Perception Correction: Addressing Social Stigmatization Around BDSM and Mental Health

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PERCEPTION CORRECTION: ADDRESSING SOCIAL STIGMATIZATION AROUND
BDSM AND MENTAL HEALTH

A Thesis
Presented to
The Faculty of the Department of Justice Studies
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by
Erin Danae Afana
August 2021
The Designated Thesis Committee Approves the Thesis Titled

PERCEPTION CORRECTION: ADDRESSING SOCIAL STIGMATIZATION AROUND BDSM AND MENTAL HEALTH

by

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APPROVED FOR THE DEPARTMENT OF JUSTICE STUDIES

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August 2021

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ABSTRACT

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by Erin Danae Afana

Mainstream society’s characterization of activities and subgroups as abnormal can result in a long history of being shamed and pathologized, leading to discrimination and stigmatization. BDSM (bondage and discipline, dominance and submission, and sadomasochism) is an alternative lifestyle with a variety of identities, characteristics and practices that are viewed by many as being outside of societal norms. The consequences of this can be seen in how society, in general, views BDSM participants, how the criminal justice system responds to issues involving BDSM, and how the mental health system perceives those who participate in BDSM activities. The purpose of this thesis was to give voice to a highly stigmatized community regarding the true aspects and lived experiences of their culture, particularly regarding health and safety practices. This was achieved by conducting interviews with 18 BDSM community leaders to better understand the adopted health and safety practices that have been influenced by the obstacles that come with social stigmatization. Based on qualitative findings, four main themes associated with BDSM interests emerged including BDSM beyond sexual pleasure, BDSM as a coping mechanism, healthy BDSM requires education, and ensuring community safety through alternative resources. Findings suggested guidelines that can provide the general population with solutions regarding awareness, acceptance, and management in areas of society, mental health, and the justice system.
This thesis is dedicated to my partner,

Kegan Garrison.

This journey would not have been possible without your

endless support, understanding, and reassurance.
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Chapter 1. Introduction

Purpose of Research

In 2017, *The New York Times* reported Hollywood film producer Harvey Weinstein was accused of sexually abusing dozens of women over a span of three decades (Kantor & Twohey, 2020). The exposure of one of the most notorious sexual predators in Hollywood motivated survivors within other industries to start coming forward against powerful men all over the world (Bhattacharyya, 2018). This sparked the #MeToo movement. Founded by Tarana Burke in 2006, the movement aimed to advocate for sexual assault survivors by providing an opportunity for women to voice their experiences and expose abusers (Bhattacharyya, 2018). Since then, prominent figures, especially in government and media, have had numerous physical and sexual assault allegations directed towards them. As a part of this movement, people such as New York Attorney General Eric Schneiderman (Kersten, 2019), Canadian broadcaster Jian Ghomeshi (Coulling & Johnston, 2018), and Alaskan House of Representative Zach Fansler (Brooks, 2018) have been accused of violently and sexually abusing women. For these three men specifically, they excused the actions by claiming that it was a part of a kink/BDSM activity, or rough sex. While Ghomeshi faced serious charges, neither Schneiderman (*Matter of Schneiderman*, 2021) nor Fansler were charged (Brooks, 2018), and Ghomeshi was later acquitted (Coulling & Johnston, 2018).

The combination of bondage/discipline, domination/submission, sadism/masochism (BDSM), sometimes referred to as kink, places a great emphasis on the framework of consent and safety within the community (Bloomer, 2019; Holt, 2016; Nielsen, 2010; Williams et al., 2014). An abundance of literature has argued that consent in the BDSM culture is the distinguishing factor from abuse, sexual assault, and psychopathology
(Dunkley & Brotto, 2020; Ortmann & Sprott, 2012; Pitagora, 2013). However, BDSM continues to be one of the most misunderstood cultures of human sexuality, particularly in the eyes of the law and mental health professionals, resulting in discrimination (Hebert & Weaver, 2015; Langdridge & Barker, 2013; Wright, 2006). In the United States, a broad estimation of 5% to 10% of people practice BDSM (Meeker, 2013, Waldura et al., 2016), with roughly 11% of women and 14% men having BDSM experiences (Janus & Janus, 1993). While BDSM is becoming increasingly more popular and acknowledged in mainstream media in the 21st century (Bennett, 2020; Weiss, 2006; 2015), it is still persistently stigmatized by society (Bezreh et al., 2012; Lindemann, 2013).

Stigmatization is not a new concept. Goffman (1963) originally adopted the ancient term from Greeks who would brand individuals that were perceived as immoral, criminal, and slaves so that they could be avoided. Goffman defined stigmatization as an attribute or reputation that is socially discrediting, making an individual feel abnormal, undesirable, or rejected from society. Social psychological definitions have agreed that stigmatization comprises (1) a particular attribute that labels someone as different and results in devaluation and (2) a social construction (Bradley-Engen, 2012; Major & O'Brien, 2005). Cultural belief systems determine and reinforce what behaviors are considered deviant and which types of deviance are classified as mentally ill (Link & Phelan, 2013). Pescosolido and colleagues (2008) argue that stigmatization is further conceptualized and shaped by the social interaction in organizations, mainstream media, and the larger cultures structure on normative expectations. Furthermore, while social norms seem to be informal, they can also influence and endorse policies and law. According to Bezreh and colleagues (2012), research related to sexual minorities
constructing a non-traditional sexual identity is a complicated process and will evolve over time with consistent education, awareness, and patience.

