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Simon Z. Weismantel
From Sadomasochism to BDSM:
Rethinking Object Relations
Theorizing Through Queer Theory
and Sex-Positive Feminism

ABSTRACT

This theoretical thesis explores the phenomenon of BDSM. BDSM is a type of consensual erotic experience that covers a wide range of interactions between or among people. Referencing the compound acronym BDSM, these interactions encompass: bondage and discipline; dominance and submission; and sadism and masochism. This project investigates psychoanalytic conceptualizations of BDSM, often called sadomasochism in analytic literature. In particular, object relations theory conceptualizations of BDSM are explored. Object relations theorists have tended to identify sadomasochism as pathology. This thesis explores and uses queer theory and sex-positive feminism to analyze two important object relations authors' writings on sadomasochism (i.e., Otto Kernberg and Jessica Benjamin). Additionally, a history of sadomasochism's entry into the psychological lexicon is given; its inclusion in the *Diagnostic and Statistical Manual of Mental Disorders* is discussed; the findings of empirical research on BDSM are reviewed; and discrimination against BDSM practitioners—including adverse experiences in psychotherapy—is described. Through this analysis, problems with object relations pathological framework regarding sadomasochism are discussed, and new adaptive object relations conceptualizations of BDSM are offered. Implications for clinical social work theory, research, and practice concerning BDSM and its practitioners are presented.

**FROM SADOMASOCHISM TO BDSM:
RETHINKING OBJECT RELATIONS THEORIZING THROUGH QUEER THEORY
AND SEX-POSITIVE FEMINISM**

A project based on an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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2014

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CHAPTER I

Introduction, Conceptualization, and Methodology

This culture always treats sex with suspicion...Sex is presumed guilty until proven innocent. Virtually all erotic behavior is considered bad unless a specific reason to exempt it has been established. The most acceptable excuses are marriage, reproduction, and love...[T]he exercise of erotic capacity, intelligence, curiosity or creativity all require pretexts that are unnecessary for other pleasures... (Rubin, 2011a, p 148).

Individuals with non-heterosexual and/or non-normative sexualities have been pathologized historically by the field of psychology, which is not immune to the influence cultural norms and prejudices around human sexual behavior. The history of homosexuality as a classified mental illness demonstrates perhaps the most well known legacy of discriminatory treatment of atypical sexualities by research psychologists and practicing psychotherapists. Practitioners of BDSM (i.e., bondage and discipline; dominance and submission; and sadism and masochism) represent another sexual minority group whose erotic behaviors have been deemed pathological both diagnostically and theoretically. This theoretical thesis explores the phenomenon of BDSM and investigates psychoanalytic hypotheses about sadomasochism. In particular, object relations theory conceptualizations of BDSM are explored. Object relations theorists have tended to identify sadomasochism as pathology. This thesis explores and uses queer theory and sex-positive feminism to analyze two important object relations authors'

writings on sadomasochism (i.e., Otto Kernberg and Jessica Benjamin). Additionally, a history of sadomasochism's entry into the psychological lexicon is given; its inclusion in the *Diagnostic and Statistical Manual of Mental Disorders* is discussed; the findings of empirical research on BDSM are reviewed; and discrimination against BDSM practitioners—including adverse experiences in psychotherapy—is described. Through this analysis, problems with object relations pathological framework regarding sadomasochism are discussed, and new adaptive object relations conceptualizations of BDSM are offered. Implications for clinical social work theory, research, and practice concerning BDSM and its practitioners are presented.

This chapter will provide an overview of BDSM. Needs identified by the literature review will be highlighted, and gaps in the existing research at the intersection of BDSM and psychology will be introduced. The connection between BDSM and clinical social work and/or psychotherapy will be made explicit, and the importance of this research project to the field will be identified. The theories that will be used to examine BDSM will be specified and their importance will be qualified (i.e., object relations theory, queer theory, and sex positive feminism). Lastly, the conceptual framework and methodology of this study will be explained, including addressing this researcher's potential bias and the overall strengths and limitations of the research plan.

BDSM: Bondage and Discipline/Dominance and Submission/Sadism and Masochism

BDSM is a type of erotic experience that covers a wide range of interactions between, or among, people. Referencing the compound acronym BDSM, these interactions encompass: bondage and discipline; dominance and submission; and sadism and masochism. In community parlance, BDSM is used as an umbrella term for the "...knowing use of psychological dominance and submission, and/or physical bondage, and/or pain, and/or related practices in a

safe, legal, consensual manner in order for the participants to experience erotic arousal and/or personal growth” (Wiseman, 1996, p. 10). Sometimes these activities are referred to as kink, and, in gay culture, there is a significant overlap between BDSM and the well-established leather subculture (Thompson, 1991).

The 1994 Janus Report on Sexual Behavior found that 14% of American males and 11% of American females had engaged in BDSM. Although methodological issues regarding sample selection have been cited with the Janus Report (Kelley, 1994), this national survey provides us with the most comprehensive investigation of sexual behavior since Kinsey’s reports on male and female sexuality (1948, 1953). Because BDSM encompasses such a broad range of activities, statistics aiming to convey how many people participate in these types of behaviors can range from as high as 50% of all Americans in Kinsey (1953) (e.g., erotic response to being bitten), to as low as 5% in Hunt (1974) (e.g., sexual pleasure from giving/receiving pain). The sexologist Robert Stoller’s work (1975, 1979, 1985, 1991) most broadly postulates “...the probable necessity of mildly perverse elements in so-called healthy sexuality” (Bader, 1993, p. 279).

Individuals who engage in BDSM are socially stigmatized and report experiencing discrimination and/or harassment based on their participation in BDSM activities (NCSF, 1998; NCSF, 2008; Hoff & Sprott, 2009; Ortmann & Sprott, 2013). The National Coalition for Sexual Freedom’s 2008 Survey of Violence & Discrimination Against Sexual Minorities found that 37.5% of the 3,058 total respondents reported experiencing some form of discrimination, harassment, or violence related to their involvement with BDSM (NCSF, 2008). Discrimination by professional service providers accounted for 11.3% of respondents’ experience (NCSF, 2008). In the category of discrimination by professionals, medical doctors were most often cited

(48.8%) (NCSF, 2008). However, more germane to the field of clinical social work, the second most cited in the category of discrimination by professionals, at nearly 40% (39.3%), was mental health practitioners (NCSF, 2008). According to Hoff and Sprott (2009), client's concerns regarding the stigma of BDSM may hinder access to and/or quality of mental health services.

Needs Presented by the Literature and Research Gaps

While sadomasochistic desires and acts were noted in Kinsey's studies of sexual behavior in the 1950s, BDSM has not been an extensively academically studied phenomenon in the modern academe. Just a generation ago, the taboo surrounding research in this area was believed to impinge upon a viable academic career (Paglia, 2013). Over the last five years, the taboo around BDSM as a legitimate research area has begun to break down significantly (Paglia, 2013). University presses have recently published three book-length ethnographies on BDSM: *Techniques of Pleasure: BDSM and the Circuits of Sexuality* by Margot Weiss (2011), *Playing on the Edge: Sadomasochism, Risk, and Intimacy* by Staci Newmahr (2011), and *Dominatrix: Gender, Eroticism, and Control in the Dungeon* by Danielle J. Lindemann (2012). However, these texts are from anthropologists and sociologists studying BDSM as a cultural phenomenon, not clinical mental health practitioners presenting psychological formulations surrounding BDSM.

Traditionally, psychological literature on BDSM—or sadomasochism, as it is often called in this literature—tends to view the phenomenon as pathological both diagnostically and theoretically (Freud, 1905; Kernberg, Moser & Klienplatz, 2005; De Block & Adrianens, 2013). It is possible to interpret this pathologizing perspective as having contributed to client reports of discrimination in the provision of mental health services, as well as the lack of cultural competency of many psychotherapists who find themselves working with this sexual minority.

Through tracing the etymology and etiology of sadomasochism's entry into the realm of psychology, this study will investigate the literature to determine how BDSM came to be understood as pathological in the field of psychoanalysis. By deploying the analytical tools of queer theory and sex-positive feminism, this thesis will deconstruct key object relations writings on sadomasochism and explore potential de-pathologized interpretations of the phenomenon. The theoretical and clinical implications of this new perspective will be discussed. As the literature review of this study revealed, there is a relative paucity of empirical studies on BDSM. Many of those that have been conducted have methodological issues. Because of these reasons, the intersection of BDSM and psychology warrants continued investigation.

As the social movements of the last 40 years free up a new generation of academics to pursue BDSM as viable research topic, it is expected that existing gaps in the literature will fill in (Paglia, 2013). The recent DSM-5 revisions regarding paraphilias may also serve to further depathologize research, clinical work, and writing on BDSM, making a space for a more complex examination and discussion of the psychological functions of erotic power exchange.

BDSM and Clinical Social Work

The historical inclusion of BDSM-related behaviors or orientations as Paraphilic Disorders in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) has influenced the perception of these atypical erotic practices as psychological disorders *ipso facto* (Moser & Kleinplatz, 2005). This may be a contributing factor to the discrimination by mental health practitioners revealed by the National Coalition for Sexual Freedom's (2008) survey. Other research also points to a lack of cultural competence (at best) and pathologizing bias (at worst) among psychotherapists working with BDSM practitioners (Kolmes, Stock & Moser, 2006; Ortman & Sprott, 2013). Because people who engage in BDSM are highly stigmatized—

socially, legally, and in the provision of psychotherapeutic services—they often remain closeted regarding this aspect of their erotic lives (Pa, 2001). Moser and Kleinplatz (2005) assert that the association of BDSM with psychopathology has contributed to the loss of jobs or of custody of children and the revocation of security clearances, as well as bias-motivated assaults (p. 107). In clinical settings, BDSM practitioners report concern that they will receive negatively biased treatment from mental health professionals (Kolmes et al., 2006). Kolmes et al. (2006) investigated bias in psychotherapy with BDSM clients and found six problematic treatment themes emerging in therapeutic dyads:

- 1) considering BDSM to be unhealthy, 2) requiring a client to give up BDSM activity in order to continue treatment, 3) confusing BDSM with abuse, 4) clients having to educate the therapist about BDSM, 5) assuming that BDSM interests are indicative of past family/spousal abuse, and 6) misrepresentation by therapists who state that they are BDSM-positive when they are not actually knowledgeable about BDSM practices (p. 314).

BDSM community activists and sympathetic mental health practitioners have advocated for a removal of the paraphilias from the DSM and for the development of guidelines for clinical practitioners so they may work more responsibly with clients who participate in BDSM (Moser & Kleinplatz, 2005; Kolmes et al., 2006). With the recent publication of the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders*, changes have been made to the Paraphilic Disorders section to address the misuse of this category as a “catch-all definition for any unusual sexual behavior” (APA, 2013). In the revision process, DSM-5’s Sexual and Gender Identity Disorder Work Group “...sought to draw a line between atypical human behavior and human behavior that causes mental distress to a person or makes the person a

serious threat to the psychological and physical well-being of other individuals” (APA, 2013). Moser and Kleinplatz (2005) parallel the current psychotherapeutic treatment of clients who practice BDSM with the field’s historical treatment of lesbian, gay, and bisexual clients. They point to a traditional psychoanalytic theoretical orientation, that, like outmoded thinking regarding homosexual clients, “...defines BDSM as pathological, *a priori*” (Moser & Klienplatz, 2005, p. 306). The literature review revealed that homosexuality and sadomasochism were identified and categorized as psychopathologies in the same historical milieu of the late 19th century, the significance of which will be discussed in subsequent chapters (Foucault, 1990; De Block & Adriaens, 2013).

Overview of Theoretical Frameworks

The method I will employ in this thesis is theoretical analysis. I will be using a literature review to examine published perspectives on BDSM. This theoretical thesis will examine how authors using object relations theory have conceptualized BDSM encounters, and how queer theory and sex-positive feminism can be used to trace, deconstruct, and modify object relations theorists’ conceptualization of BDSM. Because existing research reflects kinky clients’ reports of bias in the provision of mental health services, identifying any potential bias at the root of psychological theorizing about sadomasochism is an important task. The selection of object relations theory, queer theory, and sex-positive feminism is apropos because they highlight very different perspectives on BDSM. According to my search of the literature, object relations is the psychoanalytic theory from which most post-Freudian literature on sadomasochism has been written, and that has most shaped current psychological understanding of BDSM (Claus & Lidberg, 2003). The most well-known and prolific contemporary object relations theorists who have written on BDSM (i.e., sadomasochism) are the psychoanalysts Otto Kernberg and Jessica Benjamin. Both Kernberg and Benjamin view the phenomenon negatively—as perversion or

violence, respectively (Kernberg, 1988, 1991, 1995, 2011; Benjamin, 1980, 1988). Therefore, a critique of Kernberg and Benjamin's writings on sadomasochism will be offered. To trace the genealogy of these writings, I will locate them in history. I will then deconstruct their meaning and address their impact using Foucault's ideas of discourse and power. Lastly, I will consider Kernberg and Benjamin's conceptualizations through the lens of Rubin's sexual hierarchy ideologies.

Queer theory and sex-positive feminism are the theories that have endorsed BDSM as a potentially healthy expression of erotic desire and love. These theories have aimed to critique the prevailing negative view of BDSM and to depathologize the phenomenon. Michel Foucault's (1979) *History of Sexuality: Volume 1* significantly underpins queer theorizing on BDSM. Anthropologist Gayle Rubin is the primary theorist who has written on BDSM from a sex-positive feminist theoretical orientation. Because of the primacy of their work, Foucault and Rubin are the theorists selected in this thesis for investigation. There is also a wealth of BDSM community-based literature that allows practitioners to speak their own truths about their experience of erotic power exchange. While this community literature is not peer reviewed, it is an important primary source of material from an otherwise largely silenced sexual minority.

Conceptualization and Methodology

This study argues for the critical examination and deconstruction of object relations theorizing that conceptualizes erotic power exchange between consenting adults as perverse and pathological. This thesis promotes not only a deconstruction using the methodological tools of queer theory and sex-positive feminism, but also espouses a rethinking of how object relations concepts could be employed to understand the psychological functions BDSM with less negative bias. The methodology of a theoretical study is germane to the scope of analysis necessary to

contextualize the etiology of sadomasochism in the psychological lexicon, to understand the function of power inherent in identifying and categorizing sexual practices, and to explore the politics of pathologization. To facilitate the literature review for this study, I entered key terms into search engines and library databases to generate a robust literature review on the phenomenon. The engines and databases utilized in this research included Academia.edu, EBSCO, EBSCOhost Academic Search Premier, EBSCOhost PsycARTICLES, Google Scholar, JSTOR, Northwestern University Library, ProQuest, PsychINFO, Smith College Library, and Wiley Online Library. Examples of search terms used are “BDSM,” “kink,” “object relations,” “parahilias,” “post-structuralism,” “pro-sex feminism/sex-positive feminism,” “queer theory,” “sadomasochism,” “sexual masochism,” “sexual sadism,” “sexualities studies,” and etc. Targeted authors’ names in object relations, queer theory, and sex-positive feminism also constituted key search terms. Conducting a literature review which includes historical sexology, psychoanalytic theory and case material, empirical studies, as well as queer theory, sex-positive feminism, and BDSM community-based writings allowed a broad vantage point from which to analyze not only the phenomenon, but more importantly, to analyze how the phenomenon has been constructed. One limitation of casting such a broad research net is that an exhaustive review of each literature was not possible in the time constraints of this thesis. Therefore, it is likely that this researcher has not captured and reflected on every applicable publication.

Statement of Researcher Bias. It is important to consider this researcher’s orientation to the phenomenon as a potential strength or limitation to this thesis. As a 37-year-old, White, male student enrolled in a psychodynamic, clinically-focused school of social work, who has a career history of advocating for the equality of minority sexual communities (i.e., lesbian, gay, bisexual, transgender, and queer people), this researcher is motivated to use psychodynamic

theories in a manner which supports the mental health, well-being, and self-determination of those whose sexual identities are non-heterosexual and/or non-normative. Because of this connection with the LGBTQ activist community, this researcher was predisposed to question pathologizing object relations interpretations of atypical sexualities. The well-known story of homosexuality's entry into—and exit from—the DSM as a mental illness, and the resulting devastating history of psychological harm inflicted on LGBTQ people, influenced my suspicion of negative psychoanalytic theorizing regarding BDSM practitioners. This study was undertaken shortly after the publication of Wismeijer and van Assen's (2013) empirical research, coverage of which crossed over into mainstream news media. The findings of the Dutch study begin to offer evidence about the psychological health of BDSM participants contrary to popular narratives of pathology. The researcher's background working with sexual minority communities may be taken into account when evaluating the study's objectivity. As I hope to demonstrate in this thesis, it is good practice to examine the historical and political location of researchers and their discourse to contextualize the findings they produce.

