The beauty of blood? Self-injury and ambivalence in an Internet community

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The present article analyzes how young self-injuring women and men construct themselves as 'cutters.' The study draws on observations of a Swedish Internet community connected to self-injurious behavior and departs from a poststructuralist framework in order to analyze how members position themselves and others in relation to cultural discourses on self-injury. Two main discourses are identified in the Web community: the 'normalizing' and the 'pathologizing' discourses, which give contrasting versions of self-injury, self-cutters, and their scarred bodies. Within the normalizing discourse, self-injurious behavior is regarded as a legitimate practice for dealing with mental health problems, 'cutters' are resilient, and their blood and scars are beautiful. In contrast, within the pathologizing discourse self-injurious behavior is understood as morally reprehensible, self-cutters are pathological, and their bodies are repulsive. In the Web community, members invoke both discourses, which leads to ambivalent subject positions. This study shows that the seemingly contradictory subject positions of the two discourses in fact are interdependent on each other as members draw on both the normalizing and the pathologizing discourses in order to become 'authentic cutters.'

Keywords: identity; media; youth culture; self-injury

Introduction

The aim of the present article is to analyze how members of a Swedish online community with connection to self-injurious behavior construct self-injury as a social phenomenon and how they enact themselves as 'cutters.' Departing from a poststructuralist framework, we understand self-injurious behavior as an embodied practice and the 'cutter' identity as an embodied subject that is positioned in relation to different culturally available discourses on self-injury. Although self-injury often refers to a wide range of practices, including, for example, branding and burning, we focus here on the deliberate practice of hurting oneself through cutting or scratching the skin so that blood flows and scar tissue is left. This practice is sometimes also labeled as 'self-mutilation' or 'self-harm'. However, in Swedish the most common terms are 'self-injurious behavior' (*självskadebeteende*) and 'cutting' (*skära sig*), which are the terms we use in this article. With the increasing number of virtual self-injury communities (Whitlock *et al.* 2006), researchers have discussed whether

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self-injury websites are arenas that alleviate self-cutting, or if they contribute to a normalization of self-injurious behavior (Adams *et al.* 2005, Whitlock *et al.* 2006, Rodham *et al.* 2007, Adler and Adler 2008, Baker and Fortune 2008). In this article we argue that virtual self-injury communities are not necessarily isolated 'safe havens' for self-cutters; rather, members of the studied Web community have to balance between a locally prevalent normalizing discourse on self-injury and a culturally dominant pathologizing discourse that depicts self-injury as repulsive.

Self-injury and the Internet

Self-injury appears to have become a widespread phenomenon among youth in contemporary western societies, even though its prevalence has been disputed. For instance, in a randomized survey among graduates and undergraduates at US universities, 17% of the students reported that they had cut or burnt themselves, and of these approximately 75% had done it repeatedly (Whitlock *et al.* 2006). However, most studies report more modest figures, indicating that approximately 4% of the general population self-injure (e.g. Klonsky *et al.* 2003). A large study of 14- to 17-year olds in six European countries and Australia (Madge *et al.* 2008) shows that self-injury is more than twice as common among females as males; 8.9% of the girls and 2.6% of the boys had self-injured in the last year. The most common self-injurious behavior was cutting (55.9%), which was mostly carried out at home and without later seeking help, either from medical expertise or from friends. There are few reliable studies on self-injurious behavior among Swedish youth, but a recent study shows that about 1% of the total population of girls have reported to an assessment or treatment agency that they have cut or burnt themselves (Holmqvist *et al.* 2008).[1] However, the authors argue that there are reasons to believe that a large number of girls self-injure without seeking professional help, which could be due to the fact that self-injury remains a cultural taboo (Shaw 2002). Those who do seek psychiatric help for their self-injurious behavior argue that they want to be understood and treated as 'human beings'; however, they report that they often feel stigmatized and mistrusted by professionals (Lindgren *et al.* 2004).

In recent years, chat rooms, bulletin boards, and online communities associated with self-injurious behavior have been created on the Internet. Whitlock *et al.* (2006) show that online bulletin boards for self-injurious behavior proliferated between 1998 and 2000, and that the interest in creating and taking part in Internet groups for self-injurious behavior has been subsequently sustained. Prasad and Owens (2001) find that there are numerous self-harm-related websites that give information on self-injury, personal accounts of self-cutting, as well as guidance on how to overcome shameful feelings about self-injury. Adler and Adler (2008) identify three types of virtual self-injury communities: (1) those with an explicit anti-self-injury policy, (2) those which are pro-self-injury, and (3) those ambivalent about self-injury, which have both members stating that they like self-injury and members who want to stop. Even though these Web communities are large, most members participate passively. Most members contribute intensely to the community for a short period of time, but activity fades when support is no longer needed. Murray and Fox (2006), who have conducted a survey among 102 members of an Internet self-harm discussion group, show that the dominating reasons for participating is to receive support from like-minded individuals, be understood, and feel less isolated (see also Baker and Fortune