Newman and Haire (2019) characterize BDSM and kink communities as having the best practices when it comes to consent during the post #MeToo movement, specifically aimed at progressive non-traditional sexual cultures. The BDSM community follows a sex-positive culture of consent that adheres to a guideline of securing consent effectively and awareness of intersecting positions of power (Barker, 2013a). Society tends to approach sex advice from a heteronormative perspective, forgetting to address matters of sexual abuse, violence, and coercion in other communities (Barker et al., 2018). Fileborn and Loney-Howes (2019) claim that one of the problems with acceptance of non-traditional sexualities is that even the "slightest failure is blown out of proportion when it falls outside the norm" (pg. 159). We live in a world where it is already difficult to talk about sexual assault and even more complicated when individuals are categorized as sexually deviant and pathological. Regarding the #MeToo movement, it has been suggested to explore the BDSM community to unpack some of the issues in society (Fileborn & Loney-Howes, 2019; Newman & Haire, 2019).

Perceptions and misconceptions of various subcultures can lead to isolation, fear and mistrust towards society and its support systems. For example, constant stigmatization can result in barriers when needing assistance from mental health and judicial professionals (Link & Phelan, 2001). For sexual subcultures, this can be seen most prominently with the past and present treatment and discrimination of LGBTQ+ populations (Deshotels & Forsyth, 2020; Serpe & Nadal, 2017), those that follow alternative relationship structures (Bauer, 2010; Pitagora, 2016), and those who participate in BDSM activities (Haviv, 2016; Ortmann & Sprott, 2012; Weiss, 2015;
Wright, 2006). The purpose of this thesis is to examine how misconceptions placed on the BDSM community and its participants can contribute to health and safety concerns within the subculture. This stigmatization can be seen in how society, in general, views BDSM participants, how the criminal justice system responds to issues involving BDSM, and how the mental health system perceives those who participate in BDSM activities. This was achieved by conducting interviews with 18 BDSM community leaders to better understand the adopted health and safety practices that have been influenced by the obstacles that come with social stigmatization.

**Thesis Chapter Overview**

To contextualize BDSM, I begin with a review of critical research in social science that is most relevant to BDSM stigmatization. Chapter 2 begins with an overview of subcultures throughout history, specifically subcultures that have been previously studied as deviant, followed by a chronicling of the struggles of BDSM communities as an emergent subculture. Next, I review the perceptions and misconceptions of BDSM in popular media, the criminal justice system, the mental health field, and within academia. I conclude with an in-depth examination of the prevalence of mental health in society, the social stigmatization surrounding it, how people positively and negatively cope with mental health conditions, and its links to those who practice BDSM. Chapter 3 summarizes the significance of the thesis and framework of the current study in addressing the overall purpose, the directed scope, and gaps within our understanding of BDSM culture. In Chapter 4, I outline the methodology used to address my research questions and recruit participants, emphasizing trustworthiness, confidentiality, and anonymity with participants. I then describe my implementation of a grounded theory approach to analyze the semi-structured interviews, using a three-step coding process. I
conclude by identifying the four emergent themes that encompass this thesis. Chapter 5 unpacks each theme, focussing and interpreting the experiences conveyed by the 18 community leaders. Chapter 6 discusses and analyzes the findings from this thesis by providing contributions to past and recent literature on BDSM. In addition, this chapter will reveal limitations and strengths that emerged throughout the process of this study, along with some recommendations for future research. Lastly, this thesis will conclude with final thoughts for the readers.
Chapter 2. Literature Review

Understanding Subcultures

Society characterizes the BDSM subculture as a sexual practice to reach sexual pleasure. However, to fully understand BDSM and its underlying principles, it is important to understand the history, characteristics, and formation of subcultures in general. Subcultures have been historically studied with a deviant framework in social science for almost a century (Goode & Vail, 2008; Holt, 2007; Williams, 2007), particularly those who practice non-traditional sexualities, gender specific roles, or are a part of a racial minority (Butler, 1999; Deshotels & Forsyth, 2020; Ghaziani et al., 2016; Sedgwick, 2007). There has long been a degree of fear and mistrust by racial and sexual minority groups towards the criminal justice system, specifically law enforcement. Subcultures have begun to disappear and what we now call mainstream society is merely a collection of diverse lifestyles (Chaney, 2004; Haenfler, 2013), although the stigma still remains.

Conformity of Subcultures

The most ubiquitous assumption of subcultures is that they are subordinate, abnormal, and deviant social groups. The earliest studies of subcultures emerged from sociologists at the Chicago School from the 1920s to the 1940s, utilizing a deviance framework. They theorized that subcultures were a product of marginalization of the urban poor and became a basis to understand social pathologies (Williams, 2007). In the 1960s and 1970s, subcultures were further studied as countercultures, proposing that value-conflicts emerge between a subculture and a dominant culture, creating division (Roberts, 1978). This marked the shift from subcultures being studied in sociology to being prevalent in the field of criminology, linking subcultures to crime and generating a
social problem (Goode & Vail, 2008; Holt, 2007; Williams, 2007). More recently, the term subculture has been considered a “chameleon theory,” having the ability to alter accordingly with social change (Blackman, 2007; 2014). Although theorists continue to expand and modify the explanation of a subculture, countless subcultures exist within society and are constructed through shared values and identities.

Subcultures form when common interests do not align with societal norms. These social groups are distinguished by their shared identity, values, practices, and cultural expression (Haenfler, 2013). Subcultural shared identities can include, but are not limited to, traditional concepts of class, race, and gender (Williams, 2007), as well as more recent concepts, such as style, social reaction, resistance, sexuality, and space (Williams, 2019). By the 1990s, underground subculture formations shifted from the traditional influences of resistance and shared identities to fluidity, creativity, and pleasure (Haenfler, 2013). This approach places an emphasis on the individual meaning in agency, replacing the term subculture with lifestyle or scene (Backman, 2014).

