pursuing a diagnostic approach in the absence of any physical signs as such (Johnstone, 2000), which is to say that while the underlying objectivism of these disciplines means that clinicians tend to understand symptoms as the effects of substantive causes they have no actual

access to such causes except through the interpretive endeavour of working with the patient, their presentation, and their thoughts and feelings (Phillips, 2004). Through the aligned binaries of *form/content* and *explanation/understanding* such clinicians operate as what Sullivan (2002) has called 'dermal diagnosticians,' looking past the personal surfaces of their patient's imminent presentation and treating this precisely as an indexical medium, in order to penetrate to a deeper, hidden, and more objective realm of truths within. In this way meaning can be acknowledged and then effectively looked past, and all without having to fully acknowledge the logical conclusion of a meaningless subject.

However despite the neat structure, efficiency, and pervasiveness of this strategy of the asymmetric binary all it can really achieve is a studied indifference to the tensions that nonetheless continue to inhabit the texts in which it operates. It paradoxically de-personalises our lives even as it individualizes them, reducing the person to a mere site of pathology and a platform of symptoms (Sullivan, 2002); looking past the person who self-harms as a complex meaning-oriented subject, and the act of self-harm as a meaningful action and practice. And this neat separation of explanation and meaning is also all too easily subjected to a deconstructive disturbance since the distinction itself originated in the *verstehen* tradition (Outhwaite, 1975; Crotty, 1998) and in the works of social scientists like Max Weber (1962) and Wilhelm Dilthey (1991 [1883]), since being developed by thinkers like Von Wright (1971), and Geertz (1973). In this tradition, contra the standard clinical application, *meaning implies in itself a kind of explanation*, and is based on the recognition that human beings are meaning-oriented subjects who perform certain actions *because* of their meaning, and that therefore *to understand this meaning is to explain the action*. Indeed as Weiss points out for Weber '[*v*]*erstehen* is a method of explaining and of explaining only' (1986: 68) and one which fell in with his programme of sociology conceived as a discipline of 'explanatory understanding' (Weber, 1962: 35); 'a science which attempts the interpretive understanding of social action in order thereby to arrive at a causal explanation of its causes and effects' (ibid: 51).

It should not be imagined then, as is often the case today that explanation and understanding are simply two separate dimensions of a single action since this is already to let the asymmetric binary have its way. Rather the difference originally

intended between explanation and understanding in the *verstehen* tradition is properly taken to be the difference between a narrow, deterministic and mechanical explanation that can be arrived at by physical analysis and that suits mindless processes; and an explanation based in an understanding of the meaning of an action, that can be arrived at by interpretation, and that suits human beings; *and which therefore takes these human beings as meaning-oriented subjects* (Crotty, 1998). So for example I have already mentioned Ryle's concepts of thin description which provides an account of action as a machine may record it in detail but without meaning, context, or understanding. By contrast his idea of 'thick description' so brilliantly deployed later by Geertz (1973; see also Ponterotto, 2006) focuses on precisely these missing elements but significantly it does so toward some kind of explanation. Ryle's famous example concerned a number of boys winking and the need to distinguish between a boy with a twitch in his eyelid, a boy who is intentionally winking, and a boy who is imitating or possibly making fun of the boy who is winking. In these cases the explanation of the action, *what* it fundamentally is and *why* it was performed, rests in an understanding of its meaning and import – its thick description (Inglis, 2000: 113).

The current impoverishment of this dichotomy and its co-option into the aligned dualisms of body/mind, form/content, and mechanism/meaning results in both the objectivist framing of self-harm as an organic mechanism, and the concomitant looking past of the meaning of self-harm in accordance with the asymmetric binary as being nothing more than the epiphenomenal icing on the bio-psychological cake; phenomenologically important but not explanatorily relevant. The significance of this strategy can be illustrated with a return to the tensions inherent in modelling self-harm at one and the same time as a narrow mechanism which nonetheless manifests itself in a diverse array of expressions. One problem with this, and a relation to the problem of definition that we have already examined, is that each narrow model and mechanism proposed covers a slightly different configuration of practices and factors, and as such while each may be narrow the sum total of such explanatory models, collected from the broad literature that is available, suggests a very different picture indeed. Considering the multiple methods of self-harm (Favazza, 1996; Farber, 2002); the diversity of tools involved (Sutton, 2005); the array of different motivations for different people (Claes and Vandereycken, 2007); the variety of emotions and

thoughts preceding, accompanying, and proceeding the act (Muehlenkamp, 2005); the assortment of resulting sensations and effects (Klonsky, 2007; Horne and Csipke, 2009); the range of phenomenological states achieved (Hass and Popp, 2006); and the miscellany of contingent factors that may or may not accompany the act in various mixtures from case to case including the background situation, medical history, and personal biography of the self-harmer (Babiker and Arnold, 1997; Tantam and Huband, 2009) - the overall picture presented is not that of a universal form indicating a basic bio-psychic mechanism, but one of a *family* of practices and associated meanings which appear unstructured yet highly interconnected, configured into a vague but particular cultural pattern in the same way that multiple and diverse threads interweave to make up a rope (Wittgenstein, 1958).

Self-harm as a Symbolic Action

Indeed it is hard to read the content of self-harm literature, rather than its theoretical form and framework, without getting the strong impression that self-harm is not so much something that a body is *inflicted with*, but rather something somebody fundamentally *puts to use*. None of which, it must be made clear, is to suggest that self-harm is not 'real,' or to doubt the seriousness of the pain that is associated with it. As Middleton and Garvie put it

> People call self-harm all kinds of things – a phenomenon, a 'mental health problem' – I have even heard it referred to as a 'maladaptive tool for emotional regulation.' But what I know most of all is that self-harm is a real thing that affects real people (2008: 6).

So to question the objectivist hegemony in framing self-harm, and to call for methodological patience in its empirical exploration, is only to question whether or not our current ways of representing and understanding self-harm are capable of doing full justice to all the aspects of a 'real thing,' and indeed all the forces that make up and operate through 'real people.' As I have argued the tendency in much bio-medical and psychological discourse is to conceive of the real as that which is physically determined, but understood from a more sociological and anthropological perspective 'real people' are always complex, enculturated, meaning-oriented, socially sophisticated, and intersubjective beings (Crossley, 1996), and 'real things' are always

a combination of both the physical and the symbolic, the material and the discursive (Kleinman, 1991; Butler, 1993).

To approach self-harm in this way then, which is the intention of this thesis, is to understand it not only as the act of a biological body but also as a 'symbolic action' or what Kenneth Burke elegantly described as 'the dancing of an attitude' (1989: 31). A symbolic action is as Alexander and Mast point out 'expressive rather than instrumental, irrational rather than rational, more like theatrical performances than economic exchanges' (2006: 2) or, we may add, the mechanics of disease. And as such researching symbolic action means going beyond thin description and the assumption of underlying mechanisms, and working instead with an orientation toward thick description, which is to say toward asking about the 'why' of human action – its meaning and import (Cameron and Frazer, 1987). While numerous voices have in fact made this argument already in terms of examining the meaning of an individual's mental disorder, so that more effective services can be provided and a more reflexive and critical psychiatry developed (Tew, 2005), I want to argue here that alongside this work there is an important and supplementary task for social scientists to pursue: namely the exploration of the broader cultural meanings that attach to such 'idioms' (Nichter, 1981) of personal distress and emotional dysphoria as self-harm, and therefore help shape them as symbolic actions and the kind of things that people can meaningfully do under certain circumstances. To look at not only what the term 'self-harm' means but what meanings are actually caught up in it as an idiom of personal practice, a cultural pattern of ideas, values, and images, and as a social phenomenon. I use a cultural sociological approach (Jacobs, 1996; Emirbayer and Goodwin, 1996; Alexander and Smith, 2001) in this endeavour since it takes meaning to be every bit as much a structuring force in society as any of the categories of traditional sociology such as power, modes of production, or state organization (Alexander, 2003). But understanding that meaning is centrally important is still to leave the hermeneutic question open: how is one to find these meanings? And how is one to make sense of self-harm? And it is to these questions that I turn in the next chapter.

Chapter Two

Context and the Problem of Good Understanding

Introduction: Self-harm and Strange Verses

Ye that are of good understanding, note the doctrine that is hidden under the veil of the strange verses! – Dante (The Divine Comedy, Inferno canto 9 verses 61-63)

[I]t's also, I think, really connected to the fact that you almost feel, like, silent, you have no voice, you're mute, there's just no, you've got no option. Even if you could express yourself nobody would listen anyway. Things that go on inside you, there's no other way to get rid of them – Richey Edwards (in '*Villa 65' interview*)[5]

These fragments I have shored against my ruins – T.S. Eliot ('The Waste Land': line 430)

On a May evening in 1991, after the indie-rock band *The Manic Street Preachers* had played a gig at the Norwich Arts Centre and during an interview with New Musical Express (NME) journalist Steve Lamacq, the band's lyricist and rhythm guitarist Richey Edwards created one of contemporary rock music's most infamous moments and one of its most challenging images. Lamacq had been publicly unimpressed by the band and was particularly unconvinced by their attempts to identify with the punk music of the late 70s and early 80s (Lamacq, 2000). He went as far as to suggest that their slogans of social outrage and youthful rebellion were little more than a cynical marketing strategy, an exercise in identity consumerism which wrapped resistance in a pop package. And it was in response to this accusation that Edwards produced a razor blade from his back pocket and proceeded to cut the words '4REAL' into the full length of his forearm. The photograph that was taken of him only moments later shows his thin pale figure gazing steadily at the camera, his wounds open and fresh, a cloth wrapped around his hand to catch the blood.

The injury was severe enough that Edwards was taken to hospital where he received seventeen stitches, but it had soon been treated, cleaned, and covered, and he was then discharged and sent home to recover. By contrast the picture of the injury was to live on well past the evening, transforming the '4REAL' incident from a passing if somewhat outrageous moment of public self-injury into a text recorded in words and pictures and written and re-written through years of subsequent controversy and speculation. It became the subject of a heated debate within the offices of the NME, a debate which was recorded and published as a bonus track on *The Manic Street Preachers'* EP cover of 'Suicide is Painless', it was subsequently published by the NME

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[5] Villa 65 is a Dutch radio station, this is an excerpt from an interview conducted by them and downloaded from www.articles.richeyedwards.net/dutchradionov94.html on 21/4/10

amidst great controversy, became a popular image on the internet, was voted number 16 in *Q Magazine's* '100 Greatest Rock Photographs of All Time', and eventually even became a t-shirt (NME, August 15, 2001). Shorty after its publication young women began attending Edwards' concerts with the words '4REAL' written on their forearms in marker pen (Jovanovic, 2010: 115). And in the time since, the picture has become a kind of fetish for what can only be described as the cult of Richey Edwards; a cult that was only strengthened by his mysterious disappearance in 1995 and his subsequently being pronounced dead as a suspected suicide.

The picture is challenging in both senses of the word: it is difficult to look at and yet demanding of attention and understanding. It is a kind of speech act after all, even if it is written on the body in blood rather than expressed in more conventional terms (Hewitt, 1997; Kleinot, 2009). But for a speech act and a kind of message, it nonetheless carries something of a transgressive refusal to communicate, at least in more normative fashion, and as such confounds ordinary structures of meaning and understanding. Though at first inspection the picture may straightforwardly appear to be a testament of authenticity, a visceral if somewhat literal enactment of Mcluhan's dictum that 'the medium is the message' (1964), it nonetheless presents a much deeper hermeneutic challenge than this. It is not at all clear for example why *this* particular message should make sense within the context of *this* particular medium rather than some other. Nor is it obvious what meaningful homology is active here between the pattern of the medium and the pattern of the message such that they act together to create a single and significant symbolic act, and represent Burke's 'dancing of an attitude.'

Of course the lives of celebrities hardly justify generalisations to the broader population of self-harmers, and Edwards' '4REAL' incident can hardly count as a typical example of self-harm. But nonetheless we find within this incident, crystallised into an admittedly public and spectacular event, precisely the kind of symbolic action we have come to know as 'self-harm' and that since the 1990s has become such an instantly recognisable part of the public consciousness, and that now stands as a powerfully evocative and widely available cultural complex of images, ideas, and associations. It is interesting to note that the '4REAL' incident could easily have been framed within a well established tradition that connects punk transgression with self-mutilation, a

citation of Sid Vicious or Iggy Pop for example (Hewitt, 1997) that would make sense as a specific counter to Lamacq's accusations. But initially and for the most part since, Edward's self-injury has not been understood with reference to this tradition but rather as 'self-harm' - which is to say, as I argued in the last chapter, as an idiom of personal distress and emotional dysphoria indicting mental disorder. The 1990s marked the period in which, socially speaking, self-harm 'arrived,' or as Favazza puts it 'came of age' (1998), through a process of medical recognition, media concern, and public awareness and in something like the same way that anorexia nervosa had done in the 1980s. And it was this 'coming of age' that intervened between Iggy Pop and Richey Edwards, allowing the former to be read as a transgressive punk performer while the latter was read as a troubled soul with mental health problems. Indeed Edwards could be described as a famous self-harmer, both in the sense that he was a celebrity who self-harmed (one of the first to talk about it though certainly not the last), and also in the sense that he owes at least part of his fame to his self-harm and the public controversy that followed it.

Of course today self-harm regularly appears in the social imaginary of newspapers and magazines, songs, TV shows, and movies (Sutton, 2005; Adler and Adler, 2011). Celebrities confess, journalists and social commentators express concern, and the experts warn of a largely hidden facet of contemporary life affecting schools, universities, prisons, and homes (Fortune and Hawton, 2005; Plante, 2007; Adler and Adler, 2011). But as I argued in the last chapter in marked contrast to this recent history of social awareness and cultural power self-harm nonetheless continues to produce confusion and consternation amongst experts almost as easily as it does amongst the public, and as such represents what Dante describes as 'strange verses'; which is to say a kind of esoteric text, one made-up from the common semiotic system of the culture that surrounds and embeds it but which nonetheless works liminally, at the edges of this system, creating something familiar yet alien, and what Freud called 'uncanny' (2003 [1919]). Making sense of such strange verses presents a peculiar hermeneutic challenge. It is not just a question of checking the meanings of actions with the actors who perform them, or of tracing homologous structures of meaning so that the idiom can be understood as the reflection of its culture. But more than this, it is also the task of tracing how this idiom can be the reflection of its culture's discourses

and values as these have been distorted into an estranged and deviant modality; which is to say how it can be strange yet familiar, meaningful yet confusing, part of a cultural system and yet a transgression of it (Kenny, 1978; Showalter, 1997; Littlewood, 2002; Bordo, 2003). It is the challenge of reading a text that seems almost to have been deliberately composed as difficult, disturbing, and oblique; a text that calls to be understood, and that *should* make sense, but which nonetheless seems to resist all attempts to understand it. In short it is not a hermeneutic question based purely in the *identity* of idiom and culture, but rather one based in the *relationship* articulated between them.

In looking for the meaning of such a strange verse as self-harm, and in trying to understand the resonant/deviant relationship it has with its sociocultural context, it is hard not to follow Dante's epistemological recommendation that we search for a 'hidden doctrine' that will reveal the logic uniting medium and message, and which will embed Burke's sense of 'attitude' within the pattern of action that serves as its symbol and vehicle. And this of course has been the common strategy to date in attempts to make self-harm make sense, and the very strategy that lies behind labelling Edwards' self-injury as 'self-harm,' as an illness category that belongs to psycho-medical discourse and which can presumably be made to make sense in corresponding terms. However as I argued in chapter one the questions that such approaches have produced have far outstripped the answers that they have supplied, and though we may appreciate the need for understanding self-harm as a meaningful action it nonetheless remains something of an open and challenging problem as to exactly what kind of 'good understanding' as Dante puts it, will reveal this meaning and hidden doctrine. But of course this search for 'good understanding' is what this thesis concerns itself with, and so to that end in this chapter I want to explore the question of exactly how the meaning of self-harm can be interpreted. I shall do this by exploring another common and basic approach to understanding self-harm that often complements, but also sits in a relationship of tension with, the objectivist paradigm that I explored in the last chapter. I will examine it for its limitations and from this critical review develop a new approach to the challenge of cultivating good understanding; an approach that will supply the methodology of interpretation to be used in this thesis, that will unlock the strange verse, and help us make self-harm make sense.

The Ghost in the Machine

> In an act of self-mutilation gesture replaces language. What cannot be said in words becomes the language of blood and pain – Kim Hewitt *Mutilating the Body* (1997: 58)

One of the most significant things about the '4REAL' incident is the way that it has been consistently read as an example of 'self-harm,' a pattern of action that is already somewhat medicalized and which for commentators on the incident seemed to self-evidently represent a psychopathological condition. For this reason it is typically believed to be peculiarly subject to bio-psychological objectivism and to be something that should, and eventually will, reveal its hidden doctrine of inner pathology and causation to the good understanding of medical and psychiatric science (Favazza, 1996). However as we've seen the objectivist paradigm and discursive tendency struggles to accept meaning as such, let alone afford it a formative position in the construction and articulation of such idioms of distress as self-harm. From this argument it would seem that there is no possibility of an objectivist hermeneutics of bodily signs centred on questions of meaning, since as Husserl pointed out such signs are not meaningfully selected to make a point or send a message. Rather self-harm appears here as less a bodily speech act and personal message than a strictly meaningless mechanism, or perhaps even a symptom of a mechanism, residing less in the mind of the person than the 'natural' structures of their body. But as I pointed out before this does not mean that self-harm is represented in texts which are basically objectivist as an utterly meaningless practice, but rather that the objectivist paradigm, which powerfully influences rather than dictates such texts, tends to sidetrack the significance of meaning through the action of the asymmetric binary. As such meaning does appear in the pages of these texts through a number of common tropes and codes albeit that these ultimately stand as either inessential epiphenomena, or else as an echo of Cartesian dualism and a somewhat impotent version of what Ryle (2000 [1949]) pithily called 'the ghost in the machine.'

The Subjectivist Discursive Tendency

Indeed as much as many researchers and theorists working in scientific psychology may tacitly consider an eliminative reductionism as the logical and perhaps inevitable outcome of committing to the natural body discourse (Tallis, 2011), accepting that Cartesian dualism is best dealt with by either ignoring the mind as such, or else allowing for it only as an epiphenomenal and unnecessary emission of the brain (Noe, 2010), it would seem that the broader public and cultural imagination is still caught, perhaps unconsciously, in an implicit dualism and a recourse to some version of Ryle's 'ghost' (Guignon, 2004). The unpleasant choice between the eliminative reductionism of the machine-and-nothing-but-the-machine and the dualism of ghost-in-the-machine is of course typically mediated and mitigated by the action of the asymmetric binary. Explanation and understanding can be kept separate and in their respective corners as long as one doesn't look too hard and realise how anaemic 'understanding' has become. But the practical result of this regulation of ideas through the asymmetric binary is that within many texts such as those that deal with self-harm there are any number of problematic ambiguities and ambivalences which betray a deconstructive force at work, breaking down the binary and highlighting its inconsistencies; a deconstructive force that can only be held off, and is usually held off, by a wilful aversion of attention.

Just such wilful denials were evident in the problems associated with defining self-harm and producing an appropriate terminology for it, and in the tendency not to examine too closely the tension between the empirical diversity of self-harm on the one hand and the commitment to a reductionist and substantivist model and explanation of it on the other. But while the asymmetric binary keeps the more personalistic and meaning-oriented elements in check the sum total of such elements, tropes, and codes amounts to a second distinct discursive strategy for representing and understanding self-harm – a more subjectivist discursive tendency. It is this subjectivist discursive tendency which overlays, as icing Geertz might point out, the objectivist cake of bio-psychological models and discourse and represents some kind of significant interest in people's personal thoughts, feelings, and experiences even if they are not seen as causally significant or explanatorily important. At its weakest it may amount to little more than acknowledging the phenomenology of self-harm and admitting that alongside the activity of some inner causal mechanism there is a

matching experience of personal distress and emotional dysphoria that may be significant to the person self-harming. This of course amounts to less of a ghost in the machine than a human face sensitively placed upon it, however as we move through the spectrum of objectivist models from the more naturalistic to the more personalistic we obviously find this subjectivist tendency becoming increasingly pronounced.

But the important thing to remember is that though typically these subjectivist elements are included they are *not* normally theoretically integrated into the naturalistic mechanisms that are still used to explain self-harm, or else if they are integrated to some extent then as I noted with respect to the affect regulation model such personalistic elements are understood as providing nothing more than case specific content. As such almost all representations of self-harm can be broken down into their objectivist and subjectivist elements which are practically regulated and structured within the same texts through the action of the asymmetric binary. The binary both covers over the implicit contradictions between the objectivist and subjectivist elements while, since it is asymmetric in nature, working to turn a typical and empathic interest in the personal into a way of ontologically and epistemologically privileging the bio-psychological. In this way it commonly produces a mix of content alongside form, and understanding alongside explanation, but not an equal mix of the two and certainly not a blended one, by which I mean that there is no theoretical assimilation of the one to the other.

The evidence of this mix is perhaps most pronounced where the two tendencies are most evenly present within the text, even if they are not evenly evaluated in the business of explanation, and this typically happens in books of popular psychology and psychotherapy which while relying on objectivist psycho-medical models of self-harm nonetheless devote a good deal of space to talking about the personal feelings and backgrounds of individual self-harmers. Take for example the frequency with which the word 'understand' or 'understanding' turns up in the titles of such books on self-harm (see for example Alderman, 1997; Smith *et al*, 1999; Levenkron, 1999; Sutton, 2005; Miller, 2005; Clark and Henslin, 2007; Hollander, 2008), the way that case studies and short vignettes are typically peppered throughout the text allowing a human face and name to be hung onto the more abstract and technical ideas that are

being explained, or else take the frequency with which the poems of self-harming patients and clients of the author are included in the text. Take for example 'The Silent Scream' by 'Sian' which appears at the end of the preface to Jan Sutton's book *Healing the Hurt Within: Understand self-injury and self-harm, and heal the emotional wounds* (2005: xxii-xxiii):

> Picture this,
> a blank canvas,
> the artist
> painstakingly
> and with much giving of herself
> creates a masterpiece.
>
> The silent mouth now painted,
> utters a silent scream,
> not heard,
> yet truly felt by all who gaze on it.
>
> And picture this,
> a human body,
> not yours
> yet neither is it hers.
> The pain within it
> not seen by others,
> yet still truly felt by she who is trapped inside.
>
> And in that moment
> when, blade upon flesh
> she draws a mouth so silent,
> and the blood red lips scream their silent scream,
> the artist knows
> that her masterpiece may not be heard
> by those who seek to help her,
> yet, the kisses that silently leave their mark
> upon the canvas of her body,
> are voice enough for those who choose to hear her,
> and see the pain behind the silence of her scream.

Here, a poem which actively makes the point that the poet's strange verses may not be understood by those who 'seek to help her' is used to preface a popular psychology book; a book which enthusiastically takes up the theme of the emotional and personal lives of self-harmers even as it translates these lived realities into the language of the psycho-medical, and finds beneath such personalistic content the structure of naturalistic form. So through this poetic inclusion the personal content and subjectivist reading of self-harm is acknowledged and assimilated into such a text, providing the

dimension of human engagement but no essential information about the nature of the issue being dealt with. Rather one is supposed to find the true form and nature of both the person as a psychological subject and self-harm as an illness behind the details of this content and the verses of the poem. The objectivist and subjectivist tendencies appear here then, as in most texts dealing with self-harm, within the same pages but without their relationship being fully drawn out, or indeed their inherent tensions being properly thought through. The machine is present and the ghost is present but the two seemingly exist in parallel universes.

Something More Real than Words

But if poetry is used in such broadly objectivist texts to lend flavour rather than substance, it should be noted that *within* the text of such poems as 'The Silent Scream' as well as other representations of self-harm made by self-harmers, the opposite is often the case and the subjectivist reading stands as the dominant theme. Sian for example conjures the self-harmer as an artist whose bodily art of mutilation presents some of the same challenges as Richey Edwards' picture; namely that such acts are an attempt to express and communicate something intensely personal and meaningful, something authentic and '4REAL,' and yet paradoxically the means by which this is done represents a refusal to communicate in conventional terms. Indeed Sian acknowledges the status of such a semiotic as a strange verse, allowing that others may not hear or understand her, and yet despite this there is a sense that *because* this woman is 'trapped' within a body of pain that she feels does not belong to her, and *because* her pain is so great and she feels so estranged from her world, that self-injury is the only means of expression and communication left open. It is as if ordinary communication cannot express the depth of feeling that Sian evokes. So though we may find a ghost within the machine here it is a profoundly powerless spirit, less the animating principle of the body than its passive prisoner; conscious within but enable to project itself outward. The body as represented here then is still something like the natural body of hegemonic objectivism, though perhaps with much less attributed to its innate package of cognitive and behavioural programmes than in strongly

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objectivist texts; it is a bio-mechanical vehicle for the ghost dwelling within and still essentially separate from it.

This is an idea strongly evoked by Sian and implicit also in the quote from Richey Edwards that I used to open this chapter, here there is no sense that self-harm is a bodily mechanism lacking 'communicative intent' but rather that it belongs to the trapped and indwelling spirit which if anything suffers from *too much* communicative intent, an excess that for both Sian and Edwards overwhelms ordinary language. This failed expressive promise of language, to act as vehicle for our inner spirit and connect us across the ontological divide with others likewise trapped within their own bodies, is the reason Edwards talks about being rendered 'silent' and 'mute'; a condition which as Hewitt describes it above, produces a recourse to an alternative 'language of blood and pain.' As Jerry Rubin put it (1970: 109-10):

> Nobody really communicates with words anymore
> Words have lost their emotional impact, intimacy, ability
> to shock and make love
> Language prevents communication

For Rubin ordinary language has been colonised by the interests of the powerful and the agenda of social management, thus robbing it of its poetic power and subversive capacity. Interestingly of course this was much the same observation that Lamacq was making regarding the style and music of the *Manic Street Preachers,* that Punk was being marketised and rebellion branded, and that it was this very accusation this provided Edwards with little left for authentic communication other than his body. John O'Neill (1972) pointed out that when the use of ordinary language by regimes of social control leaves little opportunity for dissent and resistance through words then all that is left is just such a 'non-verbal rhetoric' of the body. Under these conditions the flesh becomes the site for a more authentic and less compromised communication, something more 'real' or true-to-self which lies beyond the norms and conventions of society, beyond its artifice and superficiality. This sense of a corporeal 'resort to the real' (Zizek, 2000) is well illustrated in the words of Brian Patten's offbeat love poem 'Meat' (1971):

> some descriptions of peacocks, of sunsets,
> some fat little tears,
> something to hold to chubby breasts,

something to put down,
something to sigh about,
I don't want to give you these things.
I want to give you meat, . . .

I want to give you something
That bleeds as it leaves my hand
and enters yours,
something that by its rawness,
that by its bleeding
demands to be called real

As just such a raw and bleeding corporeal truth self-harm, articulated by this subjectivist discourse, seems to take on a deep and profound meaning, indeed it attempts to take over the 'failed promise' of ordinary language (Kilby, 2001: 125) and restore through its recourse to urgency, desperation, and sacrifice something of the values of authentic communication, individual self-expression, and resistance to social pressure. And that it encodes this element of social critique perhaps helps explain why it stands as a strange verse in the first place, being by necessity a transgression of the normative. Indeed in Edwards' quote above it is not his self-harm which seems to lack communicative intent, and if his machine-like flesh is dumb it is nonetheless a medium through which he - the indwelling spirit - can articulate himself directly, rather it is others in general, society, language, and the world outside that seems to lack some kind of communicative receptivity, and it is this lack that cuts someone off and traps them within their own body-machine, leaving them isolated and estranged.

Something More Real than the World

From such a subjectivist perspective then, implicit if un-theorised in much that is said about self-harm and the self-harmer, Edwards' '4REAL' statement cannot simply be understood in terms of personal pathology but rather encodes a social critique about the moral and spiritual bankruptcy of contemporary culture and society. A critique that was evident not only in the politics of authenticity clearly articulated in the '4REAL' statement, but also in the fact that during his life he also consciously sought out similar critical texts of angst and alienation through which he could find like minds and similar sentiments to his own. Dante himself for example, was a favourite of Edwards who had religious images inspired by the poet's work tattooed on his body, while Edwards'

biographer Rob Jovanovic (2010) makes much of his sense of connection with T. S. Eliot, and his modernist masterpiece 'The Waste Land' (2009 [1922]) in particular. It is tempting in this connection to see the poem, one of the most difficult and esoteric poems in the history of poetry and the very epitome of 'strange verses', in metaphorical relationship with Edwards' own poetry of self-mutilation, but what is apparently certain is that Edwards and 'The Waste Land' shared a vision. Indeed Jovanovic seems to be speaking about both poet and rock star when he observes of Eliot that '[h]e wasn't just writing of personal hopelessness but also of the wretchedness of modern society and the loss of order and faith' (2010: 17). Eliot and Edwards both regarded and reviled this world without order; a world in which people's lives seem to be curiously posthumous, overwhelmed by the mechanical and the rationalised, and without any rejuvenating moral or spiritual impulse. Theirs was an undeniably critical vision articulating a fundamental sense of estrangement from both themselves and their world, one articulating the sense in which neither man could 'bear to live such a life' (Jovanovic, 2010: 18), and through which both appeared as ghosts, or 'ruins' as Eliot might have it, trapped within the machine.

Of course since the '4REAL' incident Edwards' own life, his lyrics and comments on self-harm, and the '4REAL' picture itself, have all been endlessly debated in biographies and internet forums and as such have become texts available to other people exploring similar sentiments and outsider identities just as Dante and Eliot were available to Edwards. It is interesting to note the iconic function that Edwards seems to play as his name turns up on numerous websites that discuss self-harm, while a visit to these websites as well as the many that are dedicated to the man himself will demonstrate that many of the members of his contemporary cult where just a few years old when he went missing, suggesting that his ongoing relevance lies less in the remembrances of a generation that grew up with him in the 90s than in the iconic function of the enigmatic and romantic image that has shaped his memory since. An image and a memory that is an instantly recognisable, even stereotypical, archetype of tragic introspected youth and the misunderstood romantic poet, and which seems to be significantly connected and articulated through the citation of his self-harm which is predictably a principle fascination on such sites.

Through this subjectivist discourse then self-harm appears, contrary to the objectivist discourse, as a thoroughly meaningful and perhaps even a resistant action, certainly a kind of critique, though perhaps an unprogrammatic and unthematised one. Here, in poetry as in self-harmer's own accounts in general, the objectivist tendency is certainly still present, how could it not in such a psychologized and medicalized culture (De Vries *et al*, 1983; Conrad and Schneider, 1992; Horwitz, 2003; Furedi, 2004), but the balance with the subjectivist discourse has been switched and it is no longer the guiding strategy of representation; a fact which is facilitated by the common practice of ignoring the logical dissonance between the multiple dualisms organized and regulated through the asymmetric binary. Self-harm appears then as more message than mechanism, and as more an expression of selfhood than individual pathology. Here we find Richey Edwards explaining that behind his illness of self-harm there is a deeper voicelessness, a sense of estrangement, and in essence a critique of contemporary life and society. For him and for Sian self-harm is a powerful act of personal and essential expression, a bloody semiotic speaking from the surfaces of the body but emanating from deep within the self, understood less as the machine and more as the ghost trapped within.

The Ghosts in the Paradigms

> [Though] the subject constitutes himself in an active fashion, by the practices of self, these practices are nevertheless not something invented by the individual himself. They are models that he finds in his culture and are proposed, suggested, imposed upon him by his culture, his society, and his cultural group – Michel Foucault *The Essential Works of Michel Foucault Volume One* (1997: 291)

If the objectivist paradigm offers little for a hermeneutics of meaning then it is perhaps tempting to fall back into the subjectivist paradigm as being all about meaning and therefore clearly representing the direction for a hermeneutic approach to take, and holding out the promise of 'good understanding.' However if the objectivist paradigm falls short on its unwillingness to account for meaning as a formative influence then the subjectivist paradigm encounters problems precisely because it puts too much emphasis on meaning rendering it into a private and privately generated force characteristic of the ghostly subject – the trapped plenitude of inner selfhood within.

So while we might say that the problem with the objectivist discourse is that it takes all self-harm, and as I argued in chapter one all self-mutilation, as speaking Plante's 'common language,' then the problem with the subjectivist discourse is that it takes self-harm as the very epitome of an utterly private language; which is to say something completely specific and utterly nominal, the very emotional and spiritual signature of the person performing it. This conception of course, along with the identity of the subjectivist discourse does add, like my analysis of the objectivist discourse, to our understanding of what meanings are abroad when the term 'self-harm' is used, but as useful as this will be once my analysis properly gets under way in later chapters my concern for the moment is that the subjectivist approach does little to actually indicate the right kind of good understanding that can characterize this analysis. Of course one need not look much further than Wittgenstein (1958) for the reasons why this is so. His rightly celebrated battery of arguments and thought experiments leaves little in the idea of a 'private language' left to indicate any kind of hidden doctrine within which might prove useful (Mulhall, 2008). And though this battery of objections is perhaps too complex to reproduce here it may be for present purposes boiled down to two main arguments: what a language is, and what a person is.

Firstly then we might note that while self-harm may be a strange and esoteric verse it is nonetheless clearly some kind of an expression and communication; it may be a difficult message to understand but as a message it is supposed to be understandable and so necessarily sits within a field of shared meanings, rules, values, and judgements (Inglis, 2000: 47). In other words a private language is no *language* at all and would be completely meaningless to others, not an idiom of distress but an apparent and complete psychotic break. As such, as Foucault points out in the quote above, semiotic systems of language and practice are 'not something invented by the individual' but rather are the very systems into which the individual subject is born and raised, and through which this subject can makes sense of the world. It is for this reason that Crotty argues that

> in large measure authors' [of lives and actions as well as texts] meanings and intentions remain implicit and go unrecognised by the authors themselves. Because in the writing of the text so much is simply taken for granted, skilled hermeneutic inquiry has the potential to uncover meanings and intentions that are, in this sense, hidden in the text. Interpreters may end up with an explicit

awareness of meanings, and especially assumptions, that the authors
themselves would have been unable to articulate' (1998: 91)

As such self-harm is not a purely private pattern of meanings and practices, not a 'beetle in a box' as Wittgenstein's thought experiment would put it (1958: 100), but rather represents a package of semantics and pragmatics which is to some extent jointly understood, and which exist principally in the social and intersubjective field as opposed to being the hidden content of an individual's skull or psyche. *We* can talk about *it*, and we know what we *mean* when we talk about it, even if we do find it difficult to define what this 'it' is. Indeed as I have already noted self-harm is not just a personal practice but also a cultural pattern of actions and meanings and a social phenomenon that exists across multiple social sites, and which is articulated through multiple kinds of texts from professional documents to magazines and movies. If then self-harm were the product of such an utterly private language we would have to explain how it can be spontaneously generated by each individual ghost trapped in each individual machine, bringing us uncomfortably back to the idea of self-harm as a more or less natural mechanism with an overlay of subjective meanings.

Secondly, and concerning the question of what a person is, we might note that the very idea of a private self is deeply problematic (Rose, 1991; Crossley, 1996) and that far from psychological events emerging from unknown inner and causal substantives, they must in fact be taken to be patterns of social and shared forms of life which just happen in our particular socio-historical case to be typically packaged in the 'language game,' or social and cultural cosmology and convention, of 'psychology' (Wittgenstein, 1958). In other words we take the subject to be sovereign and agentive in a naive fashion because this is the cultural belief system about subjects that we have been raised with. And we take psychological states such as thoughts, feelings, and intentions in a naive fashion as the product and possession of the private inner space of such a subject because such language is regulated by the language game of 'psychology' and its commitment to a dualism of inner and outer space (Harre and Tissaw, 2005). So while symbols such as 'thoughts,' 'feelings,' and 'intentions' are understood within the prevalent belief system of our culture to be inner substantives this does not mean that this is what they in fact are, it merely means that this is what we typically assume them to be. But as Geertz argued contrary to such assumptions

> Thinking consists not of 'happenings in the head' (though happenings there and elsewhere are necessary for it to occur) but of a traffic in what have been called, by G.H. Mead and others, significant symbols' meaning anything that is 'used to impose meaning upon experience' (1973: 45)

Indeed if this were not the case then each thought, feeling, and intention experienced would be, as a private language, unintelligible and incommunicable to others. They are not because they represent personal articulations, or what the poststructuralists following de Saussure (2011 [1959]) call *parole*, of broader public patterns or languages of meaning, or *langue*. Since language is not invented in each individual speech act, nor are thoughts and ideas the 'unobservable mental stuff' of individual psyches, but rather they are 'envehicled meanings' (Geertz, 1980: 135) So as Inglis makes clear 'passion, action, thought, motive, intention, memory . . . [are] not inaccessible interiorities . . . but what is made publicly manifest and embodied in words, lives and works' (2000: 127), and as such they are public, and meaning is public, because culture is public.

This is not to deny the personal dimension of one's own thoughts and feelings at all, contra those that would for example frame Wittgenstein as a behaviourist, indeed as Ray Monk points out one of the great advantages of Wittgenstein's approach is that it 'preserve[s] in all their nuances the rich variety of psychological descriptions of other people that we have at our disposal' (2005: 106) but still does away with the linguistic and cultural convention (and nothing more) of an inner space of selfhood that is wrongly taken to be the ontological implication of such descriptions. For Wittgenstein the language of the psychological is a useful language game but one which like any language has to do with the shared semiotic systems that tie subjects into their world and cannot be understood out of this context as the cutting of inner nature at its joints (McGinn, 1997; Harre and Tissaw, 2005; Mulhall, 2008). So our personal experiences are available to us through public language and indeed they, and our very subjectivity, may be thought of as being knotted from this common and social web of meanings and values. As such introspection renders nothing strictly private about the subject since what it reveals sits on an intersubjective foundation (Crossley, 1996), and is revealed through the use of public symbols. Of course this intersubjective and social ontology of the subject is an argument that has been much developed well beyond Wittgenstien's arguments against a private language but the point here is only to understand the

subject as a knot in the weave and web of culture, and to appreciate that because of this what is personal to the knot is not private to it because it does not exist or emanate from *within* the knot but rather simply individualizes or articulates in a particular configuration the pattern which is common to the web in general.

This is a deeply important point since it not only undermines the private language pretensions of the subjectivist paradigm but also the basic problem underlying both the subjectivist and the objectivist approaches to good understanding. Different as they are they both emerge as movements within the same post-enlightenment western cultural tradition, as what Robert Bellah and his colleagues call 'utilitarian-' and 'expressive individualism' (1985) and as such they both carry what Derrida (1991) termed the 'metaphysics of presence.' Such metaphysics assumes the centrality of essences and substantives or what Derrida calls 'presences,' and as such necessarily implies a centripetal interpretive logic, an approach that Paul Ricoeur (2004) describes as the 'hermeneutics of suspicion.' This is the hermeneutics criticized by Wittgenstein, Geertz, and Foucault above, and which attempts to reach behind the veil of empirical matter to find the hidden doctrine as it may exist in its pristine form unclouded by the values, norms, meanings, and diverse practices through which it manifests, and by which it may be understood in more vernacular circles.

The objectivism of essential bio-psychological structures and functions, and the subjectivism of an essential psychic plenitude of selfhood, both stand on the idea of an inner essence or presence and it is this substantive inner essence ('thing' of 'spirit') that is understood to cause and hence explain human behaviour. But as we have seen the problem is that it is precisely the semiotic weave and web otherwise called culture which this approach to look past that in actual fact constitutes the empirical matter of human life, and indeed self-harm. It is talked about, represented, and practiced, and this is all that is actually available to us, everything else is the supposition of some hidden realm of substance imagined behind the facts. So for the moment what can actually be said about self-harm with empirical justification must be restricted to *patterns of content only* rather than delusions of form and substance and as such we must take the content of our experience as Merleau-Ponty pointed out 'as the source which stares us in the face and as the ultimate court of appeal in our knowledge of

these things' (1962: 23). And as he promises, in doing this 'the sociologist returns to the living source of his knowledge' (1964: 110).

The Hermeneutics of Context

> [A] socially accepted system of ideas is imminent in every overt process of human social action, a system of ideas which in quite a literal sense informs it – that is, provides the organizational information . . . under whose guidance it is able . . . to develop a distinctive shape and define a consistent direction – Clifford Geertz (1965: 203)

> Your arms full, and your hair wet, I could not
> Speak, and my eyes failed, I was neither,
> Living nor dead, and I knew nothing,
> Looking into the heart of light, the silence.
> *Öd' und leer das Meer* - T.S. Eliot 'The Waste Land' (lines 38-42)

Perhaps then following Wittgenstein, Derrida, and Ricoeur it may be necessary to throw the substantivist subject, the metaphysics of presence, and indeed the whole hermeneutics of suspicion into question. But what does this mean for cultivating the kind of good understanding we need in order to interpret strange verses, and what kind of understanding is this when the very substantivist idea of a 'hidden doctrine' no longer seems to make sense? If one of Edwards' heroes, Dante, can describe our initial hermeneutic challenge and deliver us into such questions then perhaps another, Eliot, can point the way to a solution. Indeed Eliot's central work 'The Waste Land,' like self-harm, has been subject to any number of interpretations that follow a hermeneutics of suspicion and attempt to divine within its strangely fractured and fragmented lines and voices some unifying meaning or hidden doctrine. Famously all such attempts have been haunted and disturbed by a troubling remainder, an excess of meanings and references that simply do not fit the hidden doctrine being proposed. But as Cioran notes '[o]ur inmost aridity results from our allegiance to the rule of the *definite*, from our plea in bar of imprecision, that innate chaos which by renewing our deliriums keeps us from sterility' (1976: 222) and indeed such might be a key to interpreting Eliot's poem, for its own esoteric imprecision deals with precisely the lack of this renewing force in modernity, and the fall of the modern world into moral and spiritual sterility.

Edwards' fascination with 'The Waste Land' seems to be based in part on its articulating similar attitudes to those he expressed through his self-harm, sentiments as Jovanovic notes, of 'personal hopelessness', 'the wretchedness of modern society', and its 'loss of order and faith.' Indeed we find in both the poem and Edwards' self-harm the idea that such strange verses emerge as a response to the failure of more conventional modes of communication, and that only strange or deviant verse can carry such expressive power and be '4REAL.' As such 'The Waste Land' critically engages with the modern rule of the definite backed by its substantivist culture and metaphysics of presence, and rather than follow this rule to provide a logically structured text circulating a certain and central concept, instead produces a text made up of other texts. Ensembles of references, citations, and fragments of literature circulate together to make up the ensemble of the poem itself and in so doing evokes and draws in the entire historical and literary culture that pervades the poem and Eliot's own life. Indeed these citations are the '*fragments*' that shore up the '*ruins*' of a life he could not quite bare to live, trapped in a world that he could not quite understand. *In other words, if there is a hidden doctrine within* Eliot's text then it is not to be found in the centripetal push inward to an indwelling presence, but rather in the renewing force of giving up such core and hidden doctrines, and a *centrifugal* push outward instead; into the tradition, into the intertextual weave and web, and into the multiple contexts in which Eliot's life, vision, and poem make their meaning and take their place. Indeed 'The Waste Land' positively resists the centripetal readings which characterize a hermeneutics of suspicion and forces us into just such a centrifugal hermeneutics of context. My argument here of course is that another strange verse of the modern and late-modern western world, self-harm, enforces a similar interpretive logic.

Indeed we have already seen that it is difficult to conjure the right kind of good understanding that can penetrate the enigma of Richey Edwards' '4REAL' picture and find within the individual mind or body the core and essential reason why this act and this image could stand as a meaningful artefact of a life. But if we position the picture, the event it depicts, and even the man himself, like 'The Waste Land,' as a central knot in an intertextual web then we are forced not inward toward an assumed causal substantive (subjectivist or objectivist) but rather outward into the very texts which

surround and pervade Edwards' life and actions and through which they may be made to make sense. Such of course is the work of the biographer but as Inglis points out

> inasmuch as the biographical facts are right, one *has* indeed explained something in virtue of describing the biographical events which led up to the action. One has explained something else in describing, for example, larger but influential events outside the immediate biographical purview although one has not necessarily explained more. The more one describes, however, and the fuller and more relevant one's descriptions, the more complete one's explanation. This is . . . 'thick description,' and biography is a working synonym for it (2000: 109, his emphasis)

Perhaps then in describing more of Richey Edwards and his life-world we would want to nest the '4REAL' incident in the prose and poetry that he wrote, as well as transcripts of interviews that he gave, but also in 'The Waste Land' itself as a central text shaping and reflecting his character and attitudes, as well as Dante's 'Divine Comedy' and other of Edwards' favourite texts; texts that is that he cited and had tattooed on his body. And we could add to this list all the biographies, newspaper and magazine articles, the clinical assessments, reports, and evaluations, and of course all those many statements that have been made about him on the internet. In this way Edwards' life, style, and actions would be put into ever larger sociocultural contexts like Inglis' ever larger biographical events, however like a word looked up in a dictionary that only defers to other words (Derrida, 1991) each of these texts would imply other texts and as such we would consequently be deferred constantly and ever outward, eventually reaching the broad sociocultural processes that connect romanticism with punk rock and modern subjectivity, or for that matter the social conventions and structures that make clinical reports a meaningful, relevant, and perhaps even authoritative text. Eventually by finding 'ensembles which are themselves ensembles' as Geertz puts it (1973: 452) we would be deferred outward toward the total and complex social and cultural *ecology* that helped produce the infamous event of that May evening in 1991 (Hacking, 2002).

Foucault's Patterns

> A symbol has meaning from its relation to other symbols in a pattern. The pattern gives the meaning. – Mary Douglas *Natural Symbols* (1973: 11)

To pursue this contextualizing approach might be to treat Richey Edwards like a late twentieth-century version of Pierre Riviere, the subject of Foucault's celebrated study (1975) of a life surrounded by texts, statements, and organized systems of such statements. But in this thesis I am interested in neither the biography of a rock star or the discourse analysis of the multiple texts that surround him as such, and I have used these merely to make a point about what kind of good understanding is needed to make sense of self-harm. In this thesis my concern is not with placing a person or a picture or an event at the enigmatic centre of my hermeneutic and intertextual description but rather the package of semantics and pragmatics that makes up 'self-harm' itself, and by extension the figure of 'the self-harmer' as a particular kind of person (Hacking, 2002). Following Wittgenstein then we might understand 'self-harm' to be the *use* of the concept, its multiple appearances and applications as it is recognised as such in our culture, as a pattern of meanings and meaningful practices constituted by and through multiple texts; and it is this hermeneutics of context that constitutes 'good understanding' for this thesis.

Ian Hacking's phrase 'social ecology' (2002) is particularly useful here since it conjures the configuration or co-patterning of multiple objects and processes into a single and general context, an ecosystem, that can be approaches as an ecosystem without diminishing the rich diversity and dynamism contained within it. Richey Edwards may have been a crystallization of his culture but he was not an exact miniature of it or a 'cultural dupe' (Bordo, 1997) rather he was a personal speech act of life and action within a cultural language of numerous and complex discourses, and like any example of *parole* he needs to be understood through his surrounding *langue*, like an organism in an ecosystem, and like self-harm in our society and culture. Such an interpretation has of course been philosophically described by Ryle, and ethnographically articulated by Geertz, as 'thick description' but in this thesis, because I am less concerned with contextualising the acts of particular individuals within a specific social scene, but rather am more concerned with contextualising an idiom of practice within a broad sociocultural milieu I will turn less to the anthropological methodology of thick description laid out by Geertz than to another kind of hermeneutics of context; one that Hacking adapts for his ecological metaphor, and one that has already been used

elsewhere to explore and analyse idioms of mental disorder (Hacking, 1995, 2002; Bordo, 2003) – namely Foucault's archaeology (2001, 2002).

