Sadomasochism to BDSM: Discourse Across Disciplines

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Recent studies have revealed the stigma faced by practitioners of the sexual practice of BDSM (bondage, discipline, domination, submission, sadism, masochism). This stigma affects practitioners’ ability to be open about their sexuality and raises the question: why is this the case in this socio-historical moment? In answer, this paper analyses discourses regarding BDSM across the disciplinary boundaries of psychiatry, sociology, feminism and law. It investigates some key historical moments in the development of these discourses and reveals two discursive formations that continue to affect practitioners: pathologised practitioner and BDSM as violence. Further, this paper demonstrates how these discourses permeate the social world through the narratives produced in popular culture, and looks at the place of practitioners in these discursive formations.

The sexual practice of BDSM, more commonly known as sadomasochism, is as complex as it is varied.¹ Theorists frequently struggle at succinct definitions due to the range of practices involved and the changing and subjective meanings for individual practitioners.² However, some common features are the consensual exchange of power through dominance and submission, the inclusion of pain or intense stimulation, elements of role-taking or role play, and various levels of bondage.³ Practitioners combine activities in a ‘scene’ or encounter and importantly these scenes are discussed and negotiated beforehand.⁴ Safewords (used to slow or halt play) are agreed upon and the consensual nature of the interaction is fundamental.⁵

Recent studies have shown that some practitioners of BDSM face issues of discrimination and stigmatisation which affect their lives and mental well-being.⁶ They

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¹ BDSM stands for: bondage, discipline, dominance, submission, sadism, masochism.
⁴ Moser and Kleinplatz, Safe, Sane and Consensual, pp. 43-44.
⁵ Wiseman, SM101, pp. 52-56.
therefore may find it difficult to disclose an interest in BDSM to friends, family or partners. Recent work by Tanya Bezreh, Thomas Weinberg and Timothy Edgar found that BDSM practitioners experienced varying levels of real and perceived stigmatisation when choosing to disclose their interest in BDSM. Their study found that for some participants this stigmatisation led to a culture of self-silencing, with many experiencing a 'resignation to the norm of not talking about BDSM'. This was made further apparent with respondents expressing gratitude to the authors ‘for being offered an opportunity to talk openly about [the] topic’. Inspired by these participants’ experiences, I sought to investigate what socio-cultural and historical influences might have contributed to the stigma associated with BDSM. In doing so, this paper aims to contribute to a growing body of research which seeks to disassemble this stigma.

For this project, I applied a genealogical and discourse analysis approach to academic and cultural texts regarding BDSM. Initial investigations revealed four main disciplinary areas which have contributed to the discursive field of BDSM: psychiatry, sociology, feminism, and law. From these areas I have chosen to discuss four key historical moments which I suggest have significantly influenced discourse on BDSM and, by extension, BDSM practitioners. These moments are the publication of Psychopathia Sexualis, the entrance of sociology into the discursive field of BDSM, the feminist “sex wars”, and the UK trials of R v Brown.

The project also involved the analysis of narrative depictions of BDSM in cultural texts such as films and literature. I discuss three examples – the Fifty Shades literary trilogy and the films Secretary and Nymphomaniac Vol. II – and how they reinforce harmful stereotypes regarding BDSM. Finally, I touch on the involvement of practitioners in the discursive field of BDSM.

My analysis reveals two major discursive formations that, I will argue, work to stigmatise BDSM practitioners, and prevent the recognition of BDSM as a legitimate sexuality. These discursive formations, which I refer to as pathologised practitioner and...
BDSM as violence, consist of multiple discourses produced and replicated across the four disciplines discussed here – discourses further reinforced through popular culture. It is my contention that in order to move beyond the stigma of BDSM we must first acknowledge the discourses at the root of our prejudice.

Methodological Approach

The methodology that was employed in this paper is based upon Michel Foucault’s genealogical approach – an approach which he more often demonstrated than theorised upon. However, his essay ‘Nietzsche, Genealogy, History’ provides several points of departure which could be viewed as essential to a genealogical analysis.13 The main point which I would argue is essential, and to which this paper adheres as its methodological focus, is the rejection of a search for origins. Born out of a critique of classic historicist approaches, Foucault rejected the idea that we could understand the essence or “truth” of a topic through one historical moment. Instead, Foucault argued that understanding comes from multiple moments and networks of meaning. A genealogical approach involves the discursive analysis of a broad range of texts both historical and contemporary, academic and cultural. This method is employed to provide one possible view of the network of meaning on the topic under analysis.14

The first phase of my research was carried out in response to an academic database search I performed on the term ‘masochism’.15 An overwhelming proportion of results were situated within the fields of psychiatry, psychoanalysis, and psychotherapy. This raised the question of why this topic was still so heavily dominated by pathological/medical discourse? In an attempt to answer this question, I completed a mini-genealogy which focused on the pathologisation of ‘sexually diverse subjects’ and discursively analysed a range of literature and cultural texts.16 Some of the analysis and findings, specifically the discourse of pathologised practitioner, were used in this paper.