Conceptually, the nature of collective identity exists in a sense of “we-ness” and “collective agency,” overlapping social and personal identities (Snow, 2001). More specifically, subcultures can be seen as a collection of rituals, stories and symbols that reject the dominant culture (Sandberg, 2013). The rejection of the dominant culture drives communities to develop their own cultural practices and alternative institutional spaces. Chaney (2004) argues that “the once accepted distinction ‘sub’ and ‘dominant’ culture can no longer be said to hold true in a world where the so-called dominant culture has fragmented into a plurality of lifestyle sensibilities and preferences” (pg. 47). As subcultures start to disappear in theory, specific cultures continue to experience stigmatization and discrimination.
“Deviant” Subcultures

Stigmatization is established by labelling a particular group of individuals as deviant, especially when done by people in positions of power. The social constructs of deviance and crime varies depending on the definitions of criminal offense, the effectiveness and legitimacy of policing strategies, the social attributes of who are presumed criminal offenders, and the power that forms society (Little, 2016). Link and Phelan (2001) explicitly place components of stigmatization into the context of power, dividing the socially stigmatized (deviant) subgroup from the dominant group. The authors further developed a concept of structural stigmatization which comprises of governmental and private institutions, including, but not limited to, the criminal justice system, health care providers, and the media, as powerful domains that create policies which maintains social stigma and contributes to moral panic. Some well-known historical examples of structural stigma are the Jim Crow Laws, which maintained white privilege in the early 1960’s (Woodward & McFeely, 2002), and cultural norms of not accepting homosexuality (Lax & Phillips, 2009). Link and colleagues (2004) state “the underrepresentation of this aspect [structural stigma] is a dramatic shortcoming in the literature on stigma, as the processes involved are likely major contributors to unequal outcomes (pg. 515). Groups that have been categorized as deviant due to holding attributes that fall outside of societal norms continue to have their rights attacked through laws and the lingering illegitimate policing tactics.

With stigmatization being a mechanism of social control (Blume, 2002), social deviance has been significantly attached to racial/ethnic and sexuality minorities in the criminal justice system (Little, 2016). In the ‘60s and ‘70s, there was an emergence of anti-establishments resulting in civil rights, gay rights, and feminist movements (Hall,
Today the overlap of oppressions is referred to as intersectionality (Runyan, 2018). Discrimination, violence, police brutality, and mass incarceration are only some of the many problem’s communities of color and LGBTQ+ populations continue to experience (Alexander, 2021; Roberts, 2003; Wacquant, 2012). Research has shown that constant oppression has formed negative attitudes from marginalized and stigmatized groups toward police officials, particularly those of racial minorities (Barthelemy et al., 2016; Legewie, 2016) and LGBTQ+ populations (Casey et al., 2019; Serpe & Nadal, 2017). This hesitation to involve law enforcement has led to not involving the criminal justice system in any means and underreporting victimization (Bernstein & Kostelac, 2002; Davis & Henderson, 2003; Decker et al, 2019). We continue to witness subgroups fight for liberation through uprisings from the Stonewall riots (Carter, 2004) to the Black Lives Matter protests (Prager, 2020), bringing attention to the need to reform the criminal justice system from a punitive approach to a transformative justice approach. Due to the lack of support and/or trust in the criminal justice system, many subcultural have needed to incorporate alternative strategies to ensure health and safety within their communities. For instance, transformative practices for justice have been rooted in communities of color, feminist, sexuality and queer movements providing safe spaces to heal (Armatta, 2018; Pyles, 2020), which focusses on less stigmatizing language of ‘holding someone accountable’ to ‘supporting accountability’ (Kim, 2021).

**Sexuality Subcultures**

There is a history in mainstream culture of not accepting sexualities that do not have an outcome of procreation, making any other type of sexual behavior inappropriate and abnormal. Gayle Rubin (1984) deconstructs traditional views regarding sexuality in western societies that have been “structured by an extremely punitive social framework
and has been subjected to very real formal and informal controls” (pg. 150) including sexual essentialism, sex negativity, fallacy of the misplaced scale, hierarchical value of sex acts, domino theory of sexual peril, and the concept of benign sexual variation. The most significant concept presented was sex negativity, the idea that sex is dangerous, destructive, and is what forms sexual beliefs. As Rubin emphasizes the social construction of sexuality, she demonstrates sexual identities and behaviors as hierarchically structured through sexual classifications. The more accepted sexual expressions place certain sexualities outside of the “Charmed Circle” parameters, influencing oppression. Additionally, Rubin argues against feminists’ theories that sex and gender are the same concept. By addressing sexuality and social norms, a groundwork was placed for additional investigations and discussions surrounding gender and sexuality.

Moving away from the essentialist position Rubin presented, theorists began studying the opposition of social norms in gender and sexuality, developing the queer theory (Butler, 1999; Sedgwick, 2007). With the difficulty in precisely defining queer theory, Harding (2011) summarizes it as “exploring the oppressive power of dominant norms, particularly those relating to sexuality, and the immiseration they cause to those who cannot, or do not wish to, live according to those norms” (pg.198). The queer theory attempts to end the policing of sexualities and fight against traditional gender and sex norms, encouraging acceptance for marginalized subcultures, specifically LGBTQ+ (Halperin, 2003). Even with an era of sexual liberation, LGBTQ+ individuals still fight for acceptance. By being distinguished as having open minded perspectives around sex, gender, and attraction, they are continuously considered “outsiders” (Drushel, 2021). Being an “outsider” has greater risks to stressful experiences with social stigmatization
and discrimination, which can contribute to the overall oppositional resistance of subcultures and directly opposing social norms and control agents.