Conclusion

Chapter One has introduced the phenomenon (i.e., BDSM), and explained the conceptualization and methodology employed in this thesis. Chapter Two will present an overview of BDSM, including: 1) historical underpinnings of our contemporary psychologically conceptualization of the phenomenon; 2) description of common BDSM practices; 3) demographics of participants; 4) initial inclusion of BDSM-related practices in the *Diagnostic and Statistical Manual of Mental Disorders* and how they have shifted over time; and 5) findings of peer reviewed studies on BDSM practitioners. Chapter Three will address object relations theory, including: 1) its development from previous psychoanalytic thought; 2) key concepts and

theorists within object relations; and 3) what object relations theory says about BDSM. Chapter Four will address queer theory and sex-positive feminism, including 1) why and for whom these theories were developed; 2) major proponents queer theory/sex-positive feminism and the key elements of these critical practices; and 3) what has been written about BDSM from these perspectives. Chapter Five will discuss, analyze, and synthesize the opposing theories addressed in this thesis, and explore implications for policy, clinical practice, and future research on BDSM.

CHAPTER II

Phenomenon: BDSM

Introduction

This chapter will provide an overview of BDSM, including basic definitions, descriptions of the roles and spaces utilized for BDSM scenes, and an overview of some common BDSM practices. Available demographic information on individuals who participate in BDSM will be provided. This chapter will also address discrimination faced by those who practice BDSM. Selected psychological studies on BDSM participants will be reviewed, including findings from newer empirical studies that conclude BDSM is a non-pathological phenomenon. Limitations of the quantitative data available on BDSM practitioners will be discussed. Subsequently, a history of BDSM in psychology as well as in the *Diagnostic and Statistical Manual of Mental Disorders* will be presented. It is important to note that this thesis is limited to an examination and reflection of Western conceptualizations of human sexuality roughly beginning in the 19th century and moving forward in time.

BDSM Roles and Spaces

What specific behaviors and/or acts fall under the BDSM rubric? It is not possible to generate an exhaustive list; however, the literature does describe common practices. To lay the groundwork of understanding BDSM practices, it is helpful to understand the three general orientations of individuals who participate in BDSM. The first orientation is that of “Dominant”—often referred to as a Top in gay culture (Truscott, 1991, p. 16). A Dominant in

the BDSM scene is a person who enjoys initiating and controlling the action (Ortmann & Sprott, 2013). The second orientation is that of “submissive”—often referred to as a bottom in gay culture (Truscott, 1991, p. 16). A submissive in the BDSM scene is a person who enjoys receiving and responding to the action initiated by the Dominant (Ortmann & Sprott, 2013, p.18). The final basic orientation is that of the “switch,” also sometimes called versatile in gay culture (Ortmann & Sprott, 2013, p. 20). A switch is a person who can be fulfilled by performing in either Dominant or submissive roles. There is some community demographic evidence that suggests switch is the most common orientation, echoing Havelock Ellis’ 19th century observation that the majority of people who practice BDSM enjoy both roles (Sandnabba, Santtila, Alison & Nordling, 2002). It is interesting to note that individuals involved in BDSM span not only these role orientations, but also heterosexual, homosexual, and bisexual persons.

Erotic power exchange takes place in a variety of private, semi-public, and public spaces. The semi-public and public spaces can be exclusively heterosexual, homosexual, or pansexual (i.e., inclusive of heterosexual, homosexual, and bisexual participants) (Thompson, 1991; Jacques, 1993). Most encounters, like sex in general, occur in private spaces (e.g. bedrooms or so-called home dungeons—a room set aside and appointed specifically for BDSM scenes) (Jacques, 1993). In the BDSM community, semi-public spaces—called play-spaces, play-rooms, or play-parties—are also used for BDSM encounters (Jacques, 1993). These range from BDSM community-based-organization run dungeons to commercially run sex clubs to hotel spaces affiliated with annual BDSM conferences (Thompson, 1991; Jacques, 1993). Lastly, a few outdoor BDSM events, such as the Folsom Street Fair in San Francisco, and backrooms of particular bars, constitute public spaces where BDSM scenes may occur (Thompson, 1991).

Common BDSM Practices

In what practices do these Dominants/Tops, submissive/bottoms, and switches participate? Let us consider each letter of the BDSM acronym separately. Ortmann and Sprott (2013) provide succinct explanations:

Bondage...involves the act of restraining oneself or another using cuffs, rope, metal, fabric, shackles, or chains. An erotic feeling of immobilization or stimulation from the material and textures of the implements of restraint is one of the greatest pleasures resulting from being bound (p. 15, italics mine).

Discipline is an activity in which a Dominant partner trains a submissive partner in order to produce certain behavior. Discipline incorporates rigid guidelines for behavior and involves various forms of punishment when the prescribed standards or behavior are not met (p. 15).

Dominance is the state of assuming psychological or physical control over another in a power-exchange relationship, a state in which orders may be executed or services performed. The state of Dominance can last for the length of a brief, negotiated scene or for the entire length of a relationship, depending on the agreement between the Dominant and...submissive (p. 15).

Ortmann and Sprott (2013) acknowledge the historically, morally, colloquially, and clinically layered meaning encompassed by the terms *sadism* and *masochism* before providing brief and practical definitions that suit the needs of this Chapter. According to Ortmann and Sprott (2013) "...*sadism* refers to the derivation of pleasure as a result of inflicting pain or watching pain

inflicted on another person or persons,” while “...*masochism* refers to the derivation of pleasure from having pain or humiliation inflicted upon oneself” (p. 16).

In their 2002 study, Sandnabba et al. offer a questionnaire (N=184) using Smallest Space Analysis (SSA) to derive “...four qualitatively different sexual scripts...” which emerged by looking at an extensive and specific list of reported BDSM activities (p. 46). The four scripts of behaviors they found were: 1) “hypermasculinity;” 2) “administration and receiving of pain;” 3) “physical restriction;” and 4) “psychological humiliation” (p. 47). The hypermasculinity script included specific acts such as fistfucking, watersports (urinating on), dildo use, etc. (Sandnabba et al., 2002). The administration and receiving of pain script included spanking, hot wax, use of clothespins, etc. (Sandnabba et al., 2002). The physical restriction script included use of handcuffs, rope and device bondage, and use of straightjackets (Sandnabba et al., 2002). Lastly, the humiliation script included faceslapping, use of gags, and verbal humiliation (Sandnabba et al., 2002). These are some common BDSM practices. However, to put the variety and scope of BDSM into greater perspective, Jacques (1993) provides a list of 101 BDSM practices in the Appendices of his monograph (pp. C1-C5).

Consent. BDSM community-based writing often includes reference to what is perhaps the most common BDSM practice: consent (Thompson, 1991; Jacques, 1993; Kleinplatz & Moser, 2006; Ortmann & Sprott, 2013). Over decades, the BDSM subculture has developed its own “...set of traditions and etiquette...,” and in 1983 the group Gay Male S/M Activists formally articulated the standard of “safe, sane, and consensual” (SSC) behavior (Ortmann & Sprott, 2013, p.35-36). Adoption of the SSC code was a direct BDSM community response to “...the mainstream view that S/M was always abusive, exploitative, and coercive...” (Ortmann & Sprott, 2013, p.36). Jacques (1993) explains the Safe, Sane, and Consensual code as follows:

Safe. All players have taken the necessary precautions to prevent psychological and physical damage to themselves, including transmission of disease.

Sane. All players are in full possession of their mental faculties and are fully aware of the risks involved in the play they intended.

Consensual. All players fully understand the potential risks of their intended play and have consented to the activities. This consent can be withdrawn or modified by any player at any time (p. 3).

In recent years, another articulation of safety and consent has emerged into the subculture: “Risk Aware Consensual Kink” or RACK. RACK acknowledges, that even with careful precautions, there is always an element of “...inherent risk in any activity...” (Ortmann & Sprott, 2013, p. 37). Now that we have reviewed BDSM roles, spaces, and practices, the next section will explore available demographics of BDSM participants in more detail.

Demographics of BDSM Participants

Over the last 40 years, only about a dozen empirical studies specifically on BDSM have been published, often simply termed “sodomasochism” in the literature (Levitt, 1971; Spengler, 1977; Lee, 1979; Weinberg, Williams & Moser, 1984; Moser & Levitt, 1987; Baumeister, 1988; Alison, Santtila, Sandnabba, & Nordling, 2001; Sandnabba et al., 2002; Kolmes et al., 2006; Cross & Matheson, 2006; Richters, de Visser, Rissel, Grulich & Smith, 2008; Wismeijer & van Assen, 2013). Considering that extrapolations from survey demographics put the number of US-based BDSM practitioners in the millions, the relative paucity of empirical research is meaningful (Moser & Levitt, 1987). Moser and Levitt’s (1987) assertion that “...general

population surveys have not adequately established the proportion of the general population that identify S/M as part of their sexual pattern...” largely holds true for the literature today (p. 323). However, Kinsey (1953) estimated that 12% to 33% of women and 20% to 50% of men had experienced a BDSM-related fantasy at least once (as cited in Ortmann & Sprott, 2013, p.34). Beyond the realm of fantasy, Australian researchers Richters et al. (2008) found that 2.2% of male respondents and 1.3% of female respondents reported engaging in BDSM acts in the previous year in their large (N=19,370) empirical study. According to Janus and Janus (1993), “[u]p to 14% of American males and 11% of American females have engaged in some form of sadomasochistic...sexual behavior...” (as cited in Kolmes et al., 2006, p. 302). Whatever the percentage of the population involved, the literature makes clear BDSM participants represent a diverse demographic in terms of sex (male, female, transsexual, intersex), age, race, relational status, education level, religion, sexual orientation, and BDSM role preferences (Cross & Matheson, 2006; Richters et al., 2008).

With regard to sex and gender, male, female, transgender, and intersex participants have been identified in research samples; although, the percentage representations skew depending upon source of sample selection (e.g. a lesbian BDSM club; a heterosexual BDSM email listserv) (Kolmes et al., 2006, p. 309). Similarly, individuals across homosexual, heterosexual, and bisexual sexual orientations have been identified as involved in BDSM; again percentages skew depending on the source of sample selection (Ortmann & Sprott, 2013). Participants represent people in long-term partnerships, as well as those who identify as single. Cross and Matheson’s (2006) analysis found that over 70% of their sample identified as being in a relationship, and that slightly more identified homo- or bisexual orientations than in their control group (p. 143). Socioeconomically, Sandnabba et al., (2002) found their sample of Finnish respondents (N=186)

to be more “highly educated” and as having a “...higher income level than the population in general” (p. 42).

Race and ethnicity were rarely mentioned in studies found in the literature review process. Moser and Levitt’s (1987) study provided an exception, as they specified that 95% of their sample (N=225) was White (p. 326). Kolmes et al.’s (2006) sample (N=175) provided more detail pertaining to the race and ethnicity of their respondents, which broke down as Euro-American (87.4%), bi/multiracial (4.6%), other (3.4%), Asian-American (1.7%), Native-American (0.6%), Latino (0.6%), and African-American (0.6%) (p. 309). The omission of this type of demographic data in the majority of studies on BDSM participants represents an important research gap that invites future investigation. The population is religiously diverse, with Moser and Levitt’s (1987) sample including Protestants (male 25%/female 11%), Catholics (male 15%/female 11%), Jews (male 12%/female 6%), and no religious preference indicated by 43% of the male sample and 62% of the female sample.

The diversity of role preferences and particular BDSM acts has been addressed in the previous sections *BDSM Roles and Spaces* and *Common BDSM Practices*. Taking this diversity into consideration along with the demographic diversity of those who participate in BDSM as discussed above, the tremendous research challenge of determining and obtaining a representative and generalizable sample becomes clear.

Empirical Studies Find BDSM Non-Pathological

The psychological characteristics of BDSM participants have only more recently been explored. Wismeijer and van Assen’s (2013) groundbreaking Dutch study “Psychological Characteristics of BDSM Practitioners” represents the first empirical study investigating the “basic dimensions of personality” (p. 2). Wismeijer and van Assen engaged a large BDSM

sample (N=902) and utilized a control group (N=434) (p. 1). Using self-report, online questionnaires, these researchers assessed “the Big Five personality (neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness), rejection sensitivity, attachment style, and level of subjective well-being” for both samples and compared their scores (p. 2). Their widely publicized findings concluded that—far from the pathological stereotype of this demographic—“...BDSM practitioners are characterized by greater psychological and interpersonal strength and autonomy...” compared to the non-BDSM control group (p. 7). Rating as “...less neurotic, more extroverted, more open to new experiences, more conscientious, yet less agreeable...,” and “...associated with a higher level of subjective well-being...,” Wismeijer and van Assen’s (2013) data “...falsify the view that BDSM practitioners are psychologically disturbed” (p. 7-9). Their results also contest a popular assumption that “...preference for BDSM activities is...the result of having a history of traumatic (sexual) experiences or being generally insecurely attached” (p. 8). Citing Richters et al. (2008); Gosselin and Wilson (1980); Moser (1999); and Moser and Levitt (1995), Wismeijer and van Assen (2013) point to evidence of the “...relative good psychological health of those involved in BDSM activities...” (p. 2). Such evidence has led some researchers to reframe BDSM simply as a recreational activity rather than something deviant or pathological (Newmahr, 2010).

Similarly, relational attachment styles among the BDSM sample were found to match distributions with general adult samples, with the majority demonstrating secure attachment (47%) (Sandnabba et al., 2002, p. 49). Their Finnish respondents (N=184) had an “overwhelmingly positive” and “ego-syntonic” view of their BDSM behavior despite the social stigma attached to this marginalized sexuality and the difficulty some individuals have in finding partners who share their BDSM desires (Sandnabba et al., 2002, p. 51). This study also

determined that the majority of their sample did not restrict their sexual activity to BDSM. Only 4.9% of respondents no longer practiced “ordinary sex” (Sandnabba et al., 2002, p. 43). It is important to note respondents’ flexibility between BDSM and non-BDSM sexual expression. This finding that contradicts Kernberg’s belief that sadomasochists restrict the “...variety, scope, and flexibility of sexual life” in order to achieve orgasm (Kernberg, 1991, p. 334).

Using data from a national survey (N=19,307) in Australia, Richters et al. (2008) sought to “...examine sexual behavior correlates of involvement in BDSM and test the hypothe[sis] that BDSM is practiced by people with a history of 1) sexual coercion, 2) sexual difficulties, and/or 3) psychological problems” (p. 1660). This large survey sample only included those who had engaged in BDSM in the past year. (Richters et al., 2008, p. 1664, 1666). Demographically, Richters et al. (2008) found that engagement in BDSM activities was significantly more likely among gay, lesbian, and bisexual individuals. However, all three hypotheses were not supported by the analysis. “People who had engaged in BDSM in the past year were not more likely to have been sexually coerced ever or before age 16 years” (Richters et al., 2008, p. 1665). “Engagement in BDSM was not associated with higher levels of psychological distress (Richters et al., 2008, p. 1665). And “there were no statistically significant associations between engagement in BDSM and any of the sexual difficulties asked about in the survey” (Richters et al., 2008, p. 1666). These findings support the idea that BDSM is an alternative sexual practice that is “...not a pathological symptom of past abuse or difficulty with ‘normal’ sex,” nor is participation in BDSM correlated with psychological troubles (Richters et al., 2008, p. 1667).

Significantly, this researcher did not discover any empirical studies that found BDSM practitioners to be psychologically pathological, contrary to stereotypes of the population and traditional object relations theorizing about the phenomenon. While the findings of Richters et

al. (2008) disputed the trauma etiology narrative of sadomasochism, Sandnabba et al. (2002) found that BDSM-oriented females with a history of child sexual abuse were more likely to select a masochistic role in sadomasochistic scenes than the non-abused BDSM-oriented females in their sample. This subgroup of BDSM-oriented females also reported visiting the doctor more frequently for injuries obtained during BDSM activities than non-abused females in the sample (Sandnabba et al., 2002). Sandnabba et al. (2002) hypothesize that these individuals might have "...difficulties in setting appropriate limits to their SM-activities" (p. 51). Heterosexual males with a masochistic or submissive role orientation reported difficulty in finding sadistic or dominant female partners for BDSM activities (Moser & Levitt, 1987; Sandnabba et al., 2002). However, "...in spite of this, the males seemed to have an overwhelmingly positive and ego-syntonic view of their sexual behaviour" (Sandnabba et al., 2002, p. 51). Overall, no studies found in this literature search supports notions of BDSM practitioners as mentally ill.

Limitations of Studies on BDSM Practitioners

The limitations in the literature I have identified are: 1) the relatively limited number of empirical sexuality studies on BDSM practitioners and activities, 2) the small sample size of studies that are devoted to looking at this phenomenon specifically, and 3) the challenge of comparison and generalization from samples which include significant internal variability (i.e., country/cultural, sexual orientation, sex/gender, BDSM role preference, and particular BDSM activities, etc.).