To further my research, I investigated other academic disciplines which have taken BDSM as their subject of analysis. Upon reviewing the literature, four main areas of academic study were identified as being the main sources of discourse on BDSM. These areas were psychiatry, sociology, feminism, and law.

14 Importantly, any genealogy is not the final word, nor the only word on its topic of analysis.
15 Conducted as part of my Honours research in 2014.
In applying a genealogical approach to my question of what socio-cultural and historical influences have contributed to the stigma around BDSM, I wanted to identify the possible historical moments which I felt were significantly influential in the current stigmatisation of BDSM practitioners. I had previously conducted work on pathologisation and the psychiatric field, however, when I added my research into feminism and law, the discursive theme changed from pathologisation to violence. This is how I adduced my dual-discourse framework of pathologised practitioner and BDSM as violence. Finally, since I had previously analysed discourses of pathology in cultural texts, I tested the BDSM as violence discourse across this area also. The findings confirmed the framework and are presented here.

It is important to acknowledge the limitations of this paper and its findings in relation to my chosen methodology. The time, resources, and word length restrictions of this paper necessarily mean that at best this is a mini-genealogy. Ideally, this project would also have analysed community-produced publications, private correspondence, news media sources, archival sources, and other historical data sources to name a few. Therefore, the findings here are representative only of the discourses that were analysed and are in no way comprehensive or definitive. This project should be viewed as the beginning of a larger project and a continuance of the excellent work already conducted by others within the field.

**Psychiatry: Pathologised Practitioner**

The publication of *Psychopathia Sexualis* by psychiatrist Richard von Krafft-Ebing in 1886 is one of the most cited historical moments in academic literature regarding BDSM. The book’s importance lies in its categorisation of sexual pathologies which include, among others, sadism, masochism, fetishism, and homosexuality. Also contained within later editions of the book are hundreds of criminal case studies that Krafft-Ebing collected during his time as a medico-legal expert. These case studies, which ranged from public exposure to murder, were the basis for each pathological category. Up until this point, practices such as whipping and bondage had been practiced privately without much concern – some claim since as far back as the 17th century.\(^\text{17}\) As Kathy Sisson contends, ‘*Psychopathia Sexualis* conferred typology, aetiology and pathology on previously unremarkable sexual behaviours and desires’ [emphasis added].\(^\text{18}\) What it also did was to discursively produce the sexually deviant subject and significantly shape the discursive formation of pathologised practitioner.\(^\text{19}\)

Krafft-Ebing categorised the behaviours of sadism and masochism under the grouping: ‘perversion of the sexual instinct’.\(^\text{20}\) Sadism is defined in *Psychopathia Sexualis* as the ‘association of active cruelty and violence with lust’, and masochism as


\(^{18}\) Sisson, p. 20.

\(^{19}\) The discursive production of sexual deviance can be viewed as part of the wider medicalisation project as described by Foucault; see M. Foucault, *The History of Sexuality, Volume 1: An Introduction*, trans. Robert Hurley, London, Penguin, 1978.

the passive opposite, or ‘the wish to suffer pain and be subjected to force’. These definitions have moved beyond the scope of psychiatry into the popular vernacular, with modern definitions being strikingly similar. The impact of Krafft-Ebing on the pathologised practitioner discursive formation can further be revealed when we take into account the modern equivalent to Psychopathia Sexualis, the Diagnostic and Statistical Manual of Mental Disorders (DSM).22

First published in 1952, the DSM assists psychiatrists in the diagnosis of patients. It remains the ‘primary system for classifying mental disorders in the United States’.23 In the most recent version, DSM-5, sexual sadism and masochism are classified as paraphilic disorders, alongside fetishism, transvestitism and paedophilia.24 Up until 1973, homosexuality was also classified as a paraphilia in the DSM.25 It is clear that Krafft-Ebing’s categorisations have had a continuing influence in the discursive production of sexual subjects in the field of psychiatry, with little difference between the grouping of “perversions” in 1886 and paraphilic disorders in 2013. However, even more crucial in the pathologisation of practitioners are the diagnostic features of the manual itself.