2008). Moreover, a majority of the respondents stated that participating in the discussion group had positive effects in reducing the frequency and the severity of the self-injurious behavior, while only 10 participants reported an increase of self-harm. Others have argued that message boards might normalize self-injury and lead to maintenance or even an increase of the behavior (Adams *et al.* 2005, Rodham *et al.* 2007). Whitlock *et al.* (2006) call attention to both positive and negative aspects of interacting on the Internet for self-injurious youth. On the one hand, they argue that stigmatized individuals can express themselves freely on the Internet since it is possible to be anonymous, and it is possible to find support from others in a similar situation. On the other hand, they argue that message boards tend to 'normalize' self-injurious behavior and could therefore be harmful, potentially life threatening, and at worst contribute to a self-injury epidemic.

Apart from these studies, most research on self-injurious behavior has been performed in clinical contexts and there is a paucity of research on self-injurious behavior and the Internet. Research on virtual spaces can provide a unique opportunity to study self-presentations of individuals who perform actions that are usually seen as private (Greenfield and Yan 2006, Whitlock *et al.* 2006).

Self-injury as embodied subjectivity

Historically, medical and psychological perspectives have dominated the study of self-injury (Shaw 2002, McAllister 2003). From a *medical perspective*, self-injurious behavior tends to be seen as a symptom of mental disorder, and people that self-injure are often diagnosed as having bipolar affective disorder or borderline personality disorder. It has also been argued that self-injurious behavior should be understood as a disorder in its own terms, for instance, as an impulse control disorder similar to eating disorders (cf. Favazza 1996, Suyemoto 1998). *Psychological perspectives* on self-injurious behavior have involved both behaviorist and psychodynamic accounts. The former has emphasized the importance of modeling and reinforcement as the origin of self-injurious behavior and has understood self-injury as a communicative act, a cry for help. Researchers with psychodynamic perspectives have emphasized that self-injurious behavior is connected to body image distortions, primitive functioning, and also to experiences of trauma, particularly childhood abuse and neglect (cf. Suyemoto 1998, Shaw 2002, McAllister 2003). A central issue has been the relation between self-injury and suicide. While much research shows that people who self-harm are more likely to commit suicide (cf. McAllister 2003), some scholars have argued that it is necessary to distinguish between the two and that self-injury should rather be understood as an adaptive alternative to suicide (e.g. Favazza 1996, Solomon and Farrand 1996).

Recently, some researchers have proposed *sociocultural perspectives* in order to understand self-injurious behavior. One of the most influential proponents, Favazza (1996), compares self-mutilation in different cultural contexts and argues that self-mutilation should be divided into two main categories: 'culturally sanctioned self-mutilation' and 'pathological self-mutilation.' Behaviors falling within the boundaries of the first category are classified as non-pathological. These include, for example, initiation rites in certain cultures, but also many body modification practices in western culture that are generally accepted as body decoration, such as tattooing and piercing. Within certain subcultures, types of body modification such as

scarification and branding are popular (Musafar 1996, Pitts 2003). In contrast, the second category, pathological self-mutilation, entails repetitive self-mutilation, which Favazza (1996) argues develops when self-injuring becomes habitual and the individual develops a self-identity, for example, as a 'cutter,' addicted to the behavior. Self-injuring has then become the individual's standard method for handling psychological pain. Although Favazza (1996) argues that self-mutilation is a practice that is culturally contingent, the examples of culturally sanctioned, 'non-pathological' self-mutilation tend to be placed in non-western settings or within the so-called body modification movements, while 'pathological' self-mutilation is placed in western settings and given individualistic explanations. Thus, self-injurious behavior in the west tends to be explained in individual terms rather than in relation to cultural norms and discourses. Recently, interpretive sociologists have proposed a somewhat different perspective on self-injury (e.g. Adler and Adler 2005, 2007, 2008, Hodgson 2004). Adler and Adler (2007) argue that even though self-injury is a solitary practice, individuals are socialized to it. Peers, general media, and self-injury sites may introduce self-injury, instruct how to do it 'properly,' and teach how to interpret the physical experience (cf. Hodgson 2004). In contrast to Favazza (1996), Adler and Adler (2007) argue that self-injury is not necessarily pathological, but that it is often carried out deliberately and instrumentally. Self-injurious behavior should therefore not be understood as simply a mental disorder; rather, it is becoming a deviant subculture where self-cutting is regarded as a lifestyle choice.