Most of the studies devoted to exploring BDSM have typically only been able to solicit and use a relatively small sample size given the hypothesized actual number of people "...involved in behaviors that most would classify as S/M" (Moser & Levitt, 1987, p. 324). The studies focused on BDSM practitioners that I have located in my literature review have relied on

samples which hover around 200 participants, often less, and are largely skewed male (178 men, 47 women, Moser & Levitt, 1987; 162 male, 22 female, Alison, Santtila, Sandnabba, & Nordling, 2001; 69 male, 24 female, Cross & Matheson, 2006). One study did not provide a break down of respondents by sex, but its sample was in the 200 participant range (222 gender unspecified, Baumeister, 1988). Another study, with a sample culled largely from outreach to lesbian organizations and listservs, included more females than males, but also stayed in the 200 respondent range (136 female, 33 male, 4 other, 2 intersex, Kolmes et al., 2006). These samples are very small when we consider that nearly 20,000 people attended weekend activities associated with the annual Chicago-based International Mr. Leather contest in 2013, a contest limited to gay men (GoPride.com News Staff, 2013).

There are some notable exceptions to these small research samples. The 1998 and 2008 Survey of Violence & Discrimination Against Sexual Minorities undertaken and published by The National Coalition for Sexual Freedom collected responses from 1,000 to 3,000+ BDSM practitioners. NCSF's sample in 1998 was N=1,017 and N=3,058 in 2008. While these surveys have substantial samples, thus may have yielded more generalizable results, the research was not published in a peer-reviewed format. Two non-US based studies published in the *Journal of Sexual Medicine* also had sample pools in the thousands (Richter et al., 2008; Wismeijer & van Assen, 2013). The 2008 Australian study used data from a national survey (N=19,307). The 2013 Dutch study reported the results of online questionnaires from 902 BDSM practitioners and 434 control participants. Both of these larger scale studies concluded that BDSM was not pathological.

Lastly, another important issue with the scholarly research on BDSM is that samples are not easily comparable or generalizable because of their great internal diversity (Kelley, 1994). It

is also true that BDSM itself is "...a complex of behavioral phenomena that encompasses a wide variety of specific acts" (Moser & Levitt, 1987). When researching BDSM, samples include together sadists/dominants and masochists/submissives; males, females, and gender nonconforming people; hetero-, homo-, bi-, and pan-sexualities; sometimes different countries and certainly different cultures. Richters et al. (2008) qualify that their study did not explore possible difference among those who take dominant, submissive, or switch roles; nor were they able to measure differences between those for whom BDSM is an identity and for those whom it is an occasional behavior (p. 1666). Socioeconomic status is only occasionally mentioned in discussion regarding study samples, but enough to indicate class diversity within samples. Race and ethnicity have also only rarely been delineated in any of the studies I have found. It is possible that general and specific BDSM preferences and inclinations function differently for the wide variety of participants; however, the research to date has not been able to suss out these nuances because of internal diversity with research samples.

The relative paucity of empirical research is meaningful. The limited amount of studies could indicate that the social stigma regarding BDSM practice extends into the research world as well. It could also point to the challenges in studying sexual behavior in general, and of studying those behaviors in a largely closeted population in particular. Alternatively, it could simply demonstrate a lack of interest in BDSM as a research topic. Regardless, more empirical research on BDSM is needed to better understand this phenomenon. In the next section, I will address the historical roots of sadomasochism within the field of psychology. These roots may provide insight on how, in the absence of empirical research, theorizing on the phenomenon has tended towards pathology.

History of BDSM in Psychology

As noted in the introduction to the chapter, the focus of this thesis is on Western conceptualizations of human sexuality commencing in the 19th century. This focus is appropriate given the etiology of sadomasochism and its historical entry into the psychological discourse, which has shaped prominent ideologies about BDSM. However, it is worth noting that according to Havelock Ellis's 1903 article "Love and Pain," pain and sexuality were non-pathologically linked and practiced earlier both in Western cultures and transhistorically across Eastern societies as well (as cited in Moser & Levitt, 1987). Looking beyond human sexuality, Kinsey noted 24 various species of mammals that bite—that is, inflict pain—during intercourse in his 1953 study (as cited in Moser, 1999). This paper does not address earlier Western, non-Western, or non-human mammalian sexual expressions that may serve to normalize BDSM as a sexual variation.

In much of the psychological literature, the terms sadism, masochism, and sadomasochism are used instead of the more recent and descriptive compound acronym BDSM (i.e., bondage/discipline, dominance/submission, sadism/masochism). For the purposes of this paper, the term sadomasochism is interchangeable with the more current, popular term BDSM. Important nuances of denotation and connotation between BDSM-community use of sadomasochism and the clinical terms Sexual Sadism and Sexual Masochism will be addressed in Chapter Five.

Austro-German physician, psychiatrist, and sexologist Richard von Krafft-Ebing (1840-1902) is credited with coining the terms sadism and masochism. He derived these terms from the names of two European authors who wrote about sexual power exchange. Krafft-Ebing derived sadism from Marquis de Sade (1740-1814) who wrote about his exploits and fantasies of

deriving pleasure from inflicting pain (Ortmann & Sprott, 2013). He took masochism from the name of Leopold von Sacher-Masoch (1836-1895), an Austrian author who wrote about the erotic enjoyment he experienced while being dominated and punished (Ortmann & Sprott, 2013). Krafft-Ebing, a countryman and contemporary of Freud, categorized these new terms "...under the broad heading of 'General Pathology' in his classic volume *Psychopathia Sexualis* (1886)" (Field, 2011, p. 12). Prior to Krafft-Ebing, Bullough and Bullough (1977) argue that these types of sexual practices had not been named, classed, or pathologized (as cited in Moser, 1999). "[T]here is consensus among historians that the second half of the 19th century, and especially the publication of... *Psychopathia Sexualis*...marked a real turning point in the understanding and medicalization of sexual deviance" (De Block & Adriaens, 2013, p. 278). For Krafft-Ebing, sadism was a psychologically rooted exaggeration of normal male sexuality, while masochism was at the core an overly pronounced component of female normal, submissive sexual psychology (Robinson, 1973). Sadism and masochism were fixed-role, gender-specified perversions in Krafft-Ebing's theory. He viewed sadists as "...vicious, perhaps even murderous degenerates..." and masochists as "...pitiful, self-destructive neurotics..." (Robinson, 1973, p. 48). Krafft-Ebing's theorizing about perversions influenced Freud's ideas about sexuality (De Block & Adriaens, 2013, p. 281).

British physician and early sexologist Havelock Ellis (1859-1939) was another key figure in the psychological canonization of sadomasochism, and it is well documented that Freud read and made reference to Ellis' work (Rubin, 2011). In 1879, Ellis published *Sexual Inversion*, the first volume of his seven volume *Studies in the Psychology of Sex* (1897-1928). *Sexual Inversion* addressed sadism and masochism. According to Robinson (1973), Ellis believed "...the essential feature of both sadism and masochism...was the association of love with pain" (p. 46). Ellis

theorized that the love-pain association was based on and derived from the “emotional residues” of animal courtship, and he was far less psychologically pathologizing than Krafft-Ebing (Robinson, 1973, p. 46). Instead of conceptualizing sadism and masochism as psychic disorders, Ellis couched them more mechanically in terms of appropriations of sexual energy (Robinson, 1973). As Robinson (1973) astutely summarizes, Ellis theorized that, for both sadist and masochist, the individual’s “...supply of sexual energy was...abnormally low...,” and therefore they could only become fully aroused through “...extensive ‘borrowings’ from the energies of fear [masochism] and anger [sadism]” (p. 48). Ellis also took issue with the separation of sadism and masochism because he observed both behaviors were often exhibited by the same person (Robinson, 1973). Lastly, Ellis disagreed with Krafft-Ebing’s assertion that the sadistic and masochistic behaviors were gender specific (Robinson, 1973).

Philosopher Arnold I. Davidson (2001) has argued that the historical period during which Krafft-Ebing, Ellis, and others were writing marked the emergence of “...a new psychiatric style of reasoning about diseases,” and that this new “...system of concepts...” made possible authoritative statements about “...sexual perversion...” which before had no discursive space (p. 68-69). Concepts like Charcot’s *sens genital* (genital sense), Krafft-Ebing’s sexual instinct (i.e., appetite), the assumption that sex was functional, the dictum that propagation was the healthy functional expression of human sexual drive, and that deviation in expression was *de facto* perversion all underpinned early psychoanalytic thought regarding sex (Davidson, 2001). It was in this nineteenth-century environment of medicalization and restrictive Victorian attitudes about sexuality that Freud composed his *Three Essays on the Theory of Sexuality* (1905). While Davidson’s (2001) innovative reading of *Three Essays* interprets Freud’s treatment of the perversions (i.e., sadism, masochism, fetishism, and homosexuality) as revolutionarily

overturning—or at least opening the space for future theorists to overturn—Krafft-Ebing’s and other’s naturalized and essentialist views regarding sexuality, the dominant and popular reading of Freud’s *Three Essays* through the decades has been that sexual deviations are psychologically pathological.

Sociologist Thomas Weinberg (2006) typifies well the traditional—and extremely influential—reading of *Three Essays*. That reading holds that Freud (1938) believed “...sadism...correspond[s] to an aggressive component of the sexual instinct which has become independent and exaggerated and has been brought to the foreground by displacement” (p. 569). Masochism is also understood as a perversion: “...nothing but a continuation of sadism directed at one’s own person” (Freud, 1938, p. 570). At the time of Weinberg’s literature review, roughly one hundred years after the publication of Freud’s *Three Essays*, he accurately notes that “...very conservative attitudes towards sexuality...” remain prevalent in psychoanalytical writings (Weinberg, 2006, p. 18). These attitudes will be more fully addressed in Chapter Three on Object Relations Theory’s treatment of sadomasochism. However, at the time of this writing (2014), four decades of cultural anthropology (Paul Gebhard, *Fetishism and Sadomasochism*, 1969), sexuality studies (Michel Foucault, *The History of Sexuality, Vol. 1, An Introduction*, 1978), and sex-positive feminism (Gayle Rubin, *Thinking Sex: Notes for a Radical Theory of the Politics of Sexuality*, 1984) have finally begun to bear fruit in more recent positive psychoanalytical conceptualizations of BDSM. Most of these positive, adaptive conceptualizations have only begun to see publication in the last eight or so years.

BDSM in the Diagnostic and Statistical Manual of Mental Disorders

The history of the paraphilias’ inclusion and development through the DSM’s now seven editions (APA, 1952, 1968, 1980, 1987, 1994, 2000, 2013) charts the field’s disagreement,

confusion, and development regarding the nosology of sexual difference. Published in 1952, the first edition of the DSM was a post-World War II expansion of the 1933 *Statistical Manual for the Use of Hospitals for Mental Diseases*. It was influenced by psychodynamic concepts, which were ascendant at the time, and represented the APA's need to better understand an expanded patient population presenting with mental illnesses not found in the 1933 *Manual* (De Block & Adriaens, 2013). The first edition of the DSM (1952) included sexual deviations under the general heading of personality disorders, catalogued more specifically as "...sociopathic personality disturbances" (De Block & Adriaens, 2013, p. 285). In describing these disturbances, the DSM qualified individuals as ill in terms of personal distress, impaired relations with others, and not conforming with society and the "...prevailing cultural milieu" (De Block & Adriaens, 2013, p. 285).

The DSM-II (1968) introduced and specified eight sexual deviations: homosexuality, fetishism, pedophilia, transvestism, exhibitionism, voyeurism, sadism, and masochism. They were categorized as "...certain non-psychotic mental disorders..." and subdivided into three groups representing sexual interest towards: 1) objects other than persons of the opposite sex; 2) acts not usually associated with coitus, or 3) coitus performed in bizarre circumstance (APA, 1968, p. 44, as cited in De Block & Adriaens, 2013). The focus of diagnosis in the DSM-II was on personal distress arising from these deviant attractions.

In terms of sexuality and disease, the development of the DSM-III (1980) was rocked by intellectual and advocacy work of the 1970s that debated the fitness of homosexuality as a category of mental illness—even by the APA's own definition of mental illness at the time (De Block & Adriaens, 2013). Scholars and activists argued that homosexuality's inclusion in the DSM was not based on empirical evidence, rather that it was rooted in generalization from

clinical case studies of individuals who presented for treatment (De Block & Adriaens, 2013). As APA leadership began to meet with gay and lesbian clinicians within the Association, they came to recognize that these cases did not fit the definition of a mental disorder (i.e., cause distress or generalized impairment) (De Block & Adriaens, 2013). Homosexuality was removed from the seventh printing of the DSM-II in 1973. This debate has deep clinical and conceptual implications for sexual sadism and sexual masochism (De Block & Adriaens, 2013).

DSM-III (1980) stated that sexual deviance from social norms ought not constitute a mental disorder (De Block & Adriaens, 2013). Developers of the DSM-III sought to move from the psychodynamic conceptualization of disease towards inclusion based upon empirical scientific evidence (De Block & Adriaens, 2013). This shift mirrored the rise of biological psychiatry. The DSM-III re-named sexual deviations as paraphilias (deviation/para; attracted/philia) and placed them in the category “psychosexual disorders” (APA, 1980, p. 27, as cited in De Block & Adriaens, 2013). The authors recognized that while paraphilic fantasy may be on the spectrum of healthy sexuality, criteria for disease were met if paraphilic urges became repetitive, exclusive, or necessary for gratification (Criteria A); and the person acted on these urges *or* is markedly distressed by them (Criteria B). In the case of sadism or masochism, however, any enactment of fantasy constituted a mental illness (De Block & Adriaens, 2013). DSM-III retained the concept of “...impairment in the capacity for reciprocal, affectionate sexual activity...” even though it jettisoned impairment from its diagnostic criteria (APA, 1987, p. 281, as cited in De Block & Adriaens, 2013).

The development of DSM-IV (1994) and DSM-IV-TR (2000) were influenced by conservative religious groups who aggressively lobbied the APA when the 1994 edition limited paraphilic criteria to sexual fantasies or behaviors *that caused clinically significant distress* or

impairment in an important area of functioning (De Block & Adriaens, 2013, italics mine). While the APA sought to delineate among addressing atypical variation, diagnosing mental illness, and identifying ordinary criminality, religious groups interpreted the 1994 text as not deeming pedophilia as a mental disorder unless it caused the perpetrator distress (De Block & Adriaens, 2013). This “...public relations disaster...” led the APA to introduce the concept of nonconsenting victims, which it applied to pedophilia, voyeurism, exhibitionism, frotteurism, and sexual sadism (De Block & Adriaens, 2013). Criteria for the remaining paraphilias—including sexual masochism—remained distress and/or impairment based (De Block & Adriaens, 2013).

Like the research and advocacy of the 1970s that ultimately led to the removal of homosexuality from the DSM, newer scholarly research has bolstered the work of BDSM advocacy organizations that would like to see fetishism, sadism and masochism similarly depathologized. Moser and Kleinplatz (2005) assert that paraphilias (as described in DSM-III-TR, 2000) do not meet the DSM’s definition of a mental disorder, nor do they “...reflect the current state of scientific knowledge...” (p. 105). Indeed, in my own review of the literature (undertaken in 2013-2014), empirical research findings on BDSM practitioners do not support the classification of these orientations, desires, or behaviors as mental illness (Sandnabba et al., 2002; Richters et al., 2008; Wismeijer & van Assen, 2013).

While DSM-5 (2013) did not remove sadism and masochism specifically, or paraphilias generally, the APA’S Sexual and Gender Identity Work Group did make important changes to the category. The DSM-5 specifies, “...most people with atypical sexual interests do not have a mental disorder...” (APA, Factsheet, 2013, p. 1). The criteria for diagnosis now state that to be diagnosed with a paraphilia, people with such interests must: 1) “...feel personal distress about

their interest, not merely distress resulting from society’s disapproval; or 2) have a sexual desire or behavior that involves another person’s psychological distress, injury, or death, or a desire for sexual behaviors involving unwilling persons or persons unable to give legal consent...” (APA, Factsheet, 2013, p. 1). The DSM-5 also strives to further distinguish atypical sexual interest from mental illness by renaming the paraphilias as Disorders (i.e., Sexual Masochism in DSM-IV is titled Sexual Masochism Disorder in DSM-5); the intended implication being that sexual masochism *et. al.* is not a disorder *per se*. The literature is explicit that BDSM practitioners do not meet the first criteria (Sandnabba et al., 2002, p. 51). The applicability of the second criteria is called into question in regards to BDSM activity when we consider that Safe, Sane, Consensual (SSC) and Risk Aware Consensual Kink (RACK) are central BDSM ethical community codes (Thompson, 1991; Jacques, 1993; Kleinplatz & Moser, 2006; Ortmann & Sprott, 2013).