Certain aspects of the DSM assist mental health professionals in differentiating those people with a disorder (and therefore requiring treatment) from those who merely have non-normative sexual interests. For example, one diagnostic criteria of sexual sadism disorder is for the person to have acted out their urges on a non-consenting person, hence differentiating between a person with ‘sadistic’ desires and someone acting on those desires non-consensually.26 In the cases of sexual sadism and sexual masochism, the urges or desires of the person must ‘cause clinically significant distress or impairment in social, occupational, or other important areas of functioning’.27 However, if we look more closely at the diagnostic features of, for example, sexual masochism disorder, and begin to apply it to the real world, the differentiation, and therefore diagnosis, becomes less clear. The DSM-5 states, in regards to sexual masochism disorder:

Such individuals openly acknowledge intense sexual arousal from the act of being humiliated, beaten, bound, or otherwise made to suffer, as manifested by fantasies, urges, or behaviors. If these individuals also report psychosocial difficulties because of their sexual attractions or preferences...they may be diagnosed with sexual masochism disorder.28

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21 Krafft-Ebing, pp. 57, 89.
22 The DSM is an American manual. The European version is the International Classification of Diseases (ICD) published by the World Health Organisation (WHO). The classification of paraphilias (which include sadomasochism) sits within the section of the ICD entitled ‘Mental and Behavioural Disorders’.
27 American Psychiatric Association, pp. 694-695.
28 American Psychiatric Association, p. 694.
It is clear here that the presence of *psychosocial difficulties* is a defining factor in diagnosis – a defining factor that is problematic when applied to real world practitioners of BDSM.

The research participants in the study by Bezreh, Weinberg, and Edgar experienced varying degrees of stigma in disclosing their interest in BDSM. Of note here are those who experienced difficulty in finding partners with whom they could share those interests. Bezreh et al state, ‘[a] number of people described being rejected by potential partners who refused to participate or learn about BDSM’.\(^{29}\) One participant who,

worked as a “master” to paying clients reported having some clients with “enormous psychological issues” because they’ve been told they were “sick” or “depraved,” who then never mentioned their interests again.\(^{30}\)

As indicated by this study, BDSM practitioners deal with ‘psychosocial difficulties’ because of stigma they face in disclosing their interests. This stigma, which is in part perpetuated by the pathologising discourses of psychiatry, creates the very environment for psychosocial difficulties which are the basis for diagnoses in the DSM. This leaves practitioners in a feedback loop in which they are in danger of diagnosis if they seek help for anxieties regarding their desires – anxieties which were in part created by the psychiatric discourses in the first place. Further, this danger is not merely speculation. It has been discussed by Keely Kolmes, Wendy Stock and Charles Moser in their research into biased mental health care.\(^{31}\) Their research found that BDSM practitioners in therapy experienced a range of issues when disclosing their BDSM activities to their therapists. These included having to educate the therapist about BDSM, being told they had to give up BDSM before the therapist would continue treatment, and assuming that the practitioner had suffered past family or spousal abuse.\(^{32}\)

Over the last ten years, however, there has been a campaign led by academics in the fields of psychology and sociology, and by social groups such as the National Coalition of Sexual Freedom, to have sadism and masochism removed from the DSM.\(^{33}\) This pressure led to an important change in the latest version (DSM-5, published 2013) that emphasises that a desire for these practices does not necessarily mean the existence of a disorder.\(^{34}\) The DSM-5 states that, ‘a paraphilia by itself does not

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\(^{30}\) Bezreh, Weinberg and Edgar, p. 50.


\(^{32}\) Kolmes, Stock and Moser, p. 314. Their study also found that approximately a third of participants had sought what they term ‘kink aware’ professionals. However, some found the services were too expensive, inaccessible due to location, or not suitable to the client for reasons such as preferred gender of the therapist; p. 314. See also M. Barker, A. Lantaffi and C. Gupta, ‘Kinky clients, kinky counselling? The challenges and potentials of BDSM’, in L. Moon (ed.), *Feeling Queer or Queer Feelings?*, Oxon, Routledge, 2008, pp. 106-124.


\(^{34}\) Bezreh, Weinberg and Edgar, pp. 39-40.
necessarily justify or require clinical intervention’\(^{35}\). While the change marked a shift in the way that diagnoses are approached, I argue this caveat does little to help practitioners of BDSM since their desires are still pathologised by being classed as paraphilic. With seemingly little regard for studies that have shown the detrimental effects of psychiatric discourse on BDSM practitioners, the APA continues to include sexual sadism and masochism in the DSM.\(^{36}\) This perpetuates discourse of the pathologised practitioner, reaffirms the discursive formation through the disciplinary structure of the institution of psychiatry, and continues the stigmatisation of BDSM and its practitioners. This is the legacy of Krafft-Ebing and *Psychopathia Sexualis*.

**Sociology: De-pathologising Discourse**

It is, however, important to remember that discursive formations are not just made up of one-sided discourse. They also include all discourse that works to oppose a dominant discourse within a particular formation. In this way, the entrance of sociology into the discursive field of BDSM is our next key historical moment.

In 1978, sociologist Thomas Weinberg published - ‘Sadism and Masochism: Sociological Perspectives’.\(^{37}\) This was one of the first attempts to conceptualise BDSM practices as a social phenomenon rather than a psychopathology, and paved the way for contemporary understandings of BDSM. In his article, Weinberg discussed two aspects of BDSM which have been important in the de-pathologisation of practitioners: its sociality and its fantasy aspect.\(^{38}\)

Using a subcultural framework, Weinberg explained how practitioners are drawn together by their shared predicament – having a non-normative desire and an inability to express it. This leads to social groups which educate new participants and offer acceptance to the group. This aspect of Weinberg’s findings was very important, as it opened up the potential to view practitioners not as individual “deviants” who were hiding their practices, but as more “normal” people who desired the interaction, connections and acceptance that social groups and sub-cultures provide.