A fourth, emerging, perspective draws on poststructuralist scholars, such as Butler (1993), Foucault (1978/1995), and Grosz (1994) and their theories of the body. From a poststructuralist perspective, self-injurious behavior is seen as a cultural phenomenon that is constructed in close relation to notions of embodiment and the self (Brickman 2004). Like Favazza (1996), poststructuralist-oriented researchers argue that in western culture, some body modification practices are culturally accepted (e.g. plastic surgery, tattooing) while others are not, particularly self-injurious behavior (Pitts 2003). However, in contrast to Favazza (1996), these practices are analyzed in their cultural settings, and in contrast to Adler and Adler (2007), poststructuralists focus on the body as a site for discursive struggles and complex sets of power relations (Brickman 2004, Riley 2002[2], Pitts 2003, Cresswell 2005).

In the present study, we have adopted a poststructuralist perspective of the self and the body in order to understand how young people construct themselves and self-injurious behavior in a Web community. A pivot term in our discussion is *embodied subjectivities*, which is taken from Braidotti (1994). To begin with, the term suggests that people's identities are closely connected to their bodies. For instance, Featherstone (1982) argues that in contemporary consumer society, the body is understood as the 'mirror' of the soul and visual appearance a way to present the self. The body and its appearance are also to some extent characterized by plasticity; people's identities can (to some extent) be altered through changing clothing style or modifying the body. Braidotti takes this argument a step further contending that people's identity constructions, their subjectivities, *depart* from the body; the subject has 'bodily roots' (1994, p. 59). The body and people's embodied experiences are therefore taken as a point of departure for her analysis. Secondly, the term suggests that the embodied subject is a site where material and symbolic powers intersect (Braidotti 1994). That is, the body is seen as a site for power struggles between

different discourses that attempt to define how a particular embodied practice is supposed to be understood. For instance, throughout the last centuries the body has become 'medicalized' and many embodied practices, such as self-injury, are primarily understood in clinical terms, which affect how practitioners, media, and those cutting themselves understand the particular practice, as well as their identity. However, this 'identity' is not to be seen as stable, but rather as something that one constantly has to enact (Butler 1993), since embodied subjects are positioned in an intersection of multiple discourses, such as on the body and mental illness. Thirdly, taking the embodied subject as an analytical point of departure emphasizes how the body and the subject are not only given social meaning but also *create* social meaning. Consistent with Braidotti (1994), we would argue that embodied subjects are not merely the effect of discursive struggles, but also active agents in these struggles. People do not passively follow norms of what is considered to be a healthy body and they are not only positioned by others, when interacting in everyday life and in virtual spaces they position themselves and other subjects (Hollway 1984, Davies and Harré 1990).

Data and method

The empirical data are taken from a qualitative study of a Swedish-speaking Web community connected to self-injurious behavior carried out over two months in the spring of 2007. Data collection was done in two stages.

First, a suitable Web community was chosen, which involved using the Internet search engines such as Google and Yahoo, searching for terms and phrases such as 'self-injurious behavior', 'razorblade,' and 'cutting'. The chosen Web community was the one that appeared to be most active and had an increasing number of members. Since members can freely choose their demographic information in the Web community, it is impossible to verify the age, gender, and ethnicity of the members. Nevertheless, the majority of the members indicated that they were female and between 15 and 28 years of age. It was not explicitly stated on the community's website that it was created by and for individuals who self-injure, but rather for 'individuals who have suicidal thoughts and other problems.' Self-injury was nevertheless a common subject for discussion and members of the Web community expressed repeatedly that they were injuring themselves. Conducting research on the Internet and self-injurious behavior calls for ethical sensitivity when collecting data, especially regarding how to deal with publicly accessible information that is traditionally considered to be of private nature (Mann and Stewart 2000). One aspect to consider regards what is needed in order to gain entrance to the websites and access to the information on each member's personal page (NESH 2003). In the present study, the sole access requirement was a valid email address. However, considering the sensitive nature of the material, all information was regarded as private. Accordingly, all members in the study were informed of the study and asked for consent, which was done by the Web-administrator posting our information about the study on the community's main page. We also created our own personal page on the Web community where the same information was posted. Once consent was received from members, we downloaded pictures, texts, and written conversations between members.