Conclusion

This chapter has provided information on BDSM roles, spaces, and common practices. Available demographic data has been discussed. An overview of discrimination experienced by BDSM practitioners—both inside and outside of clinical settings—has been provided. Psychological studies on BDSM practitioners, as well as their limitations have been discussed; and newer empirical studies that counter older theoretical claims of pathology have been highlighted. The history of sadomasochism’s entrance into the field of psychology, and, later, into the DSM was traced. In Chapter Three, I will provide a general overview of object relations theory and the work of its foundational theorists. Chapter Three will also specifically address significant object relations’ texts on sadomasochism.

CHAPTER III

Object Relations Theory

Introduction

This chapter will provide a general overview of object relations theory. First, the history of object relation's development out of classic psychoanalytic thought will be summarized, including brief discussion of selected foundational figures. Secondly, the key principals of object relations theory will be highlighted with particular attention to those concepts that are relevant to object relations theorists' conceptualization of BDSM. Finally, this chapter will review important and often-cited publications that have explored BDSM from an object relations perspective, including key findings on the phenomenon from this perspective.

Overview of Object Relations Theory

Object Relations is based on the belief that all people have within them an internal, often unconscious world of relationships that is different and in many ways more powerful and compelling than what is going on in their external world of interactions with 'real' and present people (Melano-Flanagan, 2011, p. 118-119).

Object relations is a psychological theory within the psychodynamic tradition. This school of thought holds that the human psyche is shaped and influenced by the objects taken into our minds through the processes of incorporation, identification, internalization, and introjection (Melano-Flanagan, 2011). In object relations theory, the term object refers to persons—real or

imagined—who have been internalized by a given subject, as well as to the object’s personal and interactive qualities within the subject’s unconscious (Melano-Flanagan, 2011). Object relations theory considers the “...internal mental representations of others,” the “...internal images of [one’s] self,” and the dynamic relationships between them as the fundamental elements of intrapsychic structure (Melano-Flanagan, 2011, p. 119). Objects can also refer to internalized sociocultural positions that enter and inform a person’s psychology. While the most significant objects are typically parents or other early caregivers, messages of “...oppression, prejudice, hatred, [and] discrimination [can]...get inside the internal world just as powerfully as interactions with immediate family members” (Melano-Flanagan, 2011, p.121). This type of internalized oppression is relevant to discussions of BDSM practitioners, who constitute a highly minoritized sexual subculture (e.g., deviants; perverts). Lastly, anything can become internalized as an object if it is “...deeply and symbolically connected to powerful object experiences in the inner world” (Melano-Flanagan, 2011, p.120).

While object relations theory is considered something of a departure from, or extension of, classical Freudian drive theory, its beginnings have been traced back to ideas published in Freud’s (1917) canonical work “Mourning and Melancholia.” In “Mourning and Melancholia,” Freud opened the possibility of object relations through his analysis of unresolved bereavement, which he termed melancholia. Freud hypothesized that with melancholia it is the loss of a loved one (object), rather than the success or failure of drive gratification, that impacts the psyche (Melano-Flanagan, 2011). Indeed, in explaining this process, Freud eloquently stated, “Thus the shadow of the object fell upon the ego” (Freud, 1917, p. 119). For the first time in psychoanalytical thought, something exterior to the self (the lost object) is understood as becoming internalized and changing—in the case of melancholia, disturbing—the relationship to

the self (Hinshelwood, 1994, p. 19). We also see the roots of object relations theory in Freud's conceptualizations of libido and cathexis. Libido, or mental energy, is "...directed *towards* an object," and the object of the libidinal interest becomes "...cathected with the libido" (Hinshelwood, 1994, p. 14-15). The cathected object resides in the psyche of the subject. It is a component of a dynamic matrix of fantasy relationships that constitute what post-Freudian object relations theorists come to call the internalized world of object relations. Melanie Klein (1882-1960) and W.R.D. Fairbairn (1889-1964) are considered to be the co-founders of object relations theory, and D.W. Winnicott (1896-1971) is foundational contributor.

The contributions of Melanie Klein. Although she would come to break with the (Anna) Freudians, Klein saw her work as deriving from and extending Freud's (Mitchell & Black, 1995). Klein's work was revolutionary for its accomplishment in conceptualizing the psychic experience of infants, extending clinical analysis to young children, and reconceiving the adult psyche as "...always unstable, fluid, [and] constantly fending off psychotic anxieties" (Mitchell & Black, 1995, p.87). Klein expanded Freud's idea of libidinally cathected objects to a *fusion* of impulses with objects (Mitchell & Black, 1995). In the Kleinian model, fundamental impulses/objects are either perceived as libidinal (i.e., good/loved/loving) or as aggressive (i.e., bad/hating/destructive). For Klein, the principal problem humans struggle with throughout their lives is the "...management and containment of aggression," which is experienced as unbearably dangerous (Mitchell & Black, 1995, p.94).

Klein used the term projection to describe the psychic mechanism used to phantasize that an object has feelings that are in actuality one's own; alternatively, the term introjection describes the phantasy by which one takes into oneself something perceived in the outside world (Hinshelwood, 1994). These fundamental psychic mechanisms (projection and introjection) are

the basis for understanding Klein's three protective mechanisms: splitting, projective identification, and manic defense (Evans, 2013a). Splitting is the act of psychically separating bad or endangering aspects of an object from its good or loving aspects—rendering objects in an easier- to-manage state of either all good or all bad (Evans, 2013a, p. 3). Projective identification is the act of splitting off a part of the self one finds dangerous and anxiety producing, projecting it on to another object (person), and attempting to control this unacceptable part of the self by maintaining a connection to it through the projected upon other (Evans, 2013a, p. 3). Klein's manic defense is the act of denying dependence on the good object, whereby the object is devalued and held in contempt as something the self does not need (Mitchell & Black, 1995, p. 96). For Klein, the constellations of object relationships, phantasies, anxieties, and defenses are alternatively managed through two transitory psychological positions: the paranoid-schizoid position and the depressive position (Evans, 2013a, p. 4). In the paranoid-schizoid position, experience is organized by annihilation and persecutory anxieties, propensity for splitting whole objects into all-good or all-bad part objects, projective identification, and the manic defense of devaluation or idealization (Evans, 2013a, p. 4). In the more mature and integrated depressive position, experience is organized around whole objects that can contain both good and bad aspects, the capacity for ambivalence, an ability to recognize the subjectivity of another person, and a pull toward repair when damage is done (Evans, 2013a, p. 4). Unlike the Freudian stage model of stable psychological achievement, Klein believed we temporarily inhabit these psychological positions (paranoid-schizoid and depressive), which alternate under stress throughout the lifespan (Mitchell & Black, 1995).

The contributions of W.R.D. Fairbairn. Fairbairn was inspired by the work of Melanie Klein. However, Fairbairn developed his own brand of object relations through his work with

schizoid patients in Edinburgh, Scotland, isolated from the Kleinian and (Anna) Freudian debates raging in London in the 1930s and 40s (Mitchell & Black, 1995). Fairbairn wrestled with the problematic issue of Freudian repetition compulsion (i.e., "...the systematic regeneration of distress...painful patterns of behavior") (Mitchell & Black, 1995, p. 114). After all, according to Freud's pleasure principle and malleable libido, humans should seek pleasure through a variety of objects or experiences (Mitchell & Black, 1995). Yet with repetition compulsion, clients are observed to seek out and repeat painful relationships and experiences (Mitchell & Black, 1995). Freud understood sexual masochism as repetition compulsion (Mitchell & Black, 1995).

Fairbairn came to dismiss Freud's pleasure principle hypothesis, instead conceiving of the libido as not pleasure-seeking, but as object-seeking (Mitchell & Black, 1995). For Fairbairn, "...the fundamental motivational push in human experience is not gratification and tension reduction, using others as a means towards that end [Freudian drive theory], but connections with others as an end in itself" (Mitchell & Black, 1995, p. 115). Thus Fairbairnian theory is considered pure object relations. Fairbairn hypothesized that the quality of connection with early objects (i.e., parents; caretakers) determines the quality of connection repeatedly sought throughout the lifespan (Mitchell & Black, 1995, p. 114-116). If early caretakers are not loving, not recognizing of the child, or are otherwise traumatic, this is the quality of objects a client will seek in relationship (Mitchell & Black, 1995). Contemporary object relationists likely draw their narrative of a trauma etiology for BDSM from Fairbairn's "...internalization of the bad object..." and pull towards "...repetition of traumatic events..." (Evans, 2013b, p. 6).

The contributions of D.W. Winnicott. Winnicott began his career as a pediatrician, and, as a psychoanalyst, he retained his interest in the psychodynamics of children (Mitchell & Black, 1995). Supervised by Melanie Klein herself, Winnicott branched out and developed his

own unique and influential theory of object relations (Mitchell & Black, 1995). Winnicott was fundamentally concerned with "...the quality of subjective experience: the sense of inner reality, the infusion of life with a feeling of personal meaning, the image of oneself as a distinct and creative center of one's own experience" (Mitchell & Black, 1995, p.124). His theory of object relations sought to understand the psychic mechanisms through which an individual develops—or fails to develop—a healthy subjective core (Mitchell & Black, 1995). To chart this development, Winnicott explored how the subjective (internal) interfaces with the objective (external), with special attention to the transitional space between these two polarities of experience organization (Winnicott, 1985).

Like Klein and Fairbairn, the mother-infant dyad was the site of critical early object relating for Winnicott. However, he firmly believed that patients were "...powerfully self-restorative" and could resume developmental steps towards "...authentic personal subjectivity" later in life should early experiences impinge upon the infant (Mitchell & Black, 1995, p.133-134). In Winnicottian object relations, impingements occur when the infant is prematurely forced to focus on the external world (Mitchell & Black, 1995). Winnicott's developmental model holds that the infant begins in an autistic state of subjective omnipotence (Winnicott, 1985). This subjective omnipotence is the critical core around which a true self personality develops. The mother, in a state of primary maternal preoccupation, supports this subjective omnipotence by anticipating the infant's needs and providing them intuitively—not impinging by withholding or by tending to her own subjective needs (Winnicott, 1985). In this way, the good-enough mother creates a holding environment for the child (Winnicott, 1985). Over time, her responsiveness to the infant slowly wanes, which gives the child tolerable opportunities to develop a sense of the objective outside world populated by others who have their own

subjectivities (Winnicott, 1985). Winnicott called this shift from organizing experience totally subjectively to organizing experience in dialectical relation to an objective reality the “transitional experience” (Mitchell & Black, 1995, p. 128).

Winnicott noted that children make use of a transitional object during the transitional experience. This transitional object (often a teddy bear or blanket in Western cultures) is ambiguous by nature (Mitchell & Black, 1995). That is, it is not created by the child in a state of subjective omnipotence, nor is it wholly found by the child in the outside, objective world (Mitchell & Black, 1995). Instead, the transitional object importantly extends the child’s self “...between the mother...created in subjective experience and the mother that the child finds operating on her own behalf in the objective world” (Mitchell & Black, 1995, p. 128). The transitional experience sets up mature object relations where accommodation and collaboration with others is necessary to fulfill one’s desires (Mitchell & Black, 1995). While Winnicott did not write specifically on BDSM, his conceptualization of mutual object usage in adult love may be applicable to the phenomenon. Mitchell and Black (1995) summarize Winnicott’s vision of adult love as follows:

Adult love...entails periodic mutual object usage, in which each partner can surrender to the rhythms and intensity of his or her own desire without having to worry about the survivability of the other. It is a firm and solid sense of the durability of the other that makes a full and intense connection with one’s own passions possible (129).

Lastly, in *Playing and Reality* (1991), Winnicott discussed another type of transitional space: play. Extending his work on transitional phenomena, Winnicott theorized that play also sits between subjective and objective and follows early developmental lines. In earliest infancy,

baby and object are merged, and no play is possible. Our first play is on the “...playground [of]...space between the mother and the baby,” with mother available and waiting to be found by the baby (Winnicott, 1991, p. 47). Babies then learn to play alone in the presence of another, typically the mother near by, available, but not interrupting. Finally, the baby becomes able to “...enjoy an overlap of two play areas;” his play and his mother’s introduction of her own play (Winnicott, 1991, p. 47). Winnicott theorized that these steps paved the way for playing together in later relationships (Winnicott, 1991).

For Winnicott, “playing is doing” (rather than simply thinking or wishing), and he acknowledged that both children and adults play (Winnicott, 1991, p. 41). Winnicott stated, “...play is immensely exciting” (Winnicott, 1991, p. 47). Not only did *play* and *playing* become well-known Winnicottian analytic concepts, but his understanding of the function of play may hold promise for future adaptive object relations readings of BDSM.

Object Relations Theory and BDSM Research

The vast majority of psychodynamic writing on BDSM found in my literature search has been from an object relations perspective, making the theory a relevant selection for exploration in this thesis. Indeed, Claus and Lidberg (2003) report that “...psychotherapists today tend to stress the object relations basis of sadomasochism” (p. 153). These writings are largely contemporary; although the historical sexological and analytical contributions of Krafft-Ebing, Ellis, and Freud were discussed in Chapter Two. It is important to note that these historical writings have helped to create a pathological framework that has shaped psychoanalytic/object relations theorizing about BDSM. However, the theory can be used non-pathologically to understand the phenomenon, as shown by Bader (1993) and Weille (2002). New York-based psychoanalysts Otto Kernberg and Jessica Benjamin are the two most prolific contemporary

object relationists to discuss BDSM—or sadomasochism as they call it. This section will focus on Kernberg and Benjamin’s extensive writings on the phenomenon, which have constituted two canonical books on the topic: Kernberg (1995) *Love Relations: Normality and Pathology* and Benjamin (1988) *The Bonds of Love: Psychoanalysis, Feminism, and the Problem of Domination*.

Perversion and Pathology: Kernberg on Sadism and Masochism. Otto F. Kernberg (b. 1928) is an Austrian-born psychoanalyst and professor of psychiatry at Weill Cornell Medical College in New York City. One of the most well-known and respected object relations theorists of our time, Kernberg has written extensively on sadomasochism and the limitations on the capacity for mature love relations (1988, 1991, 1995, 2011). His theorizing on sadomasochism spans a continuum from what he considers relatively benign erotic behaviors to severe, aggressive character pathology (1988). To begin to understand Kernberg’s theorizing on the phenomenon, it is important to note that he sees sadism as a derivative of masochism (1998). Unlike the compound acronym BDSM where each letter represents a distinct activity or role, Kernberg’s masochism is the overarching principle in both masochistic and sadistic acts and personalities. At times, he uses the terms masochism and sadomasochism interchangeably (1991), and I will do so in discussing his conceptualizations. Citing Laplace & Pontalis (1973), Kernberg defines masochism as “...sexual perversion in which satisfaction is tied to the suffering or humiliation undergone by the subject” (1988, p. 1005). He further specifies sadomasochism as a “perversion...characterized by deriving pleasure from inflicting or receiving pain as an obligatory precondition for achieving sexual gratification and orgasm” (Kernberg, 1991, p.334). For Kernberg, masochism is the master perversion. He sees it as an “essential component” of all other paraphillias (e.g., “voyeurism, exhibitionism, fetishism, bestiality,

homosexuality, [and] transvestism”) (1991, p. 340). Kernberg (1995, 2011) makes clear that, while sadomasochism can be mild and present in neurotically organized persons/couplings, it remains a pathological perversion and falls short of his ideal “mature sexual love” (2011, p. 1501). Kernberg discloses that the “large majority” of cases he has analyzed regarding “love relations” have been heterosexual patients, and is careful to note this limitation (2011, p. 1501).

Kernberg theorizes that there is a necessary sadomasochistic element inherent in all—even healthy—sexuality, and that its purpose is to integrate aggressive impulses into libidinal features in the service of love (1991). When the integration of aggression and libido is successful, whole object relation is possible in erotic partnerships. Sexual excitement overcomes the splitting of love and hate (Kernberg, 1991). When this integration is not successful, patients develop sadomasochistic tendencies in varying degrees. For Kernberg, sadomasochism is a perversion of the triumph of aggressive forces over libidinal forces (1988, 1991, 1995).

Kernberg (1998) writes about masochism as both a characterological issue (i.e., masochistic character pathology) and as a sexual perversion (i.e., masochistic sexual behavior and perversion). Both of these phenomena function along a normal-to-pathological continuum, and they intersect at various levels. In delineating masochistic character pathology, Kernberg (1988) describes four levels representing increasingly disturbed object relations: 1) normal masochism, 2) depressive-masochistic personality disorder, 3) sadomasochistic personality disorder, and 4) primitive self-destructive and self-mutilation. These levels roughly approximate neurotic, borderline, and psychotic personality organizations, with “normal masochism” simply referring to the “moral masochism” that is the unavoidable side effect of superego functioning (Kernberg, 1988). Masochistic sexual behavior and perversion are described in three “...levels of severity...that parallel the levels of severity of masochistic character pathology” (Kernberg,

1988, 1995). These levels are: 1) masochistic perversion at a neurotic level of personality organization, 2) sexual masochism with severely self-destructive and other regressive features, and 3) extreme forms of self-mutilation and self-sacrifice (Kernberg, 1988, 1995).