Foucault's archaeology is so named because it seeks to match the patterns of meaning that characterise an artefact of life with the surrounding patterns of cultural meaning and social context that pervade and embed this artefact, in the same way that an archaeological artefact is interpreted within the context of the overall site in which it is discovered, or just as an organism may be made sense of in terms of its ecosystem. As such archaeology as Downing describes it 'tends to describe the constellation of the thinkable' (2008: 10) to which we might also add the do-able; which is to say that it helps us make sense of statements, representations, and actions by exploring what makes such things possible as meaningful statements, representations, and actions. Archaeology is a way 'of analysing and coming to understand the conditions of possibility for ideas' (Hacking, 1986), what makes them thinkable and meaningful in our given cultural context, and therefore attempts to map out an implicit pattern of meanings that act as the facilitating background for the more explicit objects of study – like self-harm.

The specific archaeological technique that I use to interpret self-harm is derived from Susan Bordo's own application of Foucault's archaeology which she calls 'axes of continuity' (2003: 142). I arrived at this technique through a hermeneutic mapping of self-harm as a social phenomenon which is described in chapter four, because it emerges out of analytic pressures detailed in chapter four, and because it is chapters five through seven that actually apply this technique, I shall describe it there at the end of chapter four so that process of the major analytic chapters can be understood clearly. For the moment it is enough to make the basic point: that idioms of distress and disorder are as Bordo describes them the 'characteristic expressions of [their] culture', the very 'crystallization of its discourses and contradictions' (2003: 141), and that as such to understand self-harm as a meaningful practice and a symbolic action we must make it make sense by placing it into the cultural and social contexts that allow these meanings to be possible and meaningful. These meanings, their patterns and contexts, are of course to be found in the multiple discourses, texts, representations, and understandings of self-harm that are its empirical presence in our culture. And so I arrive at my research question.

In this thesis I ask: what are the discursive conditions of possibility which allow 'self-harm' to take on the meaning that it has in late-modern culture, and which allow it to exist as a meaningful category of action, and 'the self-harmer' to exist as a meaningful category of person. To help in this exploration I identify the key concepts and systems of meaning used to represent and understand self-harm across the multiple social sites in which discourse about it is produced and analyse these using a hermeneutic approach rooted in cultural sociology and Foucault's archaeological method, especially as it has been interpreted by Susan Bordo in her concept of 'axes of continuity.'

Chapter Three

The Methodology of Making Sense

> Thus the movement of our understanding is constantly from the whole to the part and back to the whole. Our task is to expand the unity of the understood meaning centrifugally – Hans-Georg Gadamer *Truth and Method* (1989: 291)

<u>Introduction</u>

If self-harm is not a discrete, distinct, and substantive 'thing,' with an intrinsic unity and a timeless essence, *or at least if it cannot be empirically approached as such*, then any attempt to interpret and understand it cannot take it to be what Fontana (2002), talking about cultural hermeneutics in general, describes as a single 'monolithic structure' susceptible to a single and homogeneous interpretation. Rather, following Fontana we might think of it instead as 'a series of fragments in continuous flux' (2002: 162); fragments that is of the texts (including practices) and discourses (systems and syntaxes of such text) whose complex arrangement makes up the social ecology which embeds self-harm as a social phenomenon, and provides the very context in which it is possible for self-harm to be a meaningful practice and pattern of life. Such 'fragments' of texts and discourses are of course, as with Eliot's wonderful phrase quoted at the beginning of chapter two, the same fragments that we use to 'shore up' the 'ruins' of our habitual and implicit metaphysics of presence; creating what the anthropologist Allan Young calls a 'harmony of illusions' (1997) and thereby conjuring the essential impression of a monolithic structure, a thing called self-harm that we can approach, study, and search for its hidden doctrine. But instead of following a centripetal hermeneutics which attempts to look past and through such texts and discourses to the 'thing' that is assumed within, here I shall actually look at these texts and discourses themselves. And if no utterly clear or definite object of study meets us from behind these texts then perhaps I can find comfort in Geertz *et al's* insight that 'an accurate picture of a vague object does not consist in a clear picture but a vague one' (1979: 15). Wittgenstein also talks about times when 'what is needed is not a clear concept but a blurred one' by which he means one that does not so much define self-harm as evoke its 'aura' (quoted in Inglis, 2000: 47).

But if such insights are comforting then they nonetheless still leave me with a practical problem: where amongst these fragments of texts and discourses which shore up the harmony of illusions which is self-harm should I begin to map out and evoke its aura? The problem is that no sooner have I begun to survey these fragments for a starting

point than I am confronted with the fact that such fragments are already underway in my thinking and understanding, and no pristine or definite starting point is possible. Indeed these fragments make up a part of what Hans-Georg Gadamer (1989) called my 'tradition' which is to say my cultural heritage and available background and resources of meaning. This means that not only am I myself part and parcel of the same cultural tradition as self-harm but that the conversation I talked about in the Introduction has always already been well underway. Indeed the very insight that trying to understand self-harm is like a conversation is a product of the conversation itself. Another example might be drawn from a brief return to chapters one and two of this thesis which can be read as arguments leading up to the idea of a hermeneutics of context in the pursuit of meaning and understanding, but which can also be read as attempts at pursuing precisely such a hermeneutics through a brief discourse analysis of the objectivist and subjectivist discursive tendencies. Even before the research questions were asked I was, in the very act of formulating them, already engaged in answering them and so again the point is that there is no beginning to this conversation, it is always already underway.

The problems associated with this inability to step out of the hermeneutic circle (Gadamer, 1989), which here refers to the way that the understanding we already hold about something is the very basis upon which we define it as an object of curiosity and through which we formulate questions about it, can be illustrated with a brief return to the ever paradigmatic Richey Edwards. It is hard not to examine the texts surrounding him without beginning to see connections that make it feel like you are closing in on the issue of Edwards and self-harm, lifting the veil of strange verses and looking beyond to the hidden doctrine. It is tempting for example to see behind his fascination with 'The Waste Land' the significant figure, as indicated by Eliot's own notes on the poem, of the tragically mutilated Fisher King (Eliot, 2009). This is a mythic figure from the Arthurian myth cycle, a king, who should exemplify power but whose wounded thighs symbolise his inner impotence, a powerlessness that is reflected externally in the wasting away of his lands from which Eliot takes the title of his work. This relationship between a surface stigma connecting an inner impotence on the one hand with the decay and waste of the outer world on the other, made the Fisher King a wonderful device for Eliot who connected the moral and spiritual decay of the

modernist subject with the machine-like living death of urban life, and the blasted battlefields of the First World War. But the same connection can also allow us to see Edwards as an interesting late-twentieth century update to the Fisher King; a sovereign figure (albeit on a stage rather than a throne) who is nonetheless wounded inside, rendered powerless by a psychological or spiritual taint, and unable to review the world around him as anything but corrupt and decayed.

Apparently Eliot was much inspired by J.G. Fraser's *The Golden Bough* (2009 [1890]) and Jessie Weston's *From Ritual to Romance* (2011 [1920]) in which the Fisher King is represented as one amongst many examples of dying and resurrecting vegetation gods, which is to say those gods whose death, sleep, and springtime re-birth play out the seasons of the agricultural cycle. The Fisher King is only exceptional in that like the other dying and resurrecting vegetation gods he has suffered his mutilation but unlike Osiris, Dionysus, or Jesus he has not yet been re-born because some vital element is missing. Instead he is tragically trapped in the state between death and life, waiting for spiritual rescue by whoever would come to him and ask the sacred question; which interestingly enough changed over time from 'Whom does the grail serve?' to the rather more elicitive and even psychotherapeutic 'What is wrong with you?' (Barber, 2004).

The Fisher King is absent from Favazza's *Bodies Under Siege* but J.G. Frazer and the other dying and resurrecting vegetation gods are not. Indeed the symbol of the mutilated god, whether cut to pieces on the banks of the river Nile in the case of Osiris, or crucified on a cross as with the passion of Christ, represents a rich vein of cultural meaning which infuses the visceral with the spiritual through a ritual drama of embodiment, suffering, sacrifice, and re-birth. It is not hard to see in this formulation the basic logic of the *rite de passage* with its asceticism and ritual ordeal (van Gennep, 1961), and certainly such an approach has been applied to interpreting self-harm (Hewitt, 1997). Here then we might see in the symbolic meaning of the mutilated body and the wilful sacrifice of the deity a universal cultural motif appearing throughout the globe and reaching down through the centuries to infuse the physical wound with personal and social significance and thus to make it meaningful. This was the methodological impulse of Frazer and as I argued in chapter one this is also the methodological impulse of Favazza who is the closest thing that self-harm literature

has to a J.G. Fraser, a comparison that I make as respectfully as I do critically, and whose major work is the closest thing this literature has to *The Golden Bough*.

But as suggestive and intellectually pleasing as such connections are, it is important to recognise that these textual fragments circle one another without the necessity of any essential or causal relationship as such, though once they have been connected it can be difficult not to imagine just such essential relations. And this is in part because they represent an application of the 'tradition' to the enigma of the matter in hand. In other words anyone like me who is familiar with the Fisher King, the dying and resurrecting vegetation gods, and the ethnographic literature on the ascetic ordeals of rites of passage, will find these connections persuasive because they are the very means by which someone like me and in this tradition can make sense of something like self-harm. But the risk is in summoning such a mass of empirical fragments into the shape and suggestion of a monolithic structure and forgetting that they are in fact 'fragments in flux.'

Just as it was not enough to say that self-harm must be understood through meaning but rather that such meaning lay in the exploration of context, so too is it not enough to point to the context of a particular tradition but rather I must find a way to negotiate this hermeneutic process; to travel through such fragments as suggested by Edwards, Eliot, Frazer, and Favazza but without the tendency to cut off the flow of such fragments and their connections by assuming that they run toward a final and essential framework of relationships surrounding and indicating a substantive thing within. Rather such fragments and their connections must be kept in play, allowing my understanding to get 'fuller and more relevant' as I quoted Inglis as saying the last chapter since the fuller 'one's descriptions, the more complete one's explanation' (2000: 109). So the connection that appears between Edwards and the Fisher King is not necessarily wrong or useless except in as much as it may be taken to close the process of interpretation down in the apprehension of a final answer or totally satisfying interpretation. In this chapter I want to explore these features and techniques of a hermeneutics of context as well as describe the methods that were used in this research for recruiting participants, collecting data, and dealing with the formidable ethical issues related to researching self-harm.

The Hermeneutic Process

The centrifugal approach to hermeneutics, or the hermeneutics of context, is perhaps most fully developed in the work of the philosopher Hans-Georg Gadamer (1960) whose 'philosophical hermeneutics' has exerted a strong influence on qualitative social research since the 1960s (Bauman, 1978; Bleicher, 1982; Hekman, 1984). It contains at its core the idea that all knowledge production is the outcome of a 'dialogue' or conversation between interpreters and those multiple texts, things or people, which are being interpreted. For Gadamer we approach texts through the interpretive framework of our 'prejudices' (a word he intended in a non-pejorative sense), which is to say those representations and ways of making sense that provide a 'horizon of understanding'; a horizon upon which a particular world appears from the perspective of a particular 'life-world' (Shutz, 1967). If my prejudices had not been so quickly challenged and overwhelmed then perhaps my meeting with Fiona would have been a less productive conversation for us both; perhaps the very 'interview' that I had originally envisaged. But my ways of making sense, my prejudices, couldn't make sense of this woman sat opposite me with red raw skin and cuts lacerating her face. Instead I needed new ideas to act as new prejudices, new frameworks of interpretation that could allow an actual conversation to emerge.

Such conversations proceed on the basis of what is held in common between the two parties. So, for example, returning to the conversation that I described in the Introduction, while it is certainly true that there were obvious differences in the life-worlds that Fiona and I occupied we nonetheless shared the English language and a broadly common social and cultural background, and so it was on the basis of these shared horizons that we were able to begin talking and to begin building a new horizon, a kind of bridge across the differences in our perspectives and worlds. At each failure of understanding, every time one of us said something that puzzled the other, we would fall back into questions and answers and the unmatched ideas would be revised and the new horizon would continue to be built. Gadamer called this the 'fusion of horizons' and considered it to be the very process by which an understanding emerges with each moment of fusion helping the conversation to

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continue to its next moment of fusion. While it is certainly true that I did not leave the conversation with Fiona knowing exactly what it was like to be her, which is to say that I did not experience her personal consciousness, a new horizon of meaning and understanding was forged between us, the unique product of *that* conversation and original to neither one of us alone; and it meant that at least to some extent I did know why Fiona had attacked herself, and I believe that Fiona did know that this was understood.

Of course Fiona and I engaged in a literal conversation that day but hermeneutics is not just a model of interpersonal communication, rather in keeping with the origins of hermeneutics (Bauman, 1978; Bleicher, 1982) it can be taken as the process of trying to come to an understanding of anything at all. All objects of epistemology maybe considered 'texts' for interpretation, and this of course includes a social phenomenon and cultural idiom like self-harm. The day that I talked to Fiona was also the first day that I began talking to self-harm, that I began my conversation with it. It was also the first day, though the first of many, when my psychological language failed to establish or maintain a conversation at the level and depth that I needed. As my prejudices have changed and evolved over the years since then I have progressively swapped psychological ideas for more sociological and anthropological ones, and even then more specifically for those of cultural sociology. It is this cultural sociology which now stands as my readily available horizon of understanding that I have brought to this conversation with self-harm. As for self-harm its horizon consists of that network of meanings and values associated with it and through which it is represented and articulated. This thesis represents the outcome of this conversation between self-harm and myself and as such represents the fusion of horizons that I was able to effect between the living social and cultural presence of self-harm and those ideas, concepts, descriptions, and understandings that I have brought to bear from a basically cultural sociology. Of course this conversation itself represents only one of many between social science and self-harm (Hewitt, 1997; Frost, 2001; Inckle, 2007; Adler and Adler, 2011), and this ensemble of conversations is itself networked into an even larger ensemble of conversations between social science and mental disorder (Horwitz, 2003; Scheff, 2007).

Gadamer defines hermeneutics as the process of 'let[ting] what seems to be far and alienated speak again' (1980: 83). Of course in many ways this may be defined by inter-cultural and historical distance, or what he calls 'distantiation,' but I think it can also be applied to that which is rendered far and alienated through intra-cultural and social distance. Self-harm, as a transgressive and somewhat taboo subject, exemplifies the experience of an estranged and stigmatised self in late-modern life. The 'distance' of self-harm, the fact that it seems *far*, is further exemplified in the reactions of anger and frustration common amongst experts and public. As such I see hermeneutics as taking not just a methodological role but also to some extent a political and even a moral one. It addresses the very question of how we acknowledge prejudices and reach out to the socially estranged, ostracized, and little understood members of our society in such a way that does not seek to breakdown or de-legitimize their own experiences in the face of authorized concepts and categories, but rather seeks some form of understanding, the kind of understanding that can form the basis for an ongoing and negotiated dialogue.

By using Gadamer's hermeneutics I have attempted to overcome a typical positivist/humanist dichotomy (Hekman, 1984) which has been particularly pervasive in self-harm research. Most of this research of course has come from the basically positivistic position of the objectivist perspective which tends to override the subject's own concepts and experiences with the presupposed and unreflexive conceptual frameworks of the researcher. By contrast, that qualitative social research that has been done with self-harm generally makes an error at the other methodological pole; carrying both a humanist privileging of the subject's own concepts and understandings while assuming some kind of direct access to this 'internal' data (see for example Inckle, 2007). In contrast to both, a Gadamerian approach to hermeneutics brings the researcher's *and* the subject's concepts into a dialogue grounded in the intersubjective meanings that facilitate and contextualise this dialogue. As Hekman observes 'Gadamer's approach legitimizes the imposition of the observer's conceptual scheme without denying the constitutive role of the social actor's concepts' (1984: 333).

In this evolving conversation then, sociological knowledge and theory have taken over the psychological and become the very means, methods, and strategies of understanding which have allowed my attempt to map and model self-harm *as an*

empirical pattern of meaning and action within our cultural and social lives. To be sure then this is a hermeneutics which asks a cultural sociological question, and which uses cultural sociology as a horizon of interpretation in order to find Dante's 'good understanding,' however a thoroughly sociological hermeneutics worth the name may need more than this to qualify for the title (Outhwaite, 1975; Bauman, 1978; Hekman, 1984). After all, for Gadamer all knowledge production is hermeneutic, so what we have to consider is how you move from a sociological kind of hermeneutics, to a hermeneutic sociology.

Hermeneutics and Cultural Sociology

Three key supplements allow for the necessary transformation of hermeneutics from a universal epistemology into a suitable methodology for pursuing research in cultural sociology. These are: reflexivity, a structural application of the hermeneutic circle, and the adoption of a critical perspective. Reflexivity is of course a major issue in contemporary research methodology and a particular concern in qualitative approaches as Mauthner and Doucet explain

> Reflexivity means reflecting upon and understanding our own personal, political and intellectual autobiography as researchers and making explicit where we are located in relation to our research respondents. Reflexivity also means acknowledging the crucial role we play in creating, interpreting and theorizing research data (1998: 121)

For me the reflexive journey properly began with my conversation with Fiona and the realization that my psychological approach and paradigms were forcing a shape onto our conversation that Fiona could not make sense of, and which kept me from making sense of her. However as Gadamer makes clear such reflexive work is the very basis of reaching out to make sense, and produce new understandings. However alongside this reflection upon the background of the researcher, and hence their interpretive prejudices, reflexivity also refers in part to the process by which the on-going cultivation of new horizons of understanding also describes a process of self-transformation. By trying to understand an-other, one comes to better understand one's self. Indeed such is also a central claim for the ethnographic encounter (Clifford

and Marcus, 2010) through which one comes to understand not just another culture, but also one's own.

While such self-knowledge is undoubtedly important in and of itself, more important for my argument here is the fact that it also opens the way to examining one's own cognitive and affective reactions within the conversation as a tool for analysis in and of itself. The idea is not dissimilar to psychoanalytic countertransference in which the therapist looks to their own reactions to a client and the client's transference as a means of developing insights into their problems and personality. This process of transformation can be seized upon and used to generate new theory as well as help develop existing approaches. It is this reflexive seizing or taking-up which elevates the hermeneutic countertransference from a necessary part of epistemology to a useful aspect of an active methodology (Michrina and Richards, 1996). Reflexivity also refers to the seizing hold and taking-up of the hermeneutic process not simply as a description of an inescapable epistemology but as a methodological guide to following the process of producing knowledge (Michrina and Richards, 1996). The structures of hermeneutic interpretation may be at work regardless but through reflexivity I can hold them to high standards of analytic veracity and justification, entering more fully into the process and working consciously *with it* rather than just *through it*.

A good example of this latter kind of reflexivity in action, and the second supplement that allows me to grasp hermeneutics as an actual methodology, is what Gadamer (1989) called 'the hermeneutic circle.' This is the very process by which interpretations arise and which describes the way in which our existing prejudices shape our sense of what it is we are trying to interpret and understand whilst this new challenge to our understanding in its turn also helps modify and shape these prejudices, creating new frames of interpretation and broadening our horizons. But the hermeneutic circle also describes the closely related way in which a part of a text is revealed within the light of its whole, while examination of this part in its turn helps modify and shape our sense of the whole. Consequently hermeneutics describes a spiralling circularity to the process of producing knowledge and understanding, one that neatly matches the concepts of *langue* and *parole* and 'structure' and 'articulation' discussed in the preceding chapter. Here then the hermeneutic circle may be put to use in order to relate the empirical matter of social life and experience back to the patterns and

structures of the social world of which they are articulations, while such articulations are in their turn understood to be the very basis upon which such structures emerge, are sustained, and develop over time (Giddens, 1991). As Okrent explains

> Our knowledge claims in regard to the meaning of a whole text or of the meaning structure of some society will be supported by evidence supplied by our knowledge of the meaning of particular sentences or acts. On the other hand, our knowledge claims in regard to the meanings of those individual elements will be supported by and justified in terms of our knowledge of the meaning of the entire structure (1988: 161 quoted in Crotty, 1998)

The third supplement is a critical approach which Bauman (1978) argues is an essential part of any hermeneutic sociology, being not just an interpretation of meaning but also a mapping out of the rules and conventions that shape and regulate such meanings, and the power through which such regulatory structures operate. Gadamer has often been accused of being both methodologically and politically too conservative (Lawn, 2006) and one of the main criticisms of his hermeneutics has been that it homogenises texts, assuming that they can be understood and enclosed within a single and somewhat functionalist 'tradition' (or culture). But this is far too narrow an interpretation of Gadamer (Lawn, 2004), and as Bauman makes clear hermeneutics may be put to work to interpret sociocultural ecologies which are far from harmonious and purely functional systems, but rather reflect complexity and conflict, and which are highly dynamic and basically dialectical systems (Bauman, 1978; Bleicher, 1982, Lawn, 2006).

The discourse of self-harm is in fact both general, which is to say that it describes a general, shared, and emergent cultural pattern and a general sense or 'aura' of self-harm; and at the same time complex; which is to say that it is a matrix of ideas, images, beliefs, and values all of which include and implicate various institutions and social sites that produce discourse about self-harm. This raised the issue of how to map such a complex ecology of discourse. One solution is the differentiation of objectivist and subjectivist discursive tendencies that allow for a general sense of self-harm with the understanding that such general discourse may also code ambiguity and ambivalence, being as it is influenced by different discursive tendencies. Another method that I used was to map out different kinds of social sites that produce representations and understandings of self-harm, and these are listed in the next chapter. Finally I also

used Susan Bordo's (2003) concept of an 'axis of continuity' as a methodological adaptation of Foucault's archaeological approach to mapping discourse. Again I describe this in detail at the end of the next chapter before actually applying the method itself.

Data collection

If self-harm is an idiom that emerges from the confluence and configuration of multiple texts then it stands to reason that an eclectic approach to data collection must be adopted, one that engages with numerous social sites and explores multiple kinds of data both textual and visual. This range of data has included first person accounts given by self-harmers in interviews that I conducted as well as first person accounts that have appeared in other sources ranging from internet sites, other research and theoretical literature, 'true-life stories' in books and magazines, and celebrity autobiographies[6]. In addition I have also looked at a wealth of third person data comprised of everything from the psycho-medical literature, to popular psychology and self-help books, government reports, policy papers, the literature published by mental health charities, newspapers and magazines, and popular representations in songs, films, and television. Through this collection of texts drawn from numerous social sites I have tried to draw out the network of discourses, relations, factors, and forces that come together as an active matrix supporting self-harm as a particular and emergent cultural idiom and social phenomena.

The diversity and volume of the data that I explored collectively represents something of an ethnographic inflection, in particular I adopted the injunction to saturate myself

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[6] An interesting question arises in connection with these other first-person accounts generated outside of the interview process: to what degree can they be trusted? Of course the same question can be applied to interview data as well but social research rests on a tradition of trusting informant's accounts unless specific reasons arise to place this in question. There are some reasons however to question the veracity of these other sources, and this is the 'fadishness' (Adler and Adler, 2011) that has characterised self-harm since the 1990s. Indeed, as I will explore later, it is a repeated suspicion of people that I interviewed that some people make up stories about self-harm in order to make certain kinds of identity claims and elicit sympathy from others. In order to deal with these issues I decided to treat these other first person accounts as cultural artifacts that collectively help make up the text of self-harm in our society, and to treat them as representations of what self-harm has come to mean as a cultural idiom as opposed to worrying about their literal truth.

in the 'life-world' of my subject; to surround myself and explore as much of this available data as possible. Consequently some kind of prioritization and organization of data was required, a kind of cascading structure of attention which selected some data for a basic level of attention, a smaller set for careful examination, and a still smaller set for a very close reading and detailed analysis. Such an analytic cascade was applied to all data sources with the exception of the interview data I collected which was treated in its entirety with the greatest attention. Beyond these interviews the remaining data was organized more or less randomly into these three categories of analysis.

Qualitative methods were selected here partly because they represent access to precisely the gap in knowledge left by the objectivist hegemony I have already described. The kind of rich, nuanced, and complex meanings that I am interested in here are particularly accessible through qualitative methods and the more 'open-ended' approach which they allow; one which is 'more concerned with being attuned to who is being travelled with, so to speak, than with setting out a precise route for all to follow, as in survey research' (Warren, 2002: 86). Indeed much has been written about the suitability of such an open-ended and qualitative approach in dealing with vulnerable people (see for example Wiebel, 1990; Lee, 1993; Dunne, 2000; Melrose, 2002), as Hesse-Biber and Leavy put it: such methods strain to hear the voices of the 'silenced, othered, marginalized' by asking 'not only "what is it?" but, more importantly, "explain it to me – how, why, what's the process, what's the significance?" (2005: 28). With language that resonates strongly with my research aims Bond and Corner note that qualitative methods allow researchers 'to examine socially meaningful behaviour, albeit deviant behaviour, holistically, in context and with due attention to the dynamic aspects of social events and interactions' (2001: 113).

Of course while found data is relatively easily collected and needs little further attention prior to analysis; the need to generate original first person accounts of self-harm required a highly sensitive and flexible approach to data collection. For this I turned to non-structured 'in-depth' or 'intensive' interviews (Hesse-Biber and Leavy, 2005; Schoenberg et al, 2005) as an approach capable of eliciting complex, nuanced and rich data from participants through just such a flexible, and therefore responsive and sensitive, method. Such an approach allows for the direction and pace of the

interview, the exact and specific areas covered, and the details elicited to be set through an on-going negotiation between the participant and myself. The interview then becomes more of a collaboration in meaning-making and a conversation in the hermeneutic sense; an approach which can help explore the multiple meanings, ambiguities, and conflicting feelings and interpretations that can arise from dealing with such deep and powerful issues as typically characterise research on sensitive topics (Liamputtong, 2007: 97); as well as a means of partly sharing control over the data collection process. Indeed this kind of in-depth interviewing has been widely deployed in research with vulnerable people (Bergen, 1996; Nicholson and Burr, 2003; Honey and Halse, 2006).

From the beginning it was obvious that my approach to offering and conducting interviews would have to be adapted to the needs of recruiting and dealing with a hard-to-reach and vulnerable group. Several previous qualitative studies of self-harm had been limited by low sample sizes (Inckle, 2007; Chandler *et al*, 2011) and consequently I was prepared at the outset to struggle in finding participants. I hoped to partly militate against this by finding interview methods that foregrounded issues of power, control, and safety and to this end I offered several different forms by which interviews could be carried out: from the traditional face-to-face interview in person, through telephone interviewing, to interviews conducted by email and letter. I hoped that this range of options would reflect not only my desire to allow participants to exercise more control over the process of data collection, but would also allow people who might not feel comfortable with a face-to-face interview to still participate through a method that they may feel more at ease with.

Interviews were conducted in person for eleven participants and were carried out either in people's homes, in interview rooms supplied by Newcastle University, or else in cafes and public houses where participants had asked to meet there. In this latter case the choice of venue was a matter I discussed with participants well beforehand, stressing that I wanted them to feel safe and comfortable. Where such public places were selected I ensured that we nonetheless had adequate privacy and were not overheard. Most of these interviews were single events lasting around an hour with a small amount of extra time at the end for a de-brief (see below) however two

participants asked for follow up interviews and one of these had a third interview that was conducted by telephone.

The option to be interviewed by telephone, email, or letter meant that people could base themselves in a safe and comfortable environment, and be able to feel secure in the knowledge that they could always just put the phone down, turn off the computer, or put the letter aside and thereby immediately terminate the interview if they were beginning to feel overwhelmed. I felt this gave a level of privacy, power, and control that some might feel was lacking from traditional face-to-face interviews. Indeed nine participants opted for a telephone interview and twelve for email interviews with many stating that they would not have contributed to the research if these options had not been available. By using these alternatives I was again following existing approaches developed especially for gathering data from hard-to-reach and vulnerable groups (Illingworth, 2001; Hessler *et al,* 2003; Greenfield *et al,*2000; Tourangeau and Smith, 1996; Pridemore *et al*, 2005; Langford, 2000). As such I was not treading new territory in terms of sociological methods, however these were new methods to me (my previous experience of interviewing self-harmers having been entirely conducted in person and in prisons) and putting them to good and effective use in this research certainly represented an interesting learning curve.

Telephone interviews proceeded much as those I was more accustomed to but without the non-verbal communication that both oils the gears of the interview process and forms an important source of data in and of itself. This limitation meant that these interviews took on a slightly different feel to face-to-face encounters but this option, for all its limitations, did allow interviews to be conducted that would otherwise not have happened, and did allow for the participation of people who would otherwise not have contributed. With email interviews however, it is not only the non-verbal communication that is lost but also the verbal 'minimal prompts' (Egan, 2001) that often help a conversation along and can form a fairly non-leading way of inviting someone to carry on talking about a topic or expand on it, as well as a means of re-assuring someone that they are being listened to with interest. In the face of this loss a particular problem emerged with email interviewing in that prompts for information had to take the form of specific questions and therefore an extra vigilance was required not to lead the interviewee. Using very open questions was one part of a

solution to this, however many participants struggled with questions which were too open and seemed to want some further indication from me of what I would find interesting or useful. Often a process of asking questions over the first few emails would allow for each interview to develop its own rules and a sense of what could be asked, and what was the most effective way of asking it.

Indeed I found that as a basic rule responsiveness was the key to successful email interviewing. For example in working out how long should be left between receiving an email and responding to it I noticed that many participants tried to imitate the same gap that I left between messages whilst at the same time perhaps leaving hints or clues as to what they would personally prefer. Responding to such hints and altering the amount of time between messages accordingly was always met with a positive response, but individual preferences varied tremendously from three or four days to three or four weeks between each message. Consequently email interviews could last between two and six months and be comprised of anything between seven and fifteen different exchanges.

I had originally hoped to supplement interviews with diary data covering a period of perhaps one to three weeks and recording episodes of self-harm or occasions when they were tempted to self-harm, the thoughts and feelings surrounding these episodes, and any other thoughts, feelings, and events that they wished to note (Jacelon and Imperio, 2005). Again this is a method that has been used extensively in working with vulnerable participants (see Marino *et al,* 1999; Punch, 2002; Miller and Timson, 2004; Alaszewski, 2006) and as such showed some promise as a means of gathering rich data from such a population, however in the event I found most people were unwilling to explore this option, feeling that such a method would be a step too far into their privacy and would represent too much of a relinquishing of control over this private realm, preferring instead to be interviewed.

That said however diary data of a kind was collected but it came about in a more organic way. This happened mainly through email interviews where in the conversational structure of the message specific questions would be preceded by short enquiries about life and wellbeing. As the electronic conversation developed over a period of months and I got to know participants better and better these preliminary

comments became diary entries of a sort, some of which discussed recent and present acts of self-harm. In addition to this Dawn sent me extracts from her personal diary covering those years in which her self-harm had been most prolific, while Allie sent me diary extracts from her life worked partially up into draft chapters and notes for a planned autobiography. Other data supplied included copies of suicide letters that Susan had written for her mother and boyfriend, and an account sent by letter by someone who didn't want to be interviewed beyond what she had written. Throughout the thesis the source of any data quoted is provided in brackets following the quote.

Sampling and recruitment

The privacy and, at times intense, secrecy that surrounds self-harm, along with its associated social stigma, means that self-harmers are an example of a 'hard-to-reach' or 'hidden' population (see Melrose, 2002), one 'whose membership is not readily distinguished or enumerated based on existing knowledge and/or sampling capabilities' (Wiebal, 1990: 6). For Liamputtong such people are 'the silent, the hidden, the deviant, the tabooed, the marginalised and hence 'invisible' populations in society' (2007: 4). Clearly then recruitment for this research was always going to be a challenge. In addition to this much previous research had focused particularly on one demographic, namely white females under 30. While some have taken this to be an accurate reflection of the actual general population of self-harmers (Miller, 2005), others have argued that it is a culturally prevalent stereotype which works to frame self-harm as a problem for this particular demographic, coding self-harm as both a female problem and a youth problem, and as such making it more difficult for others who do not fit this demographic to come forward and participate in research. Whatever the actual population, it was clear that self-harmers have proven to be a difficult to reach group in the past and as I began this research there was no reason to believe that this situation would have changed. As such my sampling and recruitment strategy had to be flexible and diverse, foregrounding issues of sensitivity and responsivity alongside participant control and power.

I used no exclusion criteria for adult participants although both recruitment materials and the interview process itself were only available in English and this represented an unfortunate limitation in sampling. However much work is currently being done to explore and assess self-harm amongst the female British-Asian population through The Bristol Crisis Service for Women for example and I believe that my research can help make a genuine contribution to building an overall picture of self-harm when placed in conjunction with this other work and similar projects. Perhaps it is only in such a patch-work fashion that an accurate picture of a hidden phenomenon like self-harm can be built. In addition to this I had decided that I would not interview adolescents and children. My concern here, as a relatively inexperienced social researcher, was with the ethical complexities and ramifications of questioning vulnerable children about such a sensitive subject. Consequently I decided that in lieu of working with younger people I would instead question participants about their experiences as children and how their self-harm may have begun and developed before the age of eighteen

I began recruitment through advertisements in *The Big Issue* magazine and some local newspapers. In addition to this I was allowed to leave leaflets and posters at mental health contact and support centres and in particular several offices of the mental health charity Mind. I also dedicated a student blog I wrote to advertising the research and began a Facebook group page which both advertised the study and posted updates about its progress. I had planned to follow-up this recruitment drive with further advertisements on web sites dedicated to self-harm and mental health issues however in the event this was not necessary as the initial drive elicited a remarkable response. In particular *the Big Issue* advertisement supplied the greatest number of enquiries and actual participants. No payment or rewards were used to entice participants. A breakdown of the interviews is presented in the table below.

Table: Breakdown of Interviews

Number of Interviews	32
Number of Interviews with self harmers	30
Number of Interviews with self-harm workers	6
Number of Interviews in Person	11
Number of Interview by Telephone	9
Number of Interviews by Email	12
Total Number of Participants	29

Ethics

There is a growing literature on researching sensitive topics and dealing with vulnerable participants (see Liamputtong, 2007 for a useful survey), what De Laine has referred to as the 'back regions' of social life; 'private space, where personal activities take place and only 'insiders' participate' (2000: 67). Research into such back regions necessarily foregrounds ethical procedures and strategies as they highlight 'the need to be sensitive to the confidences and intimacies of others. One who intrudes into private space may pose a threat or risk to actors who fear exposure and sanctions' (De Laine, 2000: 67). Clearly self-harm represents just one such 'back region'; made up of a hidden and vulnerable population who are hard-to-reach and whose privacy and wellbeing must be, as far as possible, protected from the intrusions and demands of the research process.

There are several reasons why researching self-harm presents particular ethical challenges and the need for well thought-out strategy. As I've already discussed self-harm is often seen as a means of controlling or attempting to control stress and strong emotions, and as such the research process had to be carefully designed to take into account the connection between a participant's emotional state and their self-harm, since this emotional state would undoubtedly be affected by being interviewed and talking about sensitive and difficult topics. In addition to this people may have adopted self-harm as a means of specifically controlling the thoughts and feelings that emanate from another aspect of their lives; perhaps a personal biography of violence and sexual

abuse, or perhaps experiences of discrimination and estrangement. As such they may be said to be doubly vulnerable (Liamputtong, 2007) not only vulnerable as self-harmers but also as, for example, gay or lesbian, as survivors of domestic abuse or violent attack, or ethnic discrimination (Babiker and Arnold, 1997; Tantam and Huband, 2009).

There is also of course a strong social connection between self-harm and the social stigma attached to mental health issues and the status of the mental health patient (Scheff, 1999; Adler and Adler, 2011). However this goes beyond concerns of double vulnerability only, and raised the difficult question of whether researching self-harm automatically means researching people who are 'mentally ill.' These are of course very deep waters: what do we mean by 'mental illness'? To what degree does such a label and identity prevent someone from being able to participate fully in the research process, to for example provide meaningful prior and informed consent? What would it mean to exclude such people from the attention of social research on this basis? Some of these issues will be visited in detail later in the thesis however it is important here to consider some of the practical problems associated with these considerations.

At the time this research was conducted there was no officially recognised self-harm syndrome and as such self-harming behaviour alone was not enough to diagnose someone with an institutionally authorized category of mental illness. Prior to its up-coming inclusion in the DSM V it was referred to as a symptom associated with a number of personality disorders however connections between self-harm and these other categories of psychopathology, save depression, remain controversial and largely unsupported statistically (Chandler *et al*, 2011). Indeed much research suggests that the majority of self-harmers are free of psychiatric diagnosis other than depression (Tantam and Huband, 2009; Adler and Adler, 2011); and even in the case of depression there is a much deeper question around exactly what is meant by this term, the degree to which normative feelings of sadness may be meaningfully medicalized as 'depression,' and exactly what may be left, following such medicalization that can't be correlated with it (Horwitz, 2003; Greenburg, 2011).

There can be little doubt that stepping into the world of self-harm means stepping into a world which is fundamentally disturbed and disturbing, and a reflexive and

responsible ethical strategy for such research has to take into account the possibility that some participants may also have diagnoses of such 'mental illness' as mentioned above. However, ultimately there is little in the research literature that suggests that self-harmers as a group are any more affected by psychotic conditions than the rest of the population, and there is no good basis then upon which to characterize them as fundamentally irrational or unable to consider their own general wellbeing, and therefore provide meaningful prior and informed consent. Indeed I would argue that making such claims would work to further stigmatize and estrange what may otherwise be vernacularly described as a group of 'normal' people. Indeed it is worth remembering the discussion from chapter one and the failure of an abstract calculus of pathology and harm to distinguish self-harmers from the 'normative' population.

One issue that has been positively correlated with self-harm however, and that presents particular difficulties is suicide. Indeed as will be made clear in the next chapter there is a clear historical, categorical, and statistical link between self-harm and suicide. However it is important here not to labour under the old view, still persisting as a popular public myth, that self-harm is a 'trial run' at suicide and can therefore be fixed into a range of behaviours which will eventually lead someone to take their own life (Sutton, 2005). In the research, theoretical, and clinical literature that has emerged throughout the last thirty years self-harm has been understood, not as a small or trial suicide, but rather as a coping mechanism; a means of warding off emotional distress including suicidal thoughts and feelings (Favazza, 1996; Tantam and Huband, 2009). Indeed many people who self-harm display no suicidal ideation and deny that they want to, or think it likely that they will want to, kill themselves (Babiker and Arnold, 1997; Adler and Adler, 2011). To study self-harm then is not necessarily to study the suicidal. That said there is a clear correlation between suicide and various aspects of someone's life preceding this event; depression is an obvious example, self-harm is another. Both self-harm and suicide are the results of a constellation of powerful thoughts and feelings, however while the former signifies the desire to live on despite such feelings, the latter represents some kind of surrender to them. As such research of this kind must be prepared to talk about suicide and deal with suicidal thoughts and feelings.

There was a clear necessity from the beginning then, to think long and hard about the ethical issues at stake and the construction of an ethical strategy that could cope with such complexities. In particular such research was going to require a particular focus on issues of privacy and confidentiality (Kong *et al,* 2002), harm reduction and protection from the research process and its consequences (Dickson-Swift, 2005; Lee, 1993), participant agency, empowerment, and the capacity to give real prior and informed consent (Moore and Miller, 1999), and sensitivity to the potential for emotional distress and social stigma (Melrose, 2002; Nyamathi, 1998; Wellings *et al*, 2000; Sin, 2005). In looking for responses to these issues I surveyed much of the new work being done to construct specialist ethical strategies for working with hard-to-reach and vulnerable groups however the overall result of this survey was to re-affirm a basic faith in the foundational ethical procedures and strategies that have been informing sociological research for some time now. Indeed many of the specialist strategies adopted are in effect little more than fairly minor adaptations, or more reflexive deployments, of existing standard ethical procedures such as informed consent and confidentiality.

A case in point is the 'ethics-as-process' strategy (Ramcharan and Cutliffe, 2001; see also Parnis *et al,* 2005) which sounds on first contact like quite an innovative approach, however a good deal of what it recommends is simply a re-stating in more reflexive (and at times therapeutic) language of standard ethical procedures. For example informed consent is seen as not only prior but ongoing as ethical concerns emerge throughout the life of the research. Participants are therefore reminded of their capacity to withdraw or re-negotiate consent at any point. While I think that talking such issues through and raising awareness of them in the context of research with vulnerable people is important I have struggled to see what this practically adds to existing procedures which already stress the participant's capacity to withdraw from the research process. As such I tended to cherry pick helpful hints and techniques from within this literature rather than adopting sweeping 'new' and 'innovative' approaches which might be presented as whole package solutions to ethical concerns but which in the end I found failed to match such promises to any real substance. Using these techniques I brought ethical considerations into each and every level and layer of the research design; from the political position of my research aims and my desire to bring

self-harmer's own voices more fully into research, through the flexibility and sensitivity of the sampling procedures, to the more collaborative and participant-active methods of data collection, and a concern within these to stress the control, power, and safety that participants would have during this process.

The Principle tools of an ethical approach

Following on from these concerns then I want to close this chapter by talking about how the standard and basic ethical procedures of social research, tried and tested in the field for many years, were adapted to fit my specific research needs, and used to address the specific issues involved in studying self-harm. Of course prior and informed consent was sought from all participants and its being granted was a necessary precondition of any research contact. A participant information sheet was presented to the participant (in person, by e-mail, or post depending on what the individual felt most comfortable with) at least twenty-four hours prior to an interview so that time was allowed for due consideration and so that any questions that they may have had could be dealt with. Participants were subsequently given a consent form with a set of statements that each required an individual tick or initials, and the form itself had to be signed and dated.

As a matter of creating a safe research environment and experience, and in emphasising the freedom and control that rests in the participant's hands I was careful to underline with participants issues of confidentiality, anonymity, and control over the interview process. The identity of participants has been protected and their data anonymised[7] with any identifying details about their lives removed. Participants were informed and kept aware that they may withdraw from the research at any time, stopping interviews without giving a reason, and withdrawing their contribution even after the interview is completed.

During the interviews themselves every effort was made to make participants feel safe and protected. They were thoroughly briefed through the consent procedure on their right to stop, break from, or re-schedule the interview for any reason and without

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[7] The exception to this was Allie who requested that her actual name be used.

question. I reminded them of this prior to the interview in a short standard brief where I also raised the issue that the topics we would be discussing may well evoke some powerful emotions. I emphasized that the participant had ultimate control of the interview and that we would move entirely at their pace. If the participant became upset or distressed during the interview but wished to continue then I made a judgement about whether or not to stop the interview at least for the moment in order to protect the participant. In the event a momentary break was required on two occasions but in none of the interviews did a participant become so upset that either they or I felt it best to stop entirely and continue on another day.

A de-brief was conducted at the end of each interview. This de-brief was designed to bring the participant out of their reflections and away from any overpowering emotions that may have been experienced through this. One way of doing this was to ask the participant how they felt about the interview and their participation in the research. The purpose of the de-brief was to quickly and gently check the emotional and mental state of the participant at the end of the interview process and explore any coping mechanisms and support networks that might help them if the interview had proven to be particularly difficult. I kept with me for each interview a sheet of contact details that I could leave if needed for advice and support agencies that work with the various issues that typically arise, along with the standard advice and information booklet on self-harm published by Mind (Sharman and Harrison, 1994). In preparing telephone interviews I spoke to participant's beforehand to make sure that they had friends on hand who could be with them during and after the interview in case they needed care and support.

Such a de-brief needed, by necessity, to be flexible and responsive to the particular needs and experiences and for this reason a written de-brief was not used. Part of the de-brief process did include returning to the informed consent form and ticking a box which asks if the participant was satisfied with the interview process and had all of their questions answered. It should also be noted that this provision in addition to my keeping my sound recording equipment running for the entirety of my encounter with the participant if I was to be left alone with them (for example in their house) also constituted part of the procedures used for maintaining my own safety and having a record of the participants' satisfaction and basic wellbeing at the end of this

encounter. Between one and two weeks after the interview I again contacted each participant, with their permission, in order to check on them and allow for a delayed de-brief in case of issues or problems that may have arisen in the days and weeks following the interview. In each and every case participants stated that they were happy with the way that the interview had gone and were happy that they had taken part. Indeed several people commented that they had found the experience useful, providing as it had an opportunity to think and talk about their self-harm outside of a clinical or therapeutic setting.

Of course in addition to these strategies I was also a fully trained and qualified ACCT assessor and I still have my heavily annotated and highlighted photocopied booklets to fall back on. But while I may make a point by reaching back to the limitations of this prison protocol the fact is that that day with Fiona initiated a conversation that was continued with many self-harmers in both female and male prisons in the two years that followed with my working as an ACCT assessor. Sitting opposite Fiona I might have felt ill equipped despite my training, booklets, and textbooks but in the hours and hours of interviews that followed I built up a good deal of experience in addressing those issue typically tied up with interviewing self-harmers and dealing with the thoughts, feelings, and narratives associated with this topic. I would routinely interview several self-harming and suicidal prisoners a day, having to deal with issues ranging from disclosure of child sexual abuse and adult sexual violence, through depression, to severe mental health issues, and complex feelings of guilt and shame, and in addition to eliciting and dealing with this information I would also have to make risk assessments. I consider this mass of conversational experience as an effective and important training for this current research, much more so than the official ACCT training and procedures. Such experience may be difficult to quantify but it speaks to a basic fact of social research, that it is to some degree a craft (Sennett, 2002) and requires skill and sensitivity. For me, as I have argued throughout this chapter, this is a craft of conversation; of working with people to build a better understanding of them, their lives, and the idioms and shapes that those lives take on.

Finally it might be noted that the prevalence of representations of self-harm on the internet provided an interesting set of ethical issues in and of itself since much of this online content falls somewhere between published sources and participant interviews.

The ethics of social research through the internet are still being developed and ongoing changes in technology require an ongoing responsiveness form researchers. However after surveying several existing approaches to using online content (Corell, 1995; King, 1996; Mann and Stewart, 2000; Waskull, 2003; Adler and Adler, 2008) I arrived at a fairly clear definition of that content that I felt could be used without further ethical complications. As such in this study though I do make reference to online content all such content is publicly available and requires no passwords or entry to private forums or discussion boards where research would require the prior and informed consent of those people leaving content there.