What are considered deviant or normal sexualities change over time across societies. For instance, in some societies homosexuality was and still is labeled controversial, a psychiatric disorder, and/or illegal (Deshotels & Forsyth, 2020). This encouraged the formation of LGBTQ+ that successfully challenged the idea that homosexuality was deviant and abnormal (Ghaziani et al., 2016). As the queer community became more accepted through various social movements, activists, honest representation in mainstream culture, popular media, and self-discloser, the culture flourished and accumulated additional types of identities (Drushel, 2021). Past research has reported that LGBTQ+ individuals face health disparities in psychiatric disorder, substance abuse, and suicide (Herek & Garnets, 2007; McLaughlin et al., 2010), due to violence and victimization (Roberts et al., 2010). More recent research suggests personal and social acceptance of sexual orientation, gender identity, and psychiatric diagnosis (Herek & Garnets, 2007) is related to positive mental health, self-acceptance, and well-being (Shilo & Savaya, 2011). With more understanding and acceptance of the culture, it was reported that LGBTQ+ individuals had higher self-esteem, less depression, and fewer suicide attempts (Russell & Fish, 2016; Ryan et al., 2010). With the increasing acceptance and social support of sexual orientation and gender expression, other forms of alternative lifestyles are becoming more prevalent. Specifically, the many types of expressions in the kink community have started to become more normalized as, in some respects, it is thoroughly researched promoting for further understanding and acceptance of the subculture.
Understanding the BDSM Culture

Although the BDSM subculture is far less stigmatized today than previously, there are still multiple misconceptions floating around society. The BDSM scene maneuvered through history as an underground culture due to the social exclusion and discrimination from the general population (Langridge & Barker, 2013; Weinberg et al., 1984; Weiss, 2015). As underground communities expand, so does a formation of cultural values, safety principles, and alternative spaces that can meet the needs of individuals without having to disclose personal information to mainstream institutions. To fully understand a culture, especially underground, we must try and dissect the development and evolvement of the community throughout history.

What is BDSM?

Individuals involved in kink, also known as kinksters, encompass a large and growing subculture of sex and gender minorities who fall outside of what society deems as normal (Richters et al., 2008). The kink community overlaps a variety of different identities and subcultures, specifically the BDSM subgroup provides a kink spectrum without any absolutes (Bauer, 2014; Turley & Butt, 2015). Although BDSM can mean countless things to different people, generally it is an intersecting acronym of roles that relate to bondage and discipline (B/D), dominance and submission (D/s) and sadism and masochism (S/M). BDSM is a voluntary lifestyle choice that contains, but is not limited to, fantasy, fetishes, consensual violence, sensation, role play, and the exchange (taking or giving up) of power (Barker et al. 2007; Bezreh, Weinberg, & Edgar, 2012; Damm, Dentato, & Busch, 2018; Ortmann & Sprott, 2012; Pitagora, 2013).

Consent represents a central foundation in BDSM culture and individual dynamics (Dunkley & Brotto, 2020). Practicing ongoing explicit consent in dynamics distinguishes
coercive behaviors from BDSM behaviors (Holt, 2016). Practitioners outline this foundation through codified consent frameworks including Safe, Sane, and Consensual (SSC), Committed, Compassionate, and Consensual (CCC), Risk-Aware Consensual Kink (RACK), Personal Responsibility Informed Consensual Kink (PRICK), and the most recently created, Caring, Communication, Consent and Caution (the 4 C’s) (Tomazos, et al., 2017; Williams et al., 2014). Individuals interact with pre-established boundaries and mutual understandings of what behaviors and activities will take place. The relationship dynamic includes negotiations of play, shared defined terms, responsibilities, and open communication regarding desires, limitations, and boundaries (Dunkley & Brotto, 2020). To fully understand the BDSM, we must delve into some of the historical roots of how the subculture developed.

**BDSM Throughout History**

BDSM is not as taboo as it is made out to be as similar sexual pain practices have existed in various ancient cultures for thousands of years (De Neef et al., 2019; Moser, 1989; Weinberg, et al., 1984). However, due to the disapproval and discrimination of these types of behaviors, practitioners have protected their sexual freedom by becoming an underground community (Weinberg et al., 1984). Sisson (2007) provides a model to investigate the BDSM culture throughout five stages of history, starting with sexual contacts (1600s – 1900s), to sexual networks (1900s – 1970s), to sexual communities (1970s – 1980s), to sexual social movements (1980s – 1990s), and finally sexual cultures (2000s – present). It is important to note that this is not a complete historical timeline of BDSM since underground communities may have untold stories and hidden attributes.
Historical evidence suggests that the first BDSM interactions emerged in European medical records and in local brothels in the seventeenth century (Langdridge & Barker, 2013). Literature focusing on sadomasochism began developing from famous scientists in the late 1800s, from the founder of psychoanalysis Sigmund Freud (1953) to neuropsychiatrist Richard von Krafft-Ebing (Krafft-Ebing, 1886/1965; Weinberg, 1987). Krafft-Ebing coined the terms *sadism* and *masochism* after two well-known novelists. *Sadism* was inspired by Marquis De Sade’s erotic writings on sexual cruelty and *masochism* from Leopold Ritter von Sacher-Masoch’s work on humiliation and submission. Krafft-Ebing’s work suggested that the pleasure of pain was a psychological disorder with natural sadistic behaviors in men and masochism tendencies in women (Moser, 1989; Weinberg, 2006). Around the same time, Freud (1928, 1938, 1953) argued numerous psychological theories based on sadomasochism personalities, which will be further discussed later in this thesis (see BDSM in Psychiatry). The popular theme of sadomasochism gradually navigated from intellectual literature to erotic magazines and pamphlets, to past forms of what we now call pornography (Kien, 2011). Although Krafft-Ebing initially represented sadism and masochism as individual behaviors, by the 1980s social scientists began to view sadomasochism as a social phenomenon, examining the subculture and people involved (Sandnabba et al., 2002).