Kernberg's (1988) category of "...masochistic perversion at a neurotic level of personality organization" is perhaps the best fit with the BDSM phenomenon addressed in this thesis (p. 1017). According to Kernberg (1988), "...sexual masochism at this level typically takes the form of a 'scenario' enacted in the context of an object relation that is experienced as safe" (p. 1017). The scenario has an "as-if" or "play-acting quality" (Kernberg, 1988, p. 1017). Kernberg does not specifically discuss consent between partners, but it is implied at this level of functioning. Psychologically, object relations are intact. However, strong Oedipal conflicts—such as "...the need to deny castration anxiety" and "...the need to assuage a cruel superego"—are unconsciously enacted to reach sexual gratification (Kernberg, 1988, p. 1017). With masochistic perversion, sexual gratification retains "incestuous meanings" (Kernberg, 1988, p. 1017). Kernberg (1988) emphasizes the "...repetitive and strict enactment" of these scenarios necessary for those with masochistic perversion to achieve orgasm (p. 1018). Although, Sandnabba et al. (2002) found that the majority of their BDSM sample did not restrict their sexual activity to BDSM and presented flexibility in sexual expression.

In summary, Kernberg asserts that the categories of sadomasochism and mature love are mutually exclusive. He argues that sadomasochists present psychological defects that run the diagnostic spectrum from sexual perversion to character pathology, or, in the most extreme cases, represent a psychotic condition. Given the contrary findings of empirical studies on BDSM practitioners summarized in Chapter Two, I would submit that much of what Kernberg describes in his discussion of sadomasochism falls beyond the phenomenon of BDSM as defined

in previous chapters—both in the level of psychological disturbance present and in the preponderance of unrestrained self- and other-harming behavior. I hypothesize that Kernberg’s theorizing on the topic (i.e., the inclusion of these severe pathologies and acts under the rubric of sadomasochism) reflects and reproduces cultural prejudice against BDSM. This will be discussed further in Chapter Five.

Domination and Violence: Benjamin on Sadomasochism. Jessica Benjamin (b. 1946) is a leading feminist psychoanalyst and professor of clinical psychology at New York University’s Postdoctoral Program in Psychotherapy and Psychoanalysis. Benjamin was active in second-wave feminist consciousness raising projects of the late 1970s and early 1980s, and she pays close attention to gender differences and politics in her analyses of intrapsychic phenomena. Her seminal work on sadomasochism draws on—and departs from—the philosophy of Hegel and the psychology of Freud, integrates psychological and social theory, and uses object relations to explain the mechanisms at play in erotic master-slave relationships (Benjamin, 1980). Benjamin’s theorizing on sadomasochism is, in essence, an exploration of impaired self/other differentiation. Whereas Kernberg understands sadomasochism as a defect in aggression sublimation which impairs whole object relations along the continuum of character pathology, Benjamin conceptualizes sadomasochism as a faulty striving for independence that fails to sustain the tension inherent in “the dialectic of control” between two people or subjects (Benjamin, 1988, p. 53). She concentrates her analysis of sadomasochism on fantasy master-slave relationships, using the *Story of O* by Pauline Réage (1965) as her guide (Benjamin, 1980, 1988). Benjamin (1980) is explicit about the limitation of her sample: “My data is not drawn from studies of sadomasochistic practices, but from a single and powerful study of the erotic imagination, Pauline Réage’s the *Story of O*” (p. 146). While she notes “...the slave of love is

not always a woman or only a heterosexual” (stating that erotic domination “...permeates all sexual imagery in our culture”), Benjamin does not offer any exploration beyond this heteronormative permutation of the male-master/female-slave dynamic (Benjamin, 1980, p. 144).

Benjamin sees the origins of sadomasochism in the “...yearning for and the denial of mutual recognition” present in the pre-Oedipal interactions of the mother-infant dyad (Benjamin, 1980, p. 144). She also draws attention to the gender dynamics of the Oedipal conflict to explain the contrast in object relations mechanisms between males and females in the establishment of selfhood (Benjamin, 1980). That is, males repudiate and reject the mother to establish an independent “recognized” self, whereas females accept and emulate the mother to establish a dependent “recognizing” self (Benjamin, 1980, p. 159). Adult erotic or fantasy master-slave relationships like that described in the *Story of O* are pathologically extreme versions of the establishment of selfhood that maintains a (gendered) polarization of recognized/recognizing (Benjamin, 1980, p. 156). Citing Keller, Benjamin explains that this “...radical dichotomy between subject and object...denies the mutual recognition of subjects” necessary in healthy object relations (Keller as cited in Benjamin, 1980, p. 149). Benjamin sees the master-slave relationship as defensive splitting that ultimately denies true differentiation and full selfhood to both parties (Benjamin, 1980).

Benjamin (1988) conceptualizes sadomasochism as a poor solution to the paradoxical “dialectic of control;” that is, “...if I completely control the other, then the other ceases to exist, and if the other completely controls me, then I cease to exist” (p. 53). For Benjamin, “true independence means sustaining the essential tension of [the] contradictory impulses” of “asserting the self” and of “recognizing the other” (1988, p. 53). From their respective

existential and psychological perspectives, Hegel and Freud felt that this tension would naturally collapse into dominating-dominated relating if civilization did not restrict it (Benjamin, 1988, p. 53-54). In sadomasochistic relationships, Benjamin theorizes that the dialectic of control polarizes into recognized/recognizing, with the slave enjoying vicarious self recognition and mastery through the master's attention (Benjamin, 1980).

This polarization is acted out through the master's practice of erotic domination—with the consent of their slaves. Benjamin (1980, 1988) explains that consent of the dominated other is an important component of the master-slave relationship for two reasons. First, a slave's consent keeps the master from becoming dependent on her by allowing her a modicum of subjectivity—just enough to be under his command (Benjamin, 1980, p.157). Second, consent shows that the slave does in fact have a will; the master needs his slave to have a will of her own so that he may consume and negate it, which allows the master's own will to be recognized (Benjamin, 1980, p.157). In the *Story of O* (Réage, 1965), erotic domination takes many of the usual forms (e.g., whipping, caning, use of restraints, sexual servitude, etc.), but key in Benjamin's theorizing is that this domination is conducted through what she terms "rational violence" (Benjamin, 1980, 1988).

Rational violence is a much larger concept than beating or restraining. It refers to a particularly male way of psychologically differentiating that has pervaded our culture (Benjamin, 1980, p. 145). Benjamin (1980) asserts that rational violence represents a "Western rational world view" that "emphasizes difference over sameness, boundaries over fluidity....It conceives of polarity and opposition, rather than mutuality and interdependence, as the vehicles of growth" (Benjamin, 1980, p. 148). In sadomasochism, which Benjamin calls "...the most common form of erotic domination," the body of the slave or submissive is the site of physical boundary

violation (Benjamin, 1988, p. 55). Boundaries are vital in rational violence. Benjamin (1980) notes Winnicott's ideas about violence as the infant's attempt to place the (m)other outside the self's boundaries—an early differentiation impulse. For Benjamin (1980), Winnicott's theorizing on the destruction and survival of the object also “provide[s] a clue to the repetitive and exhausting nature of sadomasochism” (1980, p. 165). Benjamin's argument will be discussed further in Chapter Five.

Conclusion

In conclusion, object relations theory is an important component of the psychodynamic perspective on BDSM. However, authors who have written on the intersection of object relations and BDSM have framed the phenomenon pathologically, as Kernberg does in describing masochism as disturbed object relations, and as Benjamin does in calling sadomasochism a poor solution to the dialectic of control. In Chapter Four, queer theory and sex-positive feminism will be examined for their contributions to theorizing around BDSM. “[A] great deal of work exploring sadomasochistic energies has been done in gay and lesbian studies,...by pro-sex figures in the porn debates of the mid to late 1980s, [and] by feminists...” (Kucich, 1997, p.482). These theories and writers offer non-pathologizing conceptualizations of erotic power exchange, conceptualizations that could liberate psychoanalytic/object relations theories from the anti-SM rhetoric of pathology, perversion, and violence. In the following chapter, I will be discussing queer theory and sex-positive feminism and these theories' contributions to interpretations of BDSM.

CHAPTER IV

Sex-Positive Feminism and Queer Theory

Introduction

This chapter will provide a general overview of queer theory and sex-positive feminism. The genealogy of sexuality studies will be traced back to 19th century sexology and will be explored as a precursor to queer theory. The feminist sex wars of the 1980s will be reviewed to contextualize the position of pro-sex feminism regarding stigmatized erotic behaviors. As they contribute to theorizing around BDSM, foundational concepts of both queer theory and sex-positive feminism will be summarized. Finally, this chapter will highlight key ideas of philosopher Michel Foucault and anthropologist Gayle Rubin that problematize popular interpretations of sadomasochism and that lay the groundwork for non-pathologizing psychological conceptualizations of BDSM.

Overview of Queer Theory and Sex-Positive Feminism

1880s: Historical roots of sexuality studies and queer theory. As discussed in Chapter Two, the second half of 19th century was a pivotal historical moment in the Western etiology of sadomasochism. The birth of sexology in the 1880s ushered in a new system of identification and classification of sexual behaviors, which marked a shift in ideology around human sexuality (Rubin, 2011a). Krafft-Ebing coined the terms sadism and masochism and categorized them "...under the broad heading of 'General Pathology' in his classic volume *Psychopathia Sexualis* (1886)" (Field, 2011, p. 12). During the same time period, sexologists

Magnus Hirschfeld and Havelock Ellis offered a less pathologizing stance that strove to “...normalize and destigmatize...sexual variations” (Rubin, 2011b, p. 294). While Ellis’ and Hirschfeld’s works were more benign, they none-the-less functioned within the same emerging medicalized scheme of identification, classification, and valuation. Krafft-Ebing, Ellis, and Hirschfeld were among the first researchers to “...look at sexual diversity as their *main object of study*” [italics mine] (Rubin, 2011b [1994], p. 294). As a result, their research has been identified as a precursor to present sexuality studies (Rubin, 2011b).

Not only do the 1880s mark the beginning of empirical studies of sexuality, they also marked a fundamental shift in how sexuality was understood (Foucault, 1990). Sex moved from something that people did to something that people *are*—creating a new identity category (Foucault, 1990). As Foucault describes in *The History of Sexuality, Volume 1: An Introduction* (first published in English in 1978), before this time sexual behavior existed as acts rather independently from the subjects who practiced them. For example, ancient texts speak of sodomy as a temporary deviation, but the ideology of the 19th century merged subjects with their sexual behavior in a new way that made possible the modern conceptualization of a homosexual (Foucault, 1990). Rubin calls this “erotic speciation” (Rubin, 2011a, p. 156). Sexology “...gave rise to a new sexual system characterized by distinct types of sexual persons, populations, stratification, and political struggle” (Rubin, 2011a, p. 156). Under this sexual system, a cadre of medical, psychological, and legal professionals emerged to diagnose, treat, and police deviant sexualities (Rubin, 2011a).

Nineteenth century sexology accomplished three tasks key to understanding today’s popular narratives of sexuality: 1) It studied and noted a wide range of sexual variation, 2) it pathologized certain sexualities, and 3) it solidified the rhetoric of “sexual essentialism – the idea

that sex is a natural force that exists prior to social life” (Rubin, 2011a, p. 146). The Western ideology of sexual essentialism explains sex as “...unchanging, asocial, and transhistorical...” (Rubin, 2011a, p. 146). A century of “...medicine, psychiatry and psychology, [and] the academic study of sex has reproduced [sexual] essentialism” (Rubin, 2011a). The ideology of sexual essentialism—which still holds great sway in Western thought and law—would not be formidably challenged until Foucault’s (1978) *History of Sexuality* and Rubin’s *Thinking Sex* (first published in 1984).

1980s: The feminist sex wars and a radical theory of sex. Two schools of feminist thought clashed fiercely over issues of sexuality in the late 1970s into the 1980s in what has become known as the Feminist Sex Wars (Rubin, 2011c; Wright, 2006). This conflict directly related to differences of political opinion regarding pornography, and porn that depicted BDSM was specifically and particularly singled out (Rubin, 2011c; Wright, 2006). Although in agreement about the profound need to ameliorate the oppression of women, the feminist movement at the time fractured into anti-pornography and sex-positive camps. Diana Russell, Catharine MacKinnon, and Andrea Dworkin were, and continue to be, influential anti-pornography voices (Rubin, 2011c). Similarly, the National Organization for Women (NOW) passed a resolution in 1980 stating that pornography and sadomasochism, among other issues, violated feminist principles (Wright, 2006). These feminists believed that pornography has a causal impact on violence against women and that sadomasochism reproduced male dominance. Ideologically, anti-porn feminists “...situate[ed] pornography as the major engine of female subordination and the single most pernicious institution of male supremacy” (Rubin, 2011c, p. 22). In an astute public relations tactic, vocal anti-porn feminists over-represented sadomasochistic pornography in their arguments, reducing all pornography to sadomasochism,

and sadomasochism to the “...domination and torture...” of women (Russell as cited in Rubin, 2011c, p.29). Anti-porn feminism also questioned the ability of women to consent to BDSM acts, perceived of BDSM as intrinsically violent, and implied that women who enjoy BDSM must have something wrong with them—thereby calling into question their mental capacity to give consent (Russell as cited in Rubin, 2011c, p.29). Elucidating the landscape of power and politics, Rubin (2011a) theorizes consent as a privilege “...enjoyed only by those who engage in the highest-status sexual behavior” (p. 179). The forthcoming section on Rubin’s work and Figures I and II present Rubin’s conceptualization of privileged and marginalized sexualities.

On the other side of the feminist sex wars of the 1980s, sex-positive feminism did not see pornography as causal to violence against women—rather they understood pornography to be one of many byproducts of misogynist culture (Rubin, 2011a). This feminism, which was largely led by lesbians whose sexual practices were non-conforming (i.e., BDSM; butch/femme), defended “...sexual pleasure and erotic justice...” (Rubin, 2011a, p. 173). Sex-positive feminism conceives of *sexual liberation*—for both women and men—as a valid and important feminist goal (Rubin, 2011a, italics mine).

Foucault: Repressive hypothesis, *scientia sexualis*, and the deployment of sexuality.

Michel Foucault (1926 – 1984) was a French philosopher and professor at various universities in Europe and the US. His work ushered in the field of queer theory. Foucault made “...positive comments on practice of S/M [sadomasochism] as a strategic game that creates pleasure rather than a form of domination...” (Spargo, 1999, p. 65). In addition to the foundational Foucauldian concepts of discourse and power, three ideas from the first volume of *The History of Sexuality, Volume 1* (1978) are germane to understanding—and rethinking—psychoanalytic concepts of

BDSM. These are: 1) the repressive hypothesis, 2) *scientia sexualis*, and 3) the deployment of sexuality.

Foucault debunks the widely accepted repressive hypothesis, which assumes that the West has been functioning under the reign of sexual taboos, sexual “censorship,” and “... “modern prudishness...” since the seventeenth century (Foucault, 1990, p. 17). Instead, Foucault counters this argument and asserts that, beginning in the 17th century and exploding in the 19th century, there has been a “...multiplication of discourses concerning sex” (Foucault, 1990, p. 18). These discourses were not repressive, but productive. They produced several mechanisms for the study of and control over sexuality (including psychoanalysis). Foucault saw psychiatry of the 19th century as a site of discourse production on sex:

Psychiatry...set out to discover the etiology of mental illnesses, focusing its gaze first on ‘excess,’ then on onanism [i.e., masturbation], then on frustration, then ‘frauds against procreation,’ but especially when it annexed the whole of the sexual perversions as its own province...(Foucault, 1990, p. 30).

With the Enlightenment, science became the privileged avenue for accessing “truth,” leading to a culture where we must be scientific to know (Foucault, 1990, p. 56). The emergence and dominance of *scientia sexualis* [science of sexuality] is a way of discovering and producing knowledge in which Foucault asserts psychoanalysis plays a major role (Spargo, 1999). Modern, Western *scientia sexualis* stands in juxtaposition with another, older, or non-Western type of knowledge—*ars erotica* [erotic art] (Foucault, 1990). While *ars erotica* is about sensuality and the knowledge of pleasure, passed from master to student (think *Kama Sutra* or apprenticeship to a Leather Daddy), *scientia sexualis* is about extracting secret, shameful sexual confessions from client to analyst to determine the so-called truth (Foucault, 1990). This activity is not politically

neutral: for Foucault, the *scientia sexualis* operation of psychoanalysis demands us "...to produce a knowledge about our sexuality...[that] contributes to the maintenance of specific power relations" (Spargo, 1999, p. 14).