Chapter Four

Mapping the Social World of Self-harm

Introduction

What we might recognisably call self-harm first emerges into the historical record in 1938 with Karl Menninger's bestselling book *Man Against Himself*. It's true that in 1901 Gould and Pyle's second volume of *Anomalies and Curiosities of Medicine* (2003) had made several suggestive mentions of 'self-mutilation' but this cannot easily stand as historical evidence either for the *idea* or the *practice* of self-harm prior to the twentieth century. For one thing Gould and Pyle use the term 'self-mutilation' in a very general and loose fashion to describe any kind of incident in which someone had caused damage to themselves irrespective of the pattern of motivation or meaning that accompanied the act. As such we here find everything from Chinese footbinding, to scams that involve injuring or pretending to injure oneself, acts of suicide, and even accidents as when they note an 1851 case in which

> 30 pins were removed from the limbs of a servant girl. It was said that while hanging clothes, with her mouth full of pins, she was slapped on the shoulder, causing her to start and swallow the pins (2003: 735)

As much as such a description seems not to bear directly on self-harm it does however tie in with a more general observation that they make regarding '[a] peculiar type of self-mutilation [which] is the habit sometimes seen in hysteric persons of piercing their flesh with numerous needles or pins' (ibid). Lingering in the deliberate connection of these cases there does seem to be some suggestion in the text that the servant girl's mishap may have had a hysterical dimension. Perhaps these 'needle-girls' could stand as early examples of contemporary self-harm then and indeed this is how Favazza has understood them (1996), but there is no suggestion here that the same pattern of meanings and practices which are associated with contemporary self-harm could also be applied to these 'hysteric persons,' and Gould and Pyle's generally cavalier attitude to classifying types of anomalies together (for example several anomalies that involve needles but not self-mutilation follow the needle-girls) offers little basis for confidence. So though it may be tempting to find in their brief sketch a proto-feminist resistance against domestic labour and gender oppression such speculations must fall

on the general lack of information, and remain the retrospective projection of a contemporary pattern of meaning onto a historical collection of facts that may not fit this pattern at all.

Of course the more general category evoked here, that of hysteria, remains tantalizingly suggestive, if for no other reason than its inherent flexibility means that it can fit more-or-less any pattern one cares to look for within it. The figure of the hysteric certainly haunts the general discourse of self-harm; a fact which will become apparent throughout this thesis as hysteria emerges and re-emerges over and over again, not necessarily with any direct or definite significance but more as a general background of connected ideas and associations. It is almost tempting to say that if self-harm has a sibling resemblance to other contemporary idioms of distress like anorexia (Hewitt, 1997; Frost, 2001) then it seems to have a parental one with hysteria. Indeed its removal from the psychiatric textbooks and nosological manuals in the later twentieth century left a diagnostic slack that has been somewhat taken up by precisely those illness categories - borderline personality disorder, dissociative identity disorder, and histrionic personality disorder (Bollas, 1999) – that until 2013 had afforded self-harm its only foothold in official systems of diagnosis (Favazza, 1996). At least one book, Merskey's *The Analysis of Hysteria* (1979) appeared late enough to recognise self-harm but early enough to still deal with hysteria and categorised the former as being significantly related to the later. But by and large the connections are more suggestive than definite and terminate in the vagaries of a general cultural logic of conversion or somatisation and the idea that hysteric persons and self-harmers both deal with emotional distress through a conversion into physical stress.

The primary significance of hysteria for self-harm however is perhaps less clinical and more cultural since the classic hysteric, the hysteric that is of Jean-Martin Charcot's Salpetriere psychiatric hospital in Paris and Freud and Breuer's *Studies in Hysteria* (2004 [1895]), though she may have been exorcised from the textbooks nonetheless continues to haunt the cultural imagination (Showalter, 1997). She, and though men were certainly hysterics (Mitchell, 2001) the figure of the hysteric is most certainly a woman (see chapter eight), is still with us in literature and film, feminism, and folk psychology. She represents the core logic of conversion, the idea that conflicts which are otherwise psychologically and socially inexpressible may yet find expression

through a powerfully symbolic symptom, and as such she haunts not only the self-harmer but also the anorexic and any other idiom of distress whose pattern seems to be a crystallization of its culture, and its discourses and conflicts as Bordo puts it. But beyond this haunting presence the fact is that as yet there is little or no evidence of what we would call 'self-harm' prior to Menninger's clinical descriptions. Though it seems certain that the origins of contemporary self-harm lie in whatever practices Menninger was picking up on, it is simply a mystery as to how long these practices had been developing prior to this, and from what. Perhaps they did mutate out of hysterical forms of self-mutilation suggestive of the 'needle girls,' it would seem perfectly reasonable, but as Micale warns us

> Once a disease concept enters the domain of public discussion, it effectively becomes impossible to chart its lines of cultural origin, influence and evolution with any accuracy. Rather, visual, dramatic, and medical theories and images become inextricably caught up with one another. Eventually, this criss-cross of ideas, information and associations forms a single sociocultural milieu from which all authors – professional and popular, scientific and literary – may draw (1995: 238)

The very process by which the contemporary idea of self-harm has been constructed then, and in particular the way that it 'came of age' in the 1990s, may have effectively erased the complex and dynamic social processes and cultural transformations that cultivated it, nurtured it, and brought it to age in the first place. However though its history and origins may be lost to us its ongoing position as a meaningful and significant symbol in our lives is a consequence of those social processes and cultural systems that continue to support and maintain it, providing it with its characteristic meanings and vital contexts. In the three chapters that follow this one I shall be analysing these meanings and contexts, exploring the configuration of texts and discourses that make them up and so position self-harm as a significant symbol in late-modern western culture. However prior to this major analytic work it is important to set the empirical stage and describe the social locations in which these meanings and contexts may be found, and as such map the social world of self-harm; the world in which representations and understandings of self-harm are produced, reproduced, and circulated. I begin this task with a brief history of the first locations in which self-harm emerged, so following its construction as a distinct object of psycho-medical knowledge before mapping its movement beyond this clinical context and out into the

wider culture. This is not to contradict Micale and attempt a history of self-harm as such, or even a history of the concept of self-harm, but rather to track its emergence as an object of public interest and awareness, to provide a chronological map of those social locations in which representations of self-harm have emerged and from which they have proliferated into this public awareness, and through these means to help me map the different kinds of social sites which produce representations and understandings of it, and which therefore also contribute to its meanings.

Self-harm Appears

Menninger's 1938 work *Man Against Himself* stands as the first attempt to schematize and classify different kinds of pathological self-mutilation and contains a recognition that such acts may not simply be associated symptoms of suicidal ideation, but may in fact serve a purpose all of their own. For Menninger acts of self-harm represented a basic defence mechanism against suicidal impulses, channelling them away from an act of total body annihilation and re-directing them into a specific body part where they could become the subject of a highly localised act of self-destruction, a kind of symbolic or small suicide. Self-harm then could be seen as a kind of 'self-healing' (1938: 271) or as Menninger explains 'a victory . . . of the life instinct over the death instinct' (1938: 285). This conceptual distinction between life-serving self-mutilation and death-serving self-mutilation marks the birth of the idea of self-harm.

The Wrist Slashers

Despite this strong beginning however Menninger's ideas fell on mostly stony ground and wouldn't really resurface again until the 1970s. There were faint echoes of interest in the 1950s (Hendin, 1950; Schmidt et al, 1954) and in 1964 Stengel attempted to initiate a diagnostic separation between 'suicide' and 'attempted suicide' which described in this latter category behaviours that we would now categorize as 'self-harm,' but such scant interest was soon to be overrun by the mid to late 60s when for the first time something like self-harm became the subject of a 'moral panic' (Cohen, 1972) with reports emerging from some American clinics of a 'wave' or 'epidemic' of

self-mutilation. Though it began with only a few papers detailing a rise amongst psychiatric inpatients of repeated cutting to the wrists (Offer and Barglow, 1960; Graff and Mallin, 1967; Grunebaum and Klerman, 1967; Pao, 1969) the Philadelphia psychiatrists Graff and Mallin felt confident enough to claim that such 'wrist-slashers' had replaced schizophrenics as the new chronic patient of American psychiatric hospitals. Significantly many of these clinicians noted that this behaviour appeared quite distinct from suicide and subsequently began to formulate the idea of a separate 'delicate wrist-cutting syndrome' (Pao, 1969). This syndrome, as they reported it, could typically be found amongst women who were:

> generally young, attractive, intelligent, even talented, and on the surface socially adept . . . Invariably their early lives and family relationships have been unstable . . . In many cases the father has been seductive and unable to set limits. He is intermittently indulgent, often inadequate at his occupation, and frequently alcoholic. The mother is usually cold, punitive, and unconsciously provocative . . . Generally it can be said that these patients slash their wrists when they face the loss of a meaningful person or encounter an impasse in their interpersonal relations (Graff and Mallin, 1967: 528)

It is a description that suggests that perhaps the hysterics hadn't all disappeared during the early twentieth century after all (Bollas, 1999), or perhaps rather that the stereotype of the hysteric was still an active presence in the clinical imagination of psychiatrists (Showalter, 1991). As Frost notes

> This stereotype resonates with all the contradictory demands of what a young woman should be under psychiatry – attractive and available but virginal; intelligent but indiscriminate and lacking social competence, out of control and in need of help from the masculine science of medicine (2000: 26)

Such might be a good thumbnail sketch of the subject position Susanna Kaysen found herself trapped within when, as just such an intelligent and precocious teenager in 1967, she found herself referred to a psychiatric hospital following a fifteen minute assessment with a doctor she had never met before. Her autobiographical account of her experience *Girl, Interrupted* (2000) conjures a troubled young woman into a matrix of changing social forces and reactionary attempts to stabilize such change. Under the influence of such forces and their institutional articulation, the instability of her gender role and sense of identity resulting from this cultural and political milieu becomes channelled through a medical and psychiatric discourse that appears to have found it easier to deal with a patient with borderline personality disorder and a tendency to

harm her own wrists (2000: 152) than a young woman struggling with fast changing personal and social expectations. It is a point that hits home powerfully toward the end of the book when Kaysen's journey to recovery and eventual release seems to be predicated on whether or not she has a boyfriend and the prospects of a respectable marriage (2000: 133, 145).

Graff and Mallin's stereotype, and the very subjectivity that Kaysen found herself interpellated into (Althusser, 1971), holds with surprising consistency within this wave of 1960s 'wrist cutting', or at least amongst its official recorders and analysts, but then again as Kaysen's memoir suggests American psychiatric inpatients in the 1960s could as a general population be characterised along somewhat similar lines. Either way it didn't last much beyond the decade as by 1971 Clendenin and Murphy (and then Weissman in 1975) had looked outside of the psychiatric hospital and found that forty percent of their wrist cutters were men, only a minority of the females were single, and ages varied throughout both genders. But as short lived as the wrist-cutting epidemic had turned out to be it did significantly develop both the idea of a discrete condition of 'self-harm,' and help fix the popular prejudices associated with it within the well rehearsed matrix of traditional hysteria, and in particular its connection to young women.

Toward a distinct Self-harm Syndrome

In 1975 Morgan *et al* proposed a 'deliberate self-harm' syndrome, describing this in 1979 as:

> Non-fatal episodes of self-harm [which] may be referred to collectively as problems of self-poisoning and self-injury . . . We have used the term "non-fatal deliberate self-harm" as . . . a way of describing a form of behaviour which besides including failed suicides embraces many episodes in which actual self-destruction was clearly not intended. The general meaning of self-harm is also well suited to cover the wide variety of methods used, including drug overdosage, self-poisoning with non-ingestants, the use of other chemicals such as gases, as well as laceration and other forms of physical injury. (Morgan, 1979: 88)

The contemporary concept of self-harm is recognisable though still clearly struggling to free itself from the category 'suicide' in order to claim a meaning of its own. One

reason for this may have been the general reluctance of psychiatry to include seemingly fuzzy psychological entities such as 'intention' as demarcation criteria for diagnostic and aetiological categories (Gardner and Gardner, 1975; Jones et al, 1979; Morgan, 1979) during a period when it was becoming increasingly less psychodynamic and more bio-medical in its self-identity and orientation (Shotter, 1997; Luhrmann, 2001; Horwitz, 2003). Ross and McKay (1979) argued that putative classification schemes for self-harm needed to

> avoid the complexities and problems in attempting to examine the mutilator's motives or intentions or to determine the environmental or interpersonal conditions which may have preceded the act (1979: 15).

As such research had continued to work toward a definitional distinction between self-harm and suicide but pursued this on the basis of non-psychological characteristics and variables. As Walsh and Rosen (1988) have noted studies in the 1970s began to develop such distinctions along the lines for example of the degree and type of physical damage done during different acts, which is to say the level of 'lethality' (Clendenin and Murphy, 1971; Weissman, 1975; Morgan, 1979; Ross and McKay, 1979; Farberow, 1980; Worden, 1980), self-harm being at the lower end of the scale; the repetition of acts of self-assault, with 'self-harm' often being characterised as chronic repetition (Bachy-Y-Rita, 1974; Gardner and Gardner, 1975; Morgan, 1979; Ross and McKay, 1979); and the different methods used where 'self-harmers' typically employed a variety of means of self-assault (Ballinger, 1971; Morgan, 1979; Ross and McKay, 1979).

But despite such efforts and technical developments the issue of intent would nonetheless soon become *the* major component in developing a fully independent diagnostic and classificatory entity out of self-harm, as well as forming one of the main points around which self-harm would cease to be the exclusive purview of psychiatrists, opening the way for clinical psychologists and psychotherapists to develop their own approaches. The most significant move in this direction was Simpson's 1976 formulation of self-harm as a kind of 'antisuicide' which is opposed to total self-destruction not only at the level of psychic process and physical action but also in the most fundamental and definitional sense. Acts of self-mutilation are, according to Simpson, the means by which feelings of depersonalization and psychic

distress may be combated through galvanizing the body's sense of being alive and the mind's sense of being unified and focused. As Ross and McKay were to put it in 1979 (despite their professed lack of interest in intentional states), '[t]here is in the action of the self-mutilator seldom an intent to die and often very little risk of dying . . . His [sic] behaviour is actually counter-intentional to suicide rather than suicidal' (1979: 15).

By 1983 Pattison and Kahan developed a differential classification system for self-harm behaviours that could support a call for a 'deliberate self-harm syndrome' which was markedly different from Morgan's original use of this phrase and which, unlike Morgan's version, excluded attempted suicide, drug and alcohol overdoses, and chronic, indirect self-attack. Though these calls were unsuccessful two major works of the 1980s further established and consolidated the position of self-harm in the minds of the clinicians, researchers, and the public at large as a separate and distinct classificatory and diagnostic entity. The first of these was Walsh and Rosen's *Self-Mutilation: Theory, research, and treatment* (1988), which connected self-harm with a number of disturbances and conditions suffered in childhood and adolescence and theorized that in acts of self-harm people have 'acted out all the familiar roles from childhood: the victim, the (dissociated) witness to violence and self-destructiveness, and finally, the aggressive attacker.' (quoted in Strong, 2005: 34). The second major work was of course Favazza's *Bodies Under Siege* (1996 [1987]), which as I have already pointed out currently stands as *the* canonical authority in the world of self-harm literature, with a quote or reference from this book being an almost invariable convention of texts on the subject. Indeed more than any other it is this text that has helped raise public awareness and professional interest in a separate and distinct diagnostic category and form of mental pathology that has come to be known generally as 'self-harm.'

Self-harm goes Public

The slow development of a clinical and technical concept of self-harm, and its emergence as a necessarily psychological as well as psychiatric concept, may have come to something of a head in the mid-1980s with Walsh and Rosen's and Favazza's books, but the concomitant cultivation of a widespread public sense and awareness of

self-harm had only very gradually built up since the dire warnings of an 'epidemic' of wrist-cutters in the 1960s. Before it could fully 'come of age' as Favazza later put it, self-harm would have to develop a more public profile and become a more fully active presence within the cultural imagination. This process arguably began with the displays of self-mutilation typical of punk rock, and of Iggy Pop and Sid Vicious in particular, though as I mentioned in chapter two such displays were interpreted more in terms of youthful transgression and protest than in terms of mental illness. Nonetheless they helped create a subcultural awareness of self-harm as a kind of identity marker that implied a sense of critique and a rejection of mainstream society and its corrupt values, and which therefore performed and supported an outsider identity and a sense of being 'cool' (Becker, 1997; Adler and Adler, 2011) Heather, a forty-one year old academic, notes that during her teenage years in America

> I went through a sort of . . . punk phase and erm decided that it was cool to have . . . things like an 'A' like an anarchy 'A' written in blood on my shirt so I would scratch myself to draw blood . . . it was a sense that it was cool . . . I had a couple of friends who were cutting themselves quite seriously or . . . or burning themselves with cigarettes and they would come to school and they . . . . we would show each other what we'd done . . . and it was a way of . . . um . . . I mean being angst ridden was part of being cool (in person).[8]

Indeed while broadly practiced forms of body-modification such as piercing and tattooing were and continue to be popular amongst the punk subculture Lack (1995: 1) has noted that more hardcore punks constructed an outsider identity through 'harder, more self-destructive, consciousness-obliterating substances like heroin or . . . methamphetamine and by the 'mutilation of the body' with razor blades.'

Emo

Such 'emocore' (emotional-core) punk style 'was notable for its obsession with feelings (as opposed to politics, anger, and smashing stuff up)' (Greenwald, 2003: 2) and as the 80s softened the popularity of the punk movement the 'goth' subculture emerged as the inheritor of this 'emo' style. Goths adopted personal styles that performed an outsider identity through horror-show theatrics with white-painted faces, black

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[8] Interviews for this research were conducted by email, in person, or by telephone and which particular form is indicated in brackets after each quote.

Victorian clothing, and pronounced vampire tropes (Wilkins, 2008) The goth scene, then and now, incorporates a romantic critique of mainstream society and associates its style and ideology with the eighteenth-century Romantic movement's concern with emotional depth and the power of the sublime (Day, 1996; Gergen, 2000). Within the aesthetics of this personal style and its outsider ideology self-harm became a distinct identity marker that demonstrated in overt terms the sense of angst that Heather refers to above, and that someone suffers the world rather than being superficial and simply getting-along (Young *et al*, 2006; Wilkins, 2008; Adler and Adler, 2011). As a marker of authenticity and as an element of personal style self-harm also became a group identity marker with goths recognising one another almost as much by their cuts as by their clothes and in the 90s the connection between goth and self-harm was exemplified in the figures of rock stars Trent Reznor and Marilyn Manson. Reznor, lyricist and lead singer with *Nine Inch Nails* wrote about self-harm in the 1994 Grammy nominated song 'Hurt' which was subsequently covered by Johnny Cash in 2002 to much critical acclaim. The song opens with an evocation of dissociation and the estrangement often associated with self-harm

> I hurt myself today
> To see if I still feel
> I focus on the pain
> The only thing that's real

As with Richey Edwards, and to some extent T.S. Eliot, here again the personal and emotional distress that leads to self-harm is connected with a certain social critique, a sense that life amounts to an 'empire of dirt' as a later lyric puts it, and that all that is real is the realm of the inner, the emotional, and the pain. But while Reznor wrote about self-harm his protégé Marilyn Manson more thoroughly married this sensibility with the traditions of the self-mutilatory punk spectacle. Manson became infamous for the theatrical nature of his live shows which in the early years of his career involved not only Satanic imagery and references to 'black magic' but on-stage self-mutilation. However Manson has also talked, especially in his autobiography *Long Hard Road Out of Hell* (1998), about how these practices extended into his life behind the stage and explaining this in similar terms to Reznor as a means of forcing feelings into a deadened and estranged sense of self and world.

While both punk and goth had at various times been described as 'emo' the term was often used derisively 'to dismiss something that's overly weepy, self-indulgent, or unironic' (Greenwald, 2003: 2). However a new transatlantic youth subculture associated with an emphasis on the importance of inner depth, self-reflection, feelings of angst, and introversion (Simon and Kelly, 2007), emerged during the 1990s and has to some extent rehabilitated and positively claimed the label 'emo.' Tristin Laughter, a music publicist, explains that this emo style 'clearly shows the connection between twentieth-century American punk and nineteenth-century French romanticism' (quoted in Greenwald, 2003: 3). Of course Richey Edwards is a near archetypical representation of both this emo style and its relationship with self-harm which picks up directly from the goth style, however there have been many others, for example in an interview with *SPIN* magazine in 2000 punk-rock singer Courtney Love said

> I have many [self-destructive bones], and I've broken a bunch. I think self-destructiveness is given a really bad rap. I think self-destructiveness can also mean self-reflection, can mean poetic sensibility, it can mean a hedonism and a libertarianism and a lack of judgement

As such, acts of self-harm are often associated with the emo subculture as a recognisable identity marker and an expression of its ethos. Actress Christina Ricci, who self-harmed and experienced anorexia in her teens and who broadly fits into the emo subculture, noted in an interview for *Mademoiselle* magazine in 1999 'sometimes the idea of self-destruction is very romantic.' Of course this combination of youth subculture, celebrities, and teenage romanticism has made it tempting for many to cast the connection between emo and goth styles and their fascination with self-doubt, angst, and self-harm dismissively in terms of youthful melodrama. However even though self-harm does take up a certain place here as a subcultural identity marker and motif it should also be noted that such motifs are by no means incompatible with deeply held beliefs and feelings, and should certainly not be dismissed. As eighteen year old Susan, a proud goth, points out

> Stereotypically, I heard it was only goth and the alternatives that self harmed and committed suicide, but if you ask me, we're the ones brave enough to admit it and talk openly about it without shame (email)

Despite such sentiments it is more common for the connection between teenage attitudes and behaviour on the one hand, and the subcultural matrices of celebrities,

image, peer pressure, and music on the other, to be socially reflected through moral panics about the corruption of youth. Indeed in 1991 *The Daily Mail* asked 'Is Rock Music Destroying Our Children?' next to Edwards' '4REAL' picture (Jovanovic, 2010: 100) and described emo in 2008 as a 'sinister cult'[9] while *The Telegraph* described it in the same year as a 'self-harming youth cult that glamorises death.'[10]

Self-harm Comes of Age

If music and youth subcultures were being blamed then this would seem in part to be a result of the widespread belief that self-harm was a minor phenomenon largely confined to these social sites. However a number of high profile celebrity confessions outside of the music industry gained much broader public attention and none more so than Princess Diana's in a BBC *Panorama* interview in 1995. Apparently feeling trapped by her public role and her dysfunctional marriage to Prince Charles she had resorted to displays of self-injury both in front of him and in private. Her biographer, Andrew Morton (1998), later elaborated on these events reporting that she had thrown herself into a glass cabinet at Kensington Palace, had thrown herself down a flight of stairs, and that she had cut herself using razor blades, a penknife, and a lemon slicer. On one occasion, during an argument with Charles on an airplane, she locked herself in the bathroom and cut deeply into herself, smearing the blood over the walls and seats. During the interview she explained

> When no one listens to you, or you feel no one's listening to you, all sorts of things start to happen. For instance you have so much pain inside yourself that you try and hurt yourself on the outside because you want help . . . So yes, I did inflict upon myself. I didn't like myself, I was ashamed because I couldn't cope with the pressures.[11]

Diana's 'confession' produced a shock wave in the social world of self-harm which worked to suddenly raise public awareness with various clinicians and experts consulted on the issue by radio, newspaper, and television journalists. But there was

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[9] http://www.dailymail.co.uk/femail/article-566481/Why-child-safe-sinister-cult-emo.html downloaded 5/11/2012
[10] http://www.telegraph.co.uk/news/uknews/1935735/Popular-schoolgirl-dies-in-emo-sucide-cult.html downloaded 5/11/2012
[11] http://www.bbc.co.uk/news/special/politics97/diana/panorama.html downloaded 5/11/2012

also a sense, much reflected on since, that Diana's revelations changed people's attitudes toward self-harm (Harrison, 2006); it became something that people could admit to on the logic that if she, a princess, celebrity, and one of the most loved and popular people in the world could self-harm then perhaps a more typical self-harmer could also admit to the practice without feeling that they were irredeemably deviant. Indeed both her confession and her death in 1997 were met with recorded increases in self-harm (Harrison, 2006).[12]

Of course Diana wasn't the only celebrity to confess to self-harm in the 90s but while this trend helped raise its public profile self-harm was also beginning to be recognised as a serious public health issue and not just a melodramatic demand for attention made by a few troubled youngsters. In 1993 Marilee Strong published an article entitled 'A bright red scream' in the *San Francisco Focus* magazine which she later elaborated into a book in 1998 and which represented the first in-depth investigation into self-harm by a journalist. She reported on several self-harmers, people like 'Melanie' for example, who she recorded as saying '[t]he whole idea of cutting yourself is ironic . . . Making yourself hurt to feel better is really a wicked and deranged thing. Yet to me, it's normal.' Another informant is quoted as saying '[i]t started out as decoration and indifference to the world. It was like, See, this is how much pain I have, like battle scars of life.' Strong's follow up book describes self-harm as 'the addiction of the 90s' and of course other journalists soon followed her with several important articles appearing in the mid to late 90s such as 'Scars are stories' by K. Harrison written for *Vogue* magazine in 1995, 'The thin red line' by Jennifer Egan which was a *New York Times* cover story for July 1997, and 'The unkindest cut' by Sylvia Rubin which appeared in the *San Francisco Chronicle* in 1998. Egan's piece, which refers to Princess Diana as one of the key reasons an awareness of self-harm has started to develop, focuses on a teenage girl called 'Jill.' Trapped in peer pressure and distressed by lies which have been told about her at school 'Jill' self-harms for the first time, she is quoted at length

> I was in the bathroom going completely crazy, just bawling my eyes out, and I think my mom was wallpapering -- there was a wallpaper cutter there. I had so

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[12] It is in perhaps a particularly tragic example of the sense of self-harm being haunted by hysteria that we can note that Diana died in the Salpetriere hospital in Paris where Charcot turned hysterics into celebrities.

much anxiety, I couldn't concentrate on anything until I somehow let that out, and not being able to let it out in words, I took the razor and started cutting my leg and I got excited about seeing my blood. It felt good to see the blood coming out, like that was my other pain leaving, too. It felt right and it felt good for me to let it out that way.

Egan explains that

People harm themselves because it makes them feel better; they use physical pain to obfuscate a deeper, more intolerable psychic pain associated with feelings of anger, sadness or abandonment. Often, the injury is used to relieve the pressure or hysteria these emotions can cause, as it did for Jill; it can also jolt people out of states of numbness and emptiness -- it can make them feel alive.

But like Strong Egan uses the language of addiction and warns that while self-harm 'can appear, at first, to be a viable coping mechanism' it is in fact a 'compulsion' and 'what begins as an occasional shallow cut can progress to sliced veins and repeated visits to the emergency room.'

Around this time self-harm also began to appear more frequently as a theme or trope in movies such as *Female Perversions* (1996), *Secretary* (2002), and *Thirteen* (2003), as well as in television programmes such as *Buffy the Vampire Slayer*, and *Six Feet Under*. The emergence of this on-screen trend can be illustrated by the fact that while few films made reference to the practice prior to the late 90s by 2003 the horror sequel *Saw III* could portray the villainous Amanda as pausing at a time of stress mid-way through the film in order to cut her leg with a knife, and though the scene is short and isolated, and there are no other references to self-harm throughout the movie, it is, according to the filmmakers in their commentary on the DVD release, *the* pivotal scene of the film and one that they had to fight to have included in the final cut of the movie. It shows that Amanda is not a cartoon character of absolute evil but rather a twisted and fractured human being whose desperate search for meanings and emotional connection has led her into the strange and horrible role of torturer. It is in fact a remarkably realistic portrayal of a moment of self-harm and apparently the result of some quite extensive research on the part of the actor Shawnee Smith. What is particularly interesting of course is that the filmmakers felt that the depiction of self-harm could carry these meanings for an audience without further explanation or elucidation from them. Indeed self-harm has become so recognisable on screen that in

February 2005 the British Board of Film Classification included self-harm for the first time in its age classification system. Self-harm is now listed as one of the typical movie tropes that raise concern under its 'imitable behaviours' category, explaining that such are 'dangerous behaviours . . . .which children and young people are likely to copy'[13]

The Emergence of a Self-harm 'Community'

If through music, journalism, film, and television self-harm was became a more publically recognisable category of practice in the 1990s, and began to strongly imply a publically recognisable and particular kind of person – generally a young woman embodying psychological conflict, feeling trapped, powerless, and unable to express her true feelings – then it could certainly be said to have 'come of age' culturally and socially *as an illness category.* But as we have seen it stands for much more than this both in the emo/goth subcultures and in fact amongst many self-harmers for whom it represents an identity and even a fundamental way of life (Babiker and Arnold, 1997; Inckle, 2007; Adler and Adler, 2011). Indeed, though it is extremely difficult to draw this out through such a brief sketch of the social emergence of self-harm as a configuration of meanings and practices, it is at least worth considering what Ian Hacking (1995, 2002) calls 'looping' effects, which as he explains denotes

> the way in which classifications affect the people classified, and vice versa. In medicine, the authorities who know, the doctors, tend to dominate the known about, the patient. The known about come to behave in the ways that the knowers expect them to. But not always. Sometimes the known take matters into their own hands. The famous example is gay liberation. The word "homosexual," along with the medical and legal classification, emerged during the last half of the nineteenth century. For a time the classification was owned by medicine, by physicians and psychiatrists. The knowers determined, at least on the surface, what it was to be a homosexual. But then the known took charge (1995: 38).

It is difficult to examine the meaning of self-harm as a subcultural motif for emos and goths without seeing this as a meaningful and transformative appropriation of a medical category, a kind of mental illness, since it is the very status of this category as a medical category that makes it a genuine way, a 'real' way, to express and perform inner struggle and emotional distress. Perhaps then, though here I can do little more

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[13] www.bbfc.co.uk/classification/guidelines/main-issues/ downloaded 4/11/12

than simply suggest this, self-harm has been subject to just such looping effects and just such feedback transformations between the knowers and the known. Indeed Hacking's looping effects may represent an important general process through which biological structures of the body and meaning structures of culture mutually shape one another, interacting through an iterative feedback loop to eventually configure such idioms as 'self-harm' as we have come to know them in their mature pattern.

It is for this reason that the meaning and significance of self-harm cannot simply be described from the perspective of the knowers but rather must include that of the known, though such a process must also be careful to account for the obvious power differences between the knower and the known. Indeed Hacking expresses doubt as to whether one group of the known that he has been particularly concerned with, the known of multiple personality disorder or these days 'dissociative identity disorder,' can in fact 'take charge.' He notes that in 1983 he had commented

> At the risk of giving offence, I suggest that the quickest way to see the contrast between making up multiple personalities and making up homosexuals is to try to imagine multiple-personality bars. Multiples, insofar as they are declared, are under care, and the syndrome, the form of behaviour, is orchestrated by a team of experts. Whatever the medico-forensic experts tried to do with their categories, the homosexual person became autonomous of the labelling, but the multiple is not (quoted in Hacking, 1995: 38)

Self-harm it would seem falls somewhere in between these two, the homosexual and the multiple, since while there are no self-harm bars as such there are meeting groups, informal as well as formal support groups and newsletters, and since the late 1990s there has also been a distinct self-harm 'community' on the internet. Through such communities and movements the self-harmer may yet take charge to some extent, though as with Hacking's prognosis of the multiple it is hard not to feel that this process will be significantly more limited than that of the homosexual. Nonetheless a deeply important and recent chapter in the history of self-harm has been precisely its presence and activity on the internet. Many different sites are available from information sites provided by government agencies, or mental health charities, to discussion groups and bulletin boards involving many self-harmers, and personal blog pages that may or may not include comments from other self-harmers.

The tone of most of these sites is supportive and self-harm is almost ubiquitously represented as a 'coping mechanism' and as what Favazza termed a 'morbid form of self-help' (1996), though on many sites self-harmers own contributions can become tinged with elements of the conspiratorial and such sites are often closely regulated to make sure that hints and tips about harming or keeping one's harm a secret from parents and so on do not get passed through the forums. That said a small but significant proportion of the sites dedicated to self-harm imitates the more famous 'pro-ana' (pro-anorexia) sites in maintaining an almost militant connection to self-harm, proudly declaring its practice as an alternative way of life and refusing to frame it as an illness at all. At the border zone of such sites there are many places on the internet devoted to various practices of body modification and subcultural sado-masochism in which various forms of artistic scarification and self-mutilation are displayed and discussed. Though not strictly 'self-harm' as such the lack of clear and defining boundaries for this practice means that it slides into other similar practices with which it shares a family resemblance rather than simply stopping at their door.

Another aspect of the internet self-harm scene are the multiple home videos and photographs, often in the form of regularly updated video diaries, that are posted on blog pages and on Youtube, recording the self-harm of their uploaders and often in graphic detail. There are also many short video narratives, usually a montage of photographs set to music and interspersed with short captions that tell a person's story of self-harm. Most of these are by people in the teens or early twenties. In addition there are some videos, on Youtube for example, with advice on how to hide self-harm scars with mascara, or lists of useful excuses in case parents see scars. Again while most of these uploaded videos have a therapeutic tone and often talk about a journey to recovery from self-harm some are more 'pro' and unapologetically pursue self-harm as an active lifestyle choice.

Whitlock et al (2007) note that the emergence of an online self-harm community may have effects on how people come to regard and understand their practice, they note that

> individuals immersed in self-injury communities may experience what we think of as 'narrative reinforcement' – the sharing of similar life stories and

interpretations, which can normalize and subconsciously justify the use of self-injury (2007: 1139)

Indeed the importance of the online self-harm community is well illustrated in the words of 'Erica,' a participant in Adler and Adler's (2008) cyber-ethnography of online self-harm, she explains that

> Just the fact that there were other people doing it. Maybe like it really is, there's a group of people. I *am* part of this group, obviously. That helped me connect my identity to a self-abuser. Whereas before I was just, like, one of two people doing it so it wasn't really an identity, it was more of a problem. I didn't really think it was a problem, just a habit. Whereas on the Internet it's a lifestyle almost, the way you are, instead of just a habit (Adler and Adler, 2008: 41).

Here then, on the internet, an illness category can be transformed into an identity and organize a community albeit an online one, and as such though it seems highly unlikely that self-harm identity will ever be like gay identity there nonetheless is a clear sense in which, through such communities, the practice is being framed and re-framed not just by Hacking's 'knowers' but also by the 'known.'

Mapping Self-harm

Mapping self-harm in the way that I have done so far in this chapter, tracking its historical emergence as an object of public awareness and a distinct category of illness, as well as its social distribution as a cultural artefact of popular discourse and the public imagination, makes clear why Foucault described lived social ecologies as a 'witch's brew' (1988); a phrase that nicely evokes the sheer complexity and semiotic dynamism of a cultural pattern of meaning and action like self-harm. As a social phenomenon it cannot simply be located in one social site, and it does not simply belong to one discourse or discursive formation, any more than it belongs to a single demographic, though it may be culturally associated with certain broad categories such as the emo subculture of young women. It appears as a multiple, multifunctional, diverse, and overdetermined pattern which describes a *family* of practices with clear social, historical, cultural, and practical *resemblances* (Wittgenstein, 1958). And indeed it is through these resemblances that the task of describing and mapping the social world of self-harm may open up into a more analytic approach. Perhaps the most

obvious and basic of these resemblances, and evident in what I have covered so far in this chapter, is that the idea and category of 'self-harm,' and of 'the self-harmer,' are irreducibly psychological ideas and belong to a culture of psychology.

A Culture of Psychology

Of course strictly speaking psychology as a distinct discipline of the human sciences, and as a complex of institutions, ideas, technologies, and experts, emerges into the historical process by which 'self-harm' was conceived as an object of public knowledge through the gradual acceptance within psychiatry (still by no means total) that psychological states and motivations are not just associated factors of the practice but defining characteristics of it. From this point on both psychiatry and clinical psychology have stood as expert and authorized discourses on the issue, but exactly which one is seen as having the greater claim to authority depends on what self-harm is taken to be. If it were demonstrated that self-harm was largely determined by serotonin deficiency (Simeon et al, 1992), abnormal psychophysiological response (Haines et al, 1995), or disturbances in glucose metabolism (Westling et al, 2009) then it would fall more under the discursive jurisdiction of psychiatry; while if it were shown to be principally psychological in nature, which is to say causally connected to thoughts and feelings but without a determinative connection to biological structures or genetic vulnerability (Motz, 2009), then it would fall more under the authority of clinical psychology and psychotherapy.

Though of course psychiatry has also traditionally been concerned with the effects of thoughts and feelings, the movement away from dynamic psychiatry to bio-psychiatry in order to strengthen the discipline's claim to be a legitimate branch of bio-medicine (Shorter, 1997; Luhrmann, 2001; Horwtiz, 2003) has meant that, as is clearly demonstrated in the history of the idea of self-harm, it would rather avoid such immeasurables except in as much as they may be theoretically reduced to more definite, material, and measurable factors. It is important to point this out because psychiatry and psychology can be, and in much sociological critique often are (Furedi,

2004), grouped together as aspects of a broader 'psy-complex' representing a broad web of socially authorized discourses, institutions, relationships, practices, and technologies all concerned with the mind and all designated by the prefix 'psy' (Rose, 1985, 1998). However in such work it is easy to lose sight of the fact that this psy-complex *is a complex* and not a homogenous block, or worse yet a conspiracy. It is made up of numerous components incorporating countless people, organizations, rules, and conventions all related to one another through a dynamic of similarity and difference which can be used in line with the prejudices of the interpreter to draw out either the cohesiveness, or the internal diversity and disparity, of the complex as a whole.

However, when I talk about a 'culture of psychology' I am referring to something that is genuinely broader than this psy-complex and its fine-grained though admittedly significant internal differentiation. I am talking about the sense in which the disciplines of psychology and psychiatry, and the broader psy-complex that they are enclosed within, are themselves enclosed historically and socially within an even broader cultural trend that takes the individual human subject as an object of knowledge (Foucault, 2001) and which understands the psyche more than anything else as being essential to and defining of this humanity. Indeed as Moskowitz explains

> We live in an age consumed by worship of the psyche . . . we share a belief that feelings are sacred and salvation lies in self-esteem, that happiness is the ultimate goal and psychological healing the means . . . Our world outlook has been profoundly shaped by this faith. Not only our personal lives but the entire landscape of human events (2001: 1)

In late-modern society then 'psychology' stands for more than just an academic discipline, or even a complex of social institutions, rather it is 'the creed of our times' (Herman 1995: 1) 'telling us how to work, how to live, how to love and even how to play' (Dineen 1999: 3). More than this it tells us who and what we are, and why we do the things we do (Bellah et al, 1985; Rose, 1998, 1999). In our culture psychology plays an almost cosmological role in the anthropological sense of the term (Douglas, 1973); revealing an implicate order, providing necessary explanations, and producing hegemonic narratives which seek to address the central concerns characteristic of our way of life. In the opening chapters of this thesis I have regarded psychology as an alternative theoretical and methodological orientation to my own preferred cultural

sociology and have argued critically against it in order to create a space of enquiry in which this cultural sociology can find a place. However from this point on when I refer to 'psychology' I no longer mean to indicate another tradition of interpretation available to me and another way in which questions about self-harm or the condition of the self-harmer may be asked or answered. Rather I mean to imply this other more cosmological role and dimension of the psychological; which is to say psychology as *culture* - as a powerful and largely naturalized system of meanings and values engaged in processes of what Nelson Goodman (1978) called 'worldmaking'.

Indeed in late-modern culture psychology represents a fundamental thread in those 'webs of significance' (Geertz, 1973) that we collectively and individually weave, and that constitute our world and our selves. This is not to deny the validity of psychology as an academic discipline or as an epistemologically legitimate way to ask questions, it is only to bracket the truth-value of its statements about particular kinds of ontological (psychological) objects and the relationships between these objects so that I can focus instead on the role that 'psychology' plays as a metaphysics of the person and a culture of ideas, beliefs, and values utterly interconnected with socially powerful networks of relationships, organizations, practices, and technologies. So in a sense what I had to argue *with* in chapter one, the whole idea of inner and individual substantives, I will from now and instead argue *about*.

'Self-harm' and 'the self-harmer' are irreducibly psychological concepts in precisely this sense, in the same way that the communion ritual is an irreducibly Christian concept. Talk about self-harm, its representations and understandings, constantly and axiomatically take as their defining boundaries the discursive structures of the psychological; thoughts, feelings, and the bio-genetic architecture of the human body and brain that is thought to underpin our actions and agency, and our health and illness. As such the idea of self-harm emerges from and only makes sense within the social ecology of a psychologised culture. However this culture is broad and informs the general weave and web of ideas and values in late-modern societies from well beyond the covers of textbooks, the walls of consulting rooms, and halls of university departments. Consequently our culture of psychology is refracted and articulated through numerous social sites many of which have no overt connection to the psy-complex as such. A significant aspect of this spread of the psychological, especially in

recent decades, is the spread of a general psychotherapeutic sensibility and adherence to psychotherapeutic technologies not just into the media and public consciousness, but also into the work place, domestic sphere, services, and government (Moskowitz, 2001). Through the second half of the twentieth century psychotherapy went from being a clinical to a normative presence in our society. Frank Furedi (2004) has connected this transformation to both a cultural fascination with the emotions and an increasing tendency to medicalize ordinary life experiences. He labels this process 'therapy culture' and accuses it of cultivating the very vulnerabilities that it claims to be so concerned with as it casts the self in a 'distinctly fragile and feeble form and insists that the management of life requires the continuous intervention of therapeutic expertise' (2004: 21).

But with full acknowledgement of the ubiquity of the culture of the psychological, and the undeniable rise of therapy culture, it is nonetheless important to also appreciate that beyond this basic frame and reference point differences in representations of self-harm do proliferate, and multiple social sites do produce multiple, though related, discourses all of which contribute to the general cultural milieu, pattern, and hence meaning, of self-harm. And because of this it is important to map out such a cultural milieu not as a monolithic structure, but rather as Fontana's series of 'fragments in continuous flux' (2002: 162); connected, related, interacting, but also different. Any worthwhile map of the meanings of self-harm then needs to address both the detail of the map *and* the overall shape of the territory depicted as if both were present at one and the same time, and indeed by necessity of one another. To tackle this problem and move from ethnographic description to cultural analysis my hermeneutic method arrived at two principal strategies. The first strategy deals with the identification of different social sites through which discourse on self-harm is produced and circulated, while the second maps the multiple layers of discourse, or ensembles of ensembles, through an adaptation of Susan Bordo's concept of an 'axis of continuity' (2003: 141-2), itself a development of Foucault's archaeological method. In a sense these two strategies respectively represent both a horizontal and a vertical means for mapping and organizing the meanings that emerged through my hermeneutic conversation with self-harm.

Mapping Social Sites

The horizontal strategy, which I will deal with first, involved recognizing that since its 'coming of age' the number of social sites that produce representations of self-harm, and which therefore contribute to the general cultural ecology of its milieu and meaning, have multiplied and diversified, and that though such sites often share much in common, and reflect the common cultural fascination with the psychological, there are also important differences between them. As such it was necessary to identify the different social sites that produced discourse on self-harm and eventually I found a list of six such sites to be the most useful model, these are: expert-psy, popular psychology, civil organizations, media representations, subcultural representations, and self-harmers themselves.

The expert-psy discourse is overwhelmingly objectivist and generally considered to be the most authoritative and legitimate source of representations and understandings of self-harm as an illness or phenomenon in itself, rather than a personal experience. As I have already noted this is not a homogenous site and clear differences do exist between for example bio-psychiatry, which currently stands as the hegemonic paradigm in psychiatry and which models it as a branch of bio-medicine, clinical psychology which is more likely to take psychological states into consideration as aetiological factors, and professional psychotherapy which is even more likely than clinical psychology to focus on cognition and emotions as important factors. As one moves from bio-psychiatry through psychology to psychotherapy one also moves from an emphasis on organic structures to an emphasis on psychological functions and as such from more naturalistic to more personalistic approaches and methodologies. And as such one also finds the increasing influence of subjectivist discourse and tropes.

The second social site, *popular psychology*, is mostly a publishing phenomenon but a widespread and influential one nonetheless (Simonds, 1992; Greenburg, 1994; Moskowitz, 2001; Furedi, 2004). This site is in essence 'therapy culture' distilled into its front rank of texts. Most books which are written on self-harm, and by far and away the majority sold and subsequently referred to through other non expert-psy social sites, are books that fit into this second category. Here we find the interface between expert-psy discourse and popular representations of self-harm; a genre made up

mostly of advice books relying heavily on subjectivist tropes such poetry and case histories. These latter are often written as short vignettes and often as therapeutic narratives which include the therapist as a character, and of course most of these books are in fact written by therapists, clinical psychologists, and counsellors. Here the language of the more personalistic end of bio-psychological objectivism is maintained with its emphasis on both organic structure and psychological function, but is also typically translated into more accessible and often somewhat oversimplified terms. The objectivist elements convey expertise and legitimacy while the subjectivist elements convey empathy and work to make a connection with the intended audience for the books (self-harmers, their families, and friends) whilst also conjuring the psychological and emotional lives of real people into what might otherwise seem to be quite abstract ideas.

The third social site deals with *Civil Organizations* and characterises information typically available via booklets, leaflets, books, and through the internet, and which has been produced by various charities and organizations concerned with mental disorder in general or self-harm in particular. Here we find a good deal of information circulated through organizations such as Mind, the Bristol Crisis Service for Women, Survivors Speak Out, and the National Self-harm Network. While the tone and focus of these organizations is clearly on personal support for self-harmers and their friends and families, and as such there is a privileging of personalistic approaches and subjectivist tropes, it is still nonetheless the case that even here self-harm is largely framed as an illness or pathological practice caused by disease or dysfunction. As such again we find the usual bio-psychological objectivism tempered and flavoured by a strong personalistic modality and a subjectivist tendency in presentation.

The fourth site deals with *Media Representations* which includes the representations and understandings of self-harm that I have already mentioned in newspapers, magazines, movies, and television but also those found in novels and autobiographies, and especially those autobiographies that have been called, perhaps uncharitably, 'mis-lit' (short for 'misery literature'), or more cleverly 'auto-pathographies.' These books, such as Abigail Robson's *Secret Scars* (2007) and Victoria Leatham's *Bloodletting* (2006) represent a genre of confessional autobiographies about troubled and abusive histories which often include 'mental health issues' such as anorexia and self-harm and

can often be found in book shops under headings like 'tragic true life stories.' Perhaps not surprisingly these popular representations tend to focus on the personal life and experiences of the self-harmer and so present a fairly subjectivist reading of it. This subjectivism is perhaps most pronounced in songs where it is often seen as a product of a sane heart and mind living in an insane and cruel world. However throughout most film, newspaper, and magazine representations there is an acknowledged background of objectivist and bio-psychological discourse that is used to frame the issue and define the practice itself. It is very rare indeed for self-harm to be actively framed as anything but an illness outside of songs, the subcultural representations that they give rise to, and some websites for self-harmers which like 'pro-ana' sites actively promote the practice as a form of personal identity and transgressive resistance (Adler and Adler, 2011).

And indeed the fifth site deals with just such *Subcultural Representations*, emerging from songs, websites, magazines, and movies connected to the emo, goth, and punk subcultures. As might be expected such a romantic approach to self-harm means that it is represented here almost entirely in subjectivist terms and related to the expression of an interior depth and plenitude of selfhood. It is true that the value of the idea of 'mental illness' is used here as cultural capital, as a means of demonstrating that the feelings being presented are not a dramatic performance but a real torment, however beyond this establishment of authenticity self-harm is subsequently and typically re-framed less as physical disease or dysfunction and more as the understandable reaction of a sensitive soul to a sick world.