In the second stage of data collection, eight members were selected for further data collection. This included not only data from the Web community, but also from the members' blogs, homepages or personal pages on other websites. The members selected for further data collection appeared to be representative of the members of the network, but were also those who had the richest material, either having own homepages or blogs, or frequently contributing to the Web community. Again, data were downloaded to a computer. Out of the eight members, six presented themselves as female, one as male, and one did not provide any information about his/her sex. Six of the members gave information about their age, three were in their mid-twenties (24, 25, 27), and three were teenagers (15, 15, 17). It should be noted that the majority of the data collected had already been posted on the Internet prior to the start of the study and also before the members were asked about participation in the study. For the sake of anonymity all nicknames have been fictionalized, though we tried to keep them close to the original. For example, if an original nickname was the name of an artist, we choose a new nickname from another artist from the same music genre.

The data analysis has been informed by positioning theory (Hollway 1984, Davies and Harré 1990, Harré and Langenhove 1999), which is a tool well suited for analyzing social interaction in virtual spaces since it understands interaction as a discursive and highly contextual phenomenon (Tirado and Gálvez 2007). Inspired by poststructuralist thinking, positioning theory studies how individuals are positioned and position themselves in relation to different culturally available discourses. However, while prior work has generally not problematized the bodily aspects of interaction (see Davies 2003), our aim is to emphasize the embodied nature of the subjectivities produced in the present Web community. The analysis has been carried out in two steps. First, we identified discourses about self-injurious behavior available on the community website, blogs, and homepages/personal pages. This was done by reading and rereading the material to identify recurring ways of describing and 'doing' self-injurious behavior. Recurring themes brought up by the members were also identified. The next step was to gain an understanding of the relationship between the different discourses and the members' embodied subject positions, their reasoning around self-injury as a phenomenon, and which consequences this has on the members' self-constructions. The analysis focuses on how the members position themselves and others in relation to different discourses, through studying members' contradictory descriptions of self-injury and themselves, and their strategies to portray themselves in a favorable manner. All excerpts from the Web community cited in this article have been translated from the original Swedish.

The limitations of the study have to be acknowledged. For instance, since we only use data from one Web community and participants are not randomly selected, the study is not generalizable to a general population. Moreover, the present Web community studied is not necessarily representative of other virtual self-injury communities. However, at the time of the fieldwork the present Web community was the largest and most active self-injury website in Sweden. Moreover, using naturalistic Internet data enables an in-depth analysis of a practice that is generally regarded as private while minimally interfering with self-injurers' online interaction.

The self-cutter as normal and/or pathological

All members of the Web community have a personal web page and an email account. The community also contains a bulletin board, picture gallery and poem/short story page. During the study, all topics on the bulletin board concerned the members' everyday life, and how they cope with self-injury and/or suicidal thoughts. In the Web community, self-injury is mostly referred to in terms of cutting or scratching of the body with different types of sharp objects; the observed members rarely mentioned other ways of physically harming themselves. The online design is predominantly dark with a black background and text in gray. Music style is primarily invoked in that many members state that they listen to music genres such as 'goth' or 'death metal' and it is common to cite lyrics with an association to self-injury or death. Self-injury is an apparent and important topic in the community. Members also repeatedly portray themselves as being different from the general population. Rather than describing this difference in pathological terms, most members argue that they are 'different' and 'unique,' which, in contrast to 'the ordinary' and 'boring,' appear as positive characteristics. Their uniqueness lies in their experience of loneliness, depression, and anxiety, which ordinary people do not have. The members understand themselves to have an emotional depth that others do not have and, consequently, an understanding of others who face difficulties.

A second way for members to contrast themselves with ordinary people is through emphasizing that self-cutters see the world 'as it really is,' while others are naive and 'blind to the truth,' as Yasuko does in the following excerpt:

We're all going to die some time. [...]

Realize that.

If you don't, then YOU are the ones who are fucking immature and abusers of the truth.

Life actually isn't LaLaLa-Happy-Happy all the time. Life is hard and rough and has mercy for nobody. Nobody. (Yasuko, 15)

Here, Yasuko argues that she has unique insights into the roughness of life, that it is far from 'LaLaLa-Happy-Happy' and that we are all mortal. Through categorizing the ones that do not 'realize' this as 'immature' and 'abusers of the truth,' she indirectly constructs herself as mature and wise.

Thirdly, members contrast between themselves and non-members through positioning themselves as survivors, as people who are able to deal with hardships 'ordinary' people do not have to worry about. They write about themselves as strong and resilient individuals facing psychological difficulties. In their narratives, they describe how they sometimes find themselves on the verge of giving up, but that they always manage to make it through, as Engdur (25-year-old female) puts it: 'But I've tried all sorts of ways, I have tried every way out. Never have I given up. Always the last one standing, never an easy shortcut.'