For Foucault, one of the most significant means of exerting power and control over the last three centuries has been the *deployment of sexuality* (Foucault, 1990, p. 106). The deployment of sexuality is an expansive and multifaceted Foucauldian concept. Roughly, it refers to a structure that delineates what type of sensations are permitted, and it is built upon an older structure, the *deployment of alliance* (i.e., kinship and type of relations permitted) (Foucault, 1990, p. 106-114). For the bourgeois of the 19th century, the deployment of sexuality was concerned with the health of family lineages (as sexual depravity was seen to be inherited) (Foucault, 1990). The deployment of sexuality was later pushed onto the working class, but as a mean of social control (Foucault, 1990). Foucault believed that as the deployment of sexuality has assumed a dominant role in society, it has led to people becoming overly identified and determined by their sexuality (Foucault, 1990). The deployment of sexuality leads us to mistakenly believe that personal liberation is contingent upon a healthy sexuality *as defined by social norms* (Foucault, 1990). Instead, Foucault asserts that to break the power of the deployment of sexuality, we should focus on bodily sensations and pleasures without striving to satisfy sexuality and its rules (Foucault, 1990).

Key concepts: Discourse, power, and politics. Foundational ideas from queer theory and sex-positive feminism highlight how particular sexual behaviors came to be understood in a pathological framework, and they provide the tools for recasting stigmatized sexualities in the light of benign human variation. The first of these ideas is Foucault's *discourse*:

Discourse, for Foucault , refers to “...a historically situated material practice that produces power relations. Discourses exist within and support institutions and social groups, and are bound up with specific knowledge. So the discourse of medicine produces particular practices, knowledges, and power relations”

(Spargo, 1999, p. 73).

Late 19th century sexology is “...generally attributed with the *discursive creation* of the sexual categories and sexual identities which dominate present-day political, popular, and academic discussions of sexuality” (Katz as cited in Schmidt & Voss, 2000, p. 8, italics mine). The context of discourse reveals the produced, socially constructed nature of knowledge (e.g., popular ideas of sexual normativity) and counters the ideology of biologically determined sexual essentialism (Foucault, 1990).

Foucault (1975; 1978) theorized extensively on power. He situated power relationally (between people and among groups), felt power was exercised through the social body rather than resting solely with governments, and believed language was a key medium for the expression of power (i.e., Foucauldian discourse analysis). For Foucault, power is not a repressive force, but a productive one. That is, power produces certain types of knowledge. It is very important to recognize the produced—and productive—nature of knowledge when examining psychological conceptualization of BDSM. For example, the prevailing pathological stereotypes about BDSM can be read as being produced by earlier sexological narratives, and this supposed knowledge about BDSM has generated statutes that police sadomasochistic behaviors today (e.g., “consent is not a defense to assault” statutes) (Wright, 2006, p. 229).

Rubin (2011a) brought together Foucauldian thought on discourse and power and added her own deep analysis of the politics of sexuality. Certainly the feminist porn wars embodied

political concerns around—and political use of—sexuality (Wright, 2006; Love, 2011; Rubin, 2011c). According to Rubin, anti-porn feminists used sadomasochism as a political tool to organize their base, to win favor with broader publics who were structurally predisposed to finding sadomasochism repellent, and to demonize and attempt to drive out sex-positive feminists from the women’s movement (Rubin, 2011c). The gay liberation Comstock and Stonewall riots of the late 1960s and continued LGBT equality struggles also highlight the political salience of sex. In this political landscape, Rubin saw that “...sex is always political,” and that “sex is a vector of oppression” (2011a, p. 138 & p. 164).

Rubin: A Political Analysis of Sexuality. Gayle S. Rubin (b. 1949) is an American cultural anthropologist and professor of Anthropology and Women’s Studies at the University of Michigan at Ann Arbor. She is a foundational theorist of sexuality and gender politics, and a well-known advocate for sexual freedom. Because of the “...singular significance...” of her work, some have credited Rubin with founding the field of sexuality studies (Love, 2011, p. 1). Rubin was also a key player in the feminist sex wars and a frequent target of anti-porn feminists. Her doctoral work was an ethnographic study of gay leather men in San Francisco spanning 1960 to 1990 (Rubin, 1994). Rubin’s theorizing contextualizes sex historically and politically. She delineates a range of sexual behaviors, locating them along a continuum of privilege (e.g., psychological, social, legal privilege).

In “Thinking Sex” (originally published in 1984), Rubin (2011a) describes a number of ideological formations about sex “...so pervasive in Western culture that they are rarely questioned” (p. 146). For Rubin these six axioms explain conceptual barriers to the formation of a radical politics of sexuality. They also explain how we have come to have the notion of a “...single ideal sexuality,” which, “for psychology,...is mature [non-BDSM] heterosexuality” (p.

154). These assumptions are: 1) sexual essentialism, 2) sex negativity, 3) the fallacy of misplaced scale, 4) the hierarchical valuation of sex acts, 5) the domino theory of sexual peril, and 6) the lack of a concept of benign sexual variation (Rubin, 2011a).

Sexual essentialism is the pervasive belief that sex is “...eternally unchanging, asocial, and transhistorical” (Rubin, 2011a, p. 146). Sexual essentialism tells us that sex: 1) is solely the province of biology, 2) has remained static throughout history, and 3) denies any element of social construction. Largely influenced by religion, *sex negativity* is the idea that sex is “...inherently sinful”—“a dangerous, destructive, negative force” (Rubin, 2011a, p. 148). Under the regime of sex negativity, all erotic behavior is bad unless it is exempted by “...marriage, reproduction, and love” (Rubin, 2011a, p. 148). The *fallacy of misplaced scale* refers to the inordinately harsh and outsized penalties that are accorded to so-called sex crimes (e.g., sodomy laws in the U.S. prior to *Lawrence v. Texas* carried twenty-year prison sentences) (Rubin, 2011a, p. 149). The *hierarchical valuation of sex acts* explains the Western ordering of sexual behavior with “...marital, reproductive heterosexuals...” at the top of the hierarchy and “...despised sexual castes...” such as sadomasochists at the bottom (Rubin, 2011a, p. 149). Rubin points out that “...as sexual behaviors fall lower on the scale, the individual who practice them are subjected to a presumption of mental illness...” among other sanctions (Rubin, 2011a, p.149). The *domino theory of sexual peril* refers to the belief and fear that if the line between acceptable and unacceptable forms of sex is crossed in the least, sexual chaos will ensue (Rubin, 2011a, p. 151). Finally, Rubin explains that the development of a “...pluralistic sexual ethics...” is hindered by the *lack of a concept of benign sexual variation* (Rubin, 2011a, p. 154). The following illustrations from “Thinking Sex” provide a visual representation of the sex hierarchy formed and reproduced through the above ideological formations:

Figure I.
The Sex Hierarchy: The Charmed Circle vs. Outer Limits (Rubin, 1984)

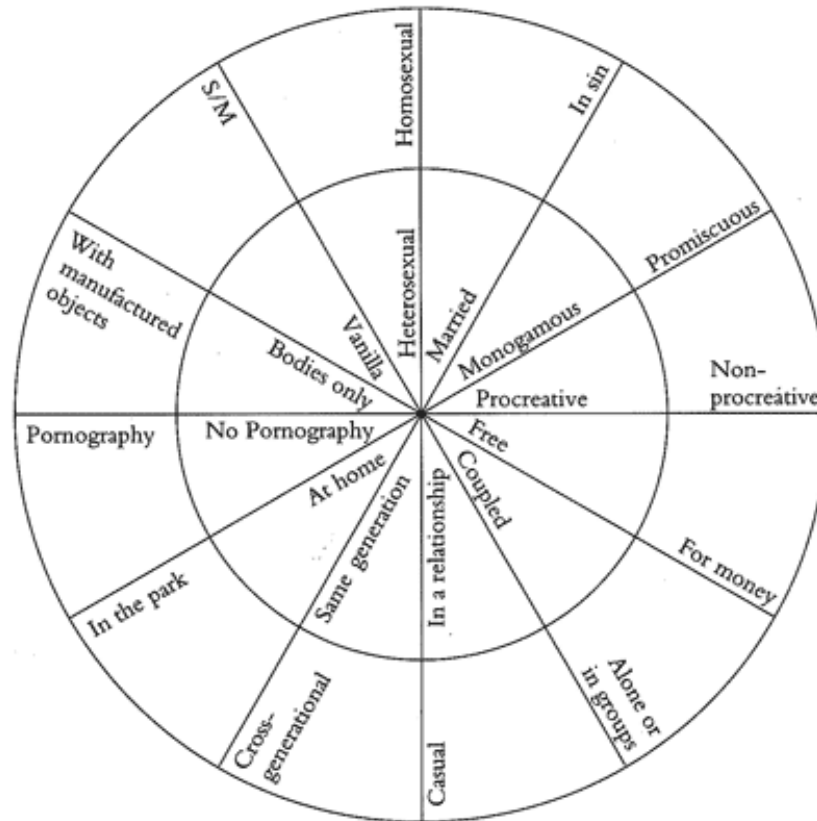


Figure II.
The Sex Hierarchy: The Struggle Over Where to Draw the Line (Rubin, 1984)

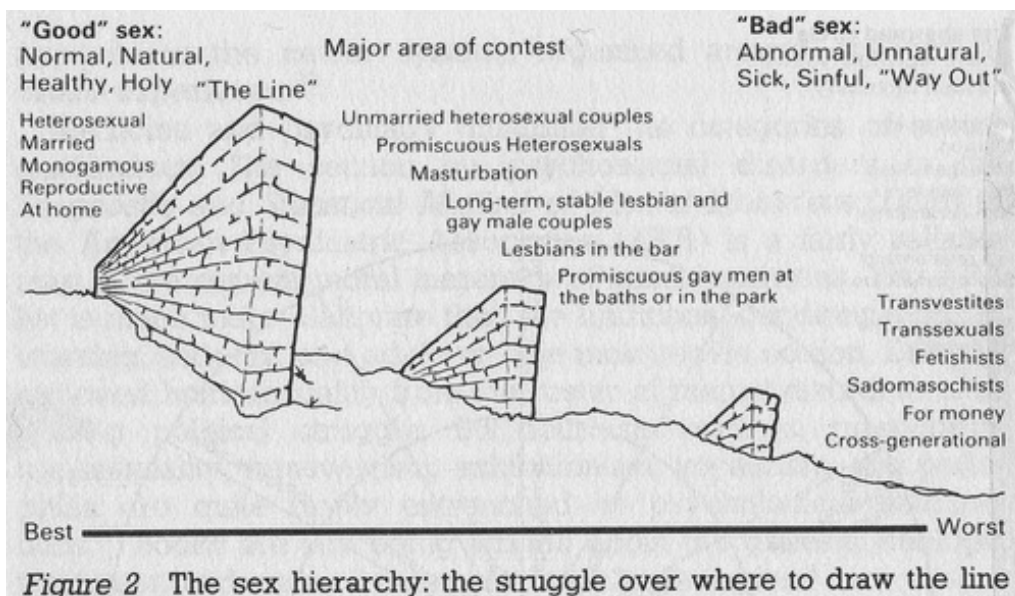


Figure 2 The sex hierarchy: the struggle over where to draw the line

Rubin sees modern psychology and psychiatry as "...multipl[ying] the categories of sexual misconduct" (Rubin, 2011a, p. 150). The inclusion of fetishism, sadism, and masochism in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) solidifies minority sexual behaviors as "...psychological malfunctions," as behaviors that need to be treated and cured (Rubin, 2011a, p. 150).

Psychiatric condemnation of sexual behaviors invokes concepts of mental and emotional inferiority.... Low-status sex practices are vilified as mental diseases or symptoms of defective personality integration. [P]sychological terms conflate difficulties of psychodynamic functioning with modes of erotic conduct. They equate sexual masochism with self-destructive personality patterns, sexual sadism with emotional aggression, and homoeroticism with immaturity (Rubin, 2011a, p. 150).

Yet through queer theory and sex-positive feminism, we can understand psychological conceptualizations of BDSM as products of history, ideological bias, and power and politics. Rubin calls for a radical theory of sexuality based on empirical sex research and sexology, rather than on prejudiced ideological formations. "A radical theory of sex must identify, describe, explain, and denounce erotic injustice and sexual oppression" (Rubin, 2011a, p. 145).

Conclusion

The academic work of studying and supporting sexual minority communities has come from the fields of sexuality studies, queer theory, and sex-positive feminism (Love, 2011). I would be remiss if I did not also credit LGBT and sexual freedom activism for pushing the academy forward (Wright, 2006; Love, 2011). By historically locating popular narratives about stigmatized sexualities, explaining the socially constructed nature of our knowledge about

sexuality, and revealing the power and political structure behind the pathologization of certain sexualities, these fields envision BDSM as a positive expression of desire. As such, these fields offer conceptual and methodological tools for rethinking object relations theorizing on sadomasochism.

In Chapter Five, I will critique traditional, pathologizing object relations theorizing on sadomasochism using the conceptual tools provided by queer theory and pro-sex feminism. I will present some newer psychoanalytical thought that sees BDSM as potentially adaptive; this is in line with recent empirical studies on BDSM practitioners that find them to be psychologically healthy. Lastly, I will review and endorse advocacy to remove fetishism, sexual sadism, and sexual masochism from the *Diagnostic and Statistical Manual of Mental Disorders* (DSM).

CHAPTER V

Discussion

Introduction

This chapter will provide a brief overview of object relations theory and of Kernberg's and Benjamin's conceptualizations of sadomasochism. The major points of Foucault's analysis of sexuality and Rubin's examination of minoritized sexual practices will also be reviewed. Using the critical practices of queer theory and sex-positive feminism, object relations' generally pathologizing stance towards BDSM will be analyzed and discussed. An overview of newer empirical studies on BDSM and more recent psychoanalytic writing on sadomasochism will be provided and reviewed. The strengths and weaknesses of this thesis's methodology will be addressed. Lastly, Chapter Five will explore implications of this paper's findings for social work practice, policy, and research.

Overview of Object Relations, Queer Theory, and Sex-Positive Feminism

Object relations theory. As discussed in Chapter Three, object relations theory fits within the psychodynamic school of thought. Object relations theory holds the "...internal mental representations of others..." the "...internal images of [one's] self..." and the dynamic relationships between these so-called "objects" comprise the fundamental elements of our intrapsychic structure (Melano-Flanagan, 2011, p. 119). Melanie Klein (1882 – 1960), W.R.D. Fairbairn (1889 – 1964), and D.W. Winnicott (1896 – 1971) are considered foundational object relations theorists (Mitchell & Black, 1995). For these theorists, object relations not only

provided a framework for our intrapsychic structure, but also helped identify the psychic mechanisms through which psychic development occurs and by which psychological defenses function to ward off anxieties. According to Claus and Lindberg (2003), "...psychotherapists today tend to stress the object relations basis of sadomasochism" (p. 153).

Otto Kernberg (b. 1928) and Jessica Benjamin (b. 1946) are contemporary object relationists who have influentially theorized about sadomasochism. For Kernberg (1991), sadomasochism represents the failure to integrate aggression and libido necessary for the whole object relations of mature love. Sadomasochism is the abnormal triumph of aggressive forces over libidinal forces, and it can run the spectrum of neurotic sexual perversion to more profound levels of character pathology and psychosis (Kernberg, 1988; 1991; 1995). Benjamin (1980; 1988) conceives of sadomasochism as impaired self/other differentiation. For Benjamin (1988), sadomasochism is a polarization of the "dialectic of control" between self and other (p. 53). Ideally, "...contradictory impulses [of] asserting the self [and of] recognizing the other" remain held in tension, but in sadomasochistic relating, these impulses polarize into recognized/recognizing roles (Benjamin, 1988, p. 53). Benjamin (1980) deems sadomasochism "erotic domination" and understands it as a form of Western, masculine "rational violence" (p. 1441). By rational violence, Benjamin (1980) is not speaking about physical violence *per se*, but of our masculinized cultural preference for "...difference over sameness, boundaries over fluidity..." (p. 148). Rational violence values "...polarity and opposition, rather than mutuality and interdependence, as the vehicles of growth" (Benjamin, 1980, p. 148). Sadomasochism fits within the schema of rational violence for Benjamin (Benjamin, 1980, 1988).