Weinberg’s second analytical framework was the concept of fantasy or 'theatrical frame' (after Erving Goffman).\(^{39}\) Using this framework, Weinberg explained how practitioners act out 'scenes', have a shared vocabulary, and share certain understandings or 'keys'. These keys allow them to turn actions, which may look on the outside like violence, into a kind of 'play'. This understanding of BDSM as a kind of fantasy or play has been another crucial aspect in the de-pathologisation of BDSM


\(^{36}\) There is also no indication that WHO plans to remove sadomasochism from the list of paraphilias in the upcoming ICD-11, as at date of publication: World Health Organisation, 'Classification of Diseases', [http://www.who.int/classifications/icd/en/](http://www.who.int/classifications/icd/en/), (accessed 15 September 2016).


\(^{38}\) I have used the term BDSM here for consistency; however, Weinberg uses the term ‘S&M’ in his article.

for some practitioners as it works to counter discourse which produces practitioners as pathological subjects perpetrating real acts of humiliation and violence.\textsuperscript{40}

Another example of the important sociological work of the time is G. W. Levi Kamel’s article ‘Leathersex: Meaningful Aspects of Gay Sadomasochism’.\textsuperscript{41} Although it focused primarily on practices within the gay leather scene, it made important distinctions about the nature of BDSM which were adopted in subsequent sociological research.\textsuperscript{42} For instance, Kamel determined BDSM to be fundamentally about the power play of dominance and submission, rather than solely about pain and cruelty. Furthermore, when pain is involved in a BDSM encounter, it has a different meaning to practitioners than it does to the outside world. As Kamel explains,

Sadists of leathersex do not take pleasure in causing pain for the mere sake of the act. Nor is it pleasurable if his lover does not share the S/M definition of pain...Likewise, the masochist who stubs his toe on an unruly sidewalk does not get an erotic charge. Painful accidents are painful, with no confusion whatsoever. The pain of S/M is defined differently, and it is the method by which partners maintain their dominant and submissive roles. It is a means to an end.\textsuperscript{43}

This explanation problematises common definitions of sadism and masochism which focus on cruelty and pain, and which disregard the element of dominance and submission. In doing so, Kamel’s findings, like those of Weinberg, began the work of de-pathologisation, by creating a new discourse which most closely reflected the experiences of real-world practitioners. Since then, a large proportion of academic work on BDSM has been aimed at refuting the notion of practitioners as “sick”, directly opposing the discourse of pathologised practitioner.\textsuperscript{44} The essential element in the majority of this work is the use of ‘everyday’ practitioners of BDSM, as opposed to psychiatric patients, as the source of research data. This has been an important shift toward viewing BDSM practitioners as having an ‘alternative’ sexuality rather than a psychopathology. Sociological scholarship has even begun to influence work being undertaken in the field of psychiatry and psychology, with researchers working to depathologise BDSM from within those fields.\textsuperscript{45}

\textsuperscript{40} It is important to note here that while some practitioners may approach their practice as a form of ‘play’ other practitioners may seek ‘real’ forms of humiliation and practices that could be considered as “real violence”. For further analysis on practitioner understandings of their practice and notions of violence: see Chapter 6, S. Newmahr, \textit{Playing on the Edge: Sadomasochism, Risk, and Intimacy}, Bloomington, Indiana University Press, 2011, pp.123-143.


\textsuperscript{42} Again I use BDSM here, whereas Kamel uses ‘S/M’.


\textsuperscript{45} For example, Bezreh, Weinberg and Edgar, \textit{American Journal of Sexual Education}, pp. 37-61.
Although these de-pathologising discourses are necessary in order to relieve some of the stigma faced by practitioners, they are situated within the very discursive formation which they seek to oppose. The continued production of pathology discourse, even though oppositional, inevitably perpetuates and constitutes the pathologised practitioner discursive formation. This is because de-pathology is necessarily predicated on pathology. The discursive production of the pathologised subject gives rise to conditions in which it is possible to produce opposing discourse. This is not to say we are forever trapped in a discursive dilemma, but the ability to move beyond it is hampered by the investment in pathology discourse by institutions such as psychiatry. While small shifts have been made, such as the recent concession in the DSM-5, the pathologised practitioner discursive formation is so deeply embedded in the discursive field of BDSM, that it may be some time before we are able to move beyond it.