These three constructions of the self-cutter – as unique, wise, and strong – can be seen as parts of a broader discourse where self-injurious behavior is perceived in positive terms. We call this discourse the 'normalizing' discourse on self-injurious behavior; it is the main discourse that we identified in the Web community, and the

one to which the members most often orient. Within the normalizing discourse, self-injurious behavior is seen as a 'normal' practice particularly suited to deal with what members call 'psychological problems' such as anxiety, depression, and suicide thoughts. Likewise, the self-cutter is within the normalizing discourse understood as different from others, she or he is unique, strong, and has insights of the darker aspects of life. In their study of self-injury and suicide websites, Baker and Fortune (2008) found that self-injury websites could grant users access to 'positive and socially valued identities' (p. 120), such as being understood and belonging to a community. These identities are reminiscent of the positive self-constructions of the normalizing discourse we found in our data. However, the young women and men in our study do not always describe self-injurious behavior and themselves in positive terms; being 'unique' is not always a positive characteristic. In the following, Dark Angel writes about herself as disgusting and repulsive.

> I am a tied-down marionette without a mouth, without a heart and without air. A totally destroyed disgusting worst kid who never succeeds with anything. Darkdarkdarkdark, a floating, liquid, suffocating fog. (Dark Angel, 17)

Dark Angel's description of herself as weak, by comparing herself to a puppet on a string who fails to exercise her own will, could be understood as a construction of the self in relation to what we call a 'pathologizing' discourse on self-injurious behavior, which is the contrasting discourse in the Web community. Compared to constructions of the self in lines with the normalizing discourse, Dark Angel gives a contrasting version (Potter 1996) of self-injury and the self-cutter. Instead of being unique, wise, and strong, she expresses disgust over herself and frustration regarding her current situation. To some extent, the pathologizing discourse draws on the medical and psychological perspectives on self-injurious behavior presented in the introduction of this article (it could be understood as a folk version of these theories), arguing that it is morally wrong to destroy the body in the way self-injurers are perceived to do. Self-injuring is seen as something 'unnatural' and is no solution to the 'real' problem of mental illness. Accordingly, within the pathologizing discourse self-injurers are perceived as ungrateful human beings who create, or exaggerate, their own problems and waste medical resources.

The two prevalent discourses in the community create dilemmas for the members, as they have to balance between the different subject positions that the two discourses offer. This becomes apparent in the recurrent discussions about whether the members are to be understood as strong or weak individuals. For instance, Stitched Up (24-year-old male) writes about his sleeping pills and his decision whether or not to take them and, consequently, whether or not to commit suicide.

> I relate to what you are writing, I also have hiding places with sleeping pills among other things, I count them at night, but I am too much of a coward or too strong to take the pills. (Stitched-up, 24)

Stitched-Up gives two accounts for not taking the pills; he is either 'too strong' or 'too weak.' Being 'too strong' implies that he is not to blame for his current situation. He is still a strong person since he does not commit suicide, despite the fact that he

is counting his pills nightly. The second account, that he is a 'coward' for not committing suicide, implies that his current situation is due to his psychologically weak state. If he were only stronger, he would deal with his issues, either by committing suicide or by getting professional help. This dilemma of constructing oneself as either being too strong or too weak could be understood as a dual, and somewhat contradictory, subject position that members take. On the one hand, they at times position themselves in line with the pathologizing discourse where their mental health problems and/or self-injury are constructed as an indication of them being 'weak' individuals. On the other, they position themselves in terms of the normalizing discourse, where they are understood as strong individuals and survivors living in difficult situations.

The fact that self-injury is perceived as either natural or pathological also leads to the members positioning themselves as either 'normal' or 'abnormal'; a conflict that is reflected in the following excerpt, in which Yasuko (15 years old) writes about her razorblades:

> I've got a plan so that I always can have it with me! [. . .] The other one [razorblade] (the newest, sharpest which cuts as if the skin was water . . .) I will have in a pocket mirror under the mattress in my bed. Then all I've got to do is reach for it and . . .
>
> D*MN IT! A-Am I really . . . sane?
>
> Do I really feel . . . well? [. . .] Really I don't like doing it . . . not really fond of pain . . . And the pain of the scalpel is so . . . cold . . . ! Not so pleasant no. [. . .] So extremely unpleasant. (Yasuko, 15)

In this example, Yasuko is initially describing self-cutting positively, writing that she will always bring one razorblade with her, while keeping the other one – the one that 'cuts as if the skin was water' – under her mattress. However, somewhat later she changes footing and questions her own mental state; accordingly, the razorblade that recently was described in positive terms is now considered as 'cold' and the pain as 'unpleasant.' This sudden change of subject positions indicates that identity, to a great extent, is a contingent and local phenomenon (Aronsson 1998). We would argue that Yasuko first understands herself and her self-injury in line with the normalizing discourse and then constructs herself in accordance with the pathological discourse. Yet, this fluidity should not be understood as if Yasuko freely chooses identity or subject position; rather, we argue that she invokes the normalizing discourse, but cannot ignore the pathologizing discourse since it is the dominant societal discourse on self-injurious behavior.

