

# All Things Healing

*On sadomasochism and the limits performativity*

*The Leatherman's Handbook II*, Larry Townsend's how-to-guide to gay SM, was first published in 1983. The edition I have is the updated second edition from 1989, which somewhat takes into account the devastation of the AIDS crisis in the intervening years. 'Although these restrictions still permit a degree of pleasure that is certainly preferable to "no sex at all,"', Townsend writes, 'it is generally not the type of sexual activity that one is most apt to enjoy in his fantasies.' For that reason, the parts of the book that explicitly engage 'fantasy' have not been revised in order to 'permit the reader a full range of mental images, even (or especially) if these images exceed the limits of the practices that are considered safe.' There is a problem here of the boundaries of fantasy, and what we need fantasy for.

'(or especially)' acknowledges that danger, or the possibility of not being quite safe after all, is integral to SM fantasies as well as practices. In the chapter 'Setting the Scene', Townsend describes how the S might go about setting up his blackroom or darkroom or dungeon: Soundproof, ventilated and relatively odour-free. It's about not taking attention away from *you*, the S, and it's about not taking attention away from the particular pain or discomfort that *you* aim to inflict. In ensuring this, the musical score of the blackroom is important. For general background, Townsend's first rule of thumb is to go for popular things: 'Unobtrusive, slightly "trippy" if you're using a little grass or whatever.' That is: things that are not so strange or experimental as to disrupt the social contract. On the other hand, it must be 'just obscure enough that your average M will not recognise it or associate it with some past recall.' Finally, he says, 'if you tape these for backroom use, you do not have to do much editing':

Richard Strauss: Sinfonia Domestica

Gustav Holst: The Planets

Dmitri Shostakovich: Symphonies 7, 10, 12, 15

Jean Sibelius: Symphonies 2, 5; Finlandia, Four Legends From Kalevala

Paul Hindemith: Kammermusik (particularly no. 4)

The scene is set: lighting, sound, props, shiny leather, cold steel, the clink of the harness - all is an abundance of style come together to ensure that the fantasy is not broken. Unobtrusive, slightly trippy, just obscure enough.

In 1984, my mother wrote a thesis at university called *Masochism: Sexuality and Socialisation*, which, unlike Townsend's manual, focuses on the psychology of straight women. She quotes the book *Little girls, sweet girls, quiet girls* in which a

scholar Harriet Bjerrum argues that the most 'refined form of oppression is that which makes the oppressed actively take part in their own oppression.' My mother elaborates on Bjerrum's point: 'Masochism, then, be understood in the sense that there are circumstances - societal or otherwise - that make women strive for subordination, perhaps because any other solution would have too overwhelming consequences.' What solutions, what consequences? The underlying idea is that oppression is *a priori*: whether it takes the shape of gendered socialisation, or misogyny in the job market, or something more general to do with the way in which capitalism numbs and alienates us, covers everything with a sheen of unreality and has us looking with increasing desperation for signs that we are not imagining things. In SM, 'diffuse oppression becomes a narrowed, real oppression that may immediately be held, and felt', my mother writes, 'Sadomasochism is a strategy for survival that enables continued existence.' As Joseph Beuys once said: 'A lifetime is not so long. You cannot wait for a tool without blood on it.'

In his chapter on 'The Advanced Specialities', Townsend uses the Stockholm Syndrome as the psychological model for engaging with imprisonment and long-term bondage. 'It is a simple and fairly consistent dynamic of human behaviour that the supplicant will seek succour from his tormentor.' He continues:

As part of this, or even independent of a long-term game, the use of certain equipment is intended to produce a similar effect ... specifically those that render the M completely powerless to exercise normal control over his body or his senses. This is my rationale for including catheters and other equipment in this section. A bound and naked man who cannot even exert control over his urination is very much a total prisoner.

In the example that Townsend presents us with - one of these fantasies that remain unedited post-AIDS - the M is left battered and alone with a catheter inserted into his penis, and a plug up his anus for so long that he becomes legitimately desperate for the S to return. Repeating this pattern over the course of several days, at one point making the M so thirsty he drinks his own piss, we arrive at this intense feeling of staged-but-real desperation: torture and reprieve are one and the same. Here is a total breakdown, here is love and devotion because there simply can't be anything else. Pleasure is ultimate, nothing is relative. *Can you imagine the relief?*

I understand that this is a fantasy, but I also understand that the fantasy is for the breakdown to be real, and that SM, generally, is the acting out of a fantasy. On a stage and within the framework of rules, sure, but rules which may allow total breakdown, if total breakdown is what's desired. Townsend stresses in the beginning of the book that the S has responsibility for the fundamental wellbeing of the M. This is the foundational pillar of SM that renders the whole interaction

performative: *in the end, you will be safe*. But given that the premise for the interaction, also, is the infliction of real pain as real pleasure, the boundaries of the performative are fairly loose. Ultimately, the hostages in Stockholm that gave name to the syndrome, too, were safe.

A few months ago, a viral think-piece from the Huffington Post laid out the problem of loneliness and depression among gay people. In the pile of testimonies presented, this one, from a care-provider at an HIV clinic, stuck with me: 'It's not a question of them not knowing how to save their lives. It's a question of them knowing if their lives are worth saving.' The heartbreak of this statement further fractures the performativity of SM. For what if you need the pain to be real, because you only recognise relief that feels like torture? What if your breakdown is artificially induced, but a breakdown nonetheless, and what if there is no coming back from that? A breakdown as real as a bruise and a playlist that reminds you of nothing.