Finally of course S*elf-harmers* are themselves a source of representations and understandings of self-harm. This is the case in their daily lives, a fact that has been taken into account in this research through interviews and the collection of other data from people who do or have self-harmed, but also in a number of other more public and shared sources from the 'auto-pathographies' and celebrity confessions already mentioned to the internet 'community' of self-harmers represented on blogs, discussion forums, support sites, fan sites, and pro-self-harm sites. As I have already mentioned while most of these sites emphasise a strongly personalistic focus and subjectivist emphasis they nonetheless build such representations on the idea that self-harm is a form of illness whether conceived bio-genetically or psychologically. But

by contrast pro-self-harm sites tend to either reproduce 'the romance of self-destruction' argument, and frame self-harm as a transgressive protest against a world they disapprove of, or else they argue that it is a 'lifestyle choice' and simply their way of coping with stress and hardship. Though this second argument is only an occasional theme on the therapeutically focused sites, it proved to be a strong element of self-harmer's own testimonies in the interviews that I conducted.

Axes of Continuity

The second, more vertical, strategy for mapping and organizing the meanings connected to self-harm and which arose from my hermeneutic conversation with it, deal specifically with the need typical of hermeneutics to interpret part of a phenomenon within the context of the whole that it is a part of, and *vice versa*. The same basic concern is discernible within Geertz's characterization of thick description as a matter of mapping ensembles of texts which are themselves ensembles and so on, as well as Hacking's ecological metaphor, and Foucault's archaeological metaphor that suggests artefacts are interpreted within the context of the broader site they appear within, which itself makes sense as a result of the artefacts found there. In the end I found an adaptation of this archaeological method to be the most useful in mapping the cultural milieu of self-harm, a technique that was developed by Bordo to explore the meanings of anorexia nervosa and which works through identifying what she calls 'axes of continuity.' These are 'streams or currents' of meanings and values (2003: 142) that flow from the broad discourses characteristic of a particular culture to converge, intermingle, configure, and manifest in the particular patterns, or artefacts, which are also characteristic of that culture; in this case self-harm. These axes then will connect the key discourses, codes, and tropes of self-harm to their sociocultural conditions of possibility, and help show homologous relationships, resonances, and family resemblances with other cultural patterns that are also located along these axes.

I have however slightly adapted Bordo's original approach so that while she talks about general thematic axes such as a 'dualist axis' that that links dualist concepts central to anorexia with dualist concepts central to western culture, I divide each axis up into

three sections that represent different kinds or levels of discursive structure. Firstly, at the level of actual representations and understandings of self-harm, there is the structure of the *key thematic discourse*, which is to say a discourse that forms the substance of how we think about, talk about, and make sense of self-harm. Secondly, and further along the axis, there is a *discursive complex* that underpins the key thematic discourse and provides the conditions for its possibility, which is to say that this complex provides the rules and conventions through which the thematic discourse is constructed and maintained as an authorized representation. And finally at the most general end of the axis is the third section which represents a very broad formation or *order of discourse* that helps characterize our general cultural paradigm or what Foucault (2002) calls an 'episteme,' and it is this which provides the conditions of possibility for the discursive complex, which of course in turn provides the conditions of possibility for the key thematic discourse. The three levels of discourse fit into each other like concentric circles of context moving, to switch to Hacking's metaphor, from organism outward to ecosystem.

I have identified three principle axes, although obviously this represents the hermeneutic dynamics of this particular conversation and research and as such other axes could be used, or indeed the material of the three axes I have used here could be divided up differently. I have called these three the ontological axis, the aetiological axis, and the pathological axis. The names are not supposed to reflect any bias toward the bio-medical approach to mental disorder but rather designate in the language of the culture that I am describing (a largely medicalized culture) categories which already exist as structures for organizing meanings and values, categories which are 'native' to this culture. The ontological axis deals with those structures and mechanisms which are taken to be natural to the subject and which are implied by accounts of the nature and function of self-harm. The aetiological axis deals with those factors which are thought to be connected to the cause and origin of a person's self-harm. And the pathological axis describes the ideas and experiences associated with acts of self-harm, what happens when the ontological structures mix with the aetiological conditions and a distinct and diagnosable result emerges.

This tripartite division also maps nicely onto the three most common functions or reasons given for someone to self-harm; these are, respectively, to express and deal

with problematic psychic forces, to overcome dissociation, and to express feelings of shame and self-loathing. As I move through the three axes and their internal structures over the next three chapters I shall describe and analyse each of these three functions but as I said before, and in contrast to many theories of self-harm, it is not a particularly discrete practice and these three themes or functions are not mutually exclusive. As such, neither are the axes themselves, rather they should be thought of in dynamic and complex interaction; making up self-harm not in any additive fashion but rather between them. The next three chapters describe and analyse each of these three axes, moving from key thematic discourse, to its underpinning discursive complex, to its underpinning order of discourse. As we explore these three it should be kept in mind that they *describe* systems and contexts of meaning, but since such systems are not occult forces or logical abstractions they also *imply* the multiple social institutions that carry and circulate such meanings. Nevertheless my thesis is concerned more with symbols and cosmology, and their resonances in our lives, rather than with casual processes and ontology. I begin with the ontological axis.

Chapter Five

The Ontological Axis

Introduction: Picturing the Self of 'Self'-harm

The following is from my field diary:

> I met Sally today outside a cafe in Brighton. It was a warm and sunny evening, lots of people sitting around chatting, making white noise which drowned out individual voices and provided us with a bit of privacy. She was friendly and talkative, in her mid-twenties, and smartly dressed in a dark trouser suit as she had just finished work for the day. We made our introductions which were easy and relaxed, and I went inside to get us some coffee. We sat outside for the interview which lasted about an hour. I didn't have to do much prompting as she was happy to talk about her experiences . . . I noticed Sally using an expressive gesture; a sort of open handed parenthesis with her palms facing inward so as to indicate herself, or to enclose herself, and alternately bracketing her head and chest. She leaned into this gesture, looking down into it slightly so as to create a space just big enough for herself; physically indicating her personal space and the only thing that occupied it - her. This gesture dominated her body language throughout the interview and now I think about it it's a gesture that has dominated the body language of everyone else that I've met and interviewed so far (early October, 2010).

Of course it's a simple gesture perhaps indicating that someone is talking about themselves and not about the 'outside world', in which case the palms may turn outward instead; and perhaps also indicating in its near rhythmic undulation between head and heart that it is the inner world of both private thoughts and feelings that is being indicated. It is a gesture that physically brackets the self and so emphasises the self in its individuality and interiority, and which becomes noticeably more emphatic in performance when the conversation turns to the social isolation of the self, and the psychological power of its emotional life. But once I had noticed this gesture I began to recognise it as part of a broader family of postures and gestures that are used in representations of self-harm and self-harmers. For example on the front cover of Dee Pilgrim's (2007) information booklet on self-harm for teenagers a boy sits with downturned head looking into his lap, his hands palm inward and wrists resting on his knees. Virtually the same posture is depicted on the cover of Tracy Alderman's *The Scarred Soul* (1997) while a version of it can be found on Levenkron's *Cutting: Understanding and overcoming self-mutilation* (1999). Here a woman is half turned

from the viewer, her back arched as she leans slightly forward creating an almost foetal position and a highly private space.

The postures depicted on these books are clearly depressed and introspective, emphasising not only the sense of estrangement and isolation that characterises the self-harmer (see next chapter) but also the interiority and psychological nature of the issue, its connection to an individual's private thoughts and feelings. Indeed on none of the books I looked at was the figure of the self-harmer shown as anything but completely alone, and if backgrounds were included at all then they were vague, general, and without detail. What is being emphasised in these depictions is the individual *as an individual,* which is to say as, in Geertz's famous formula, a

> bounded, unique, more or less integrated motivational and cognitive universe, a dynamic center of awareness, emotion, judgment and action organized into a distinctive whole and set contrastively against other such wholes and against its social and natural background (1983:59).

The relationships of this individual, their social world, and the living context of their existence and experience appear here as only secondary factors fading out of the background to frame this single, solitary, and clearly deep figure in the centre. The one exception to this rule that I found was the series of six cartoons in Louise Pembroke's *Self-harm: Perspectives from personal experience* (1996) where she depicts herself in tense relationships with various mental health staff in all but one, and even in this one a disembodied voice represents a doctor or nurse. Interestingly, in this book, contra to the standard representation, we find a description of self-harm as an experience that occurs within relationships, a fact underlined by Diane Harrison's poem *See Me* (ibid: 9) which charts the emotional space between the self-harmer who is trying to hide themselves and the other who sees them and may judge them

> See me,
> Who do you see?
> The person beneath
> That surface calm
> Hides from you.

Here the self is still isolated but their condition is less an extension of the ontological boundedness described by Geertz, and more the product of the intersubjective space that socially positions the person as under threat and withdrawn. However Pembroke

and her contributors are the exception, everywhere else a picture of a self-harmer is almost always a picture of a person alone; an individual self lost in the internal drama of their mind and heart. In this chapter I want to take the framing of this semiotics of posture and gesture seriously, and to pick-up on the implications this emphasis on the individual and the private, as well as the centrality of this individual's psychic and emotional life, might have on the meaning of self-harm. In this chapter I want to explore the implication of both the gesture I noticed in my field journal and the posture of self-harming figures as they are commonly depicted in pictures, and indicate what is perhaps the most obvious yet central discursive complex at work in the structuring of representations and understandings of self-harm, so obvious as to be virtually invisible, and perhaps so obvious that even when noticed it might seem inconsequential: namely the discursive complex of 'the self' itself.

Of course the word 'self' appears as a prefix to all the many and varied terms which are used to designate self-harm and clearly signifies the site of the act, as well as the deviant implication that here the self is both the victim and the perpetrator of the violence. However Favazza's (1996) recommendation that the term 'automutilation' be used for animal cases of what would otherwise be classed by him as 'self-mutilation,' suggests that 'self' indicates more than just the site of the violence and the grammar of its action. Rather while animals may be understood to attack their own bodies under certain circumstances the implication here, perhaps not fully thought through or thematized but nonetheless quite clearly present, is that by contrast people always attack their *selves* (Walsh and Rosen, 1988: viii). Perhaps then this is another example of the subjectivist tendency haunting generally objectivist texts; though self-harm may be framed as a mechanism of the bio-psychological system, and conceptualised in a continuum with animal automutilation, it nonetheless appears to be significant that even within this frame such a system is understood to contain or constitute a reflexive, self-aware, and human subjectivity.

Indeed it is the haunting presence of this selfhood that provides what Roland Barthes (1993) describes as the *punctum* or 'that which pierces the viewer' at the very heart of the pictures I have described. Which is to say that element of the picture that haunts and evokes into it the highly subjectivist sense of something irreducibly humanistic; something which makes a personal connection with the viewer, and which reaches out

and helps carry and communicate the essential tragedy of the life that is depicted in this way. Paradoxically then this *punctum* that enigmatically incites empathy and a desire to understand, would appear to be at least in part the product of precisely the closed and introverted posture that I have described; it is as if the picture tells us that there is meaning and humanity here, but one which is trapped within the isolation of the individual body. The very drawing in of the viewer or reader then is predicated on the idea that the person is withdrawn and isolated, and what stands in need of understanding is the enigmatic self trapped within them and cut off from others. Interestingly in almost all of these pictures the eyes of the self-harmer, if visible at all, are directed away from the viewer providing a kind of safety effect; we can look at them and empathise with them but without being challenged to witness them. This stands very much in contrast with Richey Edward's much more transgressive picture which directly challenges us to witness his being '4REAL' because he stares directly out from it and makes eye contact with the viewer. In the more common visual grammar this challenge is replaced with an invitation, a request for understanding; an appeal that the viewer might reach out to this human enigma trapped within the bounded individualism of the body and find within it a self and a voice that is not being expressed, or at least is not being heard. But in both cases, the challenge and the invitation, there seems to be the sense that there is a meaningful *self* trapped within the body of the bounded individual and unable to express itself properly or connect to others, and that in some way self-harm is a consequence of precisely this condition of isolation and the dammed plenitude of this indwelling spirit.

The Expressive Imperative (a key thematic discourse)

> Many of our patients . . . believe that people have to "get their feelings out" or they will burst. This is the idea of catharsis, that you somehow have to release the unwanted tension into the environment . . . [W]e directly challenge the belief that every emotion must lead to a physical action of some kind. Self-injurers tend to believe this deeply and often have indoctrinated their therapists with this false assumption - Conterio, Lader and Bloom *Bodily Harm* (1998: 219)

> I felt so strange that evening – numb but silently screaming in pain. Why couldn't I scream out loud? Why couldn't I show people how much pain I felt inside? . . . As the night drew in, I sat alone and in silence, holding back the

tears I was too afraid to show. My mind was flooded with disturbing memories, most of which had been buried for a very long time. The wall that had contained these memories took many years to build, yet within hours it had fallen allowing the thoughts and images to torment me once more, I couldn't push them back to rebuild it . . . My mind jumped from one event in my disastrous childhood to another – I had no control and the volcano inside me was growing dangerously close to eruption. I'd had an unusual thought the night before. It was a thought I didn't want to listen to, but a voice deep inside said it would calm the turmoil. My gaze drifted to the discarded plastic that once held four cans of beer together: as the melted plastic landed on the flesh of my forearm, the screaming inside suddenly stopped and I drifted off to sleep - Allie (email)

Allie's vivid account of an episode of self-harm evokes what Conterio *et al* describe as 'the pressure cooker theory'; the idea, as they explain it, that you must 'get your feelings out' or else they will build up inside you and create a disturbing and dangerous inner pressure eventually risking a potentially volcanic 'eruption.' This is the same model that we encountered in chapter one under its more academic title as the 'affect regulation model' and represents a popular and pervasive enough metaphor for self harm that as Conterio *et al's* comments suggest their suspicion of it is indeed quite unusual. In fact for many people the pressure cooker logic is simply synonymous with self-harm and constitutes its very definition. The BBC online Health magazine for example includes an entry on self-harm written by the Royal College of Psychiatrists which states that '[y]our feelings of anger or tension get bottled up inside until you feel like exploding. Self-harm relieves this tension.'[14]

The implicit appeal of this model aside it is important to note that it is a product of its cultural location, as is indicated by the fluid metaphor of 'bottled up' emotion which as Deborah Lupton has made clear stands as a central trope in western conceptions of affect (1998). Consider Allie's mind becoming 'flooded' with disturbing memories, or the 'volcano' building up inside her; or consider more generally the image of the pressure cooker conjuring emotions as things which 'seethe,' 'bubble', and 'boil over.' This idea of the pressure cooker nicely ties the traditional fluid metaphor into an account and explanation of self-harm which here appears as a kind of pressure valve, perhaps as an open wound breaching the boundary between the inner and the outer,

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[14] www.bbc.co.uk/health/emotional_health/mental_health/emotion_selfharm.shtml downloaded on 10/06/2012

venting off the built-up pressure and providing much needed and emergency relief. As Alyson describes this experientially

> Whenever I've self-harmed it's been whenever I've been feeling desperate, a really desperate mix of emotions, kind of sad and angry or really frustrated I just feel like it's absolutely filling me up and it's about to burst out . . . it feels like I have to let these feelings out and if I hurt myself that will let these feelings out . . . it feels like a kettle about to boil and there's a lid on it and it's about to explode (telephone)

Indeed for many of the people that I interviewed self-harm simply is this function of emotional expression and release, albeit with other dimensions of meaning also connected. Karen for example describes self-harm as 'the physical outlet for emotional pain' (email) and Susan sees self-harm as fulfilling its function 'when emotions build-up too much and we have nothing else to turn to' (email) while Allie herself defines self-harm as 'a coping mechanism which is often used when people don't know how else to react to/cope with emotional issues and/or difficulties in their lives' (email). The metaphor of a fluid build up then is connected to another near ubiquitous metaphor for self-harm, that of a 'coping mechanism' which pictures it as a kind of valve in a larger mechanical system and helps locate it within the discourse of the natural body and the body as organic machine.

Within this simple and appealing designation of self-harm as a kind of pressure valve then we find folded into it a whole facilitating background of ideas and theories drawn from the western cultural tradition and shaping our notions about the nature of the subject, of emotions, and of psychology. And in this latter respect of course advocating the commonly held wisdom of 'get[ting] your feelings out'; a normative injunction of expression and externalization that is pervasive in our culture from clichéd proverbs ('a problem shared is a problem halved'), to advertisements for tissue paper (telling us to 'just let it out'[15]), to online health advice for children ('Sharing your feelings helps you when your feelings are good and when they aren't so good'[16]) (Taylor, 1992: 368-90). Arguably it is this same logic of necessary emotional expression which sits at the centre of therapy culture, derived as it is from the very idea of a 'talking cure', and which stands as the primary justification for its therapeutic confessional commandment

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[15] A Kleenex advertisement used this message through a featured song entitled *Let it Out* by Starrfadu.
[16] www.kidshealth.org/kid/feeling/thought/talk_feelings.html (downloaded 10/06/2012)

(Foucault, 1978, 2003b; Moskowitz; 2001; Hook, 2001, 2007; Guignon, 2004). As the website for the charity The Mental Health Foundation puts it '[t]alking about your feelings can help you stay in good mental health . . . Talking about your feelings . . . [is] part of taking charge of your wellbeing and doing what you can to stay healthy.'[17] This pervasive injunction then to talk, share your feelings, or otherwise express yourself rather than 'bottle things up,' articulates what I will call here *the discourse of the expressive imperative* which stands as a common normative prescription based on a particular model of subjectivity, and that describes the mechanical *necessity* of expressing emotions if mental stability and wellbeing are to be maintained. And which furthermore forms a key theme in representations and understandings of self-harm. In order to explore this discourse I want to attend to two sub-discourses that help construct and support it: a pervasive vocabulary of emotions, and the framing of the subject as a psychic system.

A Vocabulary of Emotions

> [Self-harm] may help someone to cope with feelings that threaten to
> overwhelm them; painful emotions, such as rage, sadness, emptiness, grief,
> fear, loneliness and guilt - Harrison and Sharman *Understanding Self-harm*
> (2007: 3)

The discourse of the expressive imperative describes a mechanism of externalization, and an ontological category of things that must be externalized. This latter component is made up of emotions and indeed the vocabulary of the emotions is the very flesh and blood of the general discourse of self-harm making up the substance of almost every representation of it. The words and sentences that are used to talk about self-harm in every context are laden with our particular cultural constructions of the emotions and their dynamics, and such emotion talk in turn is a constant reference point for almost every statement made about it, even to the point of defining it as with the above quote taken from an information booklet published by the charity Mind. Psychotherapist Michael Hollander also demonstrates this when he says that

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[17] www.mentalhealth.org.uk/help-information/10-ways-to-look-after-your-mental-health/talk-about-your-feelings/ (downloaded on 10/06/2012)

> The two most common reasons for self-harming are (1) to control the extremely painful and frightening experience of overwhelming emotions, and/or (2) to escape from an awful feeling of being numb and empty (2008: 7)

In both cases the central issue framed is the emotional life and dynamics of the self-harmer. That this also applies to the second point is brought out more fully in a similarly structured statement made by the Cornell Research Program on Self-injurious Behaviour and quoted in the introduction to an information book entitled *Self Mutilation*: '[t]he act of self-injury provides a way to manage intolerable feelings or a way to experience some sense of feeling' (Williamson, 1998). One way or the other then, whether it is about too much feeling or not enough, it is nonetheless clearly all about 'feelings.' While the depersonalisation and dissociation that characterises 'too little feeling' is often defined in these terms as a lack of affect it is nevertheless typically represented as a problem because of the strong negative emotions that such a lack of feeling is paradoxically understood to evoke; feelings of fear, guilt, anxiety, and estrangement from self and others. The basic point is, as Middleton and Garvie elaborate in their self-help book *Self Harm: the path to recovery*, that

> Self harm is part of an attempt to find a way of coping with extreme and painful emotions. Self-harm acts are often triggered by difficult emotions, and it is common to see a pattern of people harming in an attempt to bring an end to a horrible emotional experience. (2008: 15)

Self-harmers themselves are no less likely to frame and interpret their actions in this same affect laden register. Karen for example describes her self-harm as a 'way of dealing with my feelings when I was upset' (email) while Sadie defines it as 'when people hurt themselves in order to deal with overwhelming situations and emotions' (email). For Katherine, who connects her self-harm to her experiences of childhood sexual abuse at the hands of her grandfather, self-harm expresses a deep seated pollution of her emotional life, as she explains

> most of the things he did didn't harm my body – he proposed them all as expressions of love and my body couldn't have known anything different – it was my emotions that were corrupted and damaged (email)

Indeed throughout the interviews emotions were consistently framed not just as the prime movers behind acts of self-harm but as the primary point of reference for all experiences, whether categorized as internal or external, and as the most immediate and important context in which we have a sense of self, and through which we live our

lives. The emotions then are given a privileged role in explaining people's intentions and motivations whether these are related to self-harm or not. Something of this affective hegemony is illustrated by Karen as she began our interview by making some introductory remarks about herself

> Today I am really positive and a generally happy person, really friendly and fairly confident but very shy . . . I get stressed very easily and worry quite a lot, and do feel very down at times . . . [A]t the time [of self-harming] I had extremely low self esteem, I absolutely hated myself and that's difficult when you're stuck with yourself all day!! I didn't think I deserved anything, thought everyone hated me . . . so yeah I think I was depressed and that's where the self-harm came in (email)

The landscape of Karen's life is painted here in the prime colours of powerful emotions. Other psychic objects, such as her thought that she didn't deserve anything, are mentioned but even these have reference to emotion and seem to emerge as effects of her more basic affective condition. She displays a strong identification with her emotions which are used to frame a basic sense of who she is and what kind of a personality she possesses. More than just indicating that self-harm principally makes sense within an emotional register then, Karen's words suggest that self-harm takes its place within a whole life-world also principally framed and interpreted through the same emotional register.

This primacy of emotion in the construction of life-words is hardly restricted to self-harmers however but rather articulates an axis of continuity connecting the structures of meaning characteristic of self-harm with homologous structures similarly characteristic of contemporary culture in general. Moskowitz's statement in the last chapter that ours is 'an age consumed by worship of the psyche' meaning one in which 'feelings are sacred' contains the significant conflation of 'psyche' and 'feelings,' the realm of the mind and the realm of the emotions, and reflects the hegemonic position that a vocabulary of emotions has taken up within contemporary discourses of popular psychology, the self-help movement, psychotherapy, and even much clinical psychology (Furedi, 2004). Today for example we can read in Daniel Goleman's hugely popular book *Emotional Intelligence: why it can matter more than IQ* (1996) about the desperate need for 'emotional literacy' in our lives, and about how failing to acknowledge one's 'true feelings' can lead to personal distress and social failure. Or we can read on the website FamilyDoctor.org that mental health means 'keeping your

emotional health,' and that 'people who are emotionally healthy are in control of their thoughts, feelings and behaviours. They feel good about themselves and have good relationships.'[18] Indeed today our cultural worship of the psyche more or less means a cultural worship of the emotions (Craib, 1994); a fact which is well illustrated by the expressive imperative since in this discourse it is our *feelings* that we must somehow get out of ourselves and that are at the centre of our mental wellbeing.

Lupton (1998) has argued that this contemporary valuation and even fetishization of the emotions in late-modern culture is a result of their being coded as emanating from some sense of a 'true' and 'internal' self, that they are

> [G]enerated from within the self in a dark secret place that is somewhat mysterious. It is believed that individuals experience emotions internally first, and then may or may not reveal them to others (1998: 63)

And as Lupton notes this idea that emotions come from within allows them to stand for something more 'honest' and 'natural' than the 'artificiality' of culture and the social negotiations and personal compromises of the ego (ibid: 89). As such emotions are understood to be the 'bearers of truth about the individual' (ibid: 27), the most 'Me' that I can possibly be (Lutz, 1985), and it is as bearers of truth and echoes of a true self that emotions are represented as something of great inner value that we may have lost contact with and, as the expressive imperative urges, we now need to 'get back in touch with', to accept rather than repress, and to allow to rise to the surface of our psyche and express rather than 'bottle up.' But if emotions are positioned as the primary reality of life and its constant reference point, and if such emotions are coded and understood to be essentially internal and individual forces, then our lives and worlds also become coded as internalized and individualized. This is an issue that I shall return to many times in this thesis, however for the moment I just want to indicate this function of the discourse, that part of its work is precisely *to emphasise the internal and the individual, and to present these as primordial and dominant realities*.

But paradoxically while our culture has been led by its psychologised and psychotherapeutic values to demonstrate a predilection for the emotional the general

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discourse on self-harm nonetheless suggests that something more is going on; that this fascination covers a deeper ambivalence within this order of values. As we have already seen when talking about self-harm emotions can be cast as a deeply powerful and deeply meaningful substratum of the self and psyche, as well as being the very substance from which our-selves and lives are made up, but they can also be cast as raw, natural forces which can be 'overwhleming' (Hollander), 'intolerable' (the Cornell researchers), and 'extreme' (Middleton and Garvie). And in this latter sense they seem to be like an internal weather system, standing for the psychic climate of our inner world; a natural given that can either be temperate or tempestuous and that we do not create but that we must nonetheless weather. Indeed in this very connection to nature emotions are typically positioned as being forces which necessarily complicate the issue of rational agency, and the executive function of a conscious sense of self or ego as I shall now describe.

The Subject as a (deep) Psychic System

> [U]sually I could feel the pent up anger and sorrow building but I'd bury it down deep where I wouldn't have to think about it . . . when I would cut myself for "blue" emotion, let's say depression, sadness, abandoned, those kinds of feelings, I'd be resisting the urge to do it, I hated what was coming and I knew I couldn't fight it off, I didn't have the emotional or mental strength to do it; I'd hate feeling the knife draw slowly across my skin and watch it rip apart, but then as the blood came out, it was a sigh of relief; once the blood was out it was done, I'd bled, and I wanted to bleed myself dry of all unhappiness – Susan (email)

Here Susan provides another powerful yet compact statement of the expressive imperative, describing for example the suppression that leads to a failure of expression and that therefore also leads to 'pent up' pressure as she attempts to 'bury' her feelings 'down deep' and out of conscious awareness. She also deploys the fluid metaphor evident in the eventual relief that comes with expression and release with the blood symbolizing unhappiness and consequently being let out and drained off. And here also she privileges an emotional vocabulary in modelling psychic forces and processes. Indeed emotions are the primary palette from which Susan makes sense of and seeks to explain her actions, the phenomenological foundation and principal mediators of her experience, but significantly also the prime movers of action. Notice

though that Susan not only talks about her emotions as having a certain determinative power, as forcing her toward an inevitable act of self-harm, but that she also frames her capacity to resist this power through the conflation of 'emotional' and 'mental strength.' Consequently in this statement it is emotion which leads her to want or even need to self-harm, it is emotion that makes her feel she shouldn't ('I hated what was coming') and represents her strength to resist, and it is emotion which constitutes the outcome of the act and the reason for doing it in the first place. The world of self-harm is clearly first and foremost a world of emotions, but as foundational as the concept of the individual's emotions is Susan's description makes it clear that this is not unambiguous or without ambivalence.

Of course the idea that emotions can be a problem for self-harmers is central to the expressive imperative. All the people that I interviewed for this research would seem ultimately to resonate with Deborah's plaintive statement that 'I seem to feel emotions a lot more than other people do' (email). The same basic idea is conveyed by Hollander in his self-help book *Helping Teens who Cut: understanding and ending self-injury* when he claims that

> By and large, adolescents who self-injure are extremely reactive people: they feel things very deeply and are prone to becoming emotionally overwhelmed quickly. They possess powerful emotional systems without the tools to manage them . . . They have great difficulty harnessing their powerful emotions in the service of clear thinking and problem solving (2008: 17)

He builds on this theme in his book, reifying a basic idea through the language of popular psychology to argue that people with high levels of 'emotional reactivity' (those that 'feel emotions a lot more than other people') can suffer from forms of 'emotional dysregulation' in which their 'powerful emotional systems' are poorly managed and become subject to disturbing and potentially dangerous excesses. Here then we find an ambivalence in the privileging of an emotional vocabulary and an acknowledgment that emotions are not just representative of a benign 'true self' but also possess a problematic dark side, that they can also be

> visceral and primitive, closer to our animal than our higher side. The emotions are associated with chaos, with excess, disorder, unpredictability and irrationality, and even with some degree of social or physical risk for both oneself and others (Lupton, 1998:85)

As such the general discourse on self-harm construes emotions as problematically dual in nature; being at the same time truth bearing emanations of a natural self, and potentially disturbing and even pathological bodily forces. Frank Furedi (2004) has noted this same dualistic pattern of ideas in the more general discourse of popular psychology where there is both a clear fetish for the emotional and yet also a wariness of 'raw unprocessed emotions.' He argues '[c]ontemporary culture does not simply applaud emotions it also demands that *strong feelings* be curbed and moderated.' (2004: 33 my emphasis) It is an important observation since it suggests that it is the *strength* of the feeling and not the individual *meaning* of the feeling that is at issue. As we have already seen, in self-harm discourse emotions framed as problematic are coded as 'overwhelming' and 'intolerable', and in Susan's and Hollander's statements it is not the specific emotions themselves that seem to describe this dark side of affect but rather the qualities of 'reactivity' and 'dysregulation.' In other words it is the level of excitation that the emotions are thought to produce in the psychological 'system' that is important, the fact as Deborah put it that self-harmers feel emotions '*a lot more*' than most people, and not the particular emotions themselves; a fact well illustrated by the list of emotions that Susan indicates as contributing to her self-harm. And of course this is precisely what the expressive imperative warns us about; not particular emotions and their personal content or meaning, but rather a general *build up* or 'dysregulation' of emotions and the risk it carries of disturbing and overwhelming the inner psychic *system*, thus threatening our self-control (presumably represented by the faculties of 'clear thinking and problem solving' that Hollander mentions).

This focus on the *power* of emotions supplies one sense in which the self-harmer is commonly represented as someone who is 'deep', where 'deep' implies the strength of the emotion, as for example when Harrison and Sharman write in their information booklet that '[s]elf-harm is a way of expressing very deep distress' (2007: 2). Self-harmers are often represented by themselves and others as suffering precisely because they are a 'deep' reservoir of just such powerful emotions which they struggle to express and hence control. Emotions then can be seen as a kind of 'chaotic energy' which in the absence of adequate control can become 'dangerous to anyone in their vicinity and [which] weakens the person experiencing them' (Lutz, 1986: 291). As such both the mechanism of the expressive imperative, and the idea of the psyche as a

system containing this mechanism can be seen to promote a concern with the rational order of the self and the control and containment of the body. Indeed it reflects what Lupton following Heywood (1996) describes as

> the ascetic avoidance of excess, the quest for rationality, the transcendence of desire and the flesh. Emotional states, according to this logic, have the potential to disrupt this sense of self-containment. They are impure, defiling, animalistic, and disgusting (1998: 86)

Perhaps this is the reason why the psychiatric and clinical psychological literature describes self-harm as an 'impulse-control disorder' (Knock and Favazza, 2009) or in other words the result of a breakdown in the subject's civilized ability to control and contain the chaotic energy of her emotions; her 'reactivity' or inability to enlist her emotions 'in the service of clear thinking and problem solving' as Hollander puts it. Through the discourse of the expressive imperative then the dynamic of chaotic emotions overwhelming self-control portrays the self-harmer as an object lesson in what happens when rational management and regulation of the emotions is not maintained, when emotions are not 'processed' *which is to say turned into thought and language and subsequently expressed*, and the only strategy of externalization left is the 'bright red scream' of self-harm (Strong, 2000).

But beyond the binary dynamic of deep-as-powerful and the processed-as-contained, there also appears to be another sense of 'deep' implicit in all of this. This is the sense of 'deep' that implies a vertical metaphor of the psyche and through which raw and chaotic emotions in their natural unprocessed forms *rise up* from the deep reservoir to threaten the rational mind and self-control. This is the sense in which '[self-harm is] a means of communicating what can't be put into words or even into thoughts and has been described as an inner scream' (Harrison and Sharman, 2007: 2); the sense of Allie's 'volcano,' and the sense implied by Susan when she tries to 'bury [her feelings] down deep,' and the sense which explains why when they return from this unsuccessful burial they might be experienced not only as painful but also as 'other' to the self, as alien and intrusive. As Harrison and Sharman explain it '[e]motions that have no outlet may be *buried* and blocked completely *out of awareness*' (2007: 3, my emphasis) and '[w]ith plenty of support, . . . [self-harmers] learn that they can cope with the pain, anger and rage, *which need to surface*' (ibid: 9, my emphasis). Emotions then are understood to be deep because they are powerful, and they are powerful

because they come from the depths and represent the raw, natural forces of our being. The expressive imperative is not just a matter of inner/outer then but also depth/surface and requires the subject of self-harm to be subject to what used to be called 'depth psychology' and the psychodynamics of the unconscious.

The discourse of the subject as system then has several functions. It balances the dual formulation of the emotions as both positive and problematic by contextualising them into a dynamic system in which it is the power of the emotion and its capacity to disturb and overwhelm the system which is potentially problematic rather than the emotion itself or its meaning. In this way it locates the discourse of the expressive imperative, and by extension self-harm, within a bio-psychological objectivism and focuses on the mechanics of the system and the threat of 'dysregulation.' It consequently allows self-harm to be modelled as a mechanism, as part of the system's strategies of rational management and regulation, albeit as a desperate and emergency measure. Of course this again betrays a certain characteristic ambivalence as self-harm is both modelled as mechanism in a rational system and an agent of rational self-control, and yet because it is an emergency measure it is positioned at the very limit of the rational, it vents the irrational force of unprocessed emotions, and can also stand therefore as an idiom of mental disorder. Apparently even when the system is breaking down its disruption needs to be modelled along rational and mechanistic lines. And so here again there is evidence of the asymmetric binary and the process of looking past. The focus on emotions I have described is often framed as a late-modern reaction to older and more repressive traditions of rational self-control and discipline (Foucault, 1978), a liberation then of values we may associate with the Victorians for instance, but it does so precisely in order to cast the emotions as natural forces in need of rational management and regulation and so the project of rational self-control and containment continues but with a slightly different semiotic style and emphasis. Under this style the actual meanings of emotions can be effectively looked past despite the general culture of emotionalism because they are framed as fluid energies or substances within a system and it is *the management of the system* that is being prioritized and tied to mental health. As such the person themselves is also looked past even as their emotional life is being acknowledged, since this life is principally described as an issue of systemic management and psychic regulation.

The Psychodynamic Self (a discursive complex)

> We are selves only in that certain issues matter for us. What I am as a self, my identity, is essentially defined by the way things have significance for me. And . . . these things have significance for me, and the issue of my identity is worked out, only through a language of interpretation which I have come to accept as a valid articulation of these issues . . . we are only selves insofar as we move in a certain space of questions – Charles Taylor *Sources of the Self* (1992: 34)

The expressive imperative represents both a key thematic discourse in constructing and regulating representations and understandings of self-harm, and more broadly a key discourse in constructing the self of late modern culture and society. But in order to understand what conditions of possibility lie behind this influential theme, what structures or conventions of meaning facilitate its being a meaningful and influential discourse, we must follow Taylor's advice and consider in what 'space of questions' and through what 'language of interpretation' such a conception of selfhood is defined and constructed. To answer these questions is to understand the discursive complex that underpins and organizes the expressive imperative as a key thematic discourse. Of course the space of questions that governs the expressive imperative is perhaps that space opened up by separating the idea of the inner from the outer, and depth from surface, and which by so doing conjures the very presence of a private internal self and psychic system into the human enigma that lies within each face (Elias 2000 [1939], Trilling, 1974).

The point, as Josh Cohen (2005) notes, can be illustrated with reference to Nathaniel Hawthorne's 1835 story *The Minister's Black Veil* (1986). Here a New England reverend suddenly decides to conceal his face behind a black veil for no apparent reason and with no explanation given to his congregation. The effect is dark and dramatic, as one old woman puts, '[h]e has changed himself into something awful, only by hiding his face' (ibid: 98). The veil interrupts the connection between the minister and his congregation and represents 'a fearful secret between him and them' (ibid: 102); a secret which in its being a lack, like a vacuum, sucks in the darkest sins that exist in each townsperson's imagination to fill it. Eventually on his deathbed the minister reveals the secret of the veil, 'What, but the mystery which it obscurely typifies, has made this piece of crape so awful? . . . I look around me, and, lo! on every visage, a Black Veil!' (ibid: 106-7). What the minister had made obvious in an oddly trivial act of

wearing a piece of crape over his face was the unnerving realization that each living face can be framed or positioned as its own veil, hiding the inner truth and essence of the person away from others, and suggesting not only an ontology of secrets, but also one of a basic interpersonal separation, and the consequent impossibility of a pure and essential communication.

Hawthorne's minister, by applying the veil, conjured into his own figure the effects of depth and surface and the space of questions which ask what is going on behind the veil; rendering his words and actions into 'strange verses,' and his veil as that which hides the 'hidden doctrine' of his true nature. The veil then conjures the inner self but also simultaneously cuts it off ontologically speaking, and isolates it epistemologically speaking, within the shell and barrier of the body, and as such constructs this inner self's essential inability to communicate its hidden essence to others. It is precisely across the barrier of the veil that the expressive imperative becomes a necessary but problematic process. In becoming unknown to his congregation the minister also became unable to demonstrate the truth of his self; rather this truth became a private and secret possession locked within him, and takes on the character of an essentially inexpressible plenitude. After all whatever might be said by the minister his veil remains suggesting that there is always more truth and more essence behind the veil. In this way Hawthorne suggests that the self who defines herself through this space of questions becomes not only a highly private self which is unknowable to others, but once she has come to *define herself to herself* in this way, may also become somewhat unknowable to herself as well. Indeed we react to our own veiling as Solomon points out by 'cast[ing] ourselves in the role of helpless martyr, battling powerful and irrational forces within us' (Solomon, 2008: xv). As such Hawthorne illustrates decades before Freud published his first psychodynamic work, that the relevant 'language of interpretation' is that psychological language that deals with the hidden depth and plenitude of the self; the language of depth psychology and psychodynamics.

Hawthorne may have been writing before Freud but there is something unmistakably psychodynamic in the veiling of the minister and the suspicions of dark motives and hidden desires that are assumed by his congregation. Indeed the sub-discourses of the expressive imperative also point us toward the essential semiotic cornerstones of psychodynamics through their model of a deep and de-centred subject, their concern with the dynamics of an internal psychic system, the vertical metaphor and layered structuring of the mind mapping conscious and unconscious regions of the psyche, the idea of difficult and even disturbing truths emanating from the unconscious, the tension between the impulses of human nature and the executive control of a rational ego, the therapeutic value of self-expression, and indeed the very idea of suppression itself. All of these threads in the weave of the expressive imperative and self-harm readily suggest the broader fabric of psychoanalysis and the cultural legacy of Sigmund Freud.

Perhaps the connection was there to see from the very beginning as Conterio *et al*, in the quote which opens this chapter, use the psychoanalytic term 'catharsis' to designate the very idea of 'getting your feelings out' or as Freud himself put it to Joan Riviere (who took his words only slightly out of context as a good everyday language exposition of the core process of psychoanalysis)

> Get it out, produce it, make something of it – outside you, that is; give it an existence, independently of you – (Freud quoted in Riviere, 1991: 146)

However this is not to say that psychoanalysis is the key to interpreting self-harm but rather that part of the key may be a more general concept representing the developed and popularized echoes of psychoanalysis as they have helped shape contemporary conceptions of the self and psyche, and this is what I mean here by 'psychodynamic.' Psychodynamic ideas are those that have a central preoccupation with the dynamic modelling of mental processes, are historically rooted in psychoanalysis, but have evolved in the hands of others and through their having been absorbed into the fabric of a general psychologised culture.

That such an important part of contemporary psychological ideology as the expressive imperative should have its roots with Freud should be little surprise. The traces of

psychodynamic concepts and values constitute the core ideology of both therapy culture and the literature and social movement of popular psychology, they characterise much contemporary folk psychology, and more than this they are clearly evident throughout the general discourse on self-harm. Indeed what W.H. Auden called 'a whole climate of opinion' (2004) engendered by Freud has since become a more tacit collective inheritance and is now perhaps better described as a whole culture of opinion, a culture which 'play[s] an important part in the way in which people in contemporary western societies now understand themselves' (Barrett, 1991: 115). So much so that the psychotherapist Michael Jacobs complains that

> [O]ne of the difficulties we now experience . . . is that we can never be sure whether what we observe is genuinely the same as that which Freud also identified, or whether people have been so influenced by his writing (even through the popular press) that they have unconsciously come to express themselves using his concepts (2003: 2-3)

Such concepts of course are not necessarily understood or used as Freud intended, so perhaps it is too much to claim that we are all Freudians now, but as Spinelli notes

> [h]owever much the majority of lay individuals who employ such ideas may have overextended, trivialized or even misunderstood a great many of the terms employed in order to explain or make sense of their own, or others', beliefs and behaviours, it remains the case that these ideas have entered common parlance, and, in so doing, have shaped, and continue to shape, fundamental views we hold about ourselves (1994: 12)

He concludes that '[l]ike it or not, we (particularly in the West) are the 'children' of Freud and all his many diverse followers, re-interpreters, rivals and detractors' (ibid: 13). As much as Freud's public standing and overt intellectual capital may have taken a tumble in the second half of the twentieth century, psychoanalysis has nonetheless emerged through processes of transformation as a general culture of opinion that helps mould and inform contemporary folk psychology. It is in this sense of a culture of opinion shaped by psychoanalytic ideas and concepts, rather than psychoanalytic ideology itself, that I will be using the term 'psychodynamic' here.

Of course the developments and differences between the strictly psychoanalytic and the more nebulous psychodynamic are important and clearly evident in the sub-discourses of the expressive imperative as I have explored them here. Perhaps one of the most important centres on the core and defining binary distinction at the very

heart of the expressive imperative: namely that between expression and repression. It is the process of repression that tries to 'bury' thoughts and feelings, pushing them down into the basement of the mind and preventing them from becoming properly processed into thought and words, and it is repression therefore that is understood to cause unprocessed or only partly processed feelings to build up in the system thus creating the pressure that self-harm seeks to vent-off. In contemporary psychodynamic discourse then, as it influences therapy culture and popular psychology and as it appears in the general discourse of self-harm, repression has become a dirty word and the very opposite of the therapeutic confessional commandment to 'get your feelings out.'

But this formulation of repression is different from Freud's original conception in three important respects. Firstly Freud did not see repression as an unambiguously bad thing but rather considered processes of repression as a necessary and important part of healthy psychic function. He also restricted the use of the term 'repression' to the process of *unconscious repression* rather than the more conscious check on feelings implied by the more general contemporary use of the term, a usage which is much closer to what Freud meant by *suppression* (Rycroft, 1995). Thirdly exactly *what* it is that is understood to be repressed has also undergone an important transformation. While Lupton formulates the point of psychoanalytic therapy as 'facilitat[ing] the release of unconscious emotions through talking to the therapist, thus *relieving the pressure*' (1998: 94, my emphasis), Wolheim (1971) reminds us that for Freud it was unacceptable *ideas* which were repressed into the unconscious and not emotions; the affective charge connected to repressed ideas being redirected elsewhere as part of the process of repression.

Lupton's understanding is mediated by the developed discourse of the expressive imperative and its vocabulary of the emotions, and indeed it is this affective conceptualization of the expression/repression binary which is at work in representations and understandings of self-harm. Nonetheless the power of the Freudian conception is utterly present within this more general psychodynamics and the process by which the expressive imperative positions self-harm as a necessary mechanism is as easily and justly described in Freudian style as 'the return of the repressed' as by any other formulation. And furthermore it is interesting to think about

the contemporary fetishization of the emotions in the light of this psychodynamic inheritance. As I discussed earlier the emotions stand as the representatives of nature and natural impulses within the psychic parliament of the mind and so take over somewhat the role Freud had allocated to the id and the libido. Indeed the representation of the emotions as the *elan vital* of the psychic system and the dynamic natural force that underpins much of our thoughts and actions, suggests that the transformation of the emotions into the primary force of self and psyche may have been based precisely in their capacity to re-frame the Freudian libido for a supposedly post-Freudian society being somewhat less abstract and less exclusively associated with sex.

The Psychodynamics of Self-harm

Even with these changes to the conception of repression and expression however the traces of Freud's conceptual innovations can still clearly be found within representations and understandings of self-harm. Returning to Allie's account of self-harm that I used to introduce the expressive imperative we find evidence of repression ('most of which had been buried for a very long time'), the blockage in expressed emotion ('silently screaming in pain. Why couldn't I scream out loud? Why couldn't I show people how much pain I felt inside?'), the seemingly independent agency of psychic forces ('allowing thoughts and images to torment me . . . I had no control'), and their power or cathexis ('the volcano inside me was growing dangerously close to eruption'), ambivalence ('I'd had an unusual thought the night before. It was a thought I didn't want to listen to'), and the inner division of the de-centred self ('a voice deep down inside said it would calm the turmoil'), and finally the pathological conversion, ('as the melted plastic landed on the flesh of my forearm, the screaming inside suddenly stopped'), and return to equanimity ('and I drifted off to sleep'). To this we can also add the importance of childhood experience and the power of psychic trauma ('[m]y mind was flooded with disturbing memories . . . [it] jumped from one event in my disastrous childhood to another') both of which are central concerns of self-harm discourse but are issues that I will take up in the next chapter.

For the moment it is only important to note that within psychodynamics understood as a language of interpretation important to the late-modern self, because it makes this self make sense to itself, we find a conception of the subject that allows for dynamism, multiplicity, and ambivalence in the very conception of subjectivity. This represents the balancing of seeming opposites into a single model without fatal contradiction that describes both the activity of the asymmetric binary and the features of ambiguity and ambivalence so characteristic of representations and understandings of self-harm. This balancing has been evident here in the framing of self-harm as a rational mechanism *and* an idiom of irrational forces, as a necessary part of the system *and* as a symptom of illness, as a strategy of regulation *and* an emotional eruption. It is also evident in what the psychologist Kenneth Gergen (2000) considers the key dynamic tension at the heart of late-modern subjectivity; that between a 'romantic self' who seeks in some sense to live through and not in spite of her emotions, and the 'modernist self' which is concerned with self-control and containment. So in psychodynamics we find a language of interpretation that includes a discourse of the emotions and the raw, natural forces that inhabit the psychic system, as well as a discourse about managing and regulating these forces and the necessity of doing so in order to realise good mental health. The romantic self and the modernist self may appear to be at odds by definition but in the psychodynamic model they are assimilated through the mutually necessitating order of rational self-management and disciplinary control. The romantic self is allowed as long as it is governed by the modernist self, and the modernist self is prioritized and allowed its executive position only because of the value and the emphasis that is placed upon the romantic self. In this way the individual has been constituted as a site of psychological self-surveillance and self-discipline, and the cosmology and social structures of psychology are thus legitimized as a realm of authoritative knowledge governing this site; but this is to move us on from the discursive complexes of this cosmology to the very broad orders of discourse that make it possible and meaningful.