Feminism: BDSM as violence

By taking into account the social and cultural conditions that gave rise to the study of BDSM within sociology, we are able to reveal the second discursive formation – *BDSM as violence*. The change in social and cultural attitudes towards sex in the 1960s and 1970s led to a greater ability within the humanities and social sciences to begin to study sex and sexuality beyond its medical and biological function. The growing gay and lesbian rights movements around this time also gave rise to academic studies of these communities and, as I’ve outlined above, some of the first studies of BDSM practices within the humanities were focused on the gay leather scene. The late 1970s saw a growing lesbian BDSM scene in New York and San Francisco. However, with the rise of second-wave feminism coming to a head at the same time, feminists became polarised on issues such as pornography, sex work and BDSM. The so-called feminist ‘sex wars’, and in particular the debate around BDSM, is the next key historical moment.

This debate took form most notably in the publication of two edited collections. The first, *Coming to Power*, was published by San Francisco-based women’s BDSM group, SAMOIS, in 1981. The second, *Against Sadomasochism*, was published in 1982 by a collective of radical feminists opposed to BDSM. The two groups had been in opposition for a number of years through the local lesbian and feminist communities in San Francisco. The two publications were not merely published in a similar timeframe, but were direct responses to the arguments of the other side. Out of their debate came two major discourses: BDSM replicates violence, and the questioning of the validity of consent.

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48 The authors of both of these edited collections use varying terminology, mostly “S/M” for the former and “sadomasochism” for the latter.
49 For the history of the formation of SAMOIS and the feud between the two groups mentioned here: see Califia, *Coming to Power*, pp. 245-283.
While, as an edited collection, *Against Sadomasochism* contains varying opinions on why BDSM should be opposed, a major argument across several authors’ work is that it replicates forms of hetero-patriarchal violence. As Bat-Ami Bar On argues,

The primary claim of [the feminist] position is that the erotization of violence or domination, and of pain and powerlessness, is at the core of sadomasochism and, consequently, that the practice of sadomasochism embodies the same values as heterosexual practices of sexual domination in general and sexual violent practices like rape in particular.\(^{50}\)

This theme of violence also runs through other contributors’ work. Sally Roesch Wagner argues that BDSM is a by-product of a culture in which romance stories and pornography teach men to be sexually violent, and teach women to enjoy it.\(^{51}\) Similarly compelling are first-hand ‘survivor’ narratives such as Marissa Jonel’s experiences of abuse and violence in lesbian BDSM relationships.\(^{52}\) Although she initially enjoyed being an ‘out’ masochist in a lesbian BDSM relationship, Jonel’s long-term partner eventually turned abusive. This experience led her to the conclusion that BDSM was simply a cover for violence. As she states,

...all this [talk] about consensual sex, changing roles back and forth, safe words, etc. *ad nauseum*—is, to my mind, just a cover that encourages women to be violent. Sadomasochism is violence.\(^{53}\)

In *Coming to Power*, many of the contributors argue from fictional and experiential, rather than theoretical, perspectives. Much of the discourse produced centres around protecting the right to choose. Counter to discourses of violence produced by the radical feminist perspective (like those in *Against Sadomasochism*), the arguments in *Coming to Power* focus on discourses of consensuality. The authors posit in varying ways that BDSM can be differentiated from violence and abuse because of its consensual nature. Conversely, authors in *Against Sadomasochism* claim consent is irrelevant to the debate for several reasons. Diana Russell argues that violence is violence, regardless of how someone perceives it: consensual or not. Further, she argues that the fact of consensuality does not negate circumstances in which persons can be victims of oppression or coercion.\(^{54}\) Robin Ruth Linden uses the example of the Stanford Prison Experiment in order to make the (unconvincing) point that the notion of consent is compromised by the power imbalance inherent in the


\(^{53}\) Jonel, p. 19.

dominant/submissive relationship.\textsuperscript{55} Finally, both Karen Rian and Bar On argue that consensuality is irrelevant to the debate, since women’s ability to consent is compromised by the patriarchal system which creates an illusion of choice.\textsuperscript{56}

Many of these points are both problematic and compelling, and they continue to influence contemporary debates on BDSM and feminism. However, what is most significant about the discourse produced, particularly from the radical feminist perspectives, is they marked a shift in the discursive field of BDSM. Up until this point, discourses around BDSM and violence were practically non-existent. As previously mentioned, the primary discursive formation regarding BDSM practitioners was one of psychopathology: they were ‘sick’ and, therefore, in need of treatment. What the ‘sex wars’ did was to develop discourses around BDSM and violence that had not been seen before. This is not to say radical feminists created the discursive formation of BDSM as violence, rather the fact that the discourses were able to be produced at that moment in time indicates a shift in how the BDSM practitioner as subject could be talked about, or discursively produced. As Stuart Hall has argued, one element of the production of subjects through discourse is the

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...acknowledgement that a different discourse or \textit{episteme} will arise at a later historical moment, supplanting the existing one, opening up a new \textit{discursive formation}, and producing, in its turn, new conceptions of ‘madness’ or ‘punishment’ or ‘sexuality’, new discourse with the power and authority, the ‘truth’, to regulate social practices in new ways.\textsuperscript{57}
\end{quote}

In this way, the “sex wars” debates were the first indication that a new discursive formation was evolving regarding BDSM practitioners. The ‘new conception’ of BDSM was one of violence and oppression. Practitioners were therefore in danger of harm and in need of protection – from each other and from themselves. Their protector was to be the legal system.