Queer and sex-positive feminist theory. I will now review the theories addressed in Chapter Four: queer theory and sex-positive feminism. According to Spargo (1999), "...queer

theory is not a singular or systematic conceptual or methodological framework, but a collection of intellectual engagements with the relations between sex, gender, and sexual desire” (p. 9). The critical practices and priorities of queer theory include—among others— “...analyses of the social and political power relations of sexuality; critiques of the sex-gender system; [and]...studies of sadomasochism and of transgressive desires” (Spargo, 1999, p. 9). The work of Michel Foucault (1926 – 1984) lay the groundwork for what we call queer theory today (Spargo, 1999). Looking to history, Foucault (1990) explored the genealogy of modern essentialist ideas about sexuality. He showed how sex and sexuality were situated historically, how these concepts were infused with constructed knowledge (so-called truths), and how sex functioned in the service of a power structure (Foucault, 1990). For Foucault, and in queer theorizing, knowledge is understood to be produced (loosely, socially constructed), but also to be productive, with certain knowledges or truths generating experiences (e.g., oppression), new categories (e.g., homosexuals), and even occupations (e.g., psychoanalysts) (Foucault, 1990). Knowledge is a vehicle for power (Foucault, 1975; 1978). Key Foucauldian concepts addressed in Chapter Four were: discourse; power; the repressive hypothesis; *scientia sexualis*; and the deployment of sexuality (1990).

Sex-positive feminism. Sex-positive feminism emerged out of the Feminist Porn Wars of the 1980s. On one side of the debate, antipornography feminists claimed that pornography generally—and porn depicting sadomasochistic acts in particular—had a causal relationship to violence against women in real life. While both sex-positive feminists and anti-porn feminists believed in ameliorating the oppression of women, anti-porn feminists (as the moniker implies) sought to do so by stopping the production and dissemination of pornography. Anti-porn feminists were also opposed to the inclusion of feminist sadomasochists and butch-femme

lesbians under the feminist tent (Rubin, 2011c). On the other side of the debate, sex-positive or pro-sex feminists did not see pornography as causal to violence against women. Instead, pro-sex feminists understood pornography, at its worst, to be one of many byproducts of our misogynist culture (Rubin, 2011a). Sexual liberation, for both men and women, was seen as an important feminist goal (Rubin, 2011a). Sex-positive feminism eschews the ideology of sex negativity, embraces sex as a potential site of women's pleasure and empowerment, and accepts BDSM as a benign sexual variant (Rubin, 2011a).

Gayle Rubin's (b. 1949) theorizing around sexuality is some of the richest intellectual work to come out of sex-positive feminism (Love, 2011). In "Thinking Sex: Notes for a Radical Theory of the Politics of Sexuality" (originally presented at the 1982 Barnard Sex Conference, and first published in 1984), Rubin offers a structural analysis of the hierarchies at play across a range of sexual practices. For Rubin, "sex is always political" and "sex is a vector of oppression" (2011a, p. 138 & p. 164). As covered in detail in Chapter Four, Rubin deconstructs pervasive Western ideologies about sex that function to stigmatize some forms of sexuality and venerate others (2011a). These ideologies are: 1) sexual essentialism, 2) sex negativity, 3) the fallacy of misplaced scale, 4) the hierarchical valuation of sex acts, 5) the domino theory of sexual peril, and 6) the lack of a concept of benign sexual variation (Rubin, 2011a).

Deconstructing Object Relations Theorizing on Sadomasochism: An Analysis

Queer theory and sex-positive feminism offer promising tools for examining object relations theorizing on sadomasochism. Because both queer theory and sex-positive feminism are used 1) to examine categorizations of sex, gender, and sexuality, and 2) to investigate how particular sexual categories or behaviors become intelligible as mentally healthy or mentally ill, I have selected these schools of thought to better understand the historical, power, and political

contexts of Kernberg and Benjamin's conceptualization of sadomasochism. In this analysis, I use a historical approach to map the genealogy of Kernberg and Benjamin's relevant theories. Employing Foucault's ideas of discourse and power, I deconstruct the meaning behind these theories and address their impact. Kernberg and Benjamin's conceptualizations are also analyzed through the lens of Rubin's concept of the sexual hierarchy. I address the issue of differential definition and divergent scope present in Kernberg's work, as well as the problematic selection of case materials in Benjamin's writing. Lastly, the issue of theorizing about sadomasochism without suitable contact with BDSM practitioners will also be considered.

A historical context: Kernberg. Queer theory stresses the importance of examining the historical context of knowledge and of acknowledging that knowledge is shaped or constructed by those in power at a given time. By this token, we must consider the historical roots of Otto Kernberg's theorizing on sadomasochism and trace them to when they first entered the psychological lexicon and were placed under the rubric of pathology. Kernberg is a psychiatrist and classical psychoanalyst (Mitchell & Black, 1995). As such, Foucault (1990) would locate the genealogy of Kernberg's thoughts on sex in the emergence of psychoanalysis in the late 1800s. As covered in Chapter Two, this time period marked a monumental shift in Western understanding of sex and sexuality. The 19th century saw the medicalization of sexuality, the categorization of sexual behaviors and personages, and the pathologizing of minority sexual practices. Beginning with Krafft-Ebing's description of sadists as "...vicious, perhaps even murderous degenerates," and masochists as "...pitiful, self-destructive neurotics," and continuing through sadomasochism's inclusion under various rubrics of pathology through editions of the DSM, the hundred-year-old discourse about sadomasochistic sexuality had long been negatively tainted when Kernberg undertook his investigation of the phenomenon (Robinson, 1973, p. 48).

With a Foucauldian discourse analysis, we see that this existing discourse predisposed the type of theorizing possible for Kernberg writing in the psychoanalytic tradition. Further, Foucault (1990) conceptualized the rise of psychiatry and psychoanalysis as developments of early sexological discourses. In rethinking the repressive hypothesis, Foucault (1990) asserted that the “...multiplication of discourses concerning sex...” were not repressive, but productive; they produced mechanisms for the study and control of sexuality (p. 18). Psychoanalysis was part of this emerging *scientia sexualis* that “...annexed the whole of the sexual perversions as its own province...” (Foucault, 1990, p. 30). Kernberg’s further pathologization of sadomasochism can be read as *scientia sexualis* operating “...to produce a knowledge about...sexuality [that] contributes to the maintenance of specific power relations” (Spargo, 1999, p.14). In this power structure, Kernberg places non-sadomasochistic heterosexual sexuality in a psychologically superior position to those who practice BDSM (i.e., “mature sexual love”) (Kernberg, 1995). It may be hypothesized that when one of the most influential psychoanalysts of our time names one type of sexuality as mentally healthy and another as mentally ill, it contributes to the maintenance of minoritized sexualities.

The power of discourse: Kernberg. Kernberg (1991) sees sadomasochism as a failure to achieve the whole object relations necessary for mature love. According to Kernberg (1988; 1991; 1995), sadomasochism is the abnormal triumph of aggressive forces over libidinal forces. I submit for consideration that much of what Kernberg describes in his discussion of sadomasochism falls beyond the phenomenon of BDSM as defined in previous chapters—both in the level of psychological disturbance present and in the preponderance of unrestrained self- and other-harming behavior. For example, what Kernberg (1988) calls sadism and masochism covers a huge expanse of behaviors, from neurotic sexual perversion (e.g. “play-acting”

scenarios in “safe” object relations) to profound levels of character pathology (e.g., a man masturbating on a roof throwing bricks at non-consenting women) to psychosis (e.g., a person tearing off pieces of their own flesh while in inpatient care). The majority of the case material Kernberg discusses as sadomasochism falls within the latter severe characterological issues, or along the lines of individuals seeking unavailable or hurtful objects (people) as romantic partners. This speaks to the dissonance between Kernberg’s use of the term sadomasochism and the definition or parameters of the term “BDSM” as it is used among its practitioners.

Furthermore, even though Kernberg himself writes that acts of “...masochistic perversion at a neurotic level of personality organization” occur within the realm of intact object relations, his view that sadomasochists wrestle with strong Oedipal conflicts, incestuous meanings, and repetitive and strict enactments qualifies his negative perception of BDSM (1988, p. 1017). I hypothesize that Kernberg’s theorizing on the topic (especially the inclusion of severe character pathologies and psychosis under the rubric of sadomasochism) reflects and reproduces cultural prejudice against BDSM. This idea of reflection/reproduction fits within Foucault’s (1990) ideas about the power of discourse and the productive quality of knowledge. By creating a body of work on “sadomasochism” that includes non-consensual other-harming acts and psychotic self-harming behaviors, Kernberg not only reflects the stigma surrounding BDSM, but also produces a knowledge base that further contributes to the *de facto* pathologizing of BDSM practitioners and to their ongoing social and legal marginalization.

Mirroring the sexual hierarchy: Kernberg. Kernberg’s writings on sadomasochism can also be evaluated through the ideologies that Gayle Rubin asserts underpin and reproduce the sexual hierarchy in our society. Described in detail in Chapter Four, these ideologies explain how we have come to have the notion of a “...single ideal sexuality,” which, “for

psychology,...is mature [non-BDSM] heterosexuality” (Rubin, 2011a, p. 154). Two of these axioms are particularly relevant in application to Kernberg’s framework on sexuality: 1) the lack of a concept of benign sexual variation, and 2) the hierarchical valuation of sex acts (Rubin, 2011a). Kernberg (1995) deploys the word “normal” and the phrase “normal love” throughout his book *Love Relations: Normality and Pathology*—the title of which implies a healthy/sick binary of sexuality. Variation from the sexual norm is not benign for Kernberg; instead, it is described as pathological or psychologically immature (1988, 1991, 1995, 2011). In this way, his theorizing places non-normative sexuality lower on the sexual hierarchy (Figure II).

Kernberg (1995) describes mature sexual love as an achievement in marital life that is tender (not aggressive), takes place in the context of a committed relationship, and includes empathy with partners’ gender identity (implying mixed-gender heterosexual pairing) (p. 32-47). This ideal also closely follows the categories depicted in Rubin’s “Charmed Circle” (Figure I). In summary, Kernberg’s writings on sadomasochism fit within the psychoanalytic history of categorizing these activities as pathological; they function to reproduce the discourse of non-normative sexualities as mentally ill; and they mirror the ideologies that support the sexual hierarchy.

A historical context: Benjamin. Psychoanalyst Jessica Benjamin’s theorizing on sadomasochism can also be located historically and politically. Her article “The Bonds of Love: Rational Violence and Erotic Domination” was published in 1980 in the journal *Feminist Studies*. (It is interesting to note that famed anti-porn feminist Andrea Dworkin published “Woman as Victim: Story of O” in 1974 in the same journal.) In addition to writing in the psychoanalytic tradition, which has its own stigmatizing discourse around minority sexualities, Benjamin’s theorizing was situated in the anti-porn variant of second-wave feminism. As the

1980 essay “Bonds of Love” grew into the book-length *The Bonds of Love: Psychoanalysis, Feminism, and the Problem of Domination* (1988), the political intention of Benjamin’s theorizing was made explicit. Her primary object relations concern—crystallized in the *Story of O*’s master-slave relationship—is “...the denial of subjectivity to women” sexually, psychologically, and socially (Benjamin, 1988, p. 221). This is an ambitious and important conclusion to ponder, but it remains a “...feminist position on sexuality” that deems “sexual dissidents” (i.e., sadomasochist) as inferior (Rubin, 2011a). According to Rubin (2011a), “Jessica Benjamin draws upon psychoanalysis and philosophy to explain why what she calls ‘sadomasochism’ is alienated, distorted, unsatisfactory, numb, purposeless, and an attempt to ‘relieve an original effort at differentiation that failed’” (p. 177). Benjamin’s (1980; 1988) object relations theorizing on sadomasochism operates in line with antipornography feminism of the 1980s. Although she is a practicing psychoanalyst with access to case material, Benjamin uses a piece of fictional sadomasochistic erotica—*The Story of O*—to theorize about the object relations failures of actual BDSMers. Therefore Rubin’s (2011a) description of anti-porn feminist tactics seems particularly applicable to Benjamin: “Its descriptions of erotic conduct always use the worst available example as if it were representative” (p.172). Rubin (2011a) addresses psychology’s demonizing of BDSM generally, and Benjamin’s essay on erotic domination particularly, in “Thinking Sex.” According to Rubin (2011a), “...psychology is the last resort of those who refuse to acknowledge that sexual dissidents are as conscious and free as any other group of sexual actors” (p. 177). A Foucauldian genealogy of Benjamin’s theorizing would locate the roots of her argument in both the second-wave feminism of the 1980s and in the original pathologization of sadomasochism that occurring in the 19th century.

The power of discourse: Benjamin. Benjamin also uses object relations to explain psychological mechanisms at play in sadomasochistic relations in a manner that represents and reproduces the discourse of perversion and developmental impairment (1980; 1988). Whereas Kernberg understands sadomasochism as a defect in aggression sublimation that impairs whole object relations along the continuum of character pathology, Benjamin conceptualizes sadomasochism as a faulty striving for independence that fails to sustain the tension inherent in “the dialectic of control” between two people or subjects (Benjamin, 1988, p. 53). Like Kernberg, Benjamin implies a psychological immaturity through failures of the individuation process. Benjamin sees the origins of sadomasochism in the “...yearning for and the denial of mutual recognition” present in the pre-Oedipal interactions of the mother-infant dyad (Benjamin, 1980, p. 144). She also draws attention to the gender dynamics of the Oedipal conflict to explain the contrast in object relations mechanisms between males and females in the establishment of selfhood (Benjamin, 1980). Adult erotic or fantasy master-slave relationships like that described in the *Story of O* are pathologically extreme versions of the establishment of selfhood that maintains a (gendered) polarization of recognized/recognizing (Benjamin, 1980, p. 156). Benjamin sees the master-slave relationship as defensive splitting that ultimately denies true differentiation and full selfhood to both parties (Benjamin, 1980). A feminist psychoanalyst, Benjamin conceptualizes sadomasochism as a type of “rational violence,” which refers to a particularly male way of psychologically differentiating that has pervaded our culture (Benjamin, 1980, p. 145). Benjamin (1980) asserts that rational violence represents a “...Western rational world view... [that] emphasizes difference over sameness, boundaries over fluidity....It conceives of polarity and opposition, rather than mutuality and interdependence, as the vehicles of growth” (Benjamin, 1980, p. 148). In Benjamin’s theorizing, sadomasochism not only fits

within the discourse of individual psychological failings, but also serves as an example of sociocultural oppression.

Mirroring sex negativity: Benjamin. Benjamin (1980) describes voluntary or fantasy sadomasochism as “erotic domination” and warns that it acts as “...a subtle apology for all male violence” (p. 146). Even when this type of sexuality is engaged in between adults in “...the mutual fantasy of control and submission,” in Benjamin’s framework “...sadomasochism remains connected to violence (particularly violence against women) (p. 146). In Benjamin’s (1980, 1988) theorizing, it seems even consent cannot rescue BDSM from falling into the “bad sex” category on the sex hierarchy continuum. Under the regime of sex negativity, all erotic behavior is bad unless it is exempted by “...marriage, reproduction, and love” (Rubin, 2011a, p. 148). Therefore Benjamin’s conceptualization fits within Rubin’s axiom of *sex negativity* (Rubin, 2011a). As explained in Chapter Four, sex negativity is the idea that sex is “...inherently sinful”—“a dangerous, destructive, negative force” (Rubin, 2011a, p. 148). In summary, Benjamin’s writings on sadomasochism can be situated historically in the context of 1980s anti-porn/anti-SM feminism. These conceptualizations are also anchored in and advance the discourse of sadomasochism as misogynistic violence. Lastly, they fit Rubin’s axiom of sex negativity.

A case of *nihil de nobis, sine nobis*. While both Kernberg and Benjamin are ostensibly using object relations to examine sadomasochism, neither are investigating the phenomenon as the BDSM community would self-define it (Ortmann & Sprott, 2013). This is problematic. Kernberg’s theorizing, by-and-large, investigates phenomena that fall far beyond consensual erotic power exchange. Yet, he calls them by the same name. Benjamin’s theorizing on sadomasochism does not include any case material from patients practicing BDSM. Instead, she

uses a quite extreme piece of erotic fiction to make her claims. It is also clear from the conclusion of *The Bonds of Love* that Benjamin uses her object relations theorizing on this so-called sadomasochism as a means to a political ends: the critique of rational violence and the denial of subjectivity to women (1988, p. 219-224). In both of these cases, defining sadomasochism in a manner that does not comport with how the BDSM community would define their actions is confusing at best, and, at worst, has political implications that call to mind the phrase *nihil de nobis, sine nobis* (nothing about us, without us.) Much like the history of problematic psychoanalytical theorizing about homosexuality, which was drastically overturned with input from gay activists and overwhelming empirical evidence of psychological health, recent empirical studies of the BDSM population and voices from BDSM community paint a very different picture from these object relations scholars.