In the early twentieth century, the practice of sadomasochism moved from local brothels to private homes, encouraging a jump in sexual social networking (Sisson, 2007). Weiss (2015) chronicled that the rise of industrialized capitalism and urbanization in the United States and Europe sparked a change in materials used in sadomasochism practices. Weiss clarified that materials went from soft objects (satin and fur) to much more hardcore equipment (leather and metal), allowing the culture to expand to a much
more diverse practice. By the 1930s, materials and images were being transported through mail with BDSM icons in pamphlets, photographs, magazines, and pornographic short films. The leather culture began to emerge in the late 1940s when the first leather gay bar was established in Los Angeles. More leather bars and motorcycle clubs started forming in the 1950s and 1960s that catered to men who enjoyed kinky sex. By the mid 1970s some of the larger clubs in the United States, Canada, and Europe began organizing annual gatherings and events for community safe spaces, such as the San Francisco’s California Motorcycle Club Carnival, which drew 10,000 men in 1977 (Stein, 2021). Consequently, as the kinky communities began to expand, so too did negative attitudes from the general population.

The late twentieth century was an era for social reform, bringing many marginalized communities together to fight for equality. Educational social organizations associated with BDSM communities began emerging in the United States (Sisson, 2007): New York’s Eulenspiegel Society (pansexual, formed in 1971), Chicago’s Hellfire Club (leather men, formed in 1971), San Francisco’s Society of Janus (pansexual, in 1974) and San Francisco’s Samois (leather women, in 1978). Since mainstream institutions cannot meet the needs of BDSM community members, organizations were developed to provide safe spaces, resources, and established cultural practices to ensure safety in their communities. By the late 1970s, the once underground Society of Janus movement progressively became more public, holding meetings at event spaces rather than in a hidden apartment (Langdridge & Barker, 2013). Although the queer community maintained their own separate identity (Kien, 2011), the BDSM community’s aspect of acceptance attracted an overrepresentation of gay men who had less concerns about being ‘outed’ to the public (Langdridge & Barker, 2013). To encourage more female
members, Society of Janus formed an outreach group Cardea in 1976 (Stein, 2021). Unfortunately, as social organizations were rising in membership participation, outside activist groups began to emphasize their disapproval of BDSM practices.

Disagreements on sexuality polarized the feminist social movement in the late 1970s and early 1980s, providing a platform to strongly oppose BDSM practices (Barker, 2013a; Wright, 2006). The sex battle directly fixated on the opinions of pornography, including the portrayal of BDSM practices (Rubin, 2011). Some lesbian feminists spoke out for BDSM as a form of positive sexual expression that should be accepted by the larger society, forming a huge debate in the feminist movement (Cruz, 2015).

Additionally, due to the devastating AIDS/HIV epidemic, society’s negative judgement spread toward non-normative sexualities, specifically the LGBTQ+ and leather communities. Activists suggest that the widespread fear of the disease helped expand the BDSM community by offering alternative sexual practices and resources to reduce the risk (Van Doorn, 2016). Following the epidemic, the birth of the internet positively transformed the kinky community. BDSM practices went from physical to virtual spaces, creating an online community for like-minded people to explore, interact, network, and research types of kinky desires in chat rooms and online discussion boards (Denney & Tewksbury, 2013). This initiated the collaboration of ‘munches’, restaurant meet-ups that link individuals with similar sadomasochism and kinky interests (Langdridge & Barker, 2013). The rise of the subculture demonstrated that peculiar fetishes were not as abnormal as once thought. The start of the twenty-first century reformed the once sheltered BDSM subculture to be digitally represented through multiple forms of media worldwide, inviting more exploration but also constructing additional societal perceptions.
Perceptions and Misconceptions of BDSM within Society

BDSM stigmatization throughout history stems predominantly from a lack of knowledge and understanding of the subculture (De Neef et al., 2019; Pitagora, 2013; Simula, 2019). Due to disapproval, the community protected their lifestyle by maintaining a hidden and underground setting (Langdridge & Barker, 2013; Weinberg et al., 1984; Weiss, 2015). When a behavior or attribute is considered deviant or abnormal, representations are perceived in a negative manner, forming stereotypes (Deller & Smith, 2013; Ortmann & Sprott, 2012). Mainstream media can produce these stereotypes and form an overall public perception, leading to further lack of understandings in other forms of social control (Barker et al., 2007; Musser, 2015; Simula & Sumerau, 2019; Tsaros, 2013). However, once a social phenomenon fights for liberation, it attracts the interest of the academic world, which starts conducting studies that provide evidence to reform past assumptions. This has been especially evident for BDSM over the past decade.

BDSM in Popular Media

BDSM’s presence in the media has dramatically amplified since the 1980s as representations started emerging in various forms of popular culture entertainment. The sadomasochist theme became prevalent throughout types of art, fictional books, fashion, advertising, movies, and music (Weiss, 2015). Leather BDSM iconography began in high-fashion clothing and art films, with the imagery quickly spreading across a wide-range of advertisement frameworks and television entertainment in the United States and United Kingdom (Weiss, 2015). BDSM representation started making appearances in well-known music artists work such as Madonna’s album Erotica, Rihanna’s song S&M, Christina Aguilera’s video Not Myself Tonight, Lady Gaga’s Bad Romance and
Teeth, and many others (Simula & Sumerau, 2019; Williams et al., 2014). There is still a rise in depictions of BDSM in mainstream media, however, representations have either promoted normalization or categorized it as pathology (Weiss, 2006). As a result, multiple studies have dissected the misrepresentation of the BDSM culture across multiple movies, television shows, and books (Barker et al., 2007; Musser, 2015; Simula & Sumerau, 2019; Tsaros, 2013).