Beautiful and repulsive bodies

According to Adler and Adler (2008), self-injury Web communities 'lack authentic embodiment' (p. 51) and members are therefore able to construct their identities freely. Nevertheless, in their study they found that self-injurers hang on to their embodied selves when interacting with each other in cyberspace. In the Web community studied in this article, the body is also important. In fact, it takes a pivotal role in the discursive struggle of self-injurious behavior. The subject positions that members take are embodied in that they invoke bodies, bodily behavior, and

materiality (e.g. blood, cutting, and razorblades) in particular ways, and also use the material aspects of self-cutting in order to position themselves in line with the different discourses. During our online observations of the picture gallery, we found both uncontroversial pictures and pictures that could be categorized as highly controversial. The more controversial pictures were given labels such as 'bloody' and contained pictures of arms and other body parts with cuts and blood. Some pictures portray razorblades lying next to, or on, the body part, often in an 'aesthetic manner.' In the following excerpt, Lolita (17 years old) comments on another member's photographs of her scars:

> True emotions are beautiful. I automatically think your scars are beautiful. Just as I also think that YOU are [beautiful]. But I have always thought that blood and damaged skin shown because of intense emotions are beautiful. (Lolita, 17)

Here, Lolita connects the other member's emotions with her scars. The outer, corporeal manifestations are understood as enactments of the inner, psychological experience of the member (cf. Featherstone 1982). The order of logic in Lolita's account is that since 'intense emotions' are 'beautiful,' that particular person's scars (as expressions of her emotions) are beautiful, and also the entire self (YOU) is seen as beautiful. Perceiving scars and intense emotions to be beautiful is, we would argue, in line with the normalizing discourse. What others might understand as pathological (i.e. self-cutting, 'intense' emotions) and ugly (i.e. scar tissue) is here held to be beautiful. An important criterion for this outer beauty is that her emotions not only are intense, but also 'true,' that is, that there is a correspondence between her embodied appearance and her subjective experience.

    In order to bleed and create scar tissue, the members mostly use razorblades, which are given an important role in the members' accounts of self-injurious behavior, as in the following fairytale, *A Desired Gift*:

> I sat speechless.
>
> Because in my hand lie a razorblade.
>
> Oh, you beautiful object, what joy to own something as sharp as you!
>
> I caressed and examined the razorblade (of highest quality I must add!) yet again before I kindly asked if I could keep it. (Yasuko, 15)

According to Hebdige (1979), subcultures make use of different semiotic resources in the stylization of group identity. For instance, straps, chains, and straitjackets were important elements in British punk culture and understood as symbolizing a feeling of being in bondage by society. In the present study, the razorblade has a similar central place. Members draw pictures of razorblades, post photographs of razorblades, often in combination with blood or a bloody arm, or, as here, they write poems and fairytales about razorblades. For Yasuko and the other members, the razorblade is valued since it is sharp enough to cause bleeding, and in the fairytale it is described as a precious, beautiful possession.

    Even though the members mostly argue that razorblade-cut arms, blood, and scarred bodies are beautiful and desirable, they at times also position their embodied

selves in relation to the pathologizing discourse, as Yasuko does in the following example:

I'm cut open.

Made an attempt to get that warm feeling again, see that red, just get some sort of calm into my body ...

But no, what am I thinking? It only lasted a few seconds and I feel frustrated even though I'm not showing it. Frustrated and desperate. Angry with myself because the sharpness doesn't grant me peace. (Yasuko, 15)

In a qualitative interview study, Fraser and Valentine (2006) show that within BDSM (bondage and domination, dominance and submission, and sadomasochism) blood is constructed as erotic and life giving, but could also be understood as something disgusting and repulsive. In this example, Yasuko describes a similar incongruous understanding of blood and cutting. First, she argues that she wants to 'get that warm feeling again, see the red' in order to calm down. But then she expresses frustration since the calm feeling only lasts for a moment and that 'the sharpness' of the razorblade does not give her peace more than a few seconds at a time. In her description, Yasuko relates to both the normalizing and pathologizing discourses. Initially, the cutting of arms and seeing the blood is described as a practice that gives her body peace, but then the 'sharpness' (of the razorblade) is said to not give her peace. Her ambivalent position – on the one hand longing for peace, on the other realizing that cutting herself does not give her peace – seems to make her frustrated and angry with herself.