\textbf{Law: R v Brown}

The next key socio-historical moment in the BDSM as violence formation is Operation Spanner, and the subsequent trials of \textit{R v Brown}.\textsuperscript{58} In 1992, UK police came into possession of video tape recordings of a group of gay men involved in consensual BDSM. The tapes were found in the pursuit of an unrelated case, and the men freely admitted to taking part in the BDSM activities. They were prosecuted and convicted under sections 20 and 47 of the \textit{Offences against the Person Act 1861} for ‘inflicting bodily injury’ and ‘assault occasioning bodily harm’. In the subsequent appeal, the defence

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\item \textsuperscript{55} R.R. Linden, ‘Introduction: Against Sadomasochism’ in R.R Linden, (ed.), \textit{Against Sadomasochism: A Radical Feminist Analysis}, San Francisco, Frog in the Well, 1982, pp. 7-10.
\item \textsuperscript{58} \textit{R v Brown} [1992] QB 491; 2 All ER 552; 2 WLR 441.
\end{itemize}
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counsel argued the Offences against the Person Act was not designed to deal with cases such as R v Brown. They argued that,

There is abundant legislation dealing with sexual behaviour but none which assisted the Crown in prosecuting the appellants...It is this circumstance which caused the Crown to search around and choose inappropriate legislation.\(^{59}\)

While the Court dismissed these claims, the point had been made – the underlying discourse of the case had been shifted from one of sexual deviance to one of sexual violence. This was confirmed in the opinion of one of the five presiding Lords in the appeals case. Lord Templeman said, ‘[i]n my opinion sado-masochism is not only concerned with sex. Sado-masochism is also concerned with violence.’\(^{60}\) He thus asserted the relevance of the legislation to the case. And yet, certain kinds of 'violence' or wounding of the body are protected under the Offences against the Person Act 1861: namely, contact sports like boxing; cosmetic and other surgeries like circumcision; and tattooing.\(^{61}\) This then begs the question, why not BDSM? Mathew Weait has suggested that unlike sport or surgery, in which participants seek to avoid injury, practitioners of BDSM may intentionally seek out activities in which injury is a possibility or eventuality.\(^{62}\) As Weait states, 'in R v Brown, the injury was of the essence – it was an aesthetic, sensuous, desired experience for the men who consented to the injury'.\(^{63}\) He goes on to argue that the corporeal autonomy exercised by the BDSM practitioners is a direct affront to the law, which is charged with both the protection and the punishment of persons within the community. He continues,

Those who participate willingly in S/M are thus, at least at a symbolic level, law's gravest threat. Not only do tops place themselves in the position of the law (by inflicting the pain and/or injury that will satisfy their desire) but bottoms ridicule the power of law by actively enjoying the top to engage in the discipline and ritual humiliation upon which the law depends for its authority.\(^{64}\)

However, the major point of the appeals case was not to determine if the appellants had inflicted bodily injury or assault occasioning bodily harm, but to determine if consent could be a valid defence against these counts. The men lost their appeal by three votes to two, with the court determining consent was not a valid defence. In giving his verdict, Lord Templeman again turned to the theme of violence. He argued that,

\(^{60}\) R v Brown, 235.
\(^{61}\) R v Brown, 231.
\(^{63}\) Weait, pp. 79-80.
\(^{64}\) Weait, p. 80.
In principle there is a difference between violence which is incidental and violence which is inflicted for the indulgence of cruelty. The violence of sado-masochistic encounters involves the indulgence of cruelty by sadists and the degradation of victims. Such violence is injurious to the participants and unpredictably dangerous. I am not prepared to invent a defence of consent for sado-masochistic encounters which breed and glorify cruelty and result in offences under sections 47 and 20...

He further appealed to the notion that the court had an obligation to protect the public from harm and against what he called a ’cult of violence’.66

The case of R v Brown, demonstrates not only a reinforcement of the violence discourse, but a solidifying of the BDSM as violence discursive formation through the disciplinary institution of the legal system. Just as the institution of psychiatry relies upon (and invests with power) the discourses of pathology and sexual deviance, so too does the legal institution rely upon discourses of violence and the threat of harm in order to fulfil its purpose to protect and punish. Furthermore, the case reified the violence discourse by rejecting the validity of consent through its legal precedent. In an almost mirror image of arguments put forth by radical feminists some ten years earlier, the judicial system in the UK replicated the discourses of violence and consent in BDSM, and reiterated the notion that practitioners need to be protected from themselves.