As BDSM manifested across multiple forms of media the once considered taboo community began to feel accepted, until the interpretations became problematic (Deller & Smith, 2013). It has been argued that the Story of O, an older French erotic novel published in 1954, presents concerns surrounding consent, gender, and agency (Musser, 2015; Tsaros, 2013). More recently, some television comedies and dramas have portrayed BDSM dynamics in a light, friendly, manner such as Will and Grace, Sex and the City, and Desperate Housewives, while others have conflated BDSM with abuse, violence, and crime (Simula & Sumerau, 2019; Stein, 2021). One of the first notable mainstream films that portrayed sadomasochistic characters and empathic depictions of BDSM was 2002’s traditional heterosexual love story Secretary (Barker et al., 2007; Tsaros, 2013). Weiss (2006) interviewed non-practitioners to examine how they interpreted the film Secretary and found that respondents either accepted BDSM as normal or they understood it as pathological. Individuals who normalized the film reflected on how sadomasochism was no longer underground and dangerous, instead BDSM could be looked at as exciting yet safe. Those that viewed the film as pathological understood BDSM as a sickness and damaged identity.

Romantic novel trilogy Fifty Shades portrayals of BDSM practices obtained rapid popularity and success in 2011 and through film adaptation in 2015 (Barker, 2013b;
Khan, 2017; Musser, 2015). A tremendous amount of public attention fixated on the erotic series, providing opportunities to raise cultural awareness and spark interests in diverse sexual practices, but also exposed BDSM as damaging and pathological (Freeburg & McNaughton, 2017). Multiple researchers have examined the representation of the BDSM culture in the *Fifty Shades* series and found concerns regarding psychological abuse (Bonomi et al. 2013), gender role norms (Downing, 2013; Musser, 2015), consent violations (Barker, 2013b; Freeburg & McNaughton, 2017), and negative messages on sexual motivation norms and sexual identity power dynamics (Leistner & Mark, 2016). Furthermore, negative portrayals in numerous television series (e.g., *Law and Order*, *CSI*, *Criminal Minds*, and *Wire in the Blood*) has pathologized and criminalized BDSM characters as abusers, sexual offenders, and murderers (Barker et al., 2007). Although studies have addressed the inaccurate representation of BDSM in popular entertainment, it continues to be criminally categorized as abusively deviant due to the complicated legal components of the culture.

**BDSM in the Criminal Justice System**

The legal system is a powerful social structure that has played a role in significantly impacting the representation of the BDSM community, similar to other marginalized populations. The term BDSM itself is not illegal, but certain aspects of practices can become of legal interest or provoke a criminal justice response (Barker et al., 2007; Holt, 2016; Weait, 2007). Although most BDSM practices involve consensual interactions aimed at pleasurable pain, it does not always contain sexual arousal (Dunkley et al., 2020). However, past legal theorists have struggled with whether sadomasochism is classified as ‘sex’ or ‘violence’ (Bennett, 2014; Hanna, 2001). Therefore, BDSM characteristics are often connected with concerns with how to legally control sex and
violence, especially when the legal system already handles violence differently based on gender (Beresford, 2016). Consent is a fundamental element when the legal system regulates sexual activities, the primary distinction between non-consensual assault or abuse (Bennett, 2018). Although both the kink community and criminal justice system has zero-tolerance with consent violations, laws regarding BDSM practices can significantly change depending on the nation.

Individuals living in the United States, Canada, and the United Kingdom cannot consent to assault or inflicting physical injuries, making consent an invalid legal defense (People v. Jovanovic, 1997; Weiss, 2015). Bennett (2020) notes, the threshold in Canada is ‘bodily harm’ and in the United States is ‘serious bodily harm’. Thus, BDSM becomes a criminal act once the jurisdiction believes that the bodily harm threshold has been crossed. In comparison, consent protects other types of bodily harm from criminal liability, for example, impact sports, childbirth, surgery, tattooing and piercing, etc. (Bennett 2020, Deckha, 2011). In the past, Canada has distinguished BDSM activities from consensual injuries with justification that the practice does not hold ‘social value’ (R v Welch, 1995) and thus apply strict pornography obscenity laws to BDSM (Olsen, 2012). However, in 2004, a Canadian judge ruled that videos containing BDSM activities are not considered obscene or as violence, instead they are a natural aspect of human sexuality (Barker et al., 2007). But there is a limit to that. More recently, in R v J.A. (2011) a defendant was found guilty of assault when their partner gave prior consent to activities performed but later became briefly unconscious during the scene (Bennett, 2013; Olsen, 2012). The laws in Canada along with some states in America now require that consensual adults must be in a state of consciousness to provide ongoing explicit consent (Dunkley & Brotto, 2020).
As early as 1967, the United States prosecuted a number of significant cases involving BDSM activities, characterizing them as sexual assault or abuse (Bennett, 2013; Turley & Butt, 2015). Following the rights era in the 1970s and 1980s, America’s legal institutions started shifting their views on rights regarding sexual freedom and privacy. Still the courts justified that prosecuting BDSM-related cases was in the best interest of citizens to protect them from harm (Holt, 2015). Today, the legal status of BDSM remains unclear, with constant revisions and no acceptable legal defense regarding consent in BDSM-related cases (Holt, 2016). However, there have been several cases that provide evidence of a potential change. For example, in State v Gaspar (2009), Rhode Island courts dropped several accounts of sexual assault convictions pertaining from a predetermined consensual online relationship that went physical. The courts did not go into detail about the consent matter but did state, “… only one question for the jury’s determination: did the events of the night in question constitute a mutually consensual sexual encounter between two adults or a brutal sexual assault?” (pg.141). In some other nations, there is no room for a grey area when it comes to BDSM activities and the law.