The Psychological Individual (an order of discourse)

> The focus of subjectivity is a distorting mirror. The self-awareness of the individual is only a flickering in the closed circuit of historical life. That is why the prejudices of the individual, far more than his judgements, constitute the historical reality of his being – Hans-Georg Gadamer *Truth and Method* (1989: 276-7)

If the key thematic discourse of the expressive imperative is fundamentally rooted in the culturally important 'language of interpretation' that is psychology, and more specifically psychodynamics, then as Taylor makes clear we can in turn position this language as emerging out of a particular 'space of questions' and an order of discourse that makes such systems of representation and cultural discourse meaningful and significant. As I briefly indicated before this space of questions seems to generally designate the broad yet utterly necessary sense in which self-harm rests upon a division between the inner and the outer and the way that the surfaces of the human body seem to cover over an inner depth, like the veil of Hawthorne's minister, and hence conjure the substantive presence of a private inner self. It follows then that ultimately the expressive imperative is positioned and finds its proper context within the order of discourse that describes the idea and the ideal of western modern and late-modern bounded individual self that Geertz described at the beginning of this chapter.

Indeed whether or not the modernist or the romantic self is emphasised, and whether or not it is bio-psychological objectivism or else a more personalistic subjectivism, that is given priority in describing and explaining self-harm, there nonetheless remains a basic and fundamental framing of the individual as the key site, core, and cause of the practice. It is the individual self that is the constant reference point for representations and understandings of self-harm and it is our construction of this individual self that provides self-harm with its most immediate context of meaning and significance. It is an obvious but utterly central point then: that to understand 'self'-harm one must understand what is meant by this 'self'; after all what would self-harm look like, what would it mean or signify, without this discursive structure of the self? This is not to ask the psychological question of what kind of a self (understood as a particular kind of personality) might come to self-harm or be particularly disposed to it, but rather to ask the historical and sociocultural question of what *sense* of a self, what idea of selfhood

and subjectivity, is implied in the kind of self that is represented as the self of 'self'-harm and which seeks to explain one in terms of the other.

The Modern Self

Our contemporary culture and cosmology of psychology tends to be focused on the figure of the individual as Geertz described it at the beginning of this chapter. But what Micale had to say about the history of illness categories would also appear to apply to the emergence of a particular ontology of the subject which effectively erases the 'lines of [its] cultural origin' and instead represents 'a single sociocultural milieu from which all authors – professional and popular, scientific and literary – may draw' (1995: 238). Consequently the individualistic focus and prejudice of the human sciences is generally justified not on historical, sociocultural, or political grounds but rather on scientific and ontological grounds as the more or less self-evident atom of human life the naturally given unit of our bio-psychological architecture, and the cause and agent of human action as shaped by eons of evolution (Lukes, 1973; Heller *et al*, 1986; Rose, 1991; Kvale, 1992; Jansz, 2004). It has then been something of an intellectual revelation of the twentieth century to note that this prejudice is a consequence of what Durkheim called 'the cult of the individual' (2008 [1912]) by which the old ideologies and orders of existence that tied human lives into a more continuous and deeply connected organism of culture had not only disappeared with the emergence of the modern world in the sixteenth-century but that they had been replaced by an overwhelming concern for the individual subject as the new order that consequently shaped our sense of ourselves, our lives, and our actions (Elias, 2000; Taylor, 1992; Seigal, 2005).

The breaking down of the old ideologies is often described as a process of 'de-traditionalization' (Giddens, 1990, 1991) through which all the old solidities and certainties began to 'melt into air' in Marx's memorable phrase (Marx and Engels 2008 [1888]) and the machine of modernism transformed one area of western life after another. As the historian Lawrence M. Friedman describes the emergence of this modern world

old forms and traditions seem to be breaking down – forms and traditions that trapped the individual in a cage of ascription; that fixed human beings in definite social roles , pinned them to a given position in the world, no matter how they might wriggle and fight (Friedman, 1999: vii-viii)

Indeed the vertical structure that had described the classical and medieval concept of the cosmos as a 'great chain of being' (Foucault, 2001) that positioned each person into a living and structured organic whole, delimiting their freedom but guaranteeing their place in the totality, was replaced with a more horizontal structure through which the role, identity, and social position of the subject was no longer a given but rather a project and a challenge to 'make something of oneself' (Bauman, 2000). The movement from the vertical to horizontal structure and social paradigm then implied a movement from a rigid and somewhat determinative hierarchy of social position and relationships to one in which there was more room for the kind of fluid and agentive forms of life and relationships that have become the ideal of modern and late-modern society. Rieff argues that a 'culture in crisis favors [sic] the growth of individuality' (1991: 279) and as such as Durkheim makes clear the historical loss of an ideology of the social group was replaced in western modernity with an ideology of the individual which became the new ideal and cult organizing people's desires, bodies, relationships, and concerns (Durkheim: 2008).

From within this ideology the individual self seemed to have been unchained and set free after eons of social and political servitude, free to make something of himself (the male pronoun is used advisedly since female subjectivity was still tied to the male) and rely on his own individual resources and productivity. However as Friedman warns

> [C]hoice is often an illusion. People are firm believers in free will. But they choose their politics, their dress, their manners, their very identity, from a menu they had no hand in writing. They are constrained by forces they do not understand and are not even conscious of (1999: 240)

The paradox folded into Durkheim's phrase then, the *cult* of the *individual*, must be taken seriously and while the *ideology* of modern individual freedom was and is indeed a sociocultural reality at work in the modern and late-modern worlds, these are worlds in which this ideology nonetheless often covers over the tight social, cultural, ethnic, and gendered ordering and regulation of people (Miller, 1993). It was not so much social order then that melted away in the modern period then but rather the obvious and overt operation of such order over people's lives, which is to say the governing

effect of social order in its coercive modality. This was gradually to be replaced by an order based on self-government, self-regulation, and the internalization of social and political power (Jervis, 1998). In other words *the modern social order simply is the order of the idea and the ideal of 'the individual.'* The 'individual' here does not so much designate individual persons as such but rather stands more as an ideology and a social institution which shapes the organic, experiential, and social lives of actual people (Crossley, 2006). Two brilliant accounts of this process are available to the cultural sociologist: Foucault's analysis of the 'disciplinary' (1991), and Norbert Elias's analysis of the 'civilizing process' and the rise of '*homo clausus*' (2000 [1939]). Since I will have cause to cover Foucault's analysis in chapter seven I will make use of Elias's here.

In his classic work *The Civilizing Process* (2000 [1939]) Elias tracks the emergence and literal incorporation of new discourses and codes of self-control and bodily self-management. The increasing humanism that flowered into the modern age, and the emphasis on the individual and its agency as the new form of order in a more horizontal world found its expression through various concerns with how to control, contain, conduct, and civilize one's body. As Miller summarises

> Elias writes the Freudian developmental story of the individual psyche onto a social and historical process in which the childlike exuberance of medieval man is metamorphosed into the decorous repressed style of the contemporary bourgeois adult (1997: 171)

Elias illustrates his argument with a literature of etiquette books that became popular at the time and which convey a more general cultural concern that people's bodily fluids, emotions, and erratic behaviours should be kept under strict self-control; the strictness of the discipline increasing with the passing of the centuries until, as a child is taught the self-discipline and self-awareness to control and civilize its own bodily functions until it becomes a decent and vigilant adult, a new kind of individual subjectivity emerged – modern subjectivity, a contained and bounded subjectivity, or what Elias calls *homo clauses* ('closed man').

In other words in the movement from a vertical to a horizontal social order forces of social control went from being explicit and external forces of coercion, to being internal and implicit forces of self-control (Mannell, 1992). And as the analogy with the

body training of childhood suggests much of this process of internalization was based on a cultivated economy of personal guilt and shame (Miller, 1997). In this way the aggressive force of the individual's agency, which might be a problem in a social order without a strong and explicit vertical order, became the policing force of its own self-control, and the body became the primary site through which agency and the control of aggression was demonstrated as it was the body and the self that was now the subject's primary possession and project. Under such a civilizing process the subject became characterized by

> firmer, more comprehensive and uniform restraint of the affects . . . together with the increased internal compulsions that, more implacably than before, prevent all spontaneous impulses from manifesting themselves directly . . . [this is] what is experienced as the capsule, the invisible wall dividing the 'inner world' of the individual from the 'external world' or, in different versions, the subject of cognition from its object, the 'ego' from the 'other', the 'individual' from 'society' (Elias, 2000: 211)

Indeed Turner describes this process as the emergence of a 'somatic society' meaning 'a society within which major political and personal problems are both problematised in the body and expressed through it' (2008: 1) or, we might add, on it. With the emergence of *homo clausus* then we arrive at some significant sense of the self of self-harm. In this description we have the central concern with controlling the raw and unprocessed impulses of the body and the powerful sense of a natural, ontological divide between self and other across which communication must occur. In the very metaphor of a *homo clausus* we have the sense of a container in which the unruly fluids and emotions of the natural body may build up, create pressure, and threaten an indecent eruption. And in the concern with conduct and the rational control of the body we have the common psychological concern, expressed by Hollander, with processing feelings into rational thought and language.

From homo clausus to homo psychologicus

In turning the self into a site of fluidity, doubt, and necessary self-control the modernist horizontal order also created the self and the psyche as a distinct and necessary object of knowledge. If one's life was not determined by its place in the social or cosmic order and one's fate was not simply a product of the will of God but

rather of one's own will and disciplined action then it mattered what this will was, where this action comes from, and what kind of thing this individual self was that now occupied the *axis mundi* of human existence. In other words if something like the civilizing process did produce a central 'space of questions' by dividing the inner world from the outer, then a language of interpretation had to be produced to deal with this new interiority, the emphasis Elias describes on internalized aggression, and the subtle yet effective paradox of a socially necessary regime of self-control. A new language of interpretation that could model the new 'subjects of inwardness' (Foucault, 1978; 2009) would of course resolve some of this paradox by representing not just a new science of the human, but also a new regime of authorized knowledge about the human, and new regimes of disciplines and technologies for helping the self control itself (Harvey, 1990; Jervis, 1998). Such a language of interpretation was of course, as I have already noted, psychology (Rose, 1985, 1991, 1998; Hook, 2007) and it is because of this that Herman can refer to it as 'the creed of our times' (1995: 1).

As Kvale points out '[p]sychology is a child of modernity' (1992: 39); it was a neologism of the sixteenth-century, an intellectual discipline of the eighteenth-century, and a science in the twentieth (Danziger, 1997; Jansz and van Drunen, 2004). And as Foucault argues it was a product of the changing social and political conditions of modernity and as such is configured with the very emergence of the 'individual' itself

> the individual is the result of . . . procedures which pin political power on the body. It is because the body has been 'subjectified,' that is to say, that the subject function has been fixed on it, because it has been psychologized and normalized, it is because of all this that something like the individual appeared, about which one can speak, hold discourses, and attempt to found sciences (2006: 56)

For Foucault then applying the power dynamics of internalization and subjectification was not just a matter of creating a moral economy of guilt and shame centred on bodily displays and performances, and was not simply a matter of rendering a socio-political order into a psychological one, but included the production of new disciplines of knowledge and their technologies that would act as a sociocultural scaffold to Elias' civilizing process; that would in effect take problems of social and political governance and re-cast them as problems of person, individual, and psychological governance (Dreyfus and Rabinow, 1982; Rose, 1991, 1998; Hook, 2007). The historical formation

of *homo clauses*, the bounded individual, necessitated the historical formation of the psychological and human sciences and as such they represent two sociocultural patterns which are deeply resonant with one another.

The curious paradox at the heart of psychology is that it is a *social* discipline and a cultural system of knowledge and technology, but one that is designed to help people become more effectively *self*-controlled and *self*-regulating. In this way it promotes two different values with the potential for tension between them. On the one hand there is the emphasis on self-regulation but on the other there is hostility precisely to 'behaviour patterns that demonstrate self-reliance and self-control' (Furedi, 2004: 34). Or at least the kind of self-reliance that denies conformity to psychological knowledge and technology. Kaminer (1993) describes this tension as it emerges in the co-dependency movement, she notes that while self-regulation is lauded as an ideal of mental health it is also understood to be something that is unachievable on one's own, indeed the very idea is taken to be an indication of 'denial'; rather a person is accepted as emotionally mature and literate only if they admit that they are 'sick' and need help. Here regulation *is* ultimately *self*-regulation but it is not framed as a naturally occurring quality of the psychological system; rather it is a cultivated quality and a product of the civilizing process. As such one must *learn* to be self-regulating and one must learn to listen to one's emotions, to recognise and accept them, and to find healthy and effective methods of expression. And of course it is the psychological, as a complex of power/knowledge (Foucault, 1991), which provides this help and guidance. It need hardly be pointed out that the dependence on psychological knowledge and technologies is underlined at nearly every turn in books and internet sites on self-harm through the ubiquitous advice 'get help.'

So while the psychological cosmology emphasises what Rice calls the 'asocial self' (1996) or *homo clausus*, it also makes the wellbeing of this individualized self dependent on the help, advice, guidance, knowledge, technology, and intervention of psychological experts (Rose, 1985, 1991, 1998; Parker *et al*, 1995; Hook, 2007). This conflict can be largely modelled through what Gergen's (2000) distinction, briefly noted at the end of the 'the psychodynamic self,' between the romantic self and the modernist self, or what Bellah *et al* call expressive and utilitarian individualism (1985). The romantic self can to some extent be seen as a recourse to the very forces and

powers of nature and the natural body that the civilizing process had sought to control though now symbolized less by farting or vomiting in public and more as a reaction against a machine sterility that writers and artists felt has begun to drain the spirit from the world (Jervis, 1998; Day; 1996; Gergen, 2000). It is this romantic discourse that we see reflected in therapy culture's valuation of the emotions, and honouring of the inner self as a true or authentic self. But it is also the control of this romantic self and its discourses that we see reflected in the idea that while emotions are good they must nonetheless be controlled and processed. As such the romantic self is discursively cast in such a way as to necessitate the modernist self, aided as it is by the regime of knowledge and multiple technologies of psychology. In the movement from *homo clausus* to the antithesis of the romantic movement then we move historically and socially into the synthesis of what Foucault called *homo psychologicus* (1987). No better example of this can be given in connection to self-harm than that of the technology of 'talk.'

Talk versus Self-harm

As we have already seen, the *depths* of the romantic self, the natural and emotional side of our psychic system, are understood as agents of truth and authenticity only when they are processed through the rational language and regulation of the modern self, the self that carries the encoded values of the *homo clausus*. The failure that leads to a build up of unprocessed affect is therefore characterised by people like Daniel Goleman and Michael Hollander as a lack of 'emotional literacy.' Hollander states that self-harmers 'often just don't know *what* they are feeling . . . [They] can't identify or label their emotions' (2008: 37, his emphasis). Psychotherapist Steven Levenkron echoes these comments when he describes the self-harmer as someone who 'has not had the opportunity to acquire the language of emotional expression' (1999). Indeed in these texts the capacity to 'process' does not seem to be a natural capacity at all, and increasingly it is framed less and less as a capacity that is effectively cultivated through ordinary socialization. Rather the privileged vocabulary of the emotionally literate is unsurprisingly a psychological vocabulary (Hook, 2001). 'Processing' then implies using these vocabularies and technologies of emotional expression, as defined

by the psychological disciplines, in order to work the raw pre-linguistic and pre-cognitive emotions into rational labels and regular forms such that they may be accepted into the psychic system, and subsequently expressed 'in a healthy way' as Darcy Lyness of Teenshealth.com puts it (quoted in Williams, 2008: 23). As Harrison and Sharman advise

> The important thing is to find ways to start talking to someone you trust . . . A professional should have the training to listen to you and help you reach your feelings and manage them in a different way (2007: 9)

What such processing implies then is the smooth functioning of the expressive imperative and the effective management of emotions without problematic repression, and therefore also without the build up of unprocessed and unexpressed affect. Indeed recall Lupton's description of therapy quoted earlier as 'facilitat[ing] the release of unconscious emotions through *talking* to the therapist, thus *relieving the pressure*' (my emphasis), psychoanalysis of course being baptized by one of its earliest patients as 'the talking cure' (Fine, 1997).

In this way a kind of spectrum is commonly posited with optimal processing and healthy emotional expression as discovered and taught through the psy-complex at one end, ordinary expression in the middle (which may not be satisfying but which also doesn't lead to serious mental health problems), and self-harm *near* the far end. Self-harm cannot represent the extreme end of the spectrum since the ultimate act of repression and certainly the ultimate act of romantic tragedy is suicide, and as we saw in chapter four self-harm has come to mean, in Menninger's phrase quoted there, 'a victory of the life instincts over the death instincts.' Therefore self-harm must count as being *on* the spectrum of expression, even if only as a last ditch and emergency mechanism of externalization. This spectrum is active and implicit spectrum throughout almost all representations of self-harm and is articulated through the common equation that the less healthy talk there is the more self-harm there will be, and the more healthy, psychological, and therapeutic talk there is the less self-harm there will be. Levenkron for example in telling the story of a therapeutic encounter with a self-harmer called Simone, notes that when he told her that they had work to do and she replies by asking 'What work is that?' he answers 'The *talk* between us that helps you stop needing to cut yourself on your arms and legs' (1999: 79 my emphasis).

He explains elsewhere that '[l]acking the words with which to express her emotional pain . . . resorts to a destructive physical dialogue with herself' (1999: 49), while Susan describes her self-harm by noting that 'I couldn't talk to him [her boyfriend at the time] or tell him how I felt, so I cut it into myself' (email). It is of course a very widely held piece of contemporary wisdom that, as Dee Pilgrim puts it in her information booklet for teenage self-harmers '[t]alking to someone is always good' (2007: 30).

Craib has observed this contemporary valuation of psychological 'talk' and has noted that people often think that they 'can talk about feelings instead of having them, that talking itself solves emotional conflicts and leaves us at ease and peace with ourselves and others' (1994: 104) Of course this power that people think inheres in 'talk' and that Craib refers to is not necessarily talk in therapeutic situations, but rather the use of psychotherapeutic models for interpersonal communication and the management of relationships, and which are presented as templates for emulation and as exemplars of best practice in our social lives (Furedi, 2004). However, though psychological and therapeutic 'talk' may be framed as an ideal, as a kind of pure and perfect communication, it also seems to carry a normative injunction. It is how we *should* talk, and we will experience suffering in proportion to the degree to which we fail to talk in this way (Coles, 1987; Hook, 2001). Such is part of the justification for the massive expansion of therapeutic services and therapy related goods from individual and group sessions, to books, CDs, DVDs, lectures, workshops, and confessional television (Simonds, 1992; Kaminer, 1993; Greenburg, 1994; Cushman, 1995; Moskowitz, 2001). In this way the disciplines, regimes of knowledge, collections of technologies, and networks of institutions that make up the psy-complex, therapy culture, and the culture of the psychological more generally have positioned psychology not only as a privileged language of interpretation, rendering the depths of our system intelligible to us, but also as a language of normative transformation, as a necessary extension of the civilizing process into modern and late-modern forms of life. Here then words and worlds cross and become confused, regimes of knowledge and representation are also regimes of management and regulation.

Summary

One of the great pleasures of mental health (whatever that is) is how much less time I have to spend thinking about myself' – Susanna Kaysen *Girl, Interrupted* (2000: 157)

Kaysen's comments may be contextualised by those of E.M. Cioran who notes that '[n]o age has been so self-conscious,' we are possessed by a 'psychological sense' which has 'transformed us into spectators of ourselves' (1976: 139), no matter what we do '[a]ll activities lead it [the mind] back to itself' (1976: 141). It will of course be a recurring theme throughout this thesis as the point is made again and again that self-harm and our psychological culture are significantly co-patterned and resonate deeply with one another. 'Psychology' it must be remembered is being referred to in this context as psychiatrist Robert Coles describes it, as a 'concentration, persistent, if not feverish, upon one's thoughts, feelings, wishes, worries – bordering on, if not embracing, solipsism: the self as the only or main form of (existential) reality' (1987: 189). It is within this general sense of psychology that we can position the actual institutions and activities of the psy-complex without supposing conspiracy or a particularly dystopian perspective on the present. But it is also within this general culture of the psychological, acting as a late modern transformation of the broader historical and social themes of modernity and the rise of the psychological individual, that we can understand the emphasis that is now placed on effective and healthy communication and the way that such an emphasis has been connected to both an ideal of emotional expression and its increasingly normative role in our society. The next two chapters will help us to flesh out some of the other dimensions and implications of this, however for the moment I want to bring us back to the observation made in my field journal at the beginning of this chapter and underline the fact that the ideas and values organized by the ontological axis map onto the historical, social, and cultural pattern of the psychological individual and describes the way that self-harm also maps this pattern as a distinctly modern kind of practice. However more than this self-harm emphasises this pattern and its dynamics, even to the point of exaggeration, and in this way seems to indicate some of the tensions and conflicts that arise for subjects modelled after the late-modern psychological individual.

Chapter Six

The Aetiological Axis

Introduction: From the Psychodynamic Self to Estrangement

> Silence: silence is the mark of hysteria. The great hysterics have lost speech . . . their tongues are cut off and what talks isn't heard because it's the body that talks – Helene Cixous *Castration or Decapitation* (1981: 49)

> It was never entirely certain what everyone else knew and what they weren't admitting to themselves. For instance, there are mentions in my diaries of my mother rowing with my grandfather about 'what he got up to,' which I take now to mean that she knew what was going on, but on the other hand we never told her anything, so how could she be certain? . . . we were completely locked into the silence and secrecy. I do blame my mother for not stopping it and for allowing him unlimited access to us . . . but I think it was her own gaggedness that stopped her finding out more, just as it was ours that stopped us telling her. I do find it all very sad – it's like that picture by Magritte of a man and a woman with sheets over their heads. Communication is impossible, and therefore how can anyone really be sure what's going on? – Dawn (email)

In this passage Dawn talks about her early family life; her relationship with her mother, and the sexual abuse that she and her sister were subjected to by their maternal grandfather, an abuse which continued over several years until he violently raped her at Christmas time when she was sixteen years old. Perhaps not surprisingly it is a history, and an event, that has since made up the mostly undisclosed and unspoken background of her self-harm. Since the age of fifteen she has cut into her skin with razors and broken glass to purge through blood and pain the memories of those early years, and the confusions of these early experiences. It was a home life she was later to describe as 'a conspiracy of silence'; a place where communication had broken down, emotional expression was repressed, and even the most familiar relationships had become infected with a sense of estrangement. On the surface of it all the family continued to live and function as a family: there was work and school and dinner and bedtime and Christmas, but behind each of these there was a seemingly impenetrable barrier that rendered each member of the family as a definate 'other' to Dawn; as something strange, unknown, and fundamentally *unknowable*. In this way she was not only estranged from her family relationships but also from the conventions of communication and emotional self-expression. As she explains:

> We grew up in a house where truths were never stated, where unpalatable facts were glossed over, and where self-expression was frowned upon . . . by the time I'd grown up I felt incapable of saying anything. I think this is what I'm trying to unlock, and one of the signs of progress will be when I become more articulate and less tongue-tied about things of great emotional importance (diary)

That Dawn's self-harm should be tied into a fundamental breakdown in language and communication should be little surprise since the discourse of the expressive imperative has already positioned it as a desperate mechanism of expression emerging through just such a breakdown. In her emails she describes how she had become estranged from ordinary language ('I felt incapable of saying anything'), self-expression ('it was as if my lips had been sown up'), and her ability to express and experience emotions ('[p]erhaps I'd be better at anger now if I'd been allowed to express it as a child – or indeed, any other emotion'). And through such sentiments the expressive imperative seems to appear, in an estranged modality, to provide a kind of self-evident sense to her summation that 'no one was ever allowed to express themselves and nothing was ever said, it's no wonder I turned to self-harm as the only means of expression I could employ.'

Indeed for Dawn the fault line that the ontological axis describes between self and other, and that frames communication and expression as problematic, has opened up into a gaping abyss in which self and other are now utterly separated and communication is not just difficult but 'impossible.' That her sense of estrangement is rooted in the framework of ideas and beliefs about subjectivity, expression, and interpersonal communication that we have looked at through the ontological axis seems to be acknowledged by her, and hinted at by her evocation of Magritte's *The Lovers* (1928). This is an unnerving painting which depicts the ordinary, even banal, act of a couple kissing but which through lighting, the stark arrangement of elements, and the fact that both man and woman are completely veiled from one another as well as from the viewer, also manages to evoke a strangely disturbing atmosphere of dread haunting the very banality of the act depicted. In this picture the basic framework of the ontological axis appears as the definite separation created by the cloth veils the couple wear and which renders attempts at contact and communication strangely impotent. Like Hawthorne's minister, Magritte has, by masking the figures, summoned the *effect* of both a public surface and a private and psychological depth, each

constituting the other and evoking a mystery that can never be finally solved: what is *really* under the veil? Or as Dawn puts it: *what's really going on?*

The cosmology of the modern western subject then, as described by the ontological axis, problematically conjures both the sense of an inexhaustible plenitude of the unknown into the private space of the self, and *at the very same time and because of this* it also posits an impassable barrier to expressing and communicating that plenitude; emotions become *too* deep, our private selves *too* private, and consequently communication and expression are set-up as impossible burdens. Indeed the expressive imperative seems to be predicated on the very idea of its own limitation, the basic impossibility of fully expressing the essence of one person to another. This inner presence, cast as truth and emotional depth, is defined by its duality with the outer world which by contrast is cast as false and artificial (Guignon, 2004), and in this way the subject can become trapped within webs of traditional ideas and beliefs about being trapped within themselves, within the psychological individual. But the privacy of this inner self and the consequent challenge of interpersonal communication are assumed to be universal features of the western individual, and as much as Dawn acknowledges these basic problems and difficulties as part of human nature it is clear that she also sees them as being hugely aggravated by the particular conditions of her early home life, and the particular events of her personal history. So while the ontological axis may provide us with discourses about the framework and pressure points from which problems *can* emerge, it does not tell us why in cases like Dawn's it is thought that problems *do* emerge; and why indeed some people, and only some people, become pathogenic and turn to self-harm[19].

Magritte also seems to hint at this need for a supplement. Perhaps anyone can relate to the sense of distance and otherness that characterizes even the closest relationships but Magritte suggests more than just a basic and existential separation. He presents claw-like folds in the veil reaching around the back of the woman's head, folds which carry the impression that the man's hand has grasped her there and taken

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[19] Again, it is important to remember that such connections of cause and effect are being described here as a cosmology or metaphysics of subjectivity and illness – I am mapping these ideas and the way they form a cat's cradle of seemingly necessary and logical connections *but* I am not arguing that such connections or the underlying realities they seek to give conceptual form to are in fact real or indeed responsible for people's self-harm; just that such are the meanings surrounding and pervading the cultural pattern of self-harm.

control of her. It is as if the very space of secrets, and the failures of communication created by the presence of the veil, also produces the space in which acts of violence and relations of subjugation can hide under cover. In *The Lovers* the banal surface and the sinister depth interpenetrate and constitute one another *as* depth and surface, as *effects* of the boundary positioned between them. The effect is an 'uncanny' one of estrangement (Freud, 2003), of the familiar turned other, and the banal turned threatening. For Dawn the same logic played out in the brutal domestic compliment of failed expression and violent abuse; the banality of bedtime and Christmas traumatised by sexual violence, and the familiarity of a mother's words made strange and distant by the impossibility of communication.

The ontological axis then does not provide a full range of statements about self-harm but must be supplemented by another dimension of ideas and values, a second axis which complements and extends the first and explains *why* common problems connected to the structure and communicative capacity of the subject as psychological individual lead in some cases, and only some to the activation of self-harm as a mechanism of emergency expression. While the first axis supplies an account within this discourse of those structures which are thought to make self-harm possible, this second axis must be brought in to explain what makes it likely; not an ontological axis then, but rather an *aetiological* one. And if it is the experience of estrangement that shows us that we need this supplement, then it is also this experience that forms the next key thematic discourse contributing to representations and understandings of self-harm.

Traumatic Estrangement (a key thematic discourse)

Of course Dawn's sense of estrangement is by no means peculiar to her but rather forms a key theme typical of representations and understandings of self-harm. For example every self-harmer interviewed for this research articulated some sense of personal, emotional, social, and even existential estrangement; a sense that the world and others, life and talk, and even eventually a sense of self, had become strange, disordered, and even disturbing. As Susan explains her experience

> It was like being a leper who has the disease through no fault of his own, and yet is tossed away and banished for his ailment . . . *I felt like an alien* (email, my emphasis)

And as Carla reflects on her past

> I was so, in so much pain, and my head was never right as a teenager, erm . . . I never felt belonging or value (in person).

But this sense of estrangement, while pervasive, is also a somewhat nebulous and mercurial theme appearing in multiple forms across the spectrum of objectivist/subjectivist representations, and is intimately but complexly tied to the central metaphor of *trauma*. Of course we have already encountered some of the more subjectivist tropes of estrangement in Richey Edwards description of his essential voicelessness, in the wounded impotence of the Fisher King that helps symbolize this voicelessness, and in the sentiments of horror and social alienation evoked by the 'The Waste Land,' sympathized with by Edwards, and resonant with the emo sub-cultural representation of the world as 'an empire of dirt' (as Trent Reznor puts it in his song 'Hurt'). But more broadly this subjectivist strand of estrangement can also be detected in the general sentiments of self-harmers who feel alone in a world that does not make sense *to* them, and which seems unable to make sense *of* them. Dawn articulates this feeling when she writes in her diary 'I don't see how I fit into the world. And then I don't see how it matters. Why *should* I be trying to fit in?' (her emphasis).

This subjectivist discourse then articulates a metaphorical sense of trauma as a kind of rupture between self and world, a friction between the two poles of western subjective ontology whose connecting membranes have become stressed and problematic. Indeed running through all these subjectivist tropes there is an implicit contrast between a sense of inner authenticity and honesty on the one hand, and a general suspicion of the falsity and artifice characteristic of the social world on the other. Recall Susan's words in defence of her goth identity in chapter four or else Louise Pembroke's defiant statement that 'if that's normal than pass the razor blades' (1996: 15). And it is in the context of this distinction and separation that voicelessness can occur since neither the public language spoken nor the world that is spoken to, are fit vehicles or habitats for the authentic truth of the self-harmer's inner condition and honesty. As Edwards comments 'you almost feel, like, silent, you have no voice, you're mute . . . Even if you could express yourself nobody would listen anyway.' It is the

phenomenological dimension of Cixous' silence of the hysteric, and what Dawn describes at a more personal and familial level as 'gaggedness.'

By contrast the theme of estrangement as it appears at the more objectivist end of the spectrum is refracted through a series of psychological states commonly associated with self-harm, or as here with trauma; states of '[d]epersonalization, derealisation, and aneasthesia' (Herman, 2001: 109) - where 'derealisation' is defined by the DSM-IV-TR as a 'sense that the external world is strange or unreal' (1994: 530). This is the experience of 'dissociation' (Tantam and Huband, 2009) commonly reported by self-harmers and framed as a pathological psychological state characterizing a sense of numbness that nonetheless leads to 'a feeling of unbearable agitation' (Herman, 2001: 109) and a fear that the self may become utterly cut off from reality or indeed cease to be real itself. This fear has been described by Adler (1985) as 'annihilation panic' and is well described by Eleanor Hill who, like Dawn, was subjected to childhood sexual abuse

> I am icy cold inside and my surfaces are without integument, as if I am flowing and spilling and not held together any more. Fear grips me and I lose the sensation of being present. I am gone (1985: 229)

Both the fluid metaphor and the concern with the closed and contained subject as described in the ontological axis are clearly at work here, feeding the fear that if the boundaries are not maintained then the unreality of the world will infect the inner self and it will consequently cease to be a unified presence, a true 'I'. As a response to such dissociation, self-harm is often represented as providing a means of shocking the system back into reality and reaffirming the boundaries that might have become dangerously unstable. This of course is the second of the three most common general explanations for the function of self-harm that I mentioned in chapter four; as Conterio *et al* put it '[for] patients who feel distanced from reality, isolated, or dehumanized, the sight of their own blood can jolt them back to reality. It reassures them that they are alive, intact, and have personal boundaries' (1998: 64). Or as a poem by an unnamed self-harmer quoted in Gardner's *Self-harm: a psychotherapeutic approach* (2001: 3) describes it

> Feeling unreal and distant disconnected with life,
> I pick up my razor blades,
> Relived at the sight of them I cry,
> Not totally aware I cut into the skin,

Jolted back into reality by the act,
Checking that I'm still alive that I'm still real,
For a short while I am in control, for a short while I am at peace

Though the poem is a subjectivist medium the idea that underpins such representations and understandings of self-harm is basically objectivist: namely that estrangement is a pathological dissociation, *a psychological state* of mental illness that includes a sense of the unreality of the world but one which is caused by the dysfunction of the bio-psychological architecture of the individual. So while the subjectivist discourse suggest an on-going relational friction or trauma between self and world which describes a powerful sense of estrangement, the objectivist discourse locates the origins of both estrangement and self-harm within the psychology of the individual, and most typically does so not through a sense of traumatic dislocation as such but rather through the location of a past traumatic event that has caused psychic damage to the individual and which now echoes down through time in the form of self-inflicted injuries (Miller, 2005).

The importance of the concept of trauma for providing an explanation of self-harm in association with the discourses of the ontological axis is well illustrated by Dawn's comment that

I think I will always bear the scars of my childhood, but I'm hopeful that the pus has gone at last (email)

The scars Dawn is talking about are not physical wounds but rather inner wounds, and the 'pus' she mentions stands as a potent symbol of all the thoughts, feelings, and memories, the raw unprocessed emotions as the ontological axis would have it, that seep through these wounds to infect her consciousness and disturb her wellbeing. Similar symbols are clearly evident in Jan Sutton's poem which concludes the introductory sections of her book

You didn't deserve that legacy,
That bleeds away inside,
Those painful wounds, so very raw.
You try desperately to hide

I see the scars of battle,
That have helped you to survive,
And I admire your strength and courage,
And your will to stay alive.

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Sadly, that past cannot be changed,
Yet maybe the future can be bright,
And I feel privileged being alongside you,
On your journey from darkness to light

The poem is addressed as a tribute to self-harmers in general and so helps establish the idea that self-harmers are in general just those people who carry a 'legacy' and who, as Farar Elliott (2001) puts it, are 'trying to survive the world-rocking aftershocks of rapes and battering and torture' (quoted in Fillmore *et al*, 2003: 119). These 'aftershocks' are the 'battles' that Sutton mentions, and when she talks about the 'scars of battle' it is a single symbol that unifies the wound that 'bleeds away *inside* you', the psychological trauma; and the outer wound of self-harm. Indeed the semiotic logics of self-harm and trauma are woven so tightly together as to not only support one another but to seem to even constitute one another. Such trauma, taken together with the process of externalization described in the ontological axis, allows the act of self-harm to make sense through the homologous relationship posited between the inner invisible wounds which bleed raw emotions, and the outer self-inflicted wounds that express this trauma and testify to it (Gardner, 2001: 4). It is this homology that makes sense of Susanna Kaysen's comment that her self-harm was a matter of expressing 'externally and irrefutably, an inward condition' (2000: 153) and that allows someone like Susan to 'bleed myself dry of all unhappiness' (email). It also provides an explanation of why it is that self-harmers seem to be subject to so much more raw and unprocessed emotion than most: it is because they are the traumatised, because they have a 'legacy' that 'bleeds away inside' and invisible 'scars' that produce emotional 'pus.'

Because of this the metaphor of psychic trauma is a deeply powerful and popular one as the titles of books on the subject makes clear: *Secret Scars* (Turner, 2002), *The Scarred Soul* (Alderman, 1997), and *Healing the Hurt Within: Understand self-injury and self-harm, and heal the emotional wounds* (Sutton, 2005). However it is also a complex and contested one, a basic idea perhaps - the homology between an inner wound and an outer expression, made literal in the case of self-harm as an actual outer wound – but one which is abroad in the dynamics of different, and differently objectivist and subjectivist, formulations. As we explore the relevance of this concept for self-harm we will have to be careful to keep the different threads of its construction and use clearly

in mind. However to return for the moment to its foundational significance and basic objectivist framing; I think it is safe to say that a psychological or psychiatric case history written for Dawn would position her experience of childhood sexual abuse as the *cause* of trauma and this trauma as the *cause* of her self-harm.

Indeed the clinical and literary form of the case history, and the general use of 'aetiology' more broadly, tend to imply not just a search for causal conditions but rather a reaching backward through time to locate these causes as deterministic origins, and as subsequently hidden inner presences actively at work within us shaping our present experiences and actions whether we realize it or not (Carruth, 1995; Young, 1997; Leys, 2000). They further typically imply that such active agents will be biological, genetic, or bio-psychological, and where social or more personal factors are considered we again find the familiar strategy of 'looking past'; a casting of such factors as precipitating sources of stress rather than as formative and structuring forces in themselves, let alone meaningful causes (Johnstone, 2000). Case histories typically hunt for more solid targets than this (Phillips, 2004) and work by matching the universal 'atlas' of structures (Armstrong, 1983) described by the ontological axis to the active conditions described by the aetiological axis in order to produce a definable and diagnosable result. Of course psychic trauma is itself the example *par excellence* of this process.

Trauma, Aetiology and Case History

> It is a hysteria with tussis nervosa and aphonia, which can be traced back to the character of the child's sucking – Sigmund Freud in letter to Wilhelm Fliess January 30th 1901 regarding his *Fragment of an Analysis of a Case of Hysteria* (quoted in Masson, 1990: 434)

Interestingly enough the concept of psychic trauma can perhaps be traced back to the first psychological case history, or at least that text which turned the traditional psychiatric case history from a dry organization of clinical notes into 'a new form of literature . . . creative narratives that include their own analysis and interpretation' (Marcus, 1990: 90): this of course being Freud's *Fragment of an Analysis of a Case of Hysteria* (1953 [1905]). It is certainly a marvellous piece of writing and an example of the literary as well as theoretical revolution that Freud brought to psychiatry and

clinical psychology. Despite its age and its curiously unsatisfactory denouement it remains a 'living force' (Masson, 1990: 84) in psychoanalysis and can with justification be described as 'possibly the single greatest case history in the literature of psychiatry' (ibid.: 85). But despite this, and the fact that it runs to some one hundred and thirty pages in the standard edition, Freud's *Fragment* is nonetheless effectively reduced to the pithy twenty-one word statement quoted above and which sums up the case of 'Dora' (Ida Bauer, 1882-1945). The reason for this reduction is that, as Freud himself points out, '[i]t is the therapeutic technique alone that is purely psychological; the theory does not by any means fail to point out that neuroses have an organic basis' (1953: 113). Here then is the binary of understanding/explanation in its psychotherapeutic form: while the process of understanding is interpretative and therapeutic it provides no explanations as such, and exists separately from the natural form of the problem at hand.

It is important to keep this distinction in mind as we explore psychic trauma since here again the asymmetric binary is at work producing a relatively coherent text on the surface, but hiding a myriad of deconstructive tensions and ambivalences underneath. Perhaps the most obvious example of this lies in a significant element about Freud's interpretation of Dora that was also a significant element in the construction of a theory of a truly psychic trauma. The eighteen-year old Dora was brought to Freud by her father 'in spite of her reluctance' (1953: 23) to be treated for hysterical and delusional symptoms relating to her belief that a friend of her father's, Herr K., had tried to seduce her, a belief that her father rejected outright. His intention in taking Dora to a psychiatrist seems to have been to force her to accept that she had imagined the whole episode and that hers was a case of neurosis and not victimization. Dora's sense of frustration and betrayal at these events, which seemed to constitute a strong experience of estrangement, a 'corros[ion of] the very basis of her sense of what was real' (Masson, 1990: 89), was exacerbated by her suspicion that her Father's wilful dismissal of her claims was based in an act of sexual exchange, since he was having an affair with Herr K.'s wife.

Indeed more than just a convenient solution to an awkward bourgeois love triangle Dora seems to have been systematically used as a pawn in any number of similar games of sexual strategy and manipulation by the various members of her family and

household, games which were covered by a conspiracy of silence that it seemed she alone wanted to break. Her isolation in this desire helps explain her 'aphonia' – the hysterical silence that Cixous talks about, and which she evokes in the play she wrote about Freud and Dora's encounter - but also in the 'tussis nervosa,' a kind of hysterical cough or gag which recalls Dawn's silence (her 'gaggedness') and the manner of her silence, as she explains:

> there's always a point at which I become completely unable to speak past a certain level of personal disclosure . . . it's like a switch closes in my throat and I can't say anything without stuttering, and certainly nothing of value (email)

Dawn's switch is like Dora's hysterical cough and both are aspects of silence and the multiple processes of silencing. For Dawn this gaggedness means keeping the family's dirty secret while at the same time dissociating from it as an experience and a memory. For Dora it also meant being held at the centre of her own family's dirty secret and battling with it as a reality, a truth, something which really was happening. And then there was Freud. It is important to appreciate that it is at this point, as Jane Gallop remarks, that Freud 'stopped believing in a 'real' seduction at the origin of hysteria and realized that the source of neurosis is the child's fantasies' (1985: 213). In other words it is here, in this case history that the idea of a fully psychic as opposed to neurologic trauma was developed and the central idea of contemporary psychic trauma established.

For Dora as for Dawn, the trauma, the disordering rupture, existed in the moral order that sutured her personal experience into the network of relationships that surrounded her; in other words it was a trauma in how she thought she should have been regarded and treated within these relationships. For Freud however, while there may well have been a physical sexual trauma in the form of a failed seduction or possibly even multiple betrayals, this hardly seemed to matter. All that was ultimately real or significant about Dora's condition was the conflicted thoughts and feelings that constituted her traumatised psyche, and of course detectable in this is the individualizing logic characteristic of the case history and psy discourse in general. As Salecl notes

> [T]here is no direct correlation between trauma and event. Many subjects can experience an event, but only some will develop a trauma linked to it; while it is

also possible that the 'event' never actually happens, but the trauma is nonetheless formed (2004: 130)

Consequently Dora's seemingly reasonable complaints are rendered by Freud into symptoms of pathology, as he writes

> A string of reproaches against other people leads one to suspect the existence of a string of self-reproaches with the same content. All that need be done is to turn back each particular reproach on to the speaker himself (1953: 35)

As I noted in the last chapter then, in modernity all rivers lead back to the individual and the self, and the connection between self and world and the person and reality can effectively be re-cast as a burden, a labour which falls entirely on the shoulders of the psychological individual. On the face of it however this may appear to be at odds with a great deal of contemporary discourse on, and controversy over, the issue of psychic trauma. Dineen for example defines trauma as the idea that

> for every here-and-now problem, there must have been a dramatic there-and-then cause; that some event in the past, as far back as infancy, was so disturbing that it continues to affect thoughts, feelings and actions (1999: 57)

The focus of this concept then appears to be, contra Freud, on the event itself and the effects of the past on the psychic wellbeing of the individual in the present. Indeed such is a powerful and popular representation of the self-harmer that can be found in much popular psychology and media representations, that is to say the self-harmer as 'survivor'; as someone who has been brutalized by life, by a 'past [that] cannot be changed' as Sutton's poem puts it, but who nonetheless journeys toward light and (as the subtitle of Sutton's book suggests) 'healing.' (Salecl, 2004: 119-140). Dusty Miller's important contribution to the genre *Women Who Hurt Themselves: A book of hope and understanding* (2005) also reflects this construction as the use of the word 'hope' in the subtitle suggests, mirroring Sutton's statement that 'the future can be bright.' Here then from Dineen's summary to Sutton and Miller's sentiments we can see a sense in which it does seem to be important in modern therapy culture that the traumatized have suffered real and actual traumas, and that psychic trauma is not simply a useful idea or metaphor that people employ to make sense of their lives and feelings, but rather a powerful, definite, and natural response of our psychic systems to real events. Indeed it is just such a framing that is at work in Miller's book. Here trauma is not only stated to be the direct cause of self-harm, an assumption which she

shares with many authors, but is also emphasised as such through her coining of the DSM-sounding 'Trauma Reenactment Syndrome,' a concept whose central characteristic is described as 'a pattern of intentionally inflicting harm on one's own body' (2005: 9) as a result of

> childhood histories of interpersonal or family trauma; [people] reenact the harm that was done to them as children and reinforce their belief that they are incapable of protecting themselves because they were not protected as children (ibid: 8).

For Miller self-harm cannot be fully explained on the basis of the expressive imperative or the need to overcome feelings of estrangement, emptiness, or unreality, rather 'these functions are only part of the motivation for such behaviour; my book addresses the physical and psychological reenactments of childhood trauma expressed in self-harmful behaviour' (ibid: 7). For Miller the issue is not the multiple and varied patterns of life and action that are experienced and expressed through states of estrangement or acts of 'self-harming behaviour' (a phrase which she expands to include alcoholism, eating disorders, addiction to medication, incessant dieting, and numerous other practices) since these are only 'reenactments' or re-plays of a deterministic past. Rather it is the memory of the traumatic event, the *aetiology* rooted in the psychology of adult remembrances of childhood abuse, which is the central issue. For Miller to track this cause is to track the *thing* that sits behind such behaviour and which explains it, and it is to see such traumatic wounds as in psychoanalyst James Hillman's words 'the fathers and mothers of our destinies' (1979: 103).

But unless we are misled by the contents of this discourse we must keep a keen eye on its process and see that within its apparent focus on past events there is nonetheless a more primary focus, not on the conditions that led to such traumas, but rather in the psychological effects and ongoing psychological condition that describes this trauma. In other words it is not the event but the *memory* of the event which is given precedence. A priority that has led on the one hand to the seriousness with which psychic trauma is taken these days, while on the other has led to a certain relativizing tendency with respect to the events that can lead to such traumas. Indeed if it is the traumatic effect and not the event that matters then there is no objective limit to what kinds of events may be understood or experienced as traumatic. Furedi (2004) has recorded this effect of what Szasz (1978) calls 'semantic inflation' with respect to

trauma, noting that a Factiva search of British newspapers revealed a huge increase in the use of the word 'trauma' between 1994 (when it appeared less than five hundred times) and 2000 (when it occurred around five thousand times). He argues that this rise tracks the inflation of the term's referents from experiences or war and childhood sexual abuse, to any number of more typical and ordinary life events from accidents and illnesses to divorce and unemployment so that it now 'means little more than people's responses to an unpleasant situation' (Furedi, 2004: 4: Dineen, 1999). But while the event at the root of the trauma has become relativized the psychological condition has not, allowing the psychiatrist Steven Sharfstein to claim that trauma is a massive public health issue and represents 'the largest single preventable cause of mental illness' being to psychiatry '[w]hat cigarette smoking is to the rest of medicine' (2006: 3). Indeed another psychiatrist Andrew Slaby, who like Farar Elliott terms trauma 'aftershock,' claims that '[w]e *all* suffer from aftershock, maybe less violently but still at a price we shouldn't have to pay. In fact, aftershock is the disease of today' (1989: 5, my emphasis).

Consequently a pattern of semantic inflation for the term 'trauma' can be mapped onto a pattern of increasing medicalization and psychologization in the way that our culture frames and deals with problems, and increasingly seeks to tackle them not at the social or political level but rather at the level of the individual mind and body (Rose, 1998; Moskowitz, 2001; Furedi, 2004). Indeed while the apparent contradiction between formulations of psychic trauma as being about real past events, against formulations of it which are all about the psychic process of memories of the past, has led to a series of heated debates that range from accusations that Freud was a coward in the face of patriarchal social norms (Masson, 1990), to arguments over whether memories of child abuse can be repressed *in toto* and later recovered through therapeutic technique or whether such techniques actually manufacture such memories (Loftus, 1996), to the current hyper-sensitized cultural climate of fear about paedophilia (Furedi, 2006) effectively works to hide the underlying trend and process shared across these different positions. And this process is precisely the tendency to psychologise, individualize, and medicalize various aspects of human experience, a process that works through the framing of the cake of psychic trauma (to recall Geertz's metaphor) as a naturally given bio-psychological process. Arguably the

tendency to lend more credence to survivor's stories of the past represents *at the discursive level* only the application of more icing onto this basic layer of meaning. In other words here again there is the action of the asymmetric binary and the appearance of favouring the personalistic when in fact this is used to convey a sense of empathy and understanding which effectively serves to cover over a deeper and more primary naturalism and objectivism.