Becoming an authentic cutter

In studies of subcultures related to physical practices, such as in body art (Riley and Cahill 2005) and on pro-anorexia websites (Giles 2006), authenticity has been described as a central issue. When claiming authenticity, individuals create valued subject positions, while making boundaries and devaluing outsiders (Riley and Cahill 2005). Similar emphasis on authenticity is found in our data. As shown above, the young men and women in the present study comply with the normalizing discourse, but at the same time have to relate to the pathologizing discourse, which at times forces them to take ambivalent subject positions. Although taking contradictory subject positions seems to cause frustration (as in Yasuko's case), siding too heavily with the normalizing discourse is no solution as it may compromise the member's credibility as an 'authentic' cutter. There is a strong taboo against self-injuring for attention among the participants in the Web community. Within the normalizing discourse, it is only acceptable for an individual to self-injure if they have 'real' problems. Moreover, blood and scars are only beautiful as long as they are expressions of 'real' emotions. For the members of the Web community, there is an impending risk of being classified as 'posers' if they do not succeed in positioning themselves as authentic cutters. In order to be understood as an authentic cutter, it is therefore crucial to find a balance between the normalizing and the pathologizing discourse. For instance, even though many members post pictures of bleeding or scarred arms, it is risky since the person

posting could be seen as cutting to seek attention or pretending to be ill. In the extract below, this risk becomes apparent as Lolita confronts Yasuko about the pictures she has been posting on her blog.

> Lolita: Do you post pictures of your self-injurious behavior because you think it is beautiful? To show the hatred inside you? Sympathy? I want to know your thought …
>
> Yasuko: I post them, like, to show how ugly, disgusting and grotesque it gets, that is, don't do it, you people out there. It's hard to explain, but I don't like my body and my looks = cuts = not good = post picture = show-don't do it you too …
>
> Lolita: […] I was just afraid that you'd be one of those who seek desperate sympathy through posting those type of pictures. In other words just a little poser. But I hear that you're NOT that […]

Lolita questions Yasuko's authenticity, asking why she posts photographs of her scarred and bloody arms. Through emphasizing the negative aspects of self-injury, Yasuko manages to position herself as authentic and having acceptable reasons for cutting herself. An analysis of Lolita's uptake indicates that the proper answer to the confrontation is not that Yasuko is cutting herself because she is in need of sympathy, but rather that she does not approve of her own behavior. Yasuko emphasizes that she is posting the picture in order to display how 'disgusting and gruesome it gets' while discouraging others from doing the same. In her answer, Lolita acknowledges that Yasuko is not a mere attention seeker, but an individual with psychological issues who, hence, has the right to injure herself.

Yasuko displays a strategy the members use in order to become authentic cutters. It involves, from time to time, aligning with the values of the pathologizing discourse through, for example, stating that they find self-injury disgusting and that they are weak and ungrateful human beings. In this way, members prove that they do not cut themselves to receive attention, or as followers of a (deviant but) trendy lifestyle, but rather because they have 'real' problems. Another strategy is to write detailed descriptions of their anxiety, diagnosis, therapy sessions, or time spent in treatment centers. This 'proves' their 'actual' mental disorder and their entitlement to self-injurious behavior. StarWatch uses this strategy in the extract below from her self-presentation on her homepage:

> Since then [first suicide attempt] I've injured myself a lot by cutting myself and overdosing on medicine. I came in contact with psychiatry for the first time when I was 18, and now, as I've said, I'm 27. Such a long time and still I feel no hope. I've tried several different anti-depressants but nothing ever works. It's always ended with me just not taking them or taking them all at the same time. Right now, I'm not taking any anti-depressants, I've stopped believing that it works. I'm in therapy, I take one day at a time and I'm waiting to possibly be admitted to a treatment home this fall. (StarWatch, 27)

StarWatch is one of the few in the community who also mention self-poisoning as a way of self-injuring. Through describing that she has been in contact with psychiatry for many years and tried everything they have offered her, she not only gives 'proof' of having severe mental health problems, but she also positions herself as a survivor. This results in a dual position of a victim of mental illness and as a survivor. Within the normalizing discourse, cutting is understood as a 'natural' technique in order to

deal with psychological issues, such as anxiety. On the community's 'information page,' the Web administrator explains his perspective on cutting:

> [...] It [cutting] is a good alternative method to taking a bunch of medicine. It works better. Getting scars is of course a downside and I wouldn't want to see more [people] cutting themselves, it's just a last resort for us who are ill. (Stitched-up, 24)

Again, we see how a member balances between the two discourses. On the one hand, he compares self-cutting with taking psychotropic drugs, a technique for coping with anxiety that is generally accepted in western culture and within the pathologizing discourse. Cutting oneself is explained to be just as, if not more, beneficial than medicating. On the other hand, Stitched-up asserts that he does not want people to self-injure. Through describing the negative aspects of cutting, that it is only 'a last resort' for those who 'are ill,' he positions himself as taking the issue seriously. Thus, while complying with the normalizing discourse, where self-injury is regarded as something positive, he simultaneously positions himself in relation to the pathologizing discourse in that he gives accounts for self-cutting, that is, it is only for those who are ill.