The United Kingdom’s legal system is very black and white when a BDSM-related concern is brought forth to the courts, or even the House of the Lords. The most notable legal event involving BDSM is known as the “Spanner” trials, which started in 1987 with police investigations on sadomasochism activities among same-sex males, including a number of raids to find “obscene” videotapes (Beresford, 2016). Consequently, 16 men were arrested for various assault charges with jail time, probation, and fines, while 26 additional men were “cautioned” (White, 2006). As a result, the House of Lords response (R v bogus, 1994) ruled that consent was not a lawful defense although they were
engaging in consensual BDSM acts (Beresford, 2016; Chatterjee, 2012; White, 2006). Following these trials, additional United Kingdom cases (e.g., Pay v. UK) began appearing questioning BDSM practitioner’s suitability for certain jobs and social roles, bringing concerns surrounding the right to sexual privacy (Bennett, 2013; 2014; Chatterjee, 2012). Since BDSM is considered criminal in most circumstances nationwide, there has been much discrimination in the practice with violations of basic human rights. Several scholars have provided worldwide evidence that being ‘outed’ as a BDSM practitioner can result in concerns involving child custody, employment, domestic violence allegations, and privacy (Bennett, 2013; 2014; De Neef, et al., 2019; Holt, 2016; Weait, 2007; Wright, 2010). In addition, many kink practitioners reported being discriminated against when seeking help from medical or mental health professionals (Holt, 2016; Wright, 2006). A lot of the discrimination emerges from medical and psychology literature connecting BDSM with sexual abusers and serial murders (for a review, see Holt, 2016).

Understandably, like with any risky activity, there is a possibility of death, especially when individuals are not following the proper safety precautions. Sheff (2021) explains, the vast majority of kinky activities do not end in “death, disability or even permanent injury” when done correctly. However, a few deaths during consensual BDSM activities have come up in court, with the most common being from erotic asphyxiation, which is breath play through choking or restricting airflow for intensified orgasms (Bauer, Schön & Jackowski, 2020; Sheff, 2021). Bennett (2020, para. 3) argues against “the bogus BDSM argument [that]…activities should be criminalized because otherwise false claims of BDSM will be used by defendants to excuse or minimize their criminal liability for non-consensual abuse”. Bennett provides several reasonings behind his argument including
distinctions between BDSM and non-consensual abuse, universal exceptionalities of
BDSM, and permitting a defense consent claim. Bennett clarifies that the
decriminalization of BDSM would not promote non-consensual abuse but instead allow
the courts to better understand the culture and effectively sort cases containing false
“rough sex” defense. In addition, to avoid these types of accidents and criminal
prosecutions, (Sheff, 2021) has emphasized the importance of playing cautious by
becoming educated, obtaining training from an experienced practitioner, staying sober,
and clarifying consent. The long history of BDSM being misunderstood, categorized as
pathological, and criminalized in the formal criminal justice system, supports the need of
an alternative institutional space that can serve the needs of particular groups.

**BDSM in Psychiatry**

Stigmatization and social risk factors surrounding the BDSM culture have historically
been engrained by the presence of sexual sadomasochism in the Diagnostic and
Statistical Manual of Mental Disorders (DSM). Published by the American Psychiatric
Association in 2013, the DSM-5 is a handbook of mental health classifications providing
appropriate language for clinicians, researchers, and health professionals. The fourth
edition of the DSM (1994) specified that “sexual sadism” and “sexual masochism” were
psychopathological paraphilias, however, an updated version in 2013 differentiates
“paraphilias from paraphilic psychotic disorders” (Weiss, 2015). The DSM-5 revision was
constructed with the objective to address limitations that were in the DSM-IV, while
incorporating new scientific and clinical-based evidential research of psychiatric
disorders (Regier et al., 2013). However, the history of atypical sexualities being
classified as mental disorders by psychologists and researchers have established a
legacy of discriminatory treatment for future generations.
In the nineteenth century, psychiatrist Krafft-Ebing popularized sadomasochism by categorizing it as sexual perversion (paraphilia) leading to a mental and social disorder (Downing, 2015). Although Krafft-Ebing may have coined the terms sadism and masochism, Freud has been credited with linking the two together and categorizing them as a perversion behavior (Freud, 1953; Weinberg, 2006). Ehrmann (2005) examined Freud’s theory that associates sexuality with aggression when sexual sadism originates during one of the six psychosexual stages of development in infants (oral, anal, phallic, latent, and genital). With this theory of repression, Ehrmann suggested Freud also provided explanations that fetishes, sexual preference, and practice are visible during this psychoanalysis. Freud (1928) considered body parts, like a foot, and items associated with the body, like a shoe, as objects that individuals can have fetishes with. Paraphilia was coined by Stekel (1924), meaning “outside” (para) and “loving” (philia), placing fetishism in the same category (Wiederman, 2003). The first edition of the DSM in 1952 placed homosexuality, transvestic, pedophilia, fetishism and sexual sadism/masochism as “sexual deviation” (Wiederman, 2003). However, some have argued that pathologizing an abnormal sexual interest is just a way to have social control of “normal” sexual behavior (Moser, 2001). The entrance of sadomasochism into psychological terminology has created a negative label, yet it was still an established diagnostic from clinical observations in patients who were “suffering” from sadomasochistic behaviors (Weierstall & Giebel, 2017; Weinberg, 2006). Freud and other researchers’ assumptions on sadomasochism shaped the psychological understanding and contributed to the long history of it being associated with mental health characteristics.
The most recent version of the DSM-5 clearly distinguishes consenting adults engaging in sexual activities and the individuals who force the engagement of non-consensual sexual activities (American Psychiatric Association, 2013). In the updated edition, the terms sexual sadism and sexual masochism were changed to include the word disorder (Weierstall & Giebel, 2017). The DSM-5 now requires sadomasochistic disorders to (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” (pg.695). However, today members of the BDSM community have been discriminated against by mental health fields because components of the practice are still pathologized in the DSM-5, particularly sadism and masochism with the willingness to inflict and/or receive pain (Tellier, 2017; Wright, 2006). Additionally, past research has attempted to demonstrate that individuals participating in BDSM were mentally unstable or victims of abuse, suffered from anxiety, depression, obsessions and compulsions, or post-traumatic stress disorder (PTSD) (Conolly, 2006; Tellier, 2017; Wismeijer et al., 2013). Generally, sadomasochism behaviors have been negatively presented as complex, and linked with an undesirable connotation, strengthening and reinforcing the stigmatization of BDSM and those that participate (Kaplinsky & Geller, 2015). The continuous misunderstanding and discrimination of the BDSM culture among many mental health care providers contributes to the need to develop alternative spaces for individuals to disclose their interest in, or who already practice, BDSM.
**BDSM in Academia**