Here then is the deeply aetiological logic of finding cause not so much in context, or the meaning-making processes of a present and living person, but rather perhaps in part in past events that have helped shape the individual but much more so in the current fact of that individual's psychic condition since it is the individual's psyche which provides the active link and common denominator between any past events, real or imaginary, and present behaviour. And so it is with the individual psyche that psychotherapists from Freud onward have concerned themselves. But beyond the complex and somewhat confusing dynamics of more or less objectivist and subjectivist formulations of a basically objectivist trauma and the effects they may have on a society that subsequently pursues such issues through therapy rather than through social and political action, it is important to keep in mind that strongly subjectivist texts, including the testimony of self-harmers themselves, tend to work from the social authority and cultural capital that accrues to the concept of trauma as a medical concept, but *use* it in a basically metaphorical and non-objectivist fashion. It is important to keep this in mind since though many self-harmers do indeed have specific traumatic events in their pasts and do point to these as being causally implicated in their self-harm, many also do not and it has become something of a popular myth that all self-harm is an echo of childhood abuse. As Favazza notes

> On several occasions I have had to rescue patients from therapists who were frustrated at not being able to find the cause of an individual's self-mutilation and therefore assumed that he or she must have been abused (introduction to Strong, 2005: xiv)

Indeed such was the experience of Deborah who wrote

> [T]he counsellor I saw spent a lot of time trying to convince me that my parents abused me when they didn't. She was determined for a long time that there would be a 'root cause' somewhere and looking back she was probably gunning for an abuse story of some sort to emerge (email)

Such is one of the problems with a one-size-fits-all aetiology and too narrow an interpretation of the *idea* of trauma. Even those self-harmers who can and do point to traumatic experiences in their pasts are far more ambiguous and equivocal in their assessment of the connection between these experiences and their self-harm, as Carla states in relation to her experience of sexual violence

> What really gets my goat is that people assume I self-harm because of that, there is a strong link . . . but as I said to my therapist I was self-harming for two years before that and that's mine, it's not his, it's mine (in person)

Here Carla explicitly lays claim to her self-harm, it is an *owned* practice, it belongs to her and forms part of their way of life, and suggestions that it is a pathological mechanism or worse yet that it has been caused by another person may challenge this perspective. So while bio-psychological objectivism positions self-harm as a symptom of trauma, and trauma as a causal aetiology, self-harmers themselves are more likely to use trauma as a complex of ideas and values which helps them to make sense of themselves, their lives, their world, and in particular their sense of estrangement. As such a metaphorical understanding of trauma, trauma as a complex of meanings rather than purely an organic process, allows us to analyse the objectivist conception of self-harm as trauma externalised and understand it instead as a sense and logic of trauma effectively practiced and meaningfully performed. And more than anything this sense of trauma is generally articulated in the condition of estrangement, and the associated states of 'depersonalization, derealisation, and anaesthesia.' And exploring the reason why trauma is particularly articulated in this way will take us from the description of the key thematic discourse of traumatic estrangement to the broader discursive complex of the real and the authentic in which it is embedded and from which it derives its meaning.

The Authentic 'Real' (a discursive complex)

The key thematic discourse of traumatic estrangement then is clearly a central concept active within representations and understandings of self-harm, though it appears as one dynamically positioned within its sociocultural field, reflecting different though related meanings, and being subject to more-or-less objectivist and subjectivist

constructions. As such it may appear to be quite a subtle and tangled phenomenon however whatever ambiguities and ambivalences may remain can effectively be faded out by pulling back from our focus on this thematic discourse and looking instead at a complex of ideas and values that significantly underpin it. Within this broader frame the different valences placed on the reality of traumatic events versus the reality of the psychic process, or trauma as mechanism versus trauma as metaphor, may be seen more clearly as articulations of common concerns and meanings and in particular the meaning of the 'real.' I put the 'real' in scare quotes for the same reason others capitalise it, or italicize it; to note that by this term I do not mean to refer to any objective reality as such but rather to the cultural meaning and general concept that people draw upon when they talk about reality (Belsey, 2004).

Framed in this way the 'real' paradoxically does not indicate any actual or genuinely objective reality as such but rather a symbolic representation of what the 'real' has come to mean for us (Belsey, 2004) and indeed it has come to mean a great deal, constituting a central cultural fascination in late-modernity. It carries connotations of the natural, the certain, the unquestionable, and the definite (Taylor, 1991; Guignon, 2004; Boyle, 2004) and has already surfaced several times in this study. In chapter one I noted the energy and passion that is poured into campaigns to have certain idioms of distress recognised as 'real' diseases and disorders, where 'real' means bio-genetic and physical as opposed to imaginary and hysterical (Showalter, 1991). In chapter five I noted with Lupton (1998) that part of our contemporary concern with the emotions is their romantic coding as the natural and hence 'real' products of a true-self as contrasted with the falsity and conformity of the civilized self and the well trained ego. At the beginning of this chapter I noted the ontological separation between self and other conjured into our intersubjective lives by the emergence of the psychological individual and the effect this has on conjuring an isolated self and making it difficult, as Dawn put it, to '*really* be sure what's going on' (my emphasis). And of course in the last section we saw that Freud and Dora's difference of opinion about what was 'really' going on in her life translated through the twentieth century into the different emphases placed on the reality of actual traumatic events on the one hand, and the reality of psychic processes on the other.

'Real' trauma and self-harm

> [H]e preserved in the flesh, in a dramatic and conspicuous manner, the history of events he could not integrate into the fabric of his personality - Miller and Bashkin *Depersonalization and Self-mutilation* (1974: 647, speaking of a patient)

But as much as our culture might demonstrate a certain fascination with the 'real,' like its similar fascination with the emotions and the romantic self this interest does not reflect an uncritical approval but rather hides a deeper mediation through the action of the asymmetric binary; and it is through this ambivalence of the 'real' that those other ambiguities and ambivalences of the objectivist and subjectivist constructions of trauma noted in the last section may be resolved into a more fundamental set of beliefs and values, and a more fundamental tension. Let us return for the moment to the psycho-medical concept of trauma. As psychiatrist Judith Lewis Herman puts it 'traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning' (2001: 33). Of course here we can note that trauma disconnects and so is understood to create the sense of estrangement we began with, separating us from the outside as '[t]he foundations of our world begin to crumble and the ground begins to shake under our feet. We begin to question our own self-worth and value as a human being' (Parkinson, 1993: 14). But it is also important to note that like the emotions trauma is described here as having the capacity to 'overwhelm,' and like the emotions what trauma is generally understood to overwhelm are precisely those semiotic systems of cognition and language that we use to make sense of the world and which represent it to us as a familiar and predictable place. Indeed the DSM-IV-TR definition of traumatic events are those that do not fit into 'normal' experience, and which then, like the raw emotions of the ontological axis, cannot be 'processed' through a person's existing ways of thinking. So traumatic events so understood are psychologically defined as those that cannot be represented, and so cannot be 'processed' (Caruth, 1995); they are too literal, they are the non-symbolic, the un-signifiable, they are the 'real' 'overwhelming' us (Belsey, 2004).

This connection between the 'real' and trauma runs all the way through its various formulations and uses, and ties both its mechanical constructions and metaphorical constructions together. Though the relationship may be differently described – as I shall soon detail – coded at the root of all configurations of traumatic estrangement is

the idea that the psychological individual and the world that surrounds it have become disconnected and that under these circumstances the 'real' is overwhelming the individual, refuses to be symbolised and represented, and must then be controlled and externalised in some other way. And it is into this context that self-harm appears as a meaningful idiom of action and takes up its place as a means of expressing that which cannot otherwise be spoken, because *to* speak it in a more conventional and normative fashion *would be to have made sense of it*, and so to have processed it, and hence to no longer be traumatised by it. And this of course is why it is *feelings* and not *thoughts* that are understood to ooze like pus from the inner wound and provide the raw and unprocessed fluids which build up and must be vented off. Thoughts would imply mediation and representation, precisely what is thought to have failed in the face of the 'real' intruding on the subject while by contrast emotions, at least according to the discourses of the ontological axis, are in essence forces of nature, forces of the 'real.'

The drama and 'conspicuousness' that Miller and Bashkin refer to in their quote symbolizes an important aspect of this relationship between the 'real,' trauma, and self-harm since it describes the peculiarly metonymic logic that self-harm seems to represent. Compare it for example to the rich and metaphorical symbolism of Freud's hysteria or even to anorexia nervosa which might encode a symbolic reaction to a social 'tyranny of slenderness' (Chernin, 1985). Against these overtly symbolic idioms self-harm appears to be a curiously literal action, it is understood and framed as expressing an inner pain and an inner wound not *through* an outer symbol of pain and trauma, but by directly externalizing it *within* a very real physical pain and a literal (physical) trauma. As Susanna Kaysen puts it

> I was trying to explain my situation to myself. My situation was that I was in pain and nobody knew it, even I had trouble knowing it. So I told myself, over and over, You are in pain. It was the only way I could get through to myself . . . I was demonstrating, externally and irrefutably, an inward condition (2000: 153)

Self-harm then is not generally represented as a metaphor for inner trauma but rather as a mechanism of externalization by which this trauma can be projected, made flesh, made 'real' and this is vitally important for its role as an externalization. Kaysen's act of 'telling' herself through acts of self-harm that she was indeed in pain could hardly fulfil its function unless the process of externalization testified in its outer reality to the

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'real-ness' of the inner pain. Indeed self-harm is often described not just as an externalization of such emotional pain but also as a validation of it; the 'real' of the blood or burnt flesh, and the 'real' of the pain and suffering, testifies to the fact that there *really* is something wrong and that it is not just imagination or melodrama. As Donna puts it

> If you've got a cut and there's blood you can point at it and it validates the feeling because for me I wasn't having my feelings recognised or validated . . . if I cut one day I wouldn't need to for a few days because just looking at the cut was enough to calm me down because it was like saying 'yes, it is real' (telephone)

But, as much as it risks making the issue complex, we must remember that though such trauma may be taken as more-or-less metaphorical depending on the degree to which it is represented through more-or-less subjectivist tropes, it is generally represented throughout its discourses and those of self-harm as being wholly, or in its foundation, a literal and objectively real bio-psychological mechanism. This however is how it is represented within these discourses and as cultural sociologists we must see *these representations as being in themselves symbolic and metaphorical*; powerfully at work organizing people's ideas and attitudes but nonetheless, and irrespective of its organic basis, as something which is

> glued together by the practices, technologies, and narratives with which it is diagnosed, studied, treated, and represented and by the various interests, institutions, and moral arguments that mobilized these efforts and resources (Young, 1997: 5)

As such we can interpret trauma, and by extension of self-harm, as a metaphorical connection between the declared 'real' of the 'inner' emotional world and the psycho-centric subject on the one hand, and the more obvious and demonstrable 'real' of physical wounds and blood on the other. Neither trauma nor self-harm then should actually be modelled as actual and literal breaks in representation and signification but rather as symbols which signify a break in representation and signification, and which are significant symbols because of the cultural value that we now place on the idea of the 'real thing' as opposed to the artifice of the more consciously recognised symbolic order. Though it might sound convoluted and confusing to say so, it would nonetheless perhaps be an accurate interpretation, to say that far from being different in this

regard from hysteria or anorexia self-harm is indeed a metaphor, but a metaphor of the metonymic, a symbol of the un-symbolic, and a performance of the 'real.'

Authenticity

Though the dynamically ambivalent framings and formulations of trauma might largely be resolved by an appreciation of the shared valuation of the 'real,' and its effects on psychological process, across both objectivist and subjectivist discourse, there emerges a deeper tension between them, implicit in what has been said so far, and revolving around that other late-modern fascination so connected to the 'real' – namely authenticity (Trilling, 1974; Taylor, 1991; Guignon, 2004). It is a concern that as Guignon explains emerges with the same processes that map the emergence of modernity, speaking of this broad historical development he says

> Increasingly, people are preoccupied with what is going on inside themselves – their feelings, intentions, desires and motives. And they are able to make a sharp distinction between what is truly them – that is . . . the seats of their deepest feelings, desires and intentions – and what is only extraneous and transient . . . The distinction between true inner self and outward, bodily existence makes it possible to look on one's own body, feelings, and needs as things "out there," distinct from oneself, to be worked over (2004: 29-30).

So through the cultivation of the *homo clausus* and the separation of the inner and the outer we conjure a concern with our inner essence, presence, and true-self – the source of our agency and the anchor of our being under conditions of 'existential anxiety' (Giddens, 1991) provided conditions of horizontal social organization. Though the historicity of the concept may seem unusual the concept itself is highly familiar in contemporary culture and, as Guignon also notes 'the ideal of authentic existence is absolutely central to all the movements that make up the self-improvement culture' (ibid: viii). But in the last chapter we recorded Deborah Lupton as noting ambivalence in our construction of such a true-self, implicit also in Guignon's description above; the idea on the one hand that the true-self is our 'feelings, intentions, desires and motives' in their natural and instinctual forms, something inherent to us, and yet the idea on the other hand that our true-self is our 'feelings, intentions, desires and motives' as they have been processed and civilized.

The distinction is consequential for configurations of trauma and the 'real' since for the latter formulation trauma consists of the 'real' of the word overwhelming our systems of representation and signification. This is easily enough placed within the framework of the emerging modernist society and subjectivity. With the great chain of being broken it is not just the individual but humanity that stood in the middle of a vast, largely indifferent, and sometimes hostile universe. In a state of 'existential anxiety' all that protected us under these new conditions of horizontal cosmic and social order were our new systems of representation from science and medicine to technology and the human sciences and *homo clauses* as such emerges through the civilizing of nature, the taming and processing of the 'real.' However by contrast, strongly subjectivist representations of trauma, as evident in the sentiments of Richey Edwards, the poetry of T.S. Eliot, the subcultural motifs of emo, as well as the feelings of many participants in this research, tend to understand the threat of the 'real' as welling up inside of them *because the outer social world has become too unreal*. In other words it is not that the 'reality' of the world has overwhelmed systems of representation, so much that these systems have become infected by inauthenticity and falseness, to such a degree that they can no longer be vehicles for the authentic 'real' which consequently pools within the inner presence of the self, creating a traumatic rupture between this authentic self and its inauthentic world, and therefore also creating the conditions under which excess 'real' emotions must be vented off through the corresponding 'real' of blood, pain, and self-harm. This second formulation is of course the romantic complement to the modernist conception.

Self-harm then symbolizes the 'real' though this concept and self-harm itself may be more-or-less refracted through objectivist and subjectivist tropes. In practice, as always any real clash between them is normally kept at arm's length by the action of the asymmetric binary and a tendency to not look too closely at irreconcilable differences such as those between a cultivated modernist true-self ('become who you truly are'), and a natural and romantic true-self ('find your inner self'). Ultimately however it is worth noting that both constructions participate in the broader culture of the psychological since the modernist true-self requires the technologies of the psy-complex to achieve fulfilment (see next chapter) while the romantic true-self requires the vocabulary and therapeutic techniques of the psy-complex to find the authentic

self within. The point must be to reinforce the basic discursive logics of the psychological individual and their paradoxical reliance on a society and culture that is geared toward that individual. However if this set of ideas, values, and concerns describes a field of meanings in which self-harm is positioned and made meaningful through its connection to the 'real' and to authenticity, then this fundamental dynamic, however it is modelled, must also be understood to penetrate deeper than the basic dualism of self and other, as we shall now see.

The Prison House of the Self

> I had always felt that there was a glass screen between me and other people; that I could connect with them up until the glass screen but after that there was a place where nobody could touch . . . I've always had the feeling that I'm two people – Dawn (email)

Dawn describes a sense of withdrawal from the world, a reaction to estrangement that like Sylvia Plath's more famous glass metaphor of 'the bell jar' (2005) cuts her off from the outside world and traps her inside herself. But interestingly this is not where the estrangement and the withdrawal end, rather it seems to seep through the usual barriers of the body and selfhood to infect aspects of the 'inner' world. Dawn's sense of herself begins to split as she makes a distinction between that part of her which is on the public side of the glass screen and which is personable, and which prides itself on its social skills and gregariousness; and that part of her which is on the private side of the screen and which is secret, the Dawn who is safe ('where nobody could touch') but silenced. This kind of splitting is a common tope amongst self-harmers, Deborah for example explains

> I am cheerful around others even when I'm not that happy inside . . .I know that my being happy around others contributes to them not knowing if there's something I'm upset about but I'd rather it that way . . . I think that the only person who can actually help you is yourself so I don't really see the point to inviting half the world to know about your problems, it just makes people end up judging one another *since no one really understands anyone else* (email – my emphasis)

Here we are reminded of Magritte's veil and Dawn's comment that it results in no one knowing 'what's really going on.' Sadie also talks about 'a thick pane of glass between you and the rest of the world,' a barrier of truth, value, and essence beyond which

'nothing seems very real and it doesn't feel like I'm in control' (email). But as common as this glass metaphor is it is not as common as the image of a prison, and the self as a prison. Carla describes here the feelings that led to her first act of self-harm:

> [talking about what led up to first self-harm] I just felt so much pain in my head and . . . like um . . . like being in an emotional prison really, um . . . I knew I had to kind of, I see it as like you know. . .when you give something an electric shock and you shock it into change? It felt like that (in person)

She describes her situation being 'stuck, stuck inside, stuck in my head, stuck in my house' and further explains this prison as

> not being able to . . . be . . . sort of . . .entirely myself because there's stuff in my head all the time, there's like, I call it like white noise in my brain, um . . .there's all this, like when I was a teenager there was all this stuff going on and I tried to maintain . . . the essence of Carla I call it [laughs] but it's taken me until about my late twenties to realize what I'm about (Carla in person)

Here the image of a prison connects both to a sense of a withdrawing into and hiding in a sense of essence, or a true sense of self. It is safe and yet it robs the subject of their connection to the world. The prison then is most often represented through the dual logic of being both curse and cure, both prison and sanctuary. As Allie explains:

> I used to hide myself away, both emotionally and physically – always pretended to be OK when I wasn't, didn't leave the house alone or even open the curtains. Didn't answer the door or phone . . . [I]t was a self-imposed imprisonment with the intention of keeping myself safe – definitely more about things out than keeping them in. I hid myself away for my own protection, but in doing so totally deprived myself from life (email)

And this is the end point of estrangement, a point where, whether it is seen as the psychological process of dissociation or else the phenomenology of social alienation, it has seeped through the world, through others, through language, and has now infected the self which as it turns out cannot be so comprehensively cut-off and isolated after all. Asking what is authentic self and true self is a little like asking what the 'I' is, each part of the body and self can be objectified in consciousness and so pursued through a self-reflexive loop. If the true-self is the true subject then the more one looks for it as a safe retreat the more of oneself will become infected by the impurity of the false self and the outside world. Authenticity retreats under conscious inspection and so estrangement spreads like a cancer. And it is this pervasive sense of estrangement, the frustration and anger of self-imprisonment and imprisonment

within the self that describes the phenomenology of the self-harmer, their lived experience. But as the foregoing discussion has hopefully shown it is not an experience that can *simply* be read as a psychological state, let alone a pathological condition, rather it is a pervasive sense of trauma that haunts the person and provides a background of meanings, ideas, values, and associations that help make self-harm make sense to the person doing it, and that helps the person make sense of themselves through their self-harm.

Control (an order of discourse)

> Scar tissue has no character. It's not like skin. It doesn't show age or illness or pallor of tan. It has no pores, no hair, no wrinkles. It's like a slipcover. It shields and disguises what's beneath. That's why we grow it; we have something to hide – Susanna Kaysen *Girl, Interrupted* (2000: 16).

> I'd rather shed blood than tears – Abigail Robson *Secret Scars* (2007: 109).

Without this dynamic of the 'real' and authenticity neither the expressive imperative nor the metaphor of trauma would make much sense; indeed without it there would be account of why sentiments could not easily be expressed, and there would be no sense of an excess of raw and unprocessed emotions welling up in the system. But as the sub-discourse of the prison house of the self indicates this discursive complex itself clearly relies on a broader order of meanings revolving around the central modernist concern with control, mastery, and agency. Indeed the dynamic between the 'real' and the authentic self is precisely one of control, of conflict between 'overwhelming' emotions and 'reality' and the self's capacity to 'process' and contain these. The withdrawal of the self into its self-imposed prison describes a battle for control between self and other albeit that it is experienced and expressed through a psychological modality rather than a political one. Indeed as Charles Guignon makes clear the concept of authenticity, is an ideal of owning *oneself*, of achieving *self-possession*' (2004: 7 his emphasis). Perhaps this should be little surprise given the figure of *homo clausus* and the emphasis that this normative ideal placed on self-control and containment. Speaking of the emergence of the modern subject Taylor notes that

What one finds running through all the aspects of this constellation [of modernist sociocultural changes] . . . is the growing ideal of a human agent who is able to remake himself by methodical and disciplined action. What this calls for is the ability to take an instrumental stance to one's given properties, desires, inclinations, tendencies, habits of thought and feeling, so that they can be *worked on*, doing away with some and strengthening others, until one meets the desired specifications (1989: 159-60 his emphasis)

Of course this idea and ideal of agency and of mastery extended well beyond the confines of the self to constitute a central issue and a core challenge inherent to the modern instrumental genius. New advances in science and technology stood not only as new systems of representation but also as new opportunities for manipulating and controlling nature. Francis Bacon famously crystallized the *zeitgeist* in his aphorism 'knowledge is power' while Descartes writes that the modernist goal is to 'make ourselves masters and possessors of nature' (1964). In the light of the modernist existential insecurity that I have already noted it is perhaps not surprising that western civilization developed a fetish for control. But as Taylor reminds us the primary site for the articulation and literal embodiment of this concern was the self and its body, and there can be no question that such concerns of self-control form a strong axis of continuity culturally positioning self-harm.

In fact, as with all three orders of discourse that I shall be identifying in this thesis, it is no exaggeration to say that control forms a pervasive background to everything I have said so far, and everything I will say, about self-harm. The whole dualist dynamic between self and other, and between the true inner self and the more ambiguous exterior reality, could be painted purely in the brush strokes of philosophical ontology but it would make for a flat and lifeless canvas. For it to come alive as a problem and a living dynamic in people's experience the central issue needs to be that of agency and control in the sense that for self-harm to be meaningful it needs to *matter* whether someone feels in control of their emotions and actions or not, whether someone has a sense of agency and mastery in the face of the world and their life or not, and it needs to *matter* in these discourses whether or not someone is impulsive or whether their emotions are, as Hollander put it 'in the service of clear thinking and problem solving' (2008: 17). If these issues are not felt to matter then the meanings that we have mapped around self-harm so far would hardly make sense at all. Caroline sums it up when she explains

I get very wound up and upset and emotional and I just don't know how to calm myself down . . . and I, I think the self-harm, it's just a release really . . . I felt like I was on the edge of just completely, totally losing it altogether and I felt like that [self-harm] was stopping me from going over the edge' (in person).

Indeed as I noted briefly in the last chapter one of the main ways in which self-harm is framed is as a 'coping mechanism' – a way to exert some kind of control over the seemingly incontrollable aspects of our life that threaten to overwhelm us. Heather talks here about her experiences of loss following the end of a relationship

I felt like I'd completely lost control of my grief, that I had no other way of getting control again . . . erm . . . 'cus I'd been like on the floor, I couldn't walk very well, so I felt like I didn't have a way back as it were . . . erm, and by cutting then after that I was able to pull myself together (in person)

Heather went on to say that after these experiences she made the decision to not 'allow myself to indulge in sadness or anguish.' There is a sense of depth here, that is one goes too far into one's emotions there may be no easy way back except through a physical discipline and the distraction of pain. The sentiment is also one simply but clearly captured by the above quote from Abigail Robson's 'auto-pathography' of a self-harmer, that she would rather 'shed blood than tears.' Indeed there is a strong stoical dimension to much of what self-harmers have to say about it. For Robson it is a technique of self-control, not just an emergency externalization but a preferable one to crying this being weak and 'an indulgence' (2007: 109). Many self-harmers take a certain pride in knowing that they can inflict wounds on themselves that many people would not be capable of. In remarking about the importance of control in the matrix of meanings that compose anorexia Susan Bordo quotes psychiatrist Michael Stacks as saying

people no longer feel they can control events outside themselves – how well they do in their jobs or in their personal relationships, for example – but they can control the food they eat and how far they can run. Abstinence, tests of endurance, are ways of proving their self-sufficiency (quoted in Bordo, 2003: 153)

And of course we might add to these contemporary disciplines of self-sufficiency the emotional regulation promised by self-harm. In the next chapter I will explore how this concern with control is connected with the activity of personal agency exercised in the project of self, which is to say the cultivation of identity, but for the moment it might be interesting just to consider for a moment that with an increasing emphasis placed

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on people 'making something' of themselves that our cultural codes of ambition and achievement may be clashing with the more obvious regimes of control that children encounter and that this might be a reason why self-harm often begins in the early teens (especially considering the co-presence of both strict control and the forceful affirmation of self as project within experiences of education). Dawn notes that

> Being grown up means freedom from other people's control, which has the utmost value for me. I was an obedient little Brownie when I was a child but behaving well didn't do me any good – I was still betrayed and abused. Perhaps for me my self-destructive tendencies are a way of regaining control over my body, i.e. being grown up gives you the freedom to hurt yourself if you choose. It's a warped but understandable response to being gagged and stifled in childhood (email)

Self-harm as Pharmakon

Of course framing self-harm as a coping mechanism and as an agent of self-control, albeit an extreme and perhaps undesirable one, also raises yet another example of ambivalence since alongside this framing self-harm is often also described as 'an addiction' (Turner, 2002). From this it would appear that self-harm is both an agent of self-control and at the same time a loss of self-control. Though the language of addiction is mostly restricted to popular psychology texts, though as I noted in chapter four it is also a prevalent representation in newspaper and magazine articles, it expresses itself in another dual formulation more common to self-harmers, as Dana puts it 'it used to be mine, something that I owned, but then it became the enemy' (email). Here then self-harm is something which is both 'owned' and other.

In a way this might simply be the extreme result of estrangement, that the very tool for fighting off estrangement and exerting the influence of the authentic itself eventually becomes estranged from you and appears not as an owned practice but as an 'other,' part of the same dark forces of the 'real' as those uncontrollable emotions. But in another we can see here yet another example of a strongly developing pattern or structural ambivalence, by which I mean not just a 'confused and confusing practice' as Pierce (1977: 377) put it but a practice that actually codes ambivalence and confusion and that is supposed to contain multiple meanings which are necessarily reconcilable to one another through logic or the mechanics of the psychic system.

Consider that so far we have seen self-harm framed as both a rational mechanism of the system and a dangerous overwhelming of the system, both an aspect of the rational control of emotions and an eruption of the irrational, both a prison and a sanctuary, both impulsive and stoical, both agent of control and addiction, and now both owned and other.

Of course some of these tensions are mitigated by their typically being articulated from different social sites – self-harm as stoicism being typical of self-harmers, and self-harm as impulse dyscontrol being more typical of psychiatrists. And some of these tensions are mediated by their being embedded into a broader system of meanings; so that self-harm may be understood to be a mechanism of rational self-control and part of a rationally ordered psychic system precisely because its function is to vent off irrational forces which means that it can be characterized as a rational process with irrational contents. But nonetheless there is undeniably something here of what Derrida (1981) called the *pharmakon*, a Greek word that has multiple meanings and that can be translated as 'poison' or 'remedy.' Plato's *Phaedrus* (2009) makes the point that while writing may seem to remedy the problems caused by the limitations of memory it in fact puts memory under threat by weakening it. Hence writing, labelled *pharmakon* by Plato and Derrida, can ambivalently signal both cure and curse, and it would appear self-harm is the same as Susan explains

> I saw my self-harm as problem and solution, and it is a double natured thing; I tend to think of it as a faceless person in the dark with a split personality, and they are always fighting with one another. . . It is its own demise, and it makes the person their own demise too. It's a problem because of other problems, like a chain reaction of events, one thing leads to another, but the solution isn't found, the "solution" becomes the problem, even if it is temporary. It's like a coin with the same two sides, regardless of its flipped side, it's always the same. I don't know how to tell you in words about its double nature, it's a double dealing agent in the mind and neither side can destroy it. The problem is solved by the solution, but then the solution becomes the problem (email)

Of course Derrida raises the issue of the pharmakon in order to deconstruct the metaphysics of presence by which Plato conjures an ideal and pure concept of memory which is supposedly under threat from an inferior technology for representation and recording. He does this in service to deconstruction to show that a perfect memory is no more a guarantor of truth than an expert who needs to check their notes is a guarantor of a fake. Pharmakon plays with such concepts of purity and pollution and,

following the last chapter, in the case of self-harm we might detect an ideal of pure expression and communication at work. Indeed self-harm is framed as both a 'remedy,' a 'morbid form of self-help' as Favazza (1996) puts it, to the problem of frustrated expression, and as a 'poisonous' blockage to the development of healthier and more therapeutic forms of expression. Self-harm as pharmakon then is at once expression and a failure of expression, both good ('a victory of the life instinct' as Menninger described it) and bad, and it is not ambivalently framed and constructed because it is so confusing, but rather it is confusing because it is supposed to be – part of its meaning is precisely to embody the ambivalent and dynamic logic of the pharmakon; remedy *and* poison, cure *and* curse.

As such it is not necessary to try to fix self-harm as an agent of control for example, or as alternatively as an agent of dyscontrol. Rather just as Derrida's deconstruction can be wonderfully revealing because it demonstrates that concepts and ideas separated by asymmetric binaries are nonetheless utterly interconnected through the common semiotic web that is their context, so self-harm's dual constructions and functions while conceptual oppositions nonetheless encode the same set of concerns, meanings, and values. Whether it is an agent of control or not is of secondary importance to the fact that it emerges, works, and has its meaning within a culture that takes control to be a central issue and a pervasive dynamic of daily life. Likewise self-harm does not so much indicate a rational psychic system, or an irrational eruption of unprocessed emotions, but rather a web of meanings utterly concerned with the issues and dynamics of rational representation and the rational regulation of emotions and behaviour. These are the fields of meaning and significance that self-harm is abroad in and within which, in the phrase of Acts 17:28, it lives, moves, and has its being.

Control, Aetiology, and the Haunting Absence of Dora

There is a sense in which this culture of control is particularly well expressed through psycho-medical concerns with the aetiological. From Bacon and Descartes onwards there has been a sense that the material is the 'real' because it is definite, definable, explicable, predictable, and manipulable. The implicit power and persuasive force of the asymmetric binary is perhaps not that hard to explain on the basis of these

concerns with control and the 'real.' More control can be exerted, or at least *the ideal of control is more easily applied*, to those factors like individual bio-genetic and bio-psychological structures and systems than to the ephemera of the distinctly personal, social, historical, and cultural. As Salecl notes of contemporary psychological and therapy culture

> Anything that is perceived as an impediment to the subject, who is supposed to be fully in control of herself, constantly productive and also not disturbing to society at large, is quickly categorized as disorder. While the subject's inner turmoil and dilemmas in regard to social expectations quickly get names as anxieties (2004: 3)

It should be little surprise then that in looking for cause we do not look for complex webs of contingency and meaning, and of a person's placement in a network of social relations, but rather reduce these to the individual and the individual to their natural body and brain - moving ever past the symbolic and toward the 'real.' But as I have tried to argue throughout this thesis so far the asymmetric binary is not a conspiracy or a rank discrimination, rather it is a subtle prejudice and tendency in our ways of thinking that seeks to balance the multiple ambiguities and ambivalences of our culture and subjectivity as it attempts to acknowledge the romantic while rationalizing life to the modern. Aetiology, and its literary expression in the case history, are crystallizations of this effort and in many ways this is what makes the case history such an interesting an enigmatic kind of a document.

It seems to me that case histories articulate the action of the asymmetric binary so well precisely because they often do try to write the person in; here at least some of the details of a life *are* gathered, and a narrative *does* to some limited extent fill out the flesh and human face which are otherwise lacking in formulas of diagnosis, treatment, and prognosis. However despite this and at the very heart of their description, exactly where the living reality of an actual person ought to be, there is a kind of erasure and estrangement instead. The central position of the person becomes a void that exists as a curious counterpoint to all the detailed information about genetics, biology, psychology, and biography that might be gathered and depicted; a strange, enigmatic, and tragic *punctum,* in Barthes' (1993) phrase, that haunts the narrative. It is in this way that such texts not only help report the silence of the hysteric (classical and contemporary) but also reproduce it, making her a strangely

voiceless figure even within those texts which are supposed to penetrate the veil of her symptoms and the enigma of her pathology.

Paradoxically it is for this very reason that despite its impressive length, complexity, and sophistication there is an unshakable sense as one reads through the *Fragment* that Freud somehow fundamentally 'missed' Dora; that behind the tapestry of psychological analysis and interpretation there is a void precisely where the living and imminent truth of Dora is supposed to be. Dora appears in these pages as a kind of haunting absence within the story of her own case history, just as she appears to have felt herself to have been something of an absence within the story of her own life. Indeed the enigma that she has represented for people in the century since the publication of the *Fragment* seems to emerge from within an aura of pervasive and multiple estrangements.

Dora is a deeply estranged figure; from her own point of view she is estranged from all those people who profess to love her and should be close to her but who instead seem intent upon using her as a pawn in a game, or a gift in an exchange; from her father's point of view, that to some extent appears as a proxy for these other people that surround Dora, she has become pathologically estranged from her family and friends and from speech and sanity; and from Freud's point of view she is estranged from her own feelings, her own unconscious desires and wishes. And bookending this list of estrangements there is a sense of a more fundamental alienation from reality itself; at one end there is Dora's experience and version of reality which seems to be under attack by everyone else; and at the other end there is Freud's calling into question the very nature of trauma itself.

When finally Dora has extracted a confession from Herr K. as to the reality of the attempted seduction, and doggedly fought for truth with respect to the other tangled relationships and webs of interests that had sought to use her and then position her as pathological, she presents the facts of her case to Freud who then presents his diagnosis and conclusion as to the psychology of her pathology, and indeed the summation of her case history. As he writes

> Dora had listened to me without any of her usual contradictions. She seemed to be moved; she said good-bye to me very warmly, with the heartiest wishes for the New Year, and – came no more' (1953: 108-109)

It is hard not to see and feel behind these words Dora's sigh of resignation, and a polite smile as disappointment bites once more, and that despite her bravery and commitment to what she saw as the truth of the matter she had nonetheless once again been misunderstood and perhaps misused. It is little wonder that she did not return. In Dora we find someone whose symptoms of silence express what must have felt almost like a conspiracy to her, one in which the truth was hidden, her closest relationships soured as she found herself used and manipulated instead of loved and understood, and her ability to connect with her friends and family, or with the authorized discourses of her culture, and eventually even with speech itself became deeply estranged and problematic. As Masson puts it

> [S]he was preoccupied with matters of truth and honesty. She felt conspired against. She was conspired against. She felt lied to. She was lied to. She felt used. She was used. She was beginning to lose her faith in justice, in integrity – in short, in the world (1990: 101)

Both the hysteric and the self-harmer then appear as people who are strangely absent from the conditions of their own lives and indeed from the very texts that are used to make up and describe that life, and as such they become increasingly withdrawn into themselves as all they have left. It is a withdrawal well expressed in Dawn's description of a 'glass screen' which cuts her off from the outside world and eventually begins to cut-off parts of her sense of herself, splitting and becoming 'internally' estranged.

In trauma the world overwhelms and swallows up the person and the site of the problem lies with them and their capacity to process (objectivist tendency) 'real' feelings and memories, or else their capacity to deal with the fact their own recognition of the 'real' is trapped within by a world that has become distinctly unreal (subjectivist tendency). But while the subjectivist perspective encodes an implicit critique of the social world in its inauthenticity it still focuses on the individual and their existential dilemma. What must not be lost sight of however is that within a culture concerned with control it may be the political systems, the networks of power relations that position and embed the person that are too 'real' and that are ultimately traumatic rendering one socially as well as psychologically estranged. While Dora understood her problems as an issue of what was really going on in her life and home, Freud saw them as an issue of what was really going on in her psyche, but *both* conceptualizations and patterns of meanings were active, and laboured under

different valences, because of the very social conditions and relationships that positioned Freud and Dora. And indeed it is tempting to say that far from Dora's real problem being a failed seduction, or a manipulative father it was her gendered position in *fin de siècle* Europe that constituted the real basis of her problems. This is a theme that I shall return to in chapter eight.

Summary

The structures of meaning that surround the issue of cause then are complex, subtle, and at times convoluted. The strictly aetiological logic of the case history provides one significant dimension of meanings here since it locates self-harm in estrangement and estrangement in trauma. By contrast while more subjectivist representations do rely on the value of the medical conception of trauma in order to validate experience and identity in a medicalized society, the further use of the concept is nonetheless less literal and more metaphorical as it is used to map the cause of self-harm less in specific events or psychological mechanisms as such, and in a less narrow and deterministic manner, and more in a general sense of a traumatic rupture with, and a general estrangement from, the world, language, and even the self. Likewise the apparent literality and metonymic logic of self-harm must be understood as significant symbols in and of themselves; in other words they are signs that indicate what the literal has come to *mean* for us; namely a 'recourse to the real' (Zizek, 2000), a connection to nature more than culture, to harsh physical truth more than representation, and to pain and blood more than words and language (Hewitt, 1997; Belsey, 2004). And in this recourse to the real there is a bid for control, for authentic self-realization and for an un-estranged foundation to subjectivity. But it is vitally important to understand self-harm in the terms of the pharmakon since it cannot be seen in any uncomplicated fashion as an agent of the 'real' or an agent of control or indeed anything else but rather must be understood to be abroad and active within a culture that is deeply concerned with these issues. As such self-harm provides a crystallization of these concerns and an articulation of the tensions, contradictions, and problems that can arise from them.

Chapter Seven

The Pathological Axis

Introduction: Stigma and the dynamics of being secret and being seen

> But the body is also directly involved in a political field; power relations have an immediate hold upon it; they invest it, mark it, train it, torture it, force it to carry out tasks, to perform ceremonies, to emit signs – Michel Foucault *Discipline and Punish* (1991: 25)

> [A]nyone can observe through the glass how the inscription on the body takes place - The operator of the Apparatus in Franz Kakfa's *In The Penal Colony* (1992: 132)

The sociologist Erving Goffman reminds us that it was the Greeks who 'originated the term stigma to refer to bodily signs designed to expose something unusual and bad about the moral status of the signifier' (1963: 11) and it was also Goffman who presented us with the classic contemporary analysis of stigma as a social process and as an aspect of his general project of understanding regimes of self-presentation, and the management of such presentations. But it was the Czech novelist Franz Kafka who left us with the most visceral and affecting evocation of stigma in the operation of his torture-cum-execution 'apparatus' described in *In the Penal Colony* (1992 [1919]). In this typically minimalist tale the outer stigma is a 'sentence,' both a judicial sentence and a literal sentence of words articulating this judgement, inscribed into the flesh of a prisoner through the slow action of a set of glass needles. Strapped to a table and subjected to this mutilation over a period of twelve hours as the needles cut deeper and deeper the sentence becomes not only a means of spectacularly executing criminals, presumably as an example to others, but also a means of exposing a truth about the criminal, his sentence, and not just to others but also to himself as he is in fact unaware of what his sentence is and must 'decipher it with his wounds' (1992: 137).

Kafka's disturbing story is a favourite amongst writers on body-modification and mutilation (Mascia-Lees and Sharpe, 1992; Curtis, 2000) but its interest for us here lies precisely in the delicate play of forces conjured into the operation of the machine. The outer stigma, at first, has the function of marking the deviant's body as different, marking them out, and sits in line with any number of spectacular displays of

punishment from putting someone in the village stocks to making children sit and face the wall in a classroom. But as the needles inscribe their grim message the sentence becomes the visible expression of an authoritative knowledge, passed from an institution with power to be sure, but made flesh within the person of the deviant – *they* 'decipher' their stigma and so learn what kind of deviant they are. That which is thought to hide within then, the substantive essence of their deviance, is positioned as an object of knowledge and made visible both socially and personally through the operation of knowledge, of technology, and most of all of the mark of stigma that seals the judgement.

Indeed these subtle power politics of embodiment and visibility, which have been with us since chapter five when we first discussed *homo clausus* and the civilizing process, are deeply significant matters for understanding self-harm. For one thing Kafka's machine symbolizes the complexity of control that we explored at the end of the last chapter and the sense that we may be trapped within a body that has become cut-off from the world through its essential traumatic difference or deviance; a body that we both own and yet which is subject to the influence of outside forces and as such can also be experienced as 'other,' and a body whose essential taint is made 'real' by the outer signal of its stigmatic wounds. The play of visibilities is intensely ambivalent for self-harmers for whom their withdrawal is, as we have seen, both a sanctuary and a prison, and whose practice is often highly private and yet codes a basic cry for help. As Susan describes it

> This is linked to my self-harm; because I couldn't put my feelings into words, I did it in the worst way possible; when people see self harm marks though, it rings alarm bells; it was the only way I could silently say 'please help me'. My cutting was begging for help; I felt like I couldn't physically speak to people when I felt that low and hurt myself, so I did it in the only way someone would see and automatically know it was bad (email)

Here Susan's practice is predicated on her wounds and scars becoming public and yet like so many other people interviewed for this research her self-harm was kept intensely private. Dawn describes this ambivalence as that between 'the desire for self-effacement and the desire, not to be looked at exactly, but just to be recognised.' Indeed 'recognition' is a useful formulation since it carries connotations of acceptance; to be recognised is not simply to be no longer invisible but to have one's basic identity

and sense of self confirmed by another. Typically within this common and dynamic tension between being secret and being seen the promise of being seen is articulated through a rescue fantasy and a hope that if she is seen then the self-harmer will be understood, and if understood then she will be accepted and her inner pain validated by the inescapable 'real' of her outer stigma. Allie provides a good example of this desire from her childhood

> [W]hen I was in primary school I used to stand alone on the edge of the playground and stare at a church in the distance. As well as wishing I was there instead of where I actually was, I always hoped one of the teachers would take the time to come over and ask if I was OK so I could tell them I wasn't (email)

But if self-harm is a message to others then perhaps it is most like a letter which is written and not sent, but rather placed in a safe place in the possibility that it may be sent in the future and in the hope that the recipient will understand it then, even if they probably wouldn't be able to understand it now. And in this sense it is both a public act and a private act. The writing of this letter, of inscribing 'please help me' onto the body, in itself would seem often to be enough at least for the immediate psychological needs of the self-harmer. But more than this, within the inscription there also seems to be a sense of a 'generalized other' (Mead, 1967) or 'big Other' (Lacan, 2007) which is to say a kind of internalized sense of the other who, while not physically present, has seen the act and its sentence, and because of or in spite of this sentence, has recognised and accepted the person who self-harms. Perhaps this internalized 'other' is simply the valedictory power of making something 'real' and so beyond question, but in either case the reason most often given for why the stigma should not be revealed to actual others as well as generalised or big Others is precisely the dual and ambivalent nature of the stigma: it is at once a sign of the 'real' that validates the self-harmer as someone who has 'real' problems whilst at the same time it is a mark of deviance and shame. And as this chapter will demonstrate feelings of guilt, of shame, of self-hatred, and of self-harm as self-punishment, are very common amongst the self-harmers who I have interviewed, as well those who post on the internet, or publish their autobiographies.

But with these considerations we seem to have moved on from ideas about the ontological structures of self-harm, or ideas about the aetiological conditions that cause it, and have moved instead into the experience of the self-harmer and the

phenomenology of self-harm as an expression of these ontological structures and aetiological causes. And as such a third axis must be added. While the ontological axis groups and organizes ideas about those ontological structures which facilitate self-harm, which make it a possible and even at times a necessary function for *this* kind of subject, who has *this* kind of body, and *this* kind of psyche; and the aetiological axis organizes ideas about what happens within the context of these ontological structures to make self-harm appear in some instances of this kind of subjectivity but not others, the two together nonetheless do not describe its effects and experience *beyond the symptoms and functions* of self-harm that they identify. They do not describe what it is like *to be* a self-harmer, the *content* of the practice as such, and it is this area of meanings that this third axis organizes and describes. Since these effects and experiences also describe the common living shape of self-harm for the self-harmer, and as such are most often recognised in the expert literature, in the process of moving from content to form, as symptomatic indicators of it, I have referred to it as the *pathological axis*.

Self-Persecution (a key thematic discourse)

> The principle on which I base my decisions is this, guilt is always beyond question – The Operator of the machine in Franz Kakfa's *In The Penal Colony* (1992: 132)

> I couldn't see myself as a strong, determined and enthusiastic person; I saw myself as a pathetic, snivelling, ugly, crying, cut and bleeding fuck up, to be plain. I had failed myself and my family and I wasn't of any use at all – Dana (email)

One of the most pervasive themes in participant accounts, and other strongly subjectivist representations of self-harm, and strongly articulated here by Dana, is the theme of self-loathing, self-hatred, and self-punishment which, with its associated sub-discourses, I will here refer to as the key thematic discourse of self-persecution. I say 'self-persecution' because this need to punish the self is normally tied into some sense of guilt and responsibility; the idea that the person has failed in some definite and quite deep sense. As Dana later explains 'If I failed, failure meant punishment,' 'I had failed myself and my family and I wasn't of any use at all' so that in the end she can summarize that 'My self-harm was self punishment, it's the best way I can explain it'

(email). Here then punishment follows a sense of failure but this is itself implicitly tied to a sense of responsibility as Alyson explains

> I always feel the . . . the depression is my fault . . . and I feel that I'm useless and pathetic and . . . it's all my fault and if I was any better then I could get myself out of it and I'm being . . . you know, awful to my family and friends and I'm a terrible person, so . . . part of it is self-punishment (telephone)

Self-punishment then follows the pattern, now familiar, of an obsessive focus on the self, its powers, dynamics, and limitations. And following this obsessive focus the need to punish appears more like a tendency to persecution. But despite the consistency and power of such sentiments amongst self-harmers this theme of self-persecution is often strangely underplayed or even completely absent from more objectivist representations and texts. It is often mentioned, though more or less in passing, and it is often listed as a typical and symptomatic of the psychological experience of the self-harmer – but it is rarely included in theories or accounts of *why* people self-harm. Perhaps this relative absence can be attributed to its position within the three axes of continuity. If the pathological axis organizes ideas about the experience and phenomenology of the self-harmer then, in line with Sullivan's process of the 'dermal diagnostician' that I mentioned in chapter one, these are precisely the idiographic features that the psychiatrist, psychologist, or psychotherapist, working from an objectivist influenced stance, tends to *look past* in an effort to reach the deeper mechanism and the deeper truth within. The action of the asymmetric binary then works to sideline the features of the pathological axis but here I want to argue what often seems quite obvious to non-experts: that the very pattern of action that describes self-harm fundamentally codes a tendency to self-punishment, which as I shall explain can ultimately be thought of as a relation of the self *to* the self, of persecution. As one of Spandler's (1996) participants to her research with the 42nd Street, a Manchester based mental health service for young people, puts it

> Self-harm is not a medical issue. It's not about being mentally unstable . . . It has to do with hatred for yourself, feeling that you're not worthy of anybody's love or attention . . . self-punishment. You deserve this, you deserve to hurt (1996: 68).