As Morrissey (2008) notes, risk-taking behaviors are socially negotiated and could be used to secure status within a group (cf. France 2000). However, it is not sufficient to self-injure in order to secure in-group status among the members of the present Web community. In order to be accepted, members have to talk about their self-injury in a 'proper' way through balancing between the two main discourses. If a member positions herself only according to the normalizing discourse, others will judge her as inauthentic. On the other hand, if she draws too heavily on the pathologizing discourse she will be understood as not belonging to the Web community in the first place, since it is a community based on acceptance of self-injurious behavior. Thus, despite the apparent contradiction of the two discourses, they are in fact interdependent in that both are needed in order to achieve an 'authentic' identity as a 'cutter.'

Conclusion

In this article we have relied on positioning theory and a poststructuralist perspective in order to study how young women and men in a virtual self-injury community construct themselves as cutters. We have shown that there are two main discourses that frame members identity constructions, namely the normalizing and the pathologizing discourses. In short, within the normalizing discourse self-injurious behavior is constructed as a relatively accepted practice for people who suffer from psychological distress. In contrast, within the pathologizing discourse self-injurious behavior is regarded as a psychological problem in itself, and to cut one's arms is not an accepted practice for coping with mental health problems.

In both discourses, the body takes a central role; the subject positions that the members take are embodied, focus is on how to understand their bodies and self-injury in relation to their inner, emotional state. It is possible to interpret the pathologizing discourse as an expression of a general cultural notion of the body where 'beauty' is idealized (cf. Featherstone 1982). With such an ideal, it is consequently considered morally wrong to 'destroy' one's own body in the way

that self-cutters are perceived to do. However, as previous research has shown, some forms of body modification, such as plastic surgery, tattooing, and piercing, are accepted in western culture, while other forms could be understood as counter discourses on dominant beauty ideals (Musafar 1996, Pitts 2003). Among the young women and men in the present study it is hard to find clear-cut evidence of such resistance. Instead, in order to be accepted as cutters, members have to balance between the two discourses, which at times creates ambivalent subject positions. Thus, the authentic cutter sees self-injury as both normal *and* pathological, the self-cutter as both weak *and* strong, and bleeding and scarred bodies as both beautiful *and* repulsive.

The limited research on self-injurious behavior and the Internet has primarily focused on the prevalence of self-injury-related websites and their potential values or dangers. It has been argued that self-injury Web communities tend to normalize self-injurious behavior and could therefore contribute to a self-injury epidemic (e.g. Adams *et al.* 2005, Whitlock *et al.* 2006, Rodham *et al.* 2007). The studied Web community could be understood as a pro-self-injury website (Adler and Adler 2008) since membership is based on acceptance of self-injurious behavior as a long-term coping strategy and lifestyle choice. The Web community could also be understood as part of a deviant subculture where self-injury is normalized (cf. Adler and Adler 2007). However, in this Web community it is not possible for members to portray self-injury in positive terms without also drawing on the pathologizing discourse; despite the members' positive stances toward self-injury they have to relate to a general cultural notion of self-injury in order to be understood as 'authentic' cutters. Being a 'cutter' is therefore not simply something positive or negative to the members, and the Web community could not be understood strictly as a 'safe haven' for self-injurers.

Acknowledgements

Notes

1. The prevalence of self-injury among adolescents in other Nordic countries is relatively high. In Norway, 10.6% of the girls and 2.9% of the boys report they have self-injured the last year (Madge *et al.* 2008). In a study on Finnish adolescents (Laukkanen *et al.* 2009), the lifetime prevalence of self-cutting was 11.4%, while 1.8% reported that they were currently cutting themselves on a regular basis.
2. Some researchers, such as Riley (2002) combine poststructuralist and feminist perspectives. In contrast to radical feminists (e.g. Jeffreys 2000) – who see self-injury as an expression of patriarchal relations, and women's accounts of self-cutting as voluntary as a form of false consciousness – Riley (2002) argues that bodies are given different meanings depending on social contexts and power relations (cf. Pitts 2003).

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