This has left BDSM practitioners in a legal predicament. On the one hand the legal system in the UK fails to provide any explicit laws which make BDSM practice illegal, and on the other hand there are no laws in place which explicitly protect consensual practitioners.67 There have also not been enough cases to confirm or reject the findings in R v Brown. In an Australian context, the legal landscape is similarly vague, — the use of common law means R v Brown could come into play in future cases involving consent and BDSM.68

The discursive formation of BDSM as violence, including the notion that consent is an invalid defence, impacts BDSM practitioners to as great a degree as discourses which pathologise them. The shifting discursive field means BDSM discourse, which was once solely the domain of psychiatry, is now intertwined through the fields of sociology, feminist theory and law – all of which claim to best understand BDSM. While these domains are accessible to relatively few, popular culture has the potential to reach large groups of the population, which in turn can have a significant impact on BDSM practitioners

**Popular Culture**

The two discursive formations of pathologised practitioner and BDSM as violence have developed, and have been reinforced, across multiple academic and theoretical

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65 R v Brown, 236.
66 M. Weait, Safe, Sane and Consensual, pp. 72-76; and R v Brown, 237
68 Bennett, p. 552.
disciplines. These discourses permeate the socio-cultural world and add another dimension to the struggle for recognition of BDSM practitioners. This is demonstrated in the following three examples of contemporary narratives that depict BDSM: the literary trilogy *Fifty Shades of Grey*, and the films *Secretary* and *Nymphomaniac Vol. II*.

The pathologised practitioner discursive formation is reinforced through the narratives and characters of *Fifty Shades* and *Secretary*. In the *Fifty Shades* series, the male protagonist, Christian, introduces the female protagonist, Anastasia, to aspects of BDSM, particularly dominant/submissive (D/s) relationships. As a novice to BDSM, Anastasia seeks to understand why Christian likes to dominate women — why he ‘is the way he is’. The narrative positions Christian as somehow ‘broken’ because of his non-normative desires, and simultaneously positions Anastasia as the person who can ‘save’ or ‘heal’ him. Throughout the series, Christian suffers from nightmares and struggles to share his feelings with Anastasia. Eventually, and through much provocation on Anastasia’s part, it is revealed that Christian has a history of childhood abuse and negligent parenting. Further to this ‘traumatic’ past, the reader also discovers that Christian’s introduction to BDSM was through the advances of an older woman when he was a teenage boy — a relationship not-so-subtly deemed as paedophilia by Anastasia. These two narrative elements link Christian’s desires for BDSM and domination with his abusive past — a causal relationship which works to pathologise Christian, and BDSM more generally. This narrative device, which aims to provide the protagonists with a challenge to overcome, is, however, based upon what Lisa Downing terms ‘problematic universalising clichés about non-normative sexuality’.

In the early scenes of *Secretary*, the protagonist Lee is released from a mental care facility. She takes a position as a lawyer’s secretary and eventually develops a D/s relationship with her boss, Mr Grey. This relationship begins when Mr Grey discovers Lee is a self-harmer who cuts her own thighs. In response to this discovery, Mr Grey begins to administer spankings to Lee in order to help her shift her desire for pain into a more ‘positive’ outlet. However, the element of the narrative that Lee self-harms is

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71 Some examples include: Anastasia refers to the older woman (Elena) as “Mrs. Robinson” but escalates to “Mrs. Pedo”, and later she confronts Elena, suggesting she “molested” Christian as a “fifteen-year-old child”: see respectively, James, *Fifty Shades of Grey*, pp. 414-416, 434; and James, *Fifty Shades Darker*, p. 160.


73 Krafft-Ebing, *Psychopathia Sexualis*.
completely missing from the original short story version. I argue this narrative device has been added so the audience can better understand Lee’s desires for spanking and submission. It gives the audience a plausible explanation for Lee’s interest in, and enjoyment of, these behaviours. However, it does so through a pathological linking with the act of cutting and self-harm. This discourse, that masochists are self-harmers, is again bound up in the wider pathologised practitioner discursive formation and has its roots in psychiatric definitions of masochism.

The BDSM as violence discursive formation is evident in both subtle and explicit ways in the second of the Nymphomaniac films, and the Fifty Shades series. In Nymphomaniac II, the female protagonist Joe experiments with more and more ‘extreme’ forms of sexual desire and expression. At the pinnacle of this journey, Joe spends a period of time visiting a professional dominant, K, who provides bondage and discipline services. While Joe enjoys her time with K, this touch with the ‘dark side’ of sexuality is the catalyst for a downward spiral of chaos in Joe’s life. Immediately after her time with K, Joe takes a job working as a debt collector for a criminal enterprise. As part of this role she takes the skills she has learned from K (notably bondage and discipline) and uses them to bind and torture men for money. This juxtaposition places what was mutually beneficial, consensual BDSM, squarely alongside criminal, abusive behaviour. Not only does this suggest BDSM leads to a life of violence and crime, but that practices and skills of BDSM can just as easily be used in non-consensual, violent and abusive ways.