I submit that neither Kernberg nor Benjamin truly address the object relations mechanisms at play during BDSM encounters. That is, Kernberg's sadomasochistic case material largely concentrates on the expression of characterological pathology (which sometimes looks like BDSM, but often does not), and Benjamin's case material is drawn from a radical fictional account of sadomasochism. It is possible to hypothesize that addressing and conceptualizing BDSM was not the primary aim of these theorists. However, their popular writings on so-called sadomasochism contribute to the psychological pathologization of this sexual minority population. The following section explores the ramifications of pathologizing people who practice BDSM.

Discrimination Against BDSM Practitioners

As noted in Chapter One, individuals who engage in BDSM are socially stigmatized and report experiencing discrimination and/or harassment based on their participation in BDSM

activities (NCSF, 1998; Wright, 2006; NCSF, 2008; Hoff & Sprott, 2009; Ortmann & Sprott, 2013). Wright (2006) notes that the "...social stigma against SM is so pervasive that many individuals hide their sexual preferences from their partners, family, friends, medical doctors, and/or *mental health professionals*" (p. 218-219, italics mine). The National Coalition for Sexual Freedom (NCSF) 1998 Violence & Discrimination Survey found that 70% of respondents reported staying at least partially closeted about their BDSM orientation (p. 2). In this survey of (n= 1,017) BDSM-identified respondents, 36% reported experiencing violence or harassment based on their alternative sexuality; 30% reported job discrimination (Wright, 2006). The National Coalition for Sexual Freedom also compiles an annual Incident Response Report based on requests for assistance from BDSM community members. In 2002, the most frequent type of incidents involved child custody and divorce cases where courts punitively decided custody and visitation rights citing parents' BDSM interests (Wright, 2006). This demonstrates the direct political impact of psychological theories, in keeping with Foucault and Rubin's assertions: because of the inclusion of Sexual Sadism and Sexual Masochism diagnoses, the "...*DSM* is regularly used as justification for discrimination against SM-identified individuals" (Wright, 2006, p. 229-230).

BDSM practitioners also report adverse treatment in psychotherapy largely due to negative countertransference and/or lack of cultural competency (Kolmes et al., 2006). Kolmes et al. (2006) investigated bias in psychotherapy with BDSM clients and found six problematic treatment themes emerging in therapeutic dyads:

- 1) considering BDSM to be unhealthy, 2) requiring a client to give up BDSM activity in order to continue treatment, 3) confusing BDSM with abuse, 4) clients having to educate the therapist about BDSM, 5) assuming that BDSM interests

are indicative of past family/spousal abuse, and 6) misrepresentation by therapists who state that they are BDSM-positive when they are not actually knowledgeable about BDSM practices (p. 314).

Ortmann and Sprott (2013) gained access to qualitative data on BDSM participants' negative experiences in therapy from the 2008 NCSF Violence & Discrimination Survey. A selection of these comments illustrate problematic therapeutic treatment:

- The therapist refused to continue to see me until I acknowledged that I was being abused (p. 122).
- I was told that my depression was due to my participation in BDSM...She said if I stopped the 'negative' behaviors I would feel better (p. 122).
- I was made to feel like I am not normal and a social deviant. I felt uncomfortable and felt I could not freely be myself or talk openly about issues concerning myself to my psychologist. I spent more than half of one of my sessions trying to defend myself and my position in the BDSM community (p. 122).
- I was told by several mental health professionals that my desires to inflict pain on another, albeit willing, participant was deviant and I needed to deal with my anger and bigotry issues (p. 122).
- I was in therapy for six months and didn't feel safe enough to tell my therapist about my SM orientation (p. 122).
- After an off-hand comment made by the therapist about 'those sick people who beat each other,' I was put into a position of being unable to talk about any connections I had to BDSM (p. 122).

These findings illustrate the challenge obtaining quality, non-stigmatizing psychotherapy faced by individuals who participate in BDSM (NCSF, 1998; NCSF, 2002, Kolmes et al., 2006; NCSF, 2008, Ortmann & Sprott, 2013). Ortmann and Sprott (2013) estimate there are only approximately 500 "...kink-friendly or kink-identified..." clinicians in the U.S. and Canada, compared to approximately 5 million people who engage in BDSM in the same region (p. 121). That ratio leaves a significant gap in well-trained, culturally competent therapists. As the National Association of Social Workers code of ethics dictates, clinical social workers are obligated to avoid discrimination and to attain cultural competence with diverse client populations (NASW, 2008).

Review of Positive Psychoanalytic Writing on BDSM

As discussed in Chapter Two, empirical studies have found BDSM practitioners to be psychosocially healthy, and reflect a description of consensual erotic power exchange more in line with the BDSM community's own self-image (Sandnabba et al., 2002; Richters et al., 2008; Wismeijer and van Assen, 2013). Psychoanalysts have also begun to explore adaptive aspects of BDSM. In "Adaptive Sadomasochism and Psychological Growth," Bader (1993) uses case material from his own practice to conceptualize developmental and therapeutic object relations advances made through patients' incorporation of BDSM sexuality into their intimate partnerships. Bader (1993) asserts that Kernberg's and Benjamin's theorizing focuses on the defensive function of sadomasochism, clarifying that his interest in his article is to explore the "...liberating and affirmative function of these fantasies and enactments," which Bader believes are frequently seen in clinical work although receive less attention (p. 280). Bader (1993) qualifies two limitations of the case material he analyzes: 1) these are patients for whom BDSM sexuality emerged during the course of therapy, and 2) he distinguishes these patients' *mild*

BDSM expressions, drawing a line between their scenarios and "...the grand and stylized rituals of...compulsive sadomasochism" (p.281). A third limitation remains unstated: these are exclusively heterosexual couplings with gender normative male/Dominate, female/submissive scripts. These limitations bring to mind Rubin's concept of *the domino effect*; while espousing an affirmative stance, Bader none-the-less is compelled to draw a line in the Sex Hierarchy between mild BDSM and more elaborate scenes, and to exclude non-gender-conforming individuals (Rubin, 2011a).

The object can survive: Increasing agency, decreasing guilt. Bader (1993) found that the incorporation of erotic power exchange in his patient's sex lives functions to bolster sexual agency and power, increase sexual and psychological freedom, and decrease guilt. Bader (1993) theorizes that psychological development arrested in Oedipal stage object relations can be resumed through sadomasochistic activity that serves to verify that "...the object can survive the full expression and power" of the subject's sexual desire (p. 281). For women, Bader asserts that "Oedipal guilt"—"...a pervasive sense of guilt over hurting one's primary love objects [parents/first caretakers]" is the primary obstacle to achieving "...a more authentic encounter with the [current] other (i.e., sexual partner)" (p. 283-284). Bader (1993) also references Winnicott's description of the child's depressive position attempt "...to repair the real and fantasied damage that her...aggression has done to the internal good object" (p. 284). He understands the object relations process of destruction, survival, and discovery of the real (m)other as a precursor to later sadomasochistic activities which serve to "reassure" women against "...depressive-stage anxieties of hurting the other" (Bader, 1993, p. 284). In addition, Bader sees BDSM as a way for women to subvert a punitive superego vis-à-vis unrestrained sexual enjoyment, as well as a way to achieve freedom from guilt about the other's well-being

during sex. The latter he compares to Winnicott's idea of the capacity to be alone in the presence of the mother. Interestingly, Bader hypothesizes that it is for overly worried, concerned, and guilty patients "who lack the capacity for sexual ruthlessness" that BDSM functions as a freeing agent (Bader, 1993, p. 287). Bader (1993) sees sadomasochism acting in a similarly guilt assuaging purpose with his male patients. In addition, BDSM holds a mirroring function for men (i.e., "mirrored by a worthy and powerful other") (p. 291). Bader (1993) observed in his patients that the psychological gains made through erotic power exchange carried over into non-sexual aspects of their functioning. To conclude, Bader (1993) uses object relations theory to explain the following potential adaptive functions of BDSM: 1) advancing arrested development of Oedipal stage object relations; 2) solidifying the subject's understanding that objects can survive the expression of power/aggression; 3) practicing the Winnicottian capacity to be alone in the present of another; 4) assuaging super ego guilt; and 5) a mirroring function.

Playing in transitional space: Mastery and integration. Weille (2002) offers additional adaptive interpretations of BDSM in "The Psychodynamics of Consensual Sadomasochistic and Dominant-Submissive Sexual Games." Using an a case study from her larger, ongoing qualitative exploratory study, Weillie (2002) seeks to find potentially affirming, subjective meanings of BDSM games between the polarity of psychoanalytic suspicion of sadomasochism on one hand and the "grandiose subcultural claims" of the BDSM community on the other (p. 158). Weille limits her sample using the methodological boundary of consent (i.e., her interviews are with adults who consensually participate in BDSM). This is in agreement with where the BDSM community itself would identify suitable behavior (Ortmann & Sprott, 2013). Accordingly, Weille qualifies the results of her case study by observing that the

psychological benefits reported are contingent upon erotic power exchange occurring in the context of an attached, loving relationship that then serves as a safe container for playing with powerful psychosexual elements. She references Winnicott's (1971) concept of play as an "inherently creative transitional phenomenon" and locates BDSM in this framework (p. 139).

In this context, Weille interprets a number of possibilities for working through childhood developmental conflicts. The first theme is the "containment and the transformation of omnipotent fantasies;" BDSM encounters can engender feelings of safety both physically through bondage, and psychologically through secure attachment during powerful expressions of aggression and sexuality (Weille, 2002, p. 152). The second developmental theme that Weille observes BDSM addressing is "mirroring and empathic attunement" (2002, p. 152). Through taking risks—and being rewarded and praised—in the BDSM encounter, the subject finds the "approval, positive regard, and empathetic attunement" that were missing or inconsistent with the original objects (Weille, 2002, p. 152). "[M]etaphors of digestion—the processes of reworking and mastery" are the third theme Weille observes, and she conceptualizes this theme as the central engine driving BDSM games (2002, p. 153). For Weille (2002), it is through reworking and mastery that the final theme of sadomasochistic benefit occurs; that is, the "freeing up [of] dichotomies" (2002, p. 153). Weille observes BDSM acting to bring ridged, polarized psychological identifications (e.g., mother: passive, victim; father: active, bullying) into a freer and more dialectical relationship with one another allowing better intrapsychic integration and increasing an individual's ability for differentiation (p. 153). In this paper, BDSM incorporates Winnicott's ideas of playing and transitional space, as well as serving mastery, integration, and differentiation functions. Overall, Weille offers compelling conceptualizations of BDSM's adaptive psychological functions. In the paper, she also

importantly contextualizes *all* sex as a compromise formation predicated on issues of early development, and urges identification of psychological meaning in the specific and particular context and function of a given sexual behavior (Weille, 2002, p. 137).

Methodology: Strengths and Limitations of This Study

This study argues for the critical examination and deconstruction of object relations theorizing that conceptualizes erotic power exchange between consenting adults as perverse and pathological. This thesis promotes not only a deconstruction using the methodological tools of queer theory and sex-positive feminism, but also espouses a rethinking of how object relations concepts could be employed to understand the psychological functions BDSM with less negative bias. The methodology of a theoretical study is germane to the scope of analysis necessary to contextualize the etiology of sadomasochism in the psychological lexicon, to understand the function of power inherent in identifying and categorizing sexual practices, and to explore the politics of pathologization. Conducting a literature review which includes historical sexology, psychoanalytic theory and case material, empirical studies, as well as queer theory, sex-positive feminism, and BDSM community-based writings allowed a broad vantage point from which to analyze not only the phenomenon, but more importantly, to analyze how the phenomenon has been constructed. One limitation of casting such a broad research net is that an exhaustive review of each literature was not possible in the time constraints of this thesis. Therefore, it is likely that all applicable publications were not reviewed by this researcher.

Implications for Clinical Social Work

This thesis highlights the epistemological challenges inherent in psychoanalytical treatment of minority sexual practices generally and in object relations theorists' treatment of sadomasochism specifically. With the publication of newer empirical studies of BDSM

participants, and of psychoanalytic writing exploring the adaptive potential of sadomasochism, new narratives of psychological health are emerging to counter old stereotypes of mental illness and perversion.

However, as the National Coalition for Sexual Freedom's (NCFCS) surveys indicate, clients who practice BDSM continue to experience discrimination in the provision of mental health services. In an effort to ameliorate this discrimination, NCFCS launched an online database of kink-aware professionals so that BDSMers who wish to enter therapy (or utilize other professional services) can search for culturally aware and culturally competent psychotherapists. NCFCS has also housed the *DSM-V Revision Project*, which was successful in modifying the categorization of kinky sex in the new edition of the DSM. In 2007, the Community Academic Consortium for Research on Alternative Sexualities (CARAS) launched the *BDSM and Therapy Project*. This project aims to increase the knowledge, skills, and cultural competency of therapists serving clients who practice BDSM; and, in the interim, to educate BDSM community members on how to secure quality, non-stigmatizing therapeutic care (Ortmann & Sprott, 2013). Clinical social workers are obligated by our code of ethics to avoid discrimination and to attain cultural competence with diverse client populations (NASW, 2008). This thesis provides information that demonstrates the need for improved cultural competency of clinical social workers around issues of erotic power exchange in their clients'—and potential clients'—lives. If object relations theorizing were freed from "...blanket critiques of sadomasochism as either perversion or misogyny"—through future empirical studies, by psychoanalytic voices that venture to explore adaptive functions, or through BDSM community education and advocacy efforts—what could this rich field of psychological conceptualization offer to a fuller understanding of the phenomenon (Bader, 1993, p. 279)? To better answer this question,

additional research on BDSM practitioners and practices is needed. In the interim, clinical social workers and others practicing psychotherapy may wish to seek out additional education on these minoritized sexual practices to improve cultural competency.

Sadomasochism vs. BDSM: A note on language. In undertaking the literature review for this thesis, I was struck by the differential use of the terms *sadomasochism* and *BDSM*. Sadism, masochism, and sadomasochism are the older terms coined by Krafft-Ebing—terms he categorized under ‘General Pathology’ in *Psychopathia Sexualis* (1886). From this pathological etymology, sadomasochism was taken up by psychoanalysts who continued to use it in their theorizing to reference behaviors that sometimes bear little resemblance to the consensual erotic power exchange described by BDSM practitioners (e.g., Kernberg’s non-consensual other-harming characterological disorders and psychotic self-harming behaviors; Benjamin’s use of *The Story of O*’s extreme fictional master-slave relationship). According to the Oxford English Dictionary, BDSM entered the language in 1990, with its first published use attributed to Fakir Musafar, a foundational figure and participant in the subculture (“BDSM,” 2014). Psychoanalysts and psychotherapists who write about erotic power exchange as an adaptive and or recreational behavior tended to use the compound acronym BDSM. These writings explored relationships and activities that were closer to what the BDSM community self-defines as their forms of atypical sexual practices. The contrasting use of sadomasochism and BDSM led this researcher to both note the development of language and to question if psychology (theorists, practitioners, DSM) and its subjects (kinksters) are talking about the same phenomenon, different phenomena, or a spectrum of behaviors that overlap in some cases but not in others.

Conclusion

This chapter provided an overview of object relations and of Kernberg's and Benjamin's conceptualizations of sadomasochism. Foucault's analysis of sexuality and Rubin's examination of minoritized sexual practices were reviewed. The critical practices of queer theory and sex-positive feminism were used to analyze object relations' pathologizing stance towards BDSM. An overview of newer empirical studies that found BDSM practitioners to be mentally healthy was given, and more recent psychoanalytic writing on sadomasochism was discussed. The strengths and limitations of this thesis's methodology were addressed. Finally, this chapter discussed BDSM education and advocacy efforts in combating psychological stigma, and explored implications of this paper's findings for social work practice. The differential language usage between psychological professionals and the subculture was discussed.

This thesis has employed a broad literature review and theoretical analysis to examine and deconstruct influential psychodynamic perspectives on BDSM. I wished to investigate prominent object relations theorizing on sadomasochism to determine possible limitations of that research and to highlight potential bias affecting these conceptualizations. By locating the writings of Kernberg and Benjamin discursively and historically, by pointing out problematic definitions of the phenomenon and problematic selection of case material, and by wondering about semantic differences between object relationist use of the term sadomasochism and BDSM community/client self-definition, I found that neither Kernberg nor Benjamin appropriately address the object relations mechanisms at play during BDSM encounters. Newer empirical research on BDSM practitioners supports the finding that people engaging in erotic power exchange are typically psychologically healthy, and, by some educational, economic, and personality measures, better off than people who report not using BDSM in their sexual lives.

None-the-less, it will take time and continued research to shift psychological and popular opinion away from the *de facto* pathology narrative, which has stigmatized and oppressed this particular sexual minority since the 19th century. The need for improved theoretical groundings and increased provider cultural competency is clear given the reported level of discrimination both inside and outside of therapeutic settings. As the psychological field most attuned to sociocultural forces and issues of systematic oppression, clinical social work is well situated to play a key role in advancing policy, research, and practice that accurately reflects and respects the healthy self-determination of BDSM participants.

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