Responsibility and Expectation

Julie also starkly expresses the discourse of self-persecution through an act of self-harm in which she cut the words 'I hate me' into her arm. She grew up in a highly 'punitive' household, exacerbated by her father's death when she was fourteen-years old since her mother now looked to her to help raise her younger siblings and take responsibility for housework. As she describes it 'I was just constantly being punished for whatever . . . so it became something that *I* could control' (in person). Julie's intonation emphasised the word 'I,' underling some of the meanings of control explored in the last chapter, but also illustrating the sense of subjective internalization which I discussed in the ontological axis; if punishment was her daily experience then since she could punish herself she could also take symbolic control of it, identity in part as the punisher and hence take some control in her own life.

Julie's internalization is also characteristic of another common aspect of participant's accounts, including Dana's and Alyson's, that in many cases and from an early age there has been some sort of pressure or expectation placed on them to suddenly become more responsible, and more adult, often in order to look after younger siblings after the departure of one of the parents or else, as in Dana's case, to look after a sick parent. Dana's story of self-harm begins with her mother's illness and her subsequently becoming care assistant to her mother from a very early age. Here she talks about a sudden realization of the impact that this role and its associated expectations was having on her

> we were in a tiny space, cornered off by a curtain, and there was a drunk man swearing on the other side at a nurse who was trying to stitch up his hand, when he fell into the curtain and nearly through it. I nearly laughed out loud, you know, you find people falling over funny and stuff like that at a young age, but I knew in a hospital things were very serious and I had to be nice so I didn't laugh, and as a nurse was hooking my Mum up to a machine, she smiled at me and said "well aren't you a brave little thing? You're very grown up." I think she was praising me for my behaviour and I felt proud, but then it slowly sank in; I realised I was grown up, too grown up for a five year old. Five year olds shouldn't have to know their parents medical details off by heart and know CPR and the recovery position. A five year old shouldn't have to stand in a corner hidden behind a curtain in a strange and scary situation and listen to a drunk man swearing and bellowing at people trying to help. A five year old shouldn't have to look after their parent, it should be the other way around . . . I wanted to cry for feeling so different and so "picked out" for this (email)

The internalization of an adult role with adult responsibilities implies the internalization of adult standards of self-control, and helps knit together other themes that I have explored in the other axes, as Dana notes

> All of this links to my communication difficulties, as a child and as a teeanger; because I was so well behaved and up to scratch with Mum's illness, I don't ever remember my grandma, or anyone asking me how I felt about it; the times in hospital, recovery, etc; no one asked me how I felt, and I couldn't put my emotions into words, So I packed them up tightly and buried them away somewhere; I couldn't talk about something that I couldn't give words (email)

In this passage the pressures and expectations that Dana internalizes and identifies with become the basis for her traumatic rupture with the world as she is 'picked out' as she puts it, made different, and hence cut-off and estranged from other forms of relationships and communication. The dynamics of Julie's story are similar to Dana's in that after her parents split up she became the 'emotional support' for her mother as well as taking on more responsibilities for housework and looking after her younger brother. She describes how her role and her mother's became switched as she took on responsibility for her mother's wellbeing while her mother became increasingly 'emotionally manipulative.' One night she tried to go out with a friend 'just to get away from it all' but as she went to leave the house her mother

> burst into tears . . . so your choice is you stay and look after her or you're the heartless daughter who abandons your crying mother . . . you know, it was like 'why should you go out and have a nice time if I'm still miserable getting over your dad' . . . it was always *your* dad in these situations [laughs], yeah it was always on me' (telephone).

Interestingly, in connection to these mother-child relationships it seems that in even when the father is seen as having been either the more abusive or manipulative it is still the mother who is nonetheless understood to bear the most responsibility for the child's internalization of responsibility, their failure to learn an adequate emotional vocabulary, and therefore also their capacity to 'process' feelings. Perhaps this is because the mother has traditionally been framed as archetype of the feminine and therefore as the guardian of the heart and the hearth 'whose primary life-giving functions were to comfort, nurture and provide' (Bronfen, 1992: 66). In this way the association of women with emotionality (Lupton, 1998) may lead to the expectation that it is the mother's responsibility to teach the child to experience and express emotions in a healthy way. John, the only man who participated in this research,

provides a case in point. Though he describes a tense and difficult relationship with both his father and his brothers as they, and he, struggled to reconcile their working class background with his sexual identity as a homosexual man, it is his mother that he blames for his history of self-harm:

> She was there the whole time and if I'd fallen out with my dad then, . . . then I could have handled that if, if she would have talked to me . . . and let me express myself properly you know? But she didn't want to know and so I've grown up . . . not knowing how to express myself really, not . . . not knowing how to be emotional (in person)

John also provides a particularly vivid and visceral example of the theme of self-loathing as his self-harm often symbolically reflected the sense of guilt and shame that he felt in connection with his sexuality. On one occasion he used a syringe to gather the liquid dirt from the bottom of an industrial bin, cut deeply into his arm with a razor blade, and then injected the dirt directly into the wound sewing it afterwards and hoping to get an infection since this inner pollution would 'what I deserved really you know? That was just how I was feeling on the inside like dirt and shit and so that's just what I thought about myself, so yeah . . . that's why I did it.' John's example dramatically shows that this theme of self-persecution operates through a moral economy of guilt and shame, where shame is, as Sarah Ahmed describes it, 'an intense and painful sensation that is bound up with how the self feels about itself, a self-feeling that is felt by and on the body' (2004: 103).

Examination, Judgement, Punishment

> In a way I really don't want any help, in case it lulls me into a false sense of security where I think I might be worth something . . . I need to suffer – why can no one understand that? I need for people to see that I'm getting what I deserve, to comfort them, just so they know that I am aware of the horrible person that I am – Abigail Robson *Secret Scars: One woman's story of overcoming self-harm* (2007: 96)

The shame and guilt typically felt by the self-harmer is connected to the standards which are incredibly high, even impossible, but standards which are nonetheless taken as *normative*, as standards that the person *should* be able to meet and embody. Dana internalized adult-responsibilities and adult standards of self-control from a very early age and looking back on this process she describes this aspect of her personality as her

'superhuman' persona suggesting that she now understands these standards to be ideals, though at the time she expected them of herself and so took them as normative. Thinking about this superhuman persona she reflects that

> In superman, spiderman, batman, green lantern, etc, all comic books; they get the girls, they get the baddies, everything works out fine. If they get hurt it doesn't show, they don't bleed when you cut them, they don't give up when its impossible, but this is all just a very high standard, something beyond being human that we idolize and need in society . . . in reality . . . when we need the inspiration and the light, we struggle to find it, and we rarely find the motivation to find it and use it (email)

For Dana her superhuman persona which tried to live up to 'impossible' standards was the basis for the kind of splitting in her sense of self that I noted in the last chapter. It is not just a question of having human limitations and superhuman ideals, but of taking these ideals to be normative expectations of the human – as *shoulds* and *oughts* whose failure to be achieved is not the failure to meet an ideal but rather a failure to meet the basic standards of being a human being, hence Dana's assessment of herself as 'a pathetic, snivelling, ugly, crying, cut and bleeding fuck up.' Deborah also expresses this deep sense of failure through her description of herself as 'wrong'

> As far back as I can remember I have tried to change to fit in, to gain approval and acceptance. Then through school I was still an outsider so I tried to be someone different and I discovered that if I was just who people wanted me to be then they would leave me alone. But for me this resulted in the useless me becoming increasingly unacceptable and shameful and it just wouldn't go away. That part of me is wrong, but it is the real me so hence I am wrong and anything that wrong shouldn't exist . . . the other me acts as a barrier it keeps me away from the world and the world away from me (email)

There is then, in these accounts, an intense sense of self-judgement; of standards that must be met, but which are generally failed, and the punishment that follows. As with Dana and Deborah though such standards often describe the fulfilment of social roles and meeting what are at least perceived to be the expectations of others. Alyson demonstrates this through her internalization of, and taking responsibility for, the expectations of others, especially her parents, an internalization that stems from early academic success and the pride this evidently gave her mother and father. She notes the way that her internalization of other's judgements of her leads to a strong sense of pressure which in turn arouses anxiety and leads to self-harm. As she explains these pressures

> My self-esteem rests very much on my ability to please others . . . that's how I have my self-esteem by being good at my role, I don't . . . I don't believe in my heart of hearts that I'm a good person or intrinsically a good person or intrinsically a loveable person really . . . I have to be a good wife and a good daughter and good at my studies . . . I have to be . . . not for my own sake but for other people's sake (telephone).

In this way the self-harmers that I interviewed as well as many who have written about it in books and on the internet, display a heightened sense of responsibility for the welfare of others and a sense of tremendous pressure that they must not disappoint or let those people down. But since their standards virtually guarantee failure self-harmers typically feel themselves to be deeply guilty: guilty of failure, guilty of not matching-up to expectations, guilty of having let others down, guilty of having let themselves down, guilty of having failed at life, and guilty of having failed as human beings. And as Dana made clear above such an economy of responsibility/expectation and shame/guilt only serves to further direct attention back onto the self which as the last two axes have described is then felt to be isolated, individualized, estranged, and ultimately trapped within its self. As we might extrapolate from the discussion of *homo clausus* in chapter five with its vigilant regime of self-control, it is a moral and emotional economy that works through processes of intense self-scrutiny. Indeed these themes of expectation and failure constitute very strong judgements against the self which is watched constantly, analysed, and evaluated constantly to see if it is matching up to standards and expectations or whether it is simply failing again. As Dawn describes this regime

> I have to do the right thing! It has to be perfect or I will get rejected because I am not good enough. Without approval I am very lost and trying to gain acceptance has been an unobtainable goal. With or without these things being offered I feel the same because on the rare occasions someone does offer their approval or acceptance I reject it as a lie. And know I have never been able to accept or approve of myself because there is nothing in me that deserves it (email)

This constant self-surveillance, examination, and judgement describes a regime of reflexivity that can become debilitating, a kind of hyper-reflexivity in which the person's belief that they will always fail leads to their inability to make decisions or take actions. Abigail Robson describes an example of this in her autobiographical account of her self-harm when one day as she is driving to work she simply

kept driving. I couldn't make a decision to stop, or turn, so I just drove straight until I reached a crossroad. I sat there until someone honked behind me. I looked at the signs and realized that if I turned left I could get onto the London Orbital and keep driving round and round without having to make a decision (2007: 136)

It is the normality of these avoided decisions which is so striking here and elsewhere in participant's accounts. The paralysis of hyper-reflexivity is far more focused on clothes, food, and house work, standard aspects of someone's daily role and identity (though here, in advance of the next chapter we might note the gendered nature of this crisis of domesticity) than more major decisions such whether to submit themselves to hospitalization for example. What one is left with is a strong impression of a never ceasing internal monologue of criticism, analysis, and anxiety all built up from a platform of expectations and aspirations. This is often connected with a withdrawal from the world and the idea of a prison house of the self. As a sense of failure deepens it effects even very basic decisions and ordinary life becomes untenable. As Robson tells us: 'the voices dripped constantly in my head like a Chinese water torture, telling me that I wasn't good enough, that I was a fraud and an imposter who didn't deserve to be well' (2007: 103).

Salvation

The failure to meet such high standards then is not read as evidence that they are indeed ideals to be aspired to but perhaps ultimately never achieved, rather such a failure simply means that they, the self-harmer, *are a failure* and that this is the judgement on them provided by life, by others, and eventually by themselves. Within this dynamic though there is an implicit dualism within the construction and framing of selfhood. On the one hand there is clearly the self who is in Dana's words a 'pathetic, snivelling, ugly, crying, cut and bleeding fuck up' but then on the other hand there is also clearly a sense of the self who would ideally meet such high standards, and who *is* worthy of love, praise, and affirmation. Self-harm is often framed as the process by which the former is transformed into at least a potential example of the latter through payment of punishment, discipline, and control into the moral economy of examination, judgement, and guilt.

That this dynamic between punishment and salvation is a widespread theme in subjectivist influenced discourses of self-harm can perhaps be indicated by its central role in Steven Shainberg's 2002 film *The Secretary* in which dowdy Lee who has recently left a psychiatric institution that she attended because of her self-harm, gets a job working for a lawyer called Mr. Gray. Her relationship with Gray becomes a projected model of her relationship with herself. He both enforces very high standards upon her, making her use a typewriter instead of a computer for example, and maintains a deep vigilance over her, constantly watching her for mistakes that she might make and which of course simply would not be a problem if she were allowed to use a computer. In others words she has been set up to fail and her failures are addressed by Gray through sado-masochistic sex play which emphasises the continuity between her self-harm and their relationship as they are both based in punishment. Gradually Lee's relationship with Gray and his new model of punishment means that she can leave her self-harm behind and she becomes by degrees more confident, transforming from a dowdy caterpillar to a sexy butterfly - her mental health problems behind her and her dress, comportment, and personality all suggesting that she is not only leaving behind her old self, but also the culture of her working class parents. By the end of the film Lee, through an act of extreme asceticism, ceases to be Gray's secretary and becomes his wife, she moves into middle class suburbia and a life of normative and domestic happiness.

Of course these dynamics and the broader themes they represent and which are also reflected in self-harmer's own accounts, frame self-harm as a true self-*punishment*: a technique of moral discipline designed, ultimately, to improve the self and provide at least a moment of purity in an otherwise pervasive sense of pollution. The failure of the self is purged in pain and suffering, paid back in stoical discipline. Self-punishment then implies both a justified punishing of the self in the light of an overwhelming sense of guilt and shame, and a purging of the self of bad feelings that don't belong to the more idealized version of the self that, what we saw in the last chapter to be an authentic and true-self. As such along with this concern for punishment there is also present and active a more implicit and subtle discourse of salvation, and a sense of who the self ought to be if only it could clear itself of the taint of failure and guilt, and reveal the happy and mentally healthy self which is felt to be latent within. If in our

Christian-informed culture wounds mean suffering (in part shame and stigma, and in part objective validation) then they also mean repentance, forgiveness, purity attained, a return to authenticity (Bradford, 1990). This of course is also the same pure and authentic self that lies at the heart of so many texts of therapy culture, recall for example from last chapter the images used by Sutton and Miller in their books of a journey back to 'light' and 'healing.'

Within this discourse of self-persecution then the conflation between the ideal and the normative describes and interprets a sense of pressure, responsibility, and failure which is regulated through a regime of self-examination, judgement, punishment, and rehabilitation. And this dynamic process of visibility and salvation also helps us then to understand the ambiguities of the secret/seen dualism. Being seen holds out the hope of short circuiting this cycle by offering the possibility, perhaps entertained only in fantasy, of being seen deeply, of being understood deeply, and of being accepted for who the self-harmer truly is – that someone will look past the 'pathetic, snivelling, ugly, crying, cut and bleeding fuck up' to see the authentic soul within. But while such a moment offers the possibility of bypassing the hyper-judgemental processes of the self-harmer it is also generally seen as a fantasy. For one thing most self-harmers seem to be cynical about the possibility of such a perfect interaction with someone else, and for another thing it would mean lumbering that person with their emotional baggage which would not be an internalization of responsibility but an externalization of it - and that is not their way.

Discipline (a discursive complex)

The key thematic discourse of self-persecution articulates a sense of selfhood that is constantly watchful and vigilant, always examining and assessing itself, and indeed always finding itself falling short of some ideal standard taken as a normative injunction. It should be remembered unless we fall accidently into a psychological analysis that these are patterns of meanings articulating the meaning of self-harm as a symbolic action, and therefore such personal dynamics need to be contextualised within a broader logic of such patterns, demonstrating the resonance between the experience of self-harm as a personal practice on the one hand, and the culture in

which this practice is meaningful and possible on the other. In looking for this context Elias's analytics of the civilizing process and the emergence of *homo clausus* are highly suggestive since they map the emergence of a kind of psychological individual characterised by self-vigilance, self-control, and the policing effect of emotions like shame and guilt. However the exact features of the discourse of self-persecution suggest more the second of the two analytics of modern *internalizing* subjectivity I mentioned in chapter five, not Elias's civilizing process but rather Michel Foucault's disciplinary society (1991).

From Spectacle to Discipline

Foucault's *Discipline and Punish* (1991 [1975]) begins with a graphic description of the public torture and execution of Robert Damiens, an attempted regicide, in 1757 which he then compares with a description of the mundane details of the daily regime in a Parisian house of corrections just eighty years later. The contrast could hardly be more striking, between the colourful evocation of a truly public spectacle of violence and the flat and frankly boring grind of daily life in prison Foucault argues we locate not just a seismic shift in the style of social order and the operation of justice, but also a shift in sociocultural strategies of power and the emergence of a new strategy rendered violence both more private and more complete, and which helped establish a new kind of subject.

The brilliance of Foucault's observation lies in its deconstruction of a common reading of this shift in attitude and strategy. If as Dostoyevsky said a civilization can be judged by entering its prisons (1985 [1862]) then this shift is often read as a moment in the ongoing liberalization and democratization of society, however since Elias we might interpret the word 'civilization' to reflect the degree to which a society's regimes of power and control have become focused on the figure of the individual subject, and the concomitant degree to which systems of self-control have been cultivated and violence internalized (Jervis, 1998). Indeed Foucault argues that what has actually changed between the public spectacle and the modern prison is not the degree of power or violence exerted but rather its strategy which here focuses on the dynamics of visibility as Crossley explains: 'the old regime of power worked by way of its visibility

. . . In the modern regime, by contrast, power works by making those subject to it visible – by surveillance' (2006: 40). Interestingly then as power becomes less visible it invests itself in the figure of the individual by making them more visible, by submitting them to a constant regime of visibility such that, not knowing when they are actively being watched and when not, they internalize the watcher and as Wolff explains 'control operates through internalization, [and] becomes, to a large extent, self-surveillance' (1990: 125). Foucault's shift in social strategies of power then is aptly described by Downing as a shift 'from the punishment of the body to the punishment of the soul' (2008: 76).

But the visibility of the prisoner is not just a matter of their being watched through the architecture and daily routine of a prison but rather theirs is the visibility that emerges through the new systems of modernist representation that, taking the human subject as their object, create vocabularies, explanations, and technologies which render their inner space and substantive essence visible. Foucault notes that '[a]s well as punishing acts, the penal system becomes a way of naming, judging, isolating, and controlling the 'shadows lurking behind the case itself" (1991: 17). It is then, the visibility of the criminal as created through the knowledge of the criminologist, the criminal as a certain kind of person inherently and essentially disposed to crime as a result of their inner and deterministic substantive constitution. For this reason Foucault connects systems of knowledge with systems of power since the emergence of authoritative knowledge about the subject becomes the basis upon which the subject discovers the truth about themselves. In this way the surveillance of the individual subject becomes self-surveillance and in turn this becomes 'the principle of his own subjection' (1991: 203). But Crossley notes that for Foucault '[p]ower is not centred in or on a particular organization or individual. Rather it is dispersed across a network of institutions' (2006: 43) and the expertise of the criminologist then cannot be taken as a specific strategy for the specific subjectification and moral rehabilitation of the criminal. Instead Foucault generalizes his analytics of the prison, arguing that though it may have been developed there and in other examples of what Goffman (1991) calls 'total institutions' such as military barracks, schools, and insane asylums, the disciplinary regime, the means by which surveillance becomes self-surveillance and self-control, came to be characteristic of western modern society in general from the workplace to the home,

and as such as Bartky explains '[i]n the perpetual self-surveillance of the inmate lies the genesis of the celebrated 'individualism' and heightened self-consciousness which are hallmarks of modern times' (1990: 65). Hallmarks that we have seen evident in Dana's judging her human self by the standards of her superhuman ideal, and in Chris's taking over the role of her own punisher, and indeed in *The Secretary* in Lee's psychological projection onto her workplace where her boss, Mr. Gray, is ever watchful of her.

Foucault's disciplinary society is a society then in which expert knowledge and moral and institutional technologies allow for the replacement of the regulation of populations through the coercive powers of an overt social order, by the regulation of populations through a more implicit order of the individual subject; a self-imposed order of the self. Here we might pick back up on the theme that the emergence of the human sciences and the psy-complex were intimately tied into the emergence of the modern individual, and that as such these new disciplines of knowledge and systems of representation also implied new systems of power and of subjectification – the means by which subjects become subjects (Rose, 1985, 1991, 1998; Hook, 2007). It is these disciplines which reveal the essence of the human subject and as such scientifically and authoritatively describe the norms inscribed therein, norms which we as human subjects must civilize and discipline ourselves into as Clegg puts it

> ways of constituting the normal are institutionalised and incorporated into everyday life. Our own reflexive gaze takes over the disciplinary role as we take on the accounts and vocabularies of meaning which are available to us, while certain other forms of account are marginalized or simply erased out of currency (1989: 156)

Such norms then describe the ways that we 'should' behave as well as the discourses that are used to structure and articulate such norms - Clegg's 'accounts and vocabularies of meaning.' As I have already argued in contemporary late-modern society such vocabularies and norms are distinctly psychological and very often medical. It is through these discourses that systems of knowledge like psychology form moral technologies by which we define ourselves as normative subjects, and subsequently examine, judge, and discipline ourselves in order to meet the standards of these norms. Such a dynamic is evident in Ann's opinion that 'everyone should see a counsellor at some point in their lives, I mean we all have issues we need to work

through, I'm sure everyone does' (telephone). The psychological and moral technologies of the individual then are also moral technologies about the individual, and through their application subjects became more individualized and of course more psychologized. Hook argues that

> the prominence and accelerated growth of [psychology], the very fact that it has not been confined to the narrow parameters of a purely academic exercise, must be seen in the context of a new culture of power that massively prioritizes the docility of the individual subject' (2007: 15).

By 'docile' he refers to a formulation of Foucault's concerning the way bodies are made into modern selves through processes of subjectification, Foucault argues that '[a] body is docile that may be subjected, used, transformed and improved' (1991: 180).

A Post-Disciplinary Society?

While Elias and Foucault offer different though somewhat complementary accounts of the civilizing process and the emergence of a disciplinary society there has been some debate in recent years criticising the relevance of such arguments outside of the historical and social conditions that were drawn on to formulate them. In particular some people have started to talk about a 'decivilizing process' (Mennell, 1990) focusing on the perceived increase of violence *within* societies which it is argued runs counter to Elias' model of suppressed and internalized intra-social aggression; and the emergence of an 'informalization process' (Crossley, 2006) through which there has been a general relaxation of manners, etiquette, and the old public values of starch-collared reserve and decorum. These two debates have connected with a related critique of Foucault, namely that our culture is less disciplined, even since the 1960s when Foucault began formulating his arguments, and that the subject in his disciplinary society is nothing more than a cipher for social control and a 'cultural dope' (Bordo, 1997).

Indeed on the face of things it might seem difficult to maintain Elias' arguments about the strict control of bodily displays and privacy under the daily influence of a hyper-sexualised media and a society that is increasingly tolerant of casual clothes, relaxed

manners, and taboo language. Nonetheless Elias and his defenders (Elias, 1996; Mennel, 1990; Wouters, 2004), while acknowledging the empirical pattern described by the 'informalization process,' and ascribing it to the breakdown in old regimes and rituals of power that have traditionally described the relationships of men to women and adults to children, notes that this process of breakdown has created whole new populations (women and children for example) that used to be more coercively controlled but who are now more subject to the processes of internalization and subjectification as described by him and Foucault. An example of this might be noted as a qualification to my comment about hyper-sexualized media. Though it is certainly true that over the last several decades there has been an increasing informalization in the standards of what can be shown, and increasingly graphic displays of flesh used in advertisements and music videos, it is also nonetheless the case that these bodies do not represent raw or natural bodies but on the contrary highly disciplined and controlled bodies (Winkler and Cole, 1994; Bartky, 1997; Bordo, 1997, 2003). Of course on the other side of the lingerie billboard those who witness these increasingly graphic displays have not only also been expected to take on some of the same values of discipline and control as are displayed there, but are also expected to control any sexual or bodily reactions to such displays which are no more acceptable now than in Victorian times.

Indeed the problem with a lot of such arguments for 'informalization' or the end of a disciplinary society is that they tend to focus on the content of the normative rather than the strategy by which the normative (of any given time) is being enforced. Crossley exemplifies this sort of problem when he says '[i]f aerobics is body-power then body-power is nothing to worry about' (2006: 50) neatly ignoring a society in which ideals of the body beautiful have been taken to such extremes, and taken to be so *normative*, that we have whole idioms of distress reflecting our cultural fixation with diet and exercise (Bordo, 2003). The key dynamic in a disciplinary society is that ideals are taken as norms and these are justified through systems of expert knowledge that we generally experience as moral imperatives, so that, for example we know we should be 'fit and healthy' but what is 'fitness'? It is not just a question of who defines the standards but rather who understands the knowledge generated in this way as authoritative, as simply the way things are, and so pursues it. Indeed as an ideal fitness

seems to a standard that always recedes from us as Bauman notes '[t]he pursuit of fitness is the state of perpetual self-scrutiny, self-reproach and self-deception, and so also of continuous anxiety' (2000: 78). Crossley seems to imagine that a subject can simply step out of their culture to view its norms with choice and agency. For example he argues that informalization is

> creating social spaces wherein choices rather than norms steer behaviour. Choice will be shaped by many factors, of course, but in the absence of norms and sanctions actors may opt in or out of them (2006: 38)

Of course it is hard to see how choice would be possible at all without the value systems provided by public norms to get one started, but more than this, as I shall argue in the next section, the provision of choice itself can be understood as a disciplinary means of making the subject police their own subjectivity, their own choices and decisions. Bauman notes that 'everything in a consumer society is a matter of choice, except the compulsion to choose – the compulsion which grows into an addiction and is no longer perceived as compulsion' (2000: 73). As Frost argues

> The media circulate a limited set of highly normative and very seductive meanings connected to consumer capitalism. The desires they create are not just about wanting *to own* but also about wanting *to become* (2001: 196, her emphasis)

We may have the choice whether or not to go on a diet, but the ideal of the healthy and beautiful body, policed by the reactions and opinions of others as well as our own internalized versions of their opinions, means that such choices are not value or norm free, nor are they without their deeply disciplinary dimension. As Bartky argues

> Dieting disciplines the body's hunger: appetite must be monitored at all times and governed by an iron will. Since the innocent need of the organism for food will not be denied, the body becomes one's enemy, an alien being intent on thwarting the disciplinary project (1990: 66)

The resulting mix of an apparently de-disciplinary and in-formalized society with the savage effort and disciplinary self-scrutiny that many people subject themselves to in the name of becoming beautiful, or successful, or popular, or finding their true-self has led to a description of 'ascetic hedonism' (Zizek, 2007) which restates the logic of the disciplinary in the context of the last few decades. Here it is our very commitment to choice, to pleasure, and to living in all the many ways that we imagine the Victorians didn't that provides all the normative impetus and sanctions for us to work ourselves

through stringent, sometimes brutal, but always hyper-vigilant regimes of discipline (Winkler and Cole, 1994).

'Talk' and the disciplinary

A key element in the technology of disciplinary power is 'the examination' meaning everything from a medical examination, to a psychiatric evaluation, to a school exam (Foucault, 1991; Downing, 2008). The examination is a tool of the visible in that it externalizes and makes known and visible that which might otherwise be hidden within the body, its measure of its inner substantives and the character of its inner essence. Through examination however we are also measured and as such compared to others so that the normative power of the 'atlas' (Armstrong, 1983), the model of what we should be, can be used to indicate deviance and disease; as Foucault explains the 'normalizing gaze establishes over individuals a visibility through which one differentiates them and judges them' (1991: 184). As an individual one is rendered visible through the application of such examinations and these strategies are pervasive in our society. Arguably they are also clearly evident in the meanings and values that characterise the self-persecutory theme in self-harm discourse as people constantly examine and judge themselves against social standards which are not taken as ideals but which rather carry the power of the normative, and as I pointed out in chapter five one normative ideal at work within the constellation of meanings that make up self-harm is that of psychological and therapeutic 'talk.'

For Foucault 'confession' (1978, 2003b), from its religious to its psychodynamic incarnations, is as much a technology of the visible, despite its literally being verbal, as those explored through the prison, and as Butchart (1997) reminds us confession is as such a form of examination, whether it is of sin or psychopathology. He notes that confession is a strategy 'through which the most confidential ideas and private secrets . . . are amplified to audability and lifted into socio-medical spaces as devices of disciplinary subjectification' (1997: 107). Through the 'talk' of psychological confession one is not only positioned within a psychological culture and the social network of the psy-complex but one is also subjectified in a distinctly psychological fashion. David Hook (2001, 2007) has researched the effects of therapeutic 'talk' in

psychotherapeutic contexts, noting that on the one hand that '[t]he performance of therapeutic listening functioned as a form of inspection, a means of observing, *assessing*, *monitoring*; an *auditory surveillance*' (2007: 20 his emphasis) while on the other the 'inactive intervention' of the therapist encourages the patient to attend to themselves 'such that the therapeutic narrative came very close to resembling the therapeutic *monologue* of a self-monitoring patient' (ibid, his emphasis). He goes on to note summarise his findings and argues that patients in such therapy demonstrated '*a powerful impetus to normative self-evaluations*' and that the '*process of locating self relative to social norms quickly became an automatic and self-implemented task for patients*' (ibid: 25, his emphasis).

But while the actual therapeutic encounter is quite easily modelled as an examination and as a disciplinary process,[20] the effects that Hook has noted seem to have become general norms and values within the lives of the self-harmers that I quoted earlier in this chapter. Of course in this connection we can remind ourselves of the spectrum of expression common to self-harm literature and generalised throughout many texts of the psy-complex and therapy culture. Here it was not just actual psychotherapeutic exchange but the ideal of psychological and therapeutic 'talk' that had become idealized as the very best way to express oneself, communicate with others, and avoid mental health problems. My point here is that it would seem that this ideal has become more of a normative injunction as indicated by Anne's belief that everyone needs to see a counsellor, and as such more ordinary norms of communication and expression have been pushed *relatively* further down the scale. Virtually all of my participants claimed to some considerable difficulties expressing themselves or communicating, believing that they are worse in this regard than most people, but by and large they came across in their interviews as highly articulate people who could very well communicate to me and express their thoughts, feelings, and experiences. Though this cannot be taken as too significant an observation for all sorts of reasons I think it does generally indicate an important factor: that people's felt difficulties with communication were felt to be difficulties in comparison with some ideal of self-

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[20] It should be remembered that no conspiracy of psychologists is being proposed here, this analysis merely constitutes an analysis of meanings which pattern values and power relations common in this cultural context.

expression through which the very essence of the person could be made visible and which would guarantee their being recognised and accepted.

Here then the ideal of psychological 'talk' connects with the establishment, externalization, and hence validation of the authentic and true-self and as such links the disciplinary process to the value of salvation. Indeed Foucault notes that the imperative to confess and express, whether religious or psychological, articulates ideals of salvation, liberation, and mental health (Foucault, 1987). Even the 'examination' as Davidson notes can be understood to be that 'form of knowledge and power that gives rise to the 'human sciences' (2003: xxiii) since it codes within it not only an assessment of the present, and a tracing of the past, but also a sense of the 'potentiality' and of 'future capability' (Hook, 2007). Though originally this may have implied the sense in which for example anthropometric examination was thought to be able to predict criminality, in contemporary psychological and psychotherapeutic discourses it has taken on a much broader significance. With the advent of 'positive psychology' and the transformation of psychotherapy from an attempt to return the patient to a state of normative illness, as opposed deviant illness, to an attempt to find some kind of solid mental health, psychological authenticity, and even 'self-actualization' (Maslow, 2011), the process of examination both clinical and personal has become a powerful way to produce desire around the figure of the individual self and their future potential. As such the twin ideals of psychological 'talk' and authentic selfhood not only create a desire to realize such ideals, but also help circulate a disciplinary moral economy through which they are taken less as ideals and more as norms describing inherent structures and capacities of the psychologically healthy subject. As such failure to achieve them is a failure to be a subject, a normal person, and as Goffman (1968) points out this is the taint of the stigma.

Project (an order of discourse)

> We are all fakes, all inventions. We are making this all up as we go along – Neil Bartlett *Who Was That Man: A present for Mr Oscar Wilde* (1988: 171)

The ideal of psychological 'talk' articulates the ideal of the authentic self, the fantasy of expressing one's essence perfectly and being understood and accepted by those

around you, while the ideal of the authentic self is itself, as Lionel Trilling made clear (1974), a product of the division of the inner and the outer and the emergence of the modern psychological individual. As I noted in chapter five a part of the core issue for this modernist subject is agency, since she is now responsible for her own fate and must work on herself so as to 'make something of herself,' and exploit the conditions of horizontal social order. With the emergence of the modern subject then we also find a concern with agency, reflexivity, and what can be called *project* – meaning precisely the injunction to make something of oneself; and to treat one's life, body, and self as a project to be worked on and worked over (Taylor, 1992; Jervis, 1998; Bauman, 2000). Calhoun notes that '[a]s lived, identity is always project, not settled accomplishment' (1994: 27) while Bauman argues that this is less an existential fact than one embedded in modernism; for him modernity means 'having an identity which can only exist as an unfulfilled project' (2000: 29). It is within this broad organizing order of modernist discourse which matches the cult of the individual with the modernist obsession with control, mastery, and progress, that the discourse of self-persecution and the workings of disciplinary society begin to make sense. It is the disciplinary that demands that the self work on the self, a strangely self-estranging formulation - that the self must be defined as a project and as not just something that *can* be worked on but something that *must* be worked up to some kind of ideal. The ideal of this ideal, the very production of a desire that matches modern subjectivity to modern capitalist social order and modes of production, is the idea of project and the self as a goal to be worked toward (Jervis, 1998; Bauman, 2000).

Reflexivity

> Everyone, it seemed was thriving. I felt a sense of frustration. Why couldn't I thrive? What kept me from engaging with life? - Victoria Leatham *Bloodletting: A true story of self-harm and survival* (2006: 185)

Zygmunt Bauman argues that under conditions of modernist subjectivity we have become increasingly reflexive beings 'who look closely at every move we take, who are seldom satisfied with its results and always eager to correct them' (2000: 23). That this is a process tied into the development of modernist psychological individualism is indicated by Greenblatt when he notes that the early modern period was sensitized to

such issues and during this period there is 'an increased self-consciousness about the fashioning of human identity as a manipulable, artful process' (2005: 2). No other text from this period indicates the contemplation of this new subjectivity with its concomitant concern with agency, reflexivity, and the doubts and anxieties which are associated with the combination of the two, than Shakespeare's *Hamlet* (1992 [1603]).

Hamlet explores the vicissitudes of agency and the capacity of the self to live up to its burden of self-directed control and fulfil its projects; and in particular it depicts the potentially paralysing effect that reflexivity may have on this burden. Throughout the play the old vertical order of family and moral duty makes its presence known in the pressure that Hamlet feels to exact revenge on his uncle for the death of his father. However instead of acting directly, knowing with certainty what the right course of action is, Hamlet falters wondering instead whether or not his father's ghost tells the truth, wondering what he should do, and wondering whether he should simply escape this terrible burden of decision and agency by taking his own life. In other words Hamlet is paralysed by his own inner and highly individual depth, and even when he finally acts to avenge his father it is not by decision but by impulse and the liberating effect of his own impending death. What Hamlet reveals is that within this complex of control, reflexivity, and project there are no easy answers and there is much anxiety and paralysis of action – ultimately this complex of agency, reflexivity, and project is characterised in *Hamlet*, as the modern self it describes, by ambivalence and so Polonius' trite advice that 'This above all else: to thine own self be true' is easy to mock when reflected in Hamlet's tortured drama of inner thought and feeling.

Hamlet then seems to represent an early clash of Gergen's modernist and romantic selves: on the one hand the power of reason and thought, and on the other the power of doubt, passion, and isolation to undermine thought and turn it into a force which debilitates action. Hamlet might be able to be true to his own self if in fact he knew who or what his own true-self was, but his central psychological dynamic is characterized by self-doubt, over-analysis, and a lack of control over his situation. And in this Hamlet's experience of self and subjectivity strongly resembles the experience of self and subjectivity of the self-harmer. Indeed given the current cultural associations between self-harm and certain youth subcultures it it is an interesting exercise in 'culturoanalysis' to enter the words 'Hamlet' and 'emo' into a search engine

(as a kind of social free association) and see what happens - my own returned over a million matches. While this may not be significant in substance it does testify to Hamlet's ongoing translation by a contemporary audience in light of precisely those structures of modern subjectivity that are felt to be both emphasised in late-modern culture, and in cultures of self-harm like emo.

The modern subject is a highly reflexive subject then, but in late-modernity this process has perhaps been even more exaggerated as Giddens argues '[t]he self is for everyone a reflexive project – a more or less continuous interrogation of past, present and future' (1992: 30) but as he makes clear while our subjectivity may be individualized the social and cultural resources from which we might construct that individuality are ever present all around us: '[i]t is a project carried amid a profusion of reflexive resources: therapy and self-help manuals of all kinds, television programmes and magazine articles' (ibid). But while Giddens remains largely sanguine about the influence of such resources on our lives other commentators have sounded a more sharply critical tone. For example Nicholas Rose argues that

> there are certain costs to the obligation to assemble one's own identity as a matter of freedom. And the exercise of choice may be parodic and playful, but it seldom remains so for long. For in the choices one makes, and in the obligation to render ones everyday existence meaningful as an outcome of choices made, one's relation with oneself is tied ever more firmly to the ethics of individual autonomy and personal authenticity (1991: 272)

So as I noted in the section of the disciplinary society while the content of our choices might at first reflect freedom of choice, this variety masks a deeper order, the order of 'the ethics of individual autonomy and personal authenticity' and the constant reflection in all things of the self.

From the Narcissistic Self to the Belaboured Self

It is in this context that Christopher Lasch (1979) formulated his theory that American culture (and here perhaps we can see late-modern consumer capitalism reflected in general) articulates a fundamental and narcissist personality disorder. To recall the words of Robert Coles in chapter five, our contemporary culture describes a 'concentration, persistent, if not feverish, upon one's thoughts, feelings, wishes,

worries – bordering on, if not embracing, solipsism: the self as the only or main form of (existential) reality' (1987: 189). For Lasch this fixation with the self and its common symptoms and effects as he read them, reflected a narcissistic self for whom 'the world is a mirror' (1879: 10). Certainly Lasch saw this narcissism reflected in most aspects of late-modern American society though he singled out therapy culture and the ethics of the personal-growth and self-awareness movements as idiomatic and saw their spread and generalization as symptoms of the broader cultural malaise. For Lasch a growing dependence on a more tightly woven fabric of state, bureaucratic, and corporate structures had left the individual with little actual autonomy and little personal responsibility. Paradoxically then this over-social condition created an under socialized subject, self-centred and grandiose and yet desperately needing the approval and validation of others. Lasch quite literally believed that social conditions had infantilized the subject and frozen them in an earlier stage of psychological development that Freud had described for his own time.

Several of Lasch's observations are important in reflecting back on the discourse of self-persecution, the focus on self, and the 'inner suffering' (1979: 43) of this self as a consequence of this focus and a kind of basic double bind – to fixate on the power of the self but to utterly need the validation of others. And while it is true that Lasch uses the term 'narcissistic' to refer to a personality structure defined by psychodynamic psychology and not overtly as a pejorative dismissal of the contemporary subject it is hard, especially given the polemical nature of his work, not to read it in this fashion. Susanna Kaysen's reflection that '[o]ne of the great pleasures of mental health (whatever that is) is how much less time I have to spend thinking about myself' (2000: 157) might help us to soften the sharp edges of Lasch's critique of the contemporary focus on the self with its suggestion that our 'narcissism' is no simple love of self but a labour to be borne by us through the injunction of project; self-creation, intense self-reflexivity, examination, judgement, and discipline.

Micki McGee (2005) perhaps suggests a more appropriate characterization of this late-modern subjectivity then, when she replaces Lasch's 'narcissistic self' with a 'belaboured self' as she explains '[s]elf invention, once the imagined path to boundless opportunity, has become a burden' (2005: 13) 'the self under advanced capitalism is nothing if not belaboured . . . a site of effort and exertion, of evaluation and

management, of invention and reinvention' (ibid: 15-16). Like Lasch McGee ties the emergence of this belaboured self to the rise of therapy culture, the personal-growth movement and self-improvement literature though like Lasch she does not reduce this relationship to naive determinism, seeing instead the resonance of culture and selfhood in the social context of late-modernity. The therapy culture literature that she examines offers the hope of discovering or cultivating an authentic 'unique, and stable self that might function – even thrive – unaffected by the vagaries of the labour market' (ibid: 16) and as such the 'belaboured self' describes both a self that is having to work harder under more demanding market conditions while predicating success or failure in this venture on the self's ability to invent, reinvent, and market itself. Like Furedi McGee points to the individualizing tendency built into this social ethos as social and political issues are focused on the individual self and the psychological is once again the privileged language of interpretation for both articulating this situation and providing the technologies, services, and goods, that meet the needs and desires inculcated by it. As McGee points out

> The figure of the self-made man – and more recently that of the self-made woman – comforts and consoles us, suggesting that vast material, social, and personal success are available anyone who is willing to work long and hard enough. The fantasy has maintained considerable appeal, despite its troubling corollary: if success is solely the result of one's own efforts, then the responsibility for any failure must necessarily be individual shortcomings or weakness (2005: 13

The belaboured self then reflects the processes of disciplinarity described by Foucault and provides a model of the subject of ascetic hedonism without further psychologising this self as Lasch does or forgetting that the psychological individual, the psychodynamic self, the ascetic hedonist, and the belaboured self are not actual selves as such but cultural patterns working through conditions of disciplinarity to shape actual people as particular kinds of subjects. All these permutations or modalities of modern and late-modern subjectivity are patterns and processes of meaning, albeit patterns that shape and organize power, and work to locate the self of each person as the site of social control, and therefore of conflict also.

It is perhaps important here to pause and note that while several valuable Foucaultian and Feminist inspired analyses of idioms of distress such as anorexia and self-harm (Bartky, 1990; Frost, 2001, Inckle, 2007) have focused on precisely these dynamics,

especially the impact of female labour on the body and the processes of subjectification as they are inscribed onto the body; it is nonetheless important to understand that this body is the visible material and outward extension of a subjectified *self* and that in the discourses of self-harm as we have been exploring them there is perhaps less emphasis on 'body-hatred' (Frost, 2001) than in anorexia and instead more focus on the self as a constellation of bodily and psychological elements. As we saw in the discourse of self-persecuton it is the *self* as an objectified essence that is the subject of guilt and hatred, more so than the body as it could have been singled out conceptually from this self by participants. Indeed the concerns and anxieties that reflect the perceived failures of self-harmers circulate issues of moral behaviour, fulfilling social and familial roles, communicating effectively, and generally fitting in. A reflection of this is the desire for the ideal of an authentic self, which while it may be reflected by a trim, fit, and beautiful body nonetheless focuses more on the ideal of a psychologically healthy and functional person who fulfils their roles, meets their duties and obligations, communicates effectively with others, can express themselves and their emotions, and who does not hate themselves. From this we might argue that the carrot of desire that keeps the belaboured self labouring is the idea that it can complete and perfect its project, and can produce/become a self for whom life and selfhood are no labour at all.

Of course in this it is easy to identify an economic principle. Jervis observes that 'consumerism entails a market-oriented quest to articulate and satisfy desires, and desires are as much to do with identity as with material goods' (1998: 93). If identity can be framed as a commodity then it provides an inexhaustible source of desires since as Craig Calhoun argues '[o]ur identities are always rooted in part in ideals and moral aspirations that we cannot realize fully. There is therefore a tension within us' (1994: 29) and it is this tension that creates the desire for it to be removed and hence the consumer logic of an authenticity industry whether this is manifest in therapy culture or in the common contemporary tendency to sell consumer goods through associated lifestyles, so that one is not just buying a certain brand of clothing or food but rather a whole identity and ideal of selfhood (Bordo, 1997, 2003; McGee, 2005). Authenticity is of course the perfect consumer good since as Hutton points out

The quest for self-understanding is a journey without end. Even in the deepest recesses of our psyches there are no experiences which, if evoked, will reveal our true identities . . . we are condemned to a quest for meaning whose meaning is that our human nature is continually being reconstituted by the forms that we create along the way (1988: 140).

Or as Sass describes the 'paradox of the reflexive' as 'desperate attempts to constitute the self [are] precisely what tears the self apart' (1987: 144). The desire to find authenticity is likely to lead less to self-fulfilment than to an 'elevated concern with the self [which] is underpinned by anxiety and apprehension' (Furedi, 2004: 21) which Jervis observes 'brings costs in the vulnerability of this self to the world [that] it purports to control' (1998: 38) and of course creates a market for therapeutic services. As Bordo points out

the very essence of advertising and the fuel of consumer capitalism [is that it] cannot allow equilibrium or stasis in human desire. Thus, we are not permitted to feel satisfied with ourselves and we are 'empowered' only and always through fantasies of what we *could* be' (1997: 51 her emphasis).

This is not necessarily to explain therapy culture *through* consumer culture, as if it were a conspiracy dreamt up by a cabal of advertising executives, though certainly the therapeutic is a sizeable industry and at least in part necessitates a consumer and economic analysis, but rather to point to their resonance and co-patterning within a common disciplinary culture which actively produces desires that can feed into the ongoing work of self-making - and hence self-regulation. McGee observes that 'one finds there is no end-point for self-making' (2005: 19), and therefore 'today's retinue of self-improvement experts, motivational speakers, and self-help gurus conjure the image of endless insufficiency' (2005: 18).

Summary

[T]he curse of the modern self, [is] that it cannot, must not, 'forget' itself – it is condemned to reflexivity – but neither can it exist in the pure reflexive state, cannot look too hard at itself (its self), for there may be nothing there' John Jervis *Exploring the Modern* (1999: 69)

It's a remarkable piece of apparatus – The operator of the apparatus in the opening line of Kafka's *In the Penal Colony* (1992).

The disciplinary, emergent from the modernist obsession with project and progress, reflected through its late-modern modalities in psychology, therapy culture, and consumer culture, describes a social and cultural pattern of subjectivity which is particularly concerned with processes of self-making and self-fulfilment and who works from idealized standards which are taken as normative expectations. Many of these ideals have reached a kind of logical conclusion in late-modernity since they focus the self on its self through the systems of knowledge and technology which tell us about the self – namely the psychological. Arguably then the sentence that is inscribed in each self-harmer through their self-inflicted wounds is a sentence in Kafka's sense, a stigma of failure perceived to be the very essence of the person. And in a way it is since this inscription is not made by a machine, or (in any uncomplicated fashion) a self-possessed and rational agent, but rather by the late-modern subject who works from the norms and values of late-modern subjectivity and so inscribes a sense of failure which is the very key to this subjectivity and its disciplinary construction.