In Fifty Shades of Grey, the language used by Anastasia is meant to indicate her naivety; however, it also can be seen to represent mainstream attitudes of a society unfamiliar with BDSM. In describing Christian’s BDSM-dedicated playroom, Anastasia calls it his ‘Red Room of Pain’, an ‘Elizabethan-torture setup’ and likens it to the Spanish Inquisition. Further, throughout the book Anastasia repeatedly uses the words, hurt, hit and beat, with lines such as: ‘He likes to hurt women’, ‘I don’t want him to beat me’, and in the subject line of an email Anastasia sends to Christian, she writes, ‘Assault and Battery: The After-Effects’. The language used here gives a stronger impression of non-consensuality and violence, than it does of consensual BDSM. While the narrative attempts to express the experiences of a novice practitioner overawed by their new world, this use of language frames the relationship as abusive, and works to reinforce discursive connections between violence, abuse and BDSM.

There are two crucial points here. First, very few mainstream narratives of BDSM practice exist. The narratives that are available seem to indicate an acceptance of this form of sexuality, and yet on closer inspection they continue to perpetuate

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75 Credit goes to my editor D. Seiler for her assistance with this insight.
78 James, Fifty Shades of Grey, pp. 126, 100, 97.
79 James, pp. 100, 286, 292.
clichés and stereotypes through the pathologised practitioner and BDSM as violence discursive formations.\(^8\) Second, if popular culture is for most people the only exposure they have to BDSM sexuality and practices, then these flawed narratives simply add to misinformation about BDSM and solidify the dominant discourses which stigmatise, rather than help, practitioners.

**Practitioners**

Finally, I would like to briefly discuss ways in which practitioners may play a part in these discursive formations. Just like in academia and the culture industries, practitioners are also producers of the discourse surrounding BDSM. The wide variation of practices under the banner of BDSM as well as the diversity of those who practice it, results in the production of various and sometimes contradictory discourses. I have chosen to discuss two ways in which practitioners are involved in the production of discourse on BDSM, but importantly point out that these are but two examples.

For some practitioners, the use of different terminology can be a way to resist both the pathology and violence discourse. The term sadomasochism is deeply connected to the pathological past of Krafft-Ebing and the DSM. It also emphasises the elements of pain, and by extension violence. Some practitioners began resisting these inherited meanings through the abbreviation S/M or S&M. This was also reflected as a trend in the work of Weinberg and the sociologists of the late 1970s who chose to use the common vernacular of their research participants. Similarly, within the leather scene the terms 'top' and 'bottom' became more prevalent as a move away from the pathological and pain-centred terms of sadist and masochist, toward terminology which focussed more on the power exchange involved. This linguistic resistance was taken to another level during the 1990s when the term BDSM gained popularity – with some areas of academia taking up this term not long after. The inclusion of activities such as bondage and discipline, and the power relations of dominance and submission, under the umbrella term of BDSM, allows practitioners to have a more inclusive terminology – a terminology created by them. For some practitioners, this can be used as a tool of discursive resistance.

Another way in which practitioners are involved in the discursive field of BDSM is through the common BDSM credo ‘safe, sane and consensual’. For the BDSM community ‘safe, sane and consensual’ has become an important guideline which helps to demarcate BDSM from abuse. However, it is also discursively part of the formations of pathologised practitioner and BDSM as violence. The term *safe* indicates there is risk and danger; *sane* indicates there is the possibility practitioners, and therefore their behaviour, could be considered mentally ill or unstable; and *consensual*...

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draws the single line between BDSM and abuse or violence. Every time these words are used, they are part of the discursive formations I have discussed in this paper. Further, as Downing has shown, the credo also has the ability to work to stigmatise practitioners within the community itself – practitioners who may wish to play on the fringes of what is considered safe, sane or consensual. This example demonstrates the complex, interweaving nature of discursive formations. While some practitioners attempt to combat the stigma of pathology and violence through their own discursive practice, the power and established nature of pathologised practitioner and BDSM as violence make it extremely difficult for a new discourse to take hold.

Conclusion

Through this analysis across disciplines, I have attempted to expose the two major discursive formations that work to stigmatise practitioners and hinder the recognition of BDSM as a legitimate sexuality and practice. The pathologisation of practitioners and the conflation of BDSM and violence is, and has been, created, perpetuated and resisted within academic scholarship, institutions such as psychiatry and law, as well as popular culture. This has left BDSM practitioners in a state of liminality. They traverse the boundaries between normative and pathological, healthy and sick, legal and illegal, consensual and violent. In order to move beyond these boundaries, the voices of BDSM practitioners and activists must be championed. They must be allowed to create the narratives and discourse which are truest to their experiences, and we must be willing to listen to what they have to say.

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