But in what way is this sociocultural apparatus 'remarkable?' It is clever and insidious in its implicit logic but what is really remarkable about the apparatus of disciplinary society is that it is a regime of order written into the subject by the subject themselves and in this way, between them, Kafka and Foucault offer us a useful model of the self-harmer: she is someone who is both the operator of the apparatus and its condemned. But for Foucault this role is the very essence of modern subjectivity and so one might object that it offers us no way to understand the particular plight of the self-harmer. However as I will argue in the next chapter, reviewing the systems and structures of meaning that the three axes describe, what makes self-harm meaningful for us, including those that perform it and may do so for a good many different reasons, is its exaggerated indication of these very tensions which *are* more or less universal and which *do* describe our common culture and subjectivity. As Bordo pointed out in respect of anorexia 'it is the 'characteristic expressions of its culture', the very 'crystallization of its discourses and contradictions' (2003: 141). And so it is with the dynamic of the secret and the seen: it is possible to gather all the ambivalent feelings that someone might have about each but it would be exceedingly difficult to produce a model that could then, with any reliability, be generally applied to self-harmers. Rather

the point to be made is that this complex and ambivalent dynamic expresses a deeper cultural force, a sensitization to visibility and the technologies of visibility, a sensitization to what is known about the self and what may be known if it allows itself to be revealed to others. Such a sensitization can really only be made to make sense of the basis of a disciplinary society in which subjects relate to themselves as both object of knowledge and as projects of self-making.

Chapter Eight

Self-harm and Gender

Introduction: the Bell Jar

> Psychopathology is the final outcome of all that is wrong with a culture – Jules Henry (quoted in Bordo, 2003: 130)

> I wasn't steering anything, not even myself . . .I felt very still and very empty, the way the eye of a tornado must feel, moving dully along in the middle of the surrounding hullabaloo – Sylvia Plath *The Bell Jar* (2005: 2-3)

Sylvia Plath committed suicide at the age of thirty leaving behind a few books of poetry and a somewhat autobiographical novel, *The Bell Jar* (2005), which details the slow descent into depression and attempted suicide of a young woman who wants a creative and meaningful life but is restricted by gender constraints and social expectations. Plath's life, and more than anything her *inner* life, have since been worked through, worked over, and mythologized by layer upon layer of interested interpretation, creating a spectrum of opinion framing her as everything from a victim of her own narcissism, to a victim of mental illness, to a victim of patriarchal society and the confused gender positions that trapped women in contradictory roles in the 1950s and 60s. As Appignanesi explains Plath's suicide 'propelled [her] into an iconic stardom . . . she grew into a saint of female victimization, her madness and suicide themselves signals of what patriarchy did to talented women who dared to aspire' (2008: 319). As Jacqueline Rose (1992) notes it is perhaps impossible to reach the real Plath beneath these readings and deployments, but it is also perhaps not necessary since Plath herself may not be what we need to interpret here but rather precisely what she has come to mean for us, and the position that her iconic status takes up, mirroring the role of idioms of distress, as an exaggerated playing out or living through of tensions and contradictions inherent to our culture.

Plath is relevant here partly because she appears to have self-harmed on several occasions as detailed in journals from July 1953 (Appignanesi, 2008: 321), and indeed she has the heroine of *The Bell Jar*, Esther Greenwood, signal her rebirth as a rebellious woman, after the symbolic death of her more conventional feminine identity by electroconvulsive therapy, through an act of ritual bloodletting (perhaps standing then

as a feminine version of the Fisher King). Plath has also become an important figure in reflecting people's attitudes about self-harm. She is often cited on the internet by young women posting about self-harm, while she is just as frequently cited by those wishing to dismiss such young women as emotional narcissists evidenced by their Plath fixation. Likewise several films put *The Bell Jar* into the hands of young female characters to show that they are concerned with their inner turmoil, or at least they like the idea of having inner turmoil because it means they are 'deep.' But more than these direct connections Plath reveals something, as much as in these prejudices as any other way, about the pattern of meanings that feed into self-harm as a symbolic action. We have already noted that this pattern is deeply modern, albeit translated through late-modern structures such as a widespread culture of the psychological, an increasingly influential and profitable therapy culture, and a near pervasive culture of consumer capitalism. But Plath demonstrates that these meanings are all also deeply gendered. Indeed gender could easily have been developed here as a fourth axis organizing meanings about the kind of subject who self-harms but, despite the highly fluid and flexible conception of an 'axis of continuity,' I think this might mislead us as to the degree to which gender runs deeply within and through all of the discourses discussed so far. In this sense gender is the final order of discourse that modifies and transforms the previous three I have examined.

We have seen how key modernist concerns, especially with issues of *representation*, *project*, and *experience* (Jervis, 1998) work like force fields moulding the meanings of self-harm so that within the sociocultural context described by these concerns it can be a possible, meaningful, and powerful practice expressing personal distress and emotional dysphoria – but all three of these concerns are themselves deeply gendered as I hope to demonstrate in this last chapter. It is important to keep in mind however, as I make this argument, that by gender I do not simply mean a pattern of ideas and attitudes that map directly onto sex differences, any more than I believe that these three broad forces of modernity produce 'the psychological individual' in the way a cutter for gingerbread men produces figures each identical to the next. Rather these are forces of influence that work through and are patterned by local and even entirely personal conditions, so that the particular knot in the cultural pattern that we might describe as a person is always in some significant sense unique, but can be said to be

so only on the basis of their personal articulation of broader sociocultural forces. Likewise I take gender to be a patterning force in human life producing the feminine and the masculine as 'fictions linked to fantasies deeply embedded in the social world which can take on the status of fact when inscribed with the powerful practices . . . through which we are regulated (Walkerdine, 1990: xiii).

This issue of the close but fuzzy mapping between sex and gender differentiation is, I think, particularly important in understanding self-harm. Given the difficulties experienced in large-scale statistical mapping and meta-analyses that I mentioned in chapter one, it is very hard to say what the gender profile for self-harm really is. Research estimates vary wildly from fifty percent to ninety percent of self-harmers being female (Cloward and Piven, 1979; McAndrew and Warne, 2005; Tantam and Huband, 2009; Adler and Adler, 2011) and various estimates are made about the 'hidden' population of male self-harm. It is universally agreed that women are more likely to present at clinics and hospitals with self-inflicted injuries, or at least they are more willing to admit to it, and likewise it is women who disproportionately participate in research such as this, and again it is women who are the cultural, and clinical, stereotype of the self-harmer with almost all representations of self-harm referencing images of women. There is one intriguing exception to this last point: in music, though there are female singer-songwriters who write and perform songs about self-harm, and are known to self-harm or have a history of it (Courtney Love and Fiona Apple for example), the majority of songs about self-harm which are written and performed are by men and more specifically than this, men who fit into the style and tropes of emo subculture. Indeed when a male image is used to represent self-harm, as it occasionally is in newspapers and on the internet, it is usually of a teenage male with a distinctly emo style.

I will return to the emo exception later, but for the moment it is perhaps enough to make the point about gender by briefly reviewing the image of the self-harmer that can be built up from the representations arising out of the three axes of continuity that we have explored. In axis one we saw that framing self-harm as a problem generally means framing it as a problem for someone who is too emotional, too impulsive, too irrational, too inarticulate, and someone who lacks the ability to process their emotions into rational language and thought. In axis two we saw that this framing of

the self-harmer presented them as someone who suffers from being too vulnerable, too sensitive, too natural, too 'real,' and too literal which again brings back to the issue of 'processing.' And in axis three we saw that self-harmer is also someone who is too private, too secretive, too narcissistic, and too self-punishing, always turning aggression in on themselves and not projecting it out into the world. The gender dimensions of these characterizations are unmistakable (Ussher, 1991; Jervis, 1999) though again it must be understood that by this I mean the 'fictions linked to fantasies' about gender which work through our culture and social institutions to pattern men and women as different kinds of subjects, *and I do not necessarily mean the people (men or women) themselves*. Of course the gender politics of self-harm are fascinating and in this chapter they will help us to pull the lattice work of meanings described by the three axes of continuity together and provide a fuller account of self-harm as a meaningful practice in our culture.

<u>Women, Modernity, and Demons</u>

If modernity produced the *homo clausus* as the prototype subject, the model to be aspired to, then as several commentators have made clear this is a distinctly gendered prototype which reads the subject as inherently male, indeed as Jane Ussher argues 'psychology has developed as a singularly male enterprise, with men studying men and applying the findings to all of humanity' (1991: 9). The consequence has been that the binary of subject/other has been used to map the binary male/female and while men have traditionally been positioned as rational, controlled, contained, and capable of public life; women by contrast have been positioned as irrational, subject to loss of control, often overwhelmed by emotions, tears, and other bodily fluids, and of course fit only for private life (Showalter, 1987; Ussher, 1991; Lupton, 1998; Jervis, 1998, 1999). In the way that such binaries tend to align to form cultural complexes of meaning, male/female and subject/other also traditionally maps onto culture/nature and understands both women and children to be too mired in nature to be truly cultured and properly civilized subjects (Grosz, 1994). Men then, as true *homo clausus*, are understood to be able, by virtue of their gender, to fully symbolise and hence 'process' their natures and so embody the modernist ideal of *homo clausus*; while

women and children are subject to problematic, or at least distasteful, eruptions of nature - eruptions of the 'real.' It is in this sense that women have often been tied to madness in a way that men, as a gender, simply have not. This is not to say that men have not suffered from madness – far from it – and the gender politics of female madness can be incredibly confusing (are women made mad by culture? Or is the feminine coded as mad by patriarchal social institutions?), but it nonetheless remains a fact of social history that during the modern period women have been associated with madness and the loss of rational control. Consequently women have traditionally been positioned as both 'subject' and its 'other' and underpinning this positioning is the fear that at times this 'other' might yet overtake her and cause a dark and dangerous trauma in the fabric of the symbolic order.

The text that neatly wraps this eruption of the other into the figure of the female, the figure of the child, and also that of the self-mutilator, is William Friedkin's 1973 film *The Exorcist*. This classic horror tells the story of an adolescent girl on the very edge of womanhood, Regan, who becomes possessed by a demon and must subsequently be exorcised by Catholic priests. *The Exorcist*, perhaps inspired by Mark's gospel account of the demoniac Garesene, contained one of the first movie representations of a kind of self-mutilation which was close enough in its associated pattern of meaning to count, at least symbolically, as self-harm. Mark Kermode's 1998 documentary *The Fear of God: 25 Years of The Exorcist* reports through interviews with Friedkin that this was originally a simple answer to a basic problem: how to make the demonically possessed Regan look less like an apple cheeked all-American adolescent and more like she was inhabited by an evil spirit. A number of 'monster make-ups' were tried but all gave the impression of a fantastical physical change that suited typical horror special-effects but not the semi-documentary realism favoured by Friedkin. Some believable way had to be found to alter Regan's appearance without diminishing the shock value of the transformation, or the audience's belief that this transformation could only have occurred through demonic possession. The solution was to create the effect of multiple lesions on Regan's face, supposedly the result of violent scratching at her own flesh.[21]

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[21] In fact the only act of self-mutilation explicitly depicted is an infamous scene in which Regan violently masturbates with a crucifix.

The implication of self-harm was indeed able to shock and disturb, but as Friedkin revealed to Kermode it was further able to convey the drama of an inner battle for control of Regan's body, and possession of her soul, her true-self. In one scene Regan's nanny and the priest Father Karras enter Regan's bedroom while she is asleep and the nanny pulls up Regan's nightgown to reveal the words 'help me' which seem to have spontaneously appeared on her belly, raised up from her skin like scars. This message, which numerous of my participants like Susan for example maintain is the underlying message of their self-harm, appears from what is effectively the unconscious of Regan's psyche where presumably she has been repressed by the invading consciousness of the demon. It is a message that is spoken through her body and represents a literal return of the repressed as Regan seeks to say through her body that which she can no longer communicate directly because she has lost control. This message then and the intended implications of her self-harm seem to signify an inner battle ripping its way onto Regan's body; the desperate inscription of psychic pain onto skin made by a person in deep conflict.

It is of course significant that Regan is an adolescent going through the changes of puberty and transforming from a girl into a woman, and as with the analysis of self-harm it may not be necessary here to fix the analysis of this significant fact beyond the indication of a dynamic field of conflicts and tensions. Perhaps the dark 'real' that possesses Regan is really her romantic self insufficiently processed by the modernist self because she is both child and female, and fighting for control before Regan's entry into full womanhood initiates her into a fully gendered subject position which is defined as its opposite and runs counter to the 'nature' of this self. As Kim Chernin points out women may feel a 'terror of female development' (1985: 21) and indeed something of this dynamic can be detected in Plath/Esther Greenwood as she moves from her adolescent dreams of becoming a writer and a professor to the realization that as a woman she is expected, as presidential candidate Adlai Stevenson famously counselled Plath's graduating class, to write laundry lists instead of poetry (Showalter, 1987; Rose, 1992; Appignanesi, 2008). As such it is hard not to read *The Exorcist* as at least a slightly subversive text despite its denouement, since it has to be admitted that the 'real' of the demon is both more intelligent and more interesting than the young Regan who conforms completely with her role as a young and civilized woman.

Perhaps then the romantic self is just a cipher for the feminine and the battle to exorcise Regan is really the battle to inscribe her into the symbolic order of patriarchal society, as represented by the two priests.

Certainly this framing of womanhood-untamed as a wild and demonic force, appears not only in various readings of the medieval and early modern 'witch craze' (Jervis, 1999) but also in feminist readings of female madness as resistant eruptions or pre-political protests against the symbolic order of a male-dominated and essentially misogynist society (Ussher, 1991). Interestingly enough the character of Father Karras, who eventually exorcises Regan, is not only a Catholic priest but also a psychiatrist. And in this connection it is tempting in seeing the words 'help me' raised like scars or welts on Regan's body to be reminded, not just of Susan or Allie or Dawn, but of the hysterical dermographia that was recorded and photographed at Charcot's Salpetriere where messages and pictures would either appear on certain women's skin or else be traced there by the doctors, including on one occasion the word 'Satan' written onto an unsuspecting woman's back (Beizer, 1994). And it is tempting also, in watching Regan's body dressed in an old fashioned nightgown and spasmodically contorted by her demon, to be reminded of other photographs taken at the Salpetriere and in particular those of 'Augustine' who was recorded in great detail in her spasms and displays of *attitude passionalle* (Didi-Hubermann, 2004). Indeed the *The Exorcist* is very easily read as a hysterical text.

In any case, whether because of the influence of *The Exorcist* or else perhaps because of more general circulating meanings, acts of self-mutilation have since become a standard part of the cinematic semiotics of demonic possession appearing in films such as *Possession* (1981), *Stigmata* (1999), *Possessed* (2000), *The Ghosts of Mars* (2001), *The Matrix Reloaded* (2003) and *The Matrix Revolutions* (2003), *Gothika* (2003), *Ginger Snaps Unleashed* (2004), and *The Exorcism of Emily Rose* (2005). In several other films acts of self-mutilation are still used to depict an inner battle but not against demons, but rather madness and a loss of control (see *The Abyss*, 1989 and *Aeon Flux*, 2005). In *Ginger Snaps Unleashed* the dark 'real' of mature womanhood is represented not by a transformation into a demon but by a transformation into a werewolf whose symbolism of nature, fecund sexuality, and hair in strange places is quite explicit. The young heroin, Brigitte, self-harms and practices bloodletting throughout the film as a

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way of slowing down and staving off her final and inevitable transformation into a werewolf/woman. While her self-injury is narratively explained by her supernatural transformation, the depiction of this self-injury clearly cites common and popular images of self-harm and nicely ties the function of self-harm here - holding off the werewolf - with self-harm in *The Exorcist* - holding off the young girl's transformation into a mature woman. But with that said it is not entirely clear if 'mature womanhood' means the symbolic inscription into a feminine identity and the ascription of a subject position somewhere between 'the subject' and its 'other' - as seems more applicable to *The Exorcist* - or whether mature womanhood might mean the full force of the 'real' in all its sexual and demanding nature, being unleashed on the adolescent - as seems more applicable to *Ginger Snaps Unleashed,* especially since Brigitte is a kind of emo tomboy and affects a certain kind of androgynous appearance.

As I pointed out before however it may not be necessary, and indeed it may be mistaken, to try and schematize these meanings too tightly, tying different symbolic elements up with different meanings and then relating the whole together like a definite and precise circuitry of meanings and values. Rather it seems that these symbols powerfully connect the interacting and interfering 'auras' (Wittgenstein, 1958) of several meanings and generally work to indicate the tensions that arise out of these meanings – the very ambivalence of the symbol all the more effectively performing this function for its being, as Pierce put it, 'confusing and confused' (1977: 377). Regan's possession then is ambiguous and disturbing because Regan's subject position as an adolescent girl on the verge of womanhood is also ambiguous and disturbing. But in any case, and clear from both *The Exorcist* and *Ginger Snaps Unleashed*, is the idea that self-harm depicts a kind of inner battle for control with dark forces of the 'real' and that these forces are in some sense understood to be more evident in women, or perhaps less controlled within them. In either case the idea of inner conflict and significant inner turmoil would appear to be distinctly gendered.

Women, Late-modernity, and Female Perversions

The Exorcist and *Ginger Snaps Unleashed* help reveal the recognition/inscription of tensions and conflicts inherent in the modernist construction and positioning of the feminine, however they are also contemporary texts and as Bauman (2000) has already reminded us, if the late-modern is anything then it is certainly modern. But while these films can be read as still relevant to late-modern femininity, and so perhaps can also help us to see how the chapter of female confinement (Showalter, 1987; Appignanesi, 2008), the chapter of classic hysteria (Showalter, 1991; Beizer, 1994; Micale, 1995; Mitchell, 2001), and the chapter of the medicalization of the feminine mystique (Plath, 2000; Kaysen, 2000) in the close history of modern women and modern madness are also all still relevant to the late-modern feminine, they do lack something of an analysis of specifically late-modern translations and transformations of these dynamics and tensions. The same however cannot be said for another significant filmic text in the history of self-harm's emergence into public awareness: Susan Streitfeld's 1996 film *Female Perversions*, a narrative exploration of psychologist Louise Kaplan's (1993) non-fiction book of the same name.

Kaplan's interest in her book is in uncovering the 'perversions' common to women, which is to say those psychological strategies by which women divert their desires away from the basic trauma imposed by their gender position, and express them instead in ways that not only allow this trauma to be lived with, but in classic disciplinary logic, also keep them re-inscribed into the very gender positions that created the trauma in the first place and which prevent a deeper reconciliation with life and the world. Streifield's deeply interesting, if at times a little heavy handed, narrative representation of this basic idea centres on the figure of the symbolically named 'Eve,' a successful and aggressive lawyer who is soon to be promoted to the position of judge. Despite this success Eve is wracked with insecurities, neuroses, and anxiety which she manages through the culturally common strategies, and some more uncommon strategies, of 'female perversions' such as beauty regimes, seduction, consumerism, and so on.

Through these typical perversions then Eve regulates her anxieties and maintains a sense of identity and self-worth but without having to address any of the deeper

traumas that underpin the contradictory character of her subjectivity or the way that these are the very means of her continued subjectification as a woman. Eve is a driven and professional woman, powerful according to many standards and a senior agent of the law and yet she is rendered utterly powerless again and again through her primary subjectification as a woman. She may be a lawyer, wealthy, middle-class, and soon to be a judge but first and foremost her subjectification is that of a woman. In one scene she is rendered passive, flustered, and threatened by a black beggar and windscreen washer. He is nonviolent and relatively polite but significantly he hails Eve as a woman from his position as a man, rather than her powerful and wealthy (white) subject to his desperate and penniless (black) one. Of course what is particularly important is that Eve answers this hail, she recognises herself in it and so allows herself to be constructed as a woman first, and only as a powerful member of society second.

The main thrust of the film is to show that 'female perversions' are the very moulding of desires along gendered lines so that the assumption of a normal female identity in a patriarchal society is the very suturing of the individual and their motivations into their own oppression and domination. Indeed to be 'normal' in this sense is also to be 'perverted.' As Jervis explains it is 'the language of inarticulate desire [that] is expressed through the very body that has to be the source of its [own] repression' (1998: 104) and so Eve's desires become the primary disciplinary means by which she is kept in her place, subsumed to the masculine order and the male gaze. Her inner tension comes from the contradiction articulated by her desire for power and her sense of responsibility on the one hand, and her inherent powerlessness on the other. Part of this complex of desire and aspiration is Eve's need to impress and please her emotionally distant father and in the film's non-too-subtle symbolism, to be a man *and* to be a woman. So the inner tension and pressure that eventually results in her cutting her breast with a razor blade comes from the struggle to affirm an identity that in its gendered forms and economy of desire is always already self-defeating and self-destructive.

Eve's story is one long playing out of the classic feminist maxim that 'the personal is political' albeit here in a largely (but not wholly) nondomestic context. As such we see that her inner turmoil and eventual self-harm are related to her disciplinary internalisation of, and taking personal responsibility for, a number of social and

political forces that threaten to destabilise her psychologically. Her desires are not 'true' to her (within the logic of the film) but are socially constructed, and taking responsibility for them internalises and psychologises what is otherwise a social structure of gendered subjectification. Internalising the tension that is the inevitable result is to take on one's own shoulders what is otherwise a social struggle. This is the key to understanding Eve's self-harm. It is a moment of psychological and emotional impasse created by the realisation that her identity and life encode an unworkable contradiction, a realization that is nevertheless still trapped in the false frame of a sense of psychological ownership and responsibility, and hence unrelievable pressure.

In *Female Perversions* self-harm takes on the position of *the* key perversion, the pinnacle coping mechanism that Eve is pushed to when all else fails, and yet also the most fundamental, the most basic or 'natural' perversion, a fact which is symbolised by its association with the only other explicitly self-harming character in the movie; a teenage tomboy called 'Ed' (a suitably gender neutral name). Ed is like Brigitte in *Ginger Snaps Unleashed* in that she is a girl that hasn't learnt to be a girl yet let alone a woman, but also perhaps one that would like to be a boy, or at least definitely doesn't want to be a woman. She has yet to suffer the trauma of her inscription into feminine identity but she knows it is coming and that is difficult enough as demonstrated by her tragic yet oddly playful explorations of female gender norms as she plays 'dress-up.' No greater evidence that Ed's womanhood is inevitable is provided by her beginning her menstruation which here, as also in *Ginger Snaps Unleashed*, is referred to as the 'curse.' The two acts of significance that Ed (who has little screen time) conducts in the film are self-harm, and a strange ritualistic burying of her menstrual fluids ('burying my baby' as she puts it), it is perhaps not too much of an interpretative leap then to see these two bloody acts as symbolically connected in the signifying logic of the film: the only 'real' thing that a woman can do is bleed.

The final frame of the movie is the ouroboros moment between Eve and Ed where the older woman reaches some understanding of her younger self and her subsequent life, and the younger woman perhaps reaches some connection with a more understanding older female, the very figure of her fear. In this scene the two characters are recognised as psychological fragments of a greater feminine consciousness that pervades the movie. Self-harm represents the essential logic (perhaps taken to an

extreme) behind all the perversions that are on display in this film: they are all self-destructive, psychologically isolating and *individualising* strategies for warding off anxiety and the realisation of powerlessness and estrangement. Indeed self-harm's status as a perversion is somewhat clearly illustrated by Ed's final act of cutting in which she has inscribed the word 'love' into her thigh. When asked why she has done this Ed replies that she had wanted to write 'hate.' Through this act the female mode of perversion is revealed as the social and psychic strategy through which female anger and resentment at being oppressed is miraculously transformed into the typically 'feminine' psychological position of wanting love and emotional support, of being the fairer and more emotional sex; and the very process through which 'hate' is transmuted into 'love.' For Ed this act is the beginning of her taking-on desires which are coded female and which will structure her subjectivity but which will also keep her at war with herself and other women, riven with insecurities, neuroses, and anxiety.

However self-harm is also seemingly presented here as a kind of transcendence of female perversions. It short circuits the masculine disciplinary order coded into the other perversions and appears to be an attempt to hit on something basic, something female yet not 'feminine,' something that hides beneath the other perversions as the primal 'real' of the female body before it is gendered into its feminine subjectivity. This authentic womanhood of the body, the body as a zero point of authentic being is symbolised by a large, naked, earth-mother character who appears dreamlike in a cave and covered in clay. In this way self-harm links Ed and Eve: the novice and as yet un-gendered pervert, and the fully gendered pervert. As such it takes its place as a short circuit between the two, a re-set button on female perversion. It is presented as the cutting through of a feminine artifice to a truth beneath, a testimony of inner authenticity against the unreality of the outer world. Again the tensions, even contradictions in this symbolic circuit need not be problematic since it is a general indication of key tensions that matters here: the authentic versus the inauthentic, the real versus the unreal, the need for agency to complete the project of selfhood versus a subjectification that renders that agency seemingly impotent, and the responsibility that agency implies versus the failure that we feel when we struggle to live up to such responsibilities. *Female Perversions* takes the inner conflict positioned within the heart of feminine subjectivity described by *The Exorcist* and *Ginger Snaps Unleashed*, and

demonstrates that it is a conflict between a subject who is both 'subject' (*homo clausus*) and 'other' (woman) and that the process of keeping her in this conflict ridden double-bind are the very 'perversions' by which she works on herself to meet these contradictory expectations and roles. In the *The Exorcist* Regan is subject to powerful forces ranged around her, heaven and hell, the demon and the exorcists, but in *Female Perversion* all of these forces of subjectification, surveillance, regulation, and control are presented, though significantly supported by culture and society, as nonetheless folded into the very pattern of late-modern feminine subjectivity. Eve is both the demon and the exorcist and together they describe her sense of selfhood, in this way though seeming opposites they mutually reinforce each other as a disciplinary logic and ensure that Eve's subjectivity and body will always be a war zone.

The Romantic and the Modern: the Late-Modern Double-Bind

These filmic texts of self-harm and feminine subjectivity then help feel out the intersections between the three axes that we have explored, of psychological individualism with its inner dynamism and constant reference to selfhood, of the ideal of authentic selfhood and the its paradoxical guarantee of traumatic estrangement, and of the disciplinary force of project and regimes of self-making. And here also is the dynamic, noted in the last chapter, between therapy culture and consumer culture through which the quest for self-making is tied to an ideal of authentic (and in the case of *Female Perversions,* feminine) selfhood and the never-ending, marketized, search for perfect mental health, self-expression, self-possession, and a balancing of the romantic and modernist dimensions of the self. What ties these two 'cultures' together is their common disciplinary logic which is drawn out by Williams and Rose when Williams points out that the 'unprecedented expansion' of goods is not in itself necessarily problematic but 'it has also brought a weight of remorse and guilt, craving and envy, anxiety, and, above all, uneasy conscience, as we sense that we have too much, yet keep wanting more' (1982: 4); while Rose compliments this economy of desire by noting that '[s]elves who find . . . their identity constantly fading under inner and outer fragmentation are to be restored, through therapy, to unity and personal

purpose' (Rose, 1991: 228). Presumably the 'personal purpose' is in fact the search for psychic unity and so the cycle of consumption can begin again.

So systems of representation provide moral technologies that allow us to pursue our projects of self-making, and do so through the production of project-oriented desires, which we mostly follow through the acquisition and consumption of commodities, goods and services, which we hope in some sense will bring us the satisfaction, stability, happiness, and recognition from others that we know we need and deserve because our culture tells us that we do (Lears, 1983). Our 'perversions' are so many attempts, doomed to failure, to find this satisfaction and fulfilment, but in its absence we continue to recognise the inherent lack within us, the failure of our subjectivity, and therefore produce the desire to carry on with the project. The argument is not, and cannot be, that self-harmers are driven 'mad' by the vicissitudes of consumerism but rather that self-harm, consumer culture, and therapy culture resonate with the same core concerns and conflicts and these reflect the fundamental structure of the subject in modernity, though through distinctly late-modern modalities. It is not consumerism or psychotherapy, or psychology more generally, that I wish to implicate here but rather the kind of self that emerges as a common concern of all three and the tensions and double binds that it is subject to, especially in its feminine form, and the disciplinary logic that is both the process and the product of these binds.

While actual people may articulate the patterns of meaning that make up the double bind in various ways and for various locally complex reasons, my argument here is that the double-bind reflects the disciplinary hook upon which the sociocultural pattern of the late-modern psychological individual is stuck. It is this pattern and its inherent tensions, ambivalences, and conflicts that self-harm gives expression to and draws attention to. The double-bind of course can be identified most readily in female subjectivity (and I will pick up on its male applications toward the end of this chapter) and is readily expressed in the figure of Plath and her heroine Esther Greenwood. As Rose puts it '[f]or Plath, to be a woman is to be rigidly, tragically, circumscribed' (1992: 116) to want to be fulfil multiple roles but to be categorized as good mother *or* eccentric writer, and never as brilliant writer *and* good mother. Between the demands of her femininity and her creativity Plath found herself in a double-bind, two ideals that create a war zone in the self. In both Plath's case and that of Susanna Kaysen who

I have referred to several times throughout the thesis, their socio-historical position offers a ready interpretation of their experience of the double-bind; during the 50s and 60s gender roles were changing but not at an even pace and women coming into womanhood at that time were given distinctly mixed signals as personified in the regrettable words of Adlai Stevenson to Plath's graduating class. But what about Eve?

Eve represents a distinctly post-80s femininity; a woman reaping the benefits of second wave feminism and aggressively and successfully pursuing a career in the public arena which had traditionally been the preserve of men. It might seem then that the subject position of the feminine should be well past the kind of double-bind described by Plath and Kaysen but as numerous feminist commentators on anorexia have remarked (Bartky, 1990, 1997; Bordo, 1997, 2003; McSween, 1993; Frost, 2001) if anything the double-bind has simply become that more insidious and that more *disciplinary* in nature. Women today are expected to be 'superwomen' (Bordo, 1997, 2003), a language echoed in Dana's description of her own impossibly high standards, capable of being both the perfect traditional woman *and* the perfect man – both subject *and* its compliment - competing successfully against him in the public arena but maintaining her femininity at home. This double-bind seems to impact particularly hard on young women, who find themselves at a point in their lives where they are beginning to take up the expectations and projects of self-making typical of mature women, and so who typically find themselves caught between ambivalent injunctions to be perfect girls – empathic, good at relationships, nurturing, helpful, obedient, polite, nice, emotional, beautiful, sexually muted- whilst at the same time cultivating those qualities that allow them to compete with boys – aggression, competativeness, ambition, reason-centred, driven, marketable (Bordo, 2003; Frost, 2001).

The choices that characterize Eve's gender position in contrast to Plath's and Kaysen's seem considerable and empowering until you realize that many young women feel that they have to cultivate and embody *all* of these qualities irrespective of the intense tension and conflict between them and as such she should be marketable yet authentic, flexible yet unique, adaptable and successful and yet somehow effortless and natural in the sense of the often repeated advise 'just be you.' The ideals coded into contemporary feminine subjectivity then are both contradictory, describing a double-bind, but also, as the last chapter demonstrated, they are not coded as *ideals*

at all but rather as normative standards by which one can judge the suitability or failure of the self. Indeed this tension between ideals and norms is itself a meta-double-bind as subjects, particularly women, take on ideals that describe authentic selfhood as normative standards while the ideal of these ideals, authentic selfhood itself, always retreats since it cannot be achieved through the normal but only through the exceptional.

The work that the late-modern female subject must do then can perhaps best be summarized through Gergen's useful characterization of the modernist and romantic selves. Traditionally in modernity the romantic self was under the strict control of the modern self though this division also inscribed an inherent gender distinction since women were seen as being innately more romantic than men and so less able to cultivate a thoroughly modernist self. But in late-modernity the romantic self has been effectively marketized. This has happened partly through the ideal of authentic selfhood as understood to be achievable through psychological and psychotherapeutic technologies which themselves have helped create a consumer psychology or therapy culture. It has partly happened through the production of desires based in ideals of authenticity and projects of self-making, as reflected in lifestyle-based advertising so that one is no longer just buying a commodity but a whole identity. And finally the romantic self has also been marketized through the belabouring of the self since an emphasis on the romantic self has promoted a more implicit disciplinary emphasis on the mechanisms and technologies of the modernist self, enabling it to control the romantic self and make it available for processes of self-making – these technologies of course being provided by the psy-complex and therapy culture. It is through this inherent tension between the romantic and modernist selves, refracted as it is through the multiple dynamics of authenticity and 'reality,' reason and emotion, expression and repression, control and chaos, and self-making and self-failing, that the late-modern, and especially female, subject has been increasingly individualized and psychologized, and has increasingly seen the political become the private. It is this inherent tension that describes Eve's predicament and the key double-bind that runs through representations and understandings of self-harm: *to feel powerless and yet responsible*, an agent yet a failure, a true-self and yet one who has lost her authenticity.

None of which, it must be emphasised, is to suggest that self-harm is a woman's problem, though it may be a feminist issue. For me the figure of Richey Edwards comes back into view at this point; the male self-harmer, strongly connected to music, and characterized by his emo style. As I pointed out earlier in this chapter the great majority of images of self-harmers are of women except in the music industry where most songs about self-harm are written and performed by men. These are, as I noted in chapter four, songs that focus on emotions, and inner turmoil, and which represent a fetish for the romantic self. Arguably the emo style brings young men into a similar gender predicament to that of the feminine: namely the double-bind of having to represent both genders, and both romantic and modernist selves, so that there is a key ambivalence at the heart of the subject. Eve and Richey Edwards both dramatically enact this deep tension and the painful conflicts that it produces regardless of their biological sex.

Conclusion

Making Sense of Self-harm

Introduction

> There was something so immediately rewarding about cutting myself. It worked on so many levels: a punishment for being so dirty, a rush of endorphins which produced a chemical high, the physical pain distracted me from the emotional pain, and the scars served as a great reminder of how damaged I was – Josh Cannon *Silent Scream* (2008: 122-23)

> I think it's . . . I mean . . . it's a whole big tangle of just, erm . . . something [laughs] – Donna (telephone)

> And the end of all our exploring
> Will be to arrive where we started
> And know the place for the first time
>   - T.S. Eliot Little Gidding (2009)

Donna's confusion in trying to sum up the meaning and significance of self-harm for is perhaps understandable, and after a hermeneutic conversation that took me constantly back and forth between the intensely personal imminent moment in which a person in distress and pain took a razor blade to their own skin, and the broadest discursive structures or ensembles of modernism, I also feel that I now understand it more and yet still find it enigmatic and difficult to place. Perhaps one reason for this is its typical character, emphasised throughout this thesis, of ambivalence. Self-harm is, as we have seen, multiply constructed and articulated from within fields of common cultural issues and concerns. I believe that part of the answer to grasping self-harm is to not grasp it too tightly, its meanings are at play within this field of concerns as it works deconstructively from within these meanings, reproducing them as it does, but also disturbing them and confusing them. Or in other words: self-harm simply wouldn't mean what self-harm means, and needs to mean, if its meanings were made clearer and less confused. In his *Critical Essays* Roland Barthes (1972) argues that the role of literature is not to express the inexpressible but rather to make the reading difficult, to problematised the flow of assumed meaning, to make a 'strange verse' in Dante's phrase, and to 'un-express the expressible.' I think we shall not go far wrong to understand self-harm in the same way. It is of course, as I noted in chapter five, often framed as an expression or the inexpressible and this is certainly part of its

constellation of meanings. But this does not mean that it actually expresses the inexpressible, but only that its significance is that *it is thought* to express the inexpressible. In reality it takes the common texts of late-modern culture and subjectivity and transforms them from something expressible and implicit, to something inexpressible and rendering explicit in pain, and blood, and scars.

Self-harming at the Intersection of Axes of Culture and Continuity

Self-harm as an idiom, as a package of meanings and practices tied together by enough of a family resemblance that it can be described *as* a family and be given a family name, sits at, and emerges from, the intersection of the three axes of continuity that we have explored while the whole is patterned by the ubiquitous structure of gendered subjectification. Indeed without the distinction between an inner and an outer and the emergence of modern individual subjectivity, without the emphasis on emotions and the psychodynamic self, without the idea of psyche as system and the necessity of expression, without a cultural distinction between the symbolic and the 'real' and a coterminous concern with the dynamics of the 'real' and the authentic, without the associations that connect pain and blood and wounds to the 'real,' without a central concern for agency and control, without the psycho-medical conception of trauma, and without the internalization of responsibility, the process of examination, and the logic of self-punishment coded into a disciplinary culture, and without an emphasis on reflexivity and the self as project, and without the double-binds of ideals passed off as norms and emphasis on a romantic self that must nonetheless be controlled and 'processed' by a modernist self, and without the key double-bind of feeling powerless yet responsible - without all of these, and all of their many and complex interactions, self-harm would not make sense.

Self-harm sits at this intersection as a product of the conflicts that emerge from the meeting of so many complex and rich patterns of meaning and it brings attention to this intersection and its character of conflict, through an exaggerated performance of these very conflicts. Personally then it may be a way, made meaningful within such a sociocultural ecology of discourse, to negotiate the tensions and conflicts that become centred on the self as the primary site of conflict, and it may be a way to move toward

expressing this conflicted state to others and begin the negotiation of social restitution. But we must understand that if self-harm performs these functions for people then it does so on the basis of its cultural meanings and their social contexts. There is no implied dualism in this. Indeed while Downing notes that Foucault's archaeology is 'unconcerned with individual experience or human agency' (2008: 33) this is really only in as much as such experience or agency is represented through the kind of metaphysics of presence that Derrida described, and is held over as separate from the structures of social organization and from cultural systems of discourse. In as much, as I argued in chapter two, as we dissolve the traditional structure/agency problem by understanding both as co-patterned configurations emerging from broader social ecologies then experience and agency need not be left blank in an analysis that attempts to explore and understand the semiotic and discursive systems that underpin them.

Indeed the dimension of personal experience has been central to this analysis though I have not taken a distinctly person-based methodology. For me much of the personal fascination of self-harm as a subject of study lies in all the people that I have met over the last eight years of working with self-harm and self-harmers, all the faces and bodies, names and stories, lives and experiences. But the fascination that I have with it as a cultural sociologist lays in the fact that behind closed doors, in a seemingly utterly private and personal moment, just as a person who is caught in the power of their own thoughts and feelings draws a razor blade across their skin and blood weeps from the cut, folded into that highly individual and imminent moment, there is a whole tradition and culture that is implicit and present, yet not obvious and indeed largely unacknowledged. This culture is the same culture as that which is conjured and shored up by 'The Waste Land,' Freud's *Fragment*, *The Bell Jar*, Marilyn Manson, *Hamlet*, *Bodies Under Siege*, Magritte's *The Lovers*, Kafka's *Penal Colony*, The Fisher King, Christ's passion, *Girl, Interrupted*, Princess Diana, Hawthorne's minister, Courtney Love, and Richey Edwards. And it's the same culture that informs, in the most literal sense, every text and every person that I have referred to in this thesis, and of course the practice and meaning of self-harm. *Parole* and *langue* cannot be separated except in the imagination of linguists, and on the ground there is only living language.

Likewise the semiotics that spin the weave and web of self-harm are simultaneously personal and social, individual and cultural.

Susan Bordo, writing about cultural criticism, argues that it 'isn't about lacking sympathy for people's personal choices . . . it's about perceiving consciousness of the larger contexts in which our choices occur' (1997: 16). Likewise I am not interested in morally judging or medically diagnosing self-harmers, I am not interested in defining it as an illness, a coping mechanism, an addiction, or a tool even if by 'tool' we take it to mean something free of values and a simple extension of individual agency. My point here has been to attempt that 'consciousness of the larger context' and so to place self-harm in its sociocultural position as it draws on, condenses, transforms, and exaggerates the key concerns and conflicts of late-modern culture and subjectivity.

On Psychology and Anti-psychology

Of course a recurrent theme in this 'consciousness of the larger context' has been a tendency to turn critically toward the psychological as a hegemonic structure in our society and culture. It is important to understand that in doing this I have not attempted to make a narrowly causal argument here but rather one based in *resonance* and co-patterning. Self-harm is the emergent product of a culture that has separated the inner from the outer, conjured a private self into this inner space, created a language of representation based on the expert interpretation of this private self, and patterned its structures around this fundamental cosmology of the psychological individual. Therefore self-harm *resonates* with this culture. It is perhaps understandable that one can look askew at the institutions and agents of the psy-complex and imagine them to be involved in insidious plots to subjugate people and transform the whole of life into a consumer spectacle based in the pursuit of self-making and the desire for satisfaction. This however is not my argument here, nor is it my personal opinion. I tend to agree with critics such as Furedi (2004) when he understands transformations in, for example, the patterning of private and public space in late-modernity as tied to the development of therapy culture and the strengthening of our culture of the psychological. But I tend to diverge when such critique moves toward a conspiratorial tone. Foucault, for all that he is, I think

incorrectly, labelled an 'anti-psychiatrist,' never was *against* psychology or psychiatry so much as he acknowledged them as dominant cultural discourses, giving rise to institutional hegemony, and the inevitable co-patterning of systems of knowledge with systems of power. I think more than anything Foucault wanted a critical, reflexive, and socially responsive psychology and psychiatry and not ones that imagined, as they still often do implicitly or explicitly, that they simply and *purely* represent the onward match of knowledge.

It's true that my experiences in forensic psychology, the interaction I have had with psychiatrists through the prison service, experiences I had completing basic training in counselling, and my studies for a BSc in psychology have left me with a sharply critical attitude toward the psychological but this is in large measure a reaction to the generally uncritical position that psychological discourse has attained in our culture and the authority and power that is weals in our society. Like Foucault I believe that any institution that can hold such power on the basis of a claim to privileged knowledge must be open to critical analysis and robust reflexivity and that to hold such complexes of regimes of knowledge, organizations, and social institutions to these standards is as much for their own good as anyone else's. As I quoted Middleton and Garvie as saying in chapter one: 'what I know most of all is that self-harm is a real thing that affects real people' (2008: 6). Indeed the pain and suffering connected to mental disorder, the actions and effects of it, and its formative influence on many people's lives are all very *real* no matter whether or not the word is put in scare quotes or not. The issue is not this, nor is it the related issue that we must have some kind of cultural response to the reality of mental disorder – there can be no pure and pristine return to the beginning, how we deal with such things as mental disorder is how we are dealing with them today, right now, and it is from this very necessary set of services and supports that we must begin to build a better and more reflexive 'mental health' provision.

If my thesis has a political point then it is the broad cultural critique of the tendency for a psychologized culture and a marketized therapy culture to individualize and de-politicize social issues, including those incredibly broad issues of culture and subjectivity that characterize modernity and late-modernity. It is to argue that we must pay attention to the deconstructive power of idioms like self-harm to find a

critical moment within the very processes by which we go about producing and reproducing this culture even as it produced and reproduces us. I think self-harm should sensitize us to what McGee rightly calls the 'belaboured self' and beginning working toward cultural patterns of meaning and action that offer, if not replacements, then at least a broader living context. This of course carries an especially strong sense of urgency with respect to young women since, whatever the truth behind the statistics, they are clearly struggling with the double-binds of 'post-feminist' society and such double-binds are also clearly feeding into their self-harm. But while social and cultural transformation either do or do not take place we will, in the meantime, most certainly need psychiatrists and psychologists and psychotherapists, but we also need them to be more reflexive and questioning, more open to the commonly devalued side of the asymmetric binary, and more willing to approach such idioms of distress as self-harm as thoroughly meaningful actions performed by meaning-oriented people.

Researching the Vulnerable

Part of my challenge in approaching this research was to collect data from a 'hidden' and 'vulnerable' part of the population. A good deal of time was spent researching and constructing an ethical strategy that could deal with all the difficult and problematic 'what if' questions of suicide, disclosure of child abuse, associated mental disorders, and the potentially 'triggering' effects of talking about self-harm. I went into my interviews armed with my ethical strategy and a box of tissues. Both, of course, were necessary; the ethical strategy had to be worked on to make sure that both the participants and I were properly protected throughout, and the tissue were an obvious tool for the job. But in the event I needed my box of tissues only twice, and my ethical protocols largely stayed tucked away in my document bag. People were generally very interested in the research and eager to participate, methodically detailing their stories, and calmly and carefully formulating their understanding of self-harm. My overwhelming memory of data collection is of the humour that people used to approach their stories and the process of being interviewed. After a thoroughly enlightening interview with Cally I shut off my recorder and walked with her out of the

public building we had used and out on to the street. We chatted as we went and she talked about how people don't like it when someone with 'mental health problems' makes jokes about it, or approaches the issue with humour. 'We like to laugh like anyone else' she said, and I found her sentiment repeated in interview after interview. Of course there were tears as well as laughter and many of the interviews did get very emotional, but in contrast to some of the literature on the subject such emotions did not seem to be anything to be too worried about and were certainly not overwhelming.

All of which was in marked contrast to the reaction I received from non-self-harmers who largely panicked when they heard the words 'self-harm.' Participant recruitment advertisements placed with newspapers were suddenly pulled at the last moment, my money refunded, and no explanation given as to why. People who were told about the research often struggled with my reasons for wanting to perform it, let alone the issues involved in successfully performing it. And my ethical strategy, so carefully worked on, was delayed for an unreasonable amount of time by an ethics process that clearly felt somewhat stumped by the subject. It is interesting to contemplate the stigma of 'mental illness' in the light of such dynamics: whose shame and, I think most strongly embarrassment, does this stigma really describe? Does it emanate from the person marked by it, or from those who mark them? And of course what is really interesting is that this stigma attaches itself not just when people are being overtly negative or insulting about mental disorder but also when they are going out of their way to show understanding and a protective attitude.

Ultimately I learnt a great deal from the people who took part in this research and not just about self-harm. My conversations and interviews with them were enriching experiences and on each occasion I was taken aback by how quickly we would fall into an involved discussion about such ostensibly personal issues, and by just how easily such communication was established. Perhaps the key to handling such interviews was precisely to treat them as conversations as I had realised with Fiona eight years ago. The collaboration seemed to be genuinely empowering and participant's reported positive experiences of taking part.

Final Thoughts

In this thesis I have tried to make self-harm make some kind of sense and one of the key understandings that I have been trying to articulate is that part of the meaning of self-harm is precisely its capacity and function to disrupt meanings, to 'unexpress the expressable' as Barthes has it. But this raises an interesting problem for my research. If self-harm is *supposed* to be confusing, ambivalent, and disturbing *because* it expresses confusion, ambivalence, and disturbance, then my very attempt to make it make sense would seem to work against this. Perhaps such idioms of personal distress and emotional dysphoria should be left open as traumatic wounds in the normative weave and web of our culture. But then even to say *this* is to make sense of them as just such wounds and the problem is replicated. In the end I think it is important to remember that while social and political implications can be drawn from practices like self-harm they are not in themselves forms of political resistance except in as much as they do resist the completion of normative subjectivity and hence appear as a refusal to a healthy and normal member of society. The self-harming person and their actions are located within the force fields of discourse, and the matrix of such forces, as they make up patterns and processes of history, culture, society, and politics, but as Bordo reminded us the self-harming person is also someone who is usually confused and disturbed, in pain, and *in need of understanding*.

Perhaps to really make sense of self-harm would be to make it redundant and then perhaps, like classic hysteria, it might fade into the history books. But reviewing this thesis as the outcome of a hermeneutic conversation which began with Fiona in a prison miles away and years ago, it strikes me that though I do understand self-harm much better than before, and though it does make a lot more sense to me, it somehow still slips and escapes just beyond my grasp and so remains an enigma and an invitation to understanding. The conversation continues . . .

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