Historically, BDSM has been studied under various negative frameworks, as being practiced by the sexually deviant or mentally ill (Bezreh et al., 2012; Connolly, 2006; Doshi, 2015; Wismeijer & Van Assen, 2013). However, in the past two decades, BDSM research has included more sociological and social psychological understandings of the kink culture fixated on the formations of BDSM communities and experiences of diverse sexualities (Weinberg, 2006). In fact, Simula (2021) highlights the recent explosion of BDSM research in the journal of *Sexualities: Introduction to the special issue: BDSM Studies*, unpacking early assumptions of the culture. Simula reports that the new body of research was not limited to a specific academic discipline or field, as the topic of BDSM appeared in “literature, media studies, counseling, history, law and legal studies, psychology, anthropology, game studies, leisure, sociology, health and medicine, women’s gender studies, critical race studies, disability studies, and many others” (pg.2).

As the BDSM culture combats the long history of stigmatization from past literature, recent research has moved away from the classical sexual lens and examined BDSM through a number of viewpoints (Simula, 2021). It was found that BDSM can be a form of sexual orientation (Moser, 2016; Sandnabba et al., 1999), serious leisure (Newmahr, 2010; Sprott & Williams, 2019; Williams et al, 2016), spirituality (Baker, 2018; Fennel, 2018), ritual (Klement et al., 2017), therapeutic practice (Lindemann, 2011; Schuerwegen et al., 2021; Sheppard, 2019) and navigating through trauma (Thomas, 2020). Specifically, scholars began to study and understand BDSM activities as a healthy form of serious leisure instead of only a sexuality experience (Williams, 2009). Studies found that BDSM benefits can contain pleasure and arousal, personal growth, exploration, psychological release, and self-expression (Hebert & Weaver, 2015; Sprott
& Williams, 2019). Kagan (2020) examines the experimental learning opportunities while practicing BDSM through a “heightened corporeal, sensual, emotional and aesthetic experience” and contributing to social learning techniques. A significant contribution to BDSM research has been the increasingly studied dispute that BDSM itself is not a sign of pathology and damage (Connolly, 2006; Rogak & Connor, 2018; Wismeijer & Van Assen, 2013). Additionally, studies have suggested that the general population can learn positive lessons from BDSM guidelines in relationships, drama therapy management skills, and corporate settings, specifically in social work (Moser & Kleinplatz, 2006; Williams et al., 2017). Overall, social science has broadened the frameworks for studying the BDSM community, with findings providing further directions for exploration.

**Understanding Mental Health**

Although there has been a long history correlating individuals who practice BDSM with being pathological, recent studies have proven the only similarity is the stigma surrounding both concepts (Beckmann, 2001; Moser & Klienplatz, 2005; Pitagora, 2013). Mental health conditions are far more common than people think (Jacob & Patel, 2014), however, mental health is still extremely misunderstood, producing stigmatization and discrimination (Ben-Zeev et al., 2010; Corrigan, 2004). Public stigma has a major impact on a number of individuals in society, especially when it turns into self-stigma, interfering with social life, self-esteem, employment and overall quality of life (Coleman et al., 2017; Corrigan et al., 2016; Schomerus et al., 2019).

**Common Mental Health Conditions**

Historically, ignorance surrounding mental health conditions has produced universal fear and negative perceptions. There have been three historical theories contributing to the development of a mental health illness including supernatural (origins beyond the
universe), somatogenic (physical origins), and psychogenic (psychological origins) (Farreras, 2019). Prior to asylums, individuals who seemed to have a mental health condition were perceived as “madness” or dangerous and linked with sin (Arboleda-Flórez & Stuart, 2012). Psychiatric hospitals were the primary source of mental health care until 1963, when the federal Community Mental Health Act was created to move individuals out of asylums and into community-based mental health centers (McGinty et al., 2018). However, restraints, shock therapy, and lobotomies (psychosurgery through the nose) continued until the pharmaceutical industry viewed mental conditions as a chemical brain imbalance in the 1970s (Farreras, 2019). Still today, individuals who lack understanding of their mental condition can be repeatedly placed in hospitals, rehab, homeless shelters, and criminal justice institutions (McGinty et al., 2018).

For centuries, individuals with mental health conditions have been banished by society without the proper insight and understanding. Mental health conditions are extremely common worldwide, affect all types of communities, and contribute to economic and social consequences (Jacob & Patel, 2014). A mental illness is defined as a medical condition that disturbs an individual’s emotional thinking or behavior associated with distress in social, work, or family settings (APA, 2013). The most highly prevalent conditions reported contain depressive and anxiety disorders. When other adjustment and mood disorders are added they are all referred to as common mental health conditions (CMHC) (Pomaki et al., 2012). Specifically, CMHC include depression, generalized anxiety disorder, panic disorders, obsessive-compulsive disorder (OCD), PTSD, and phobias (Kendrick & Pilling, 2012). In 2015, the World Health Organization (2017) estimated 4.4% (322 million people) of the global population suffer from a
depressive disorder and 3.6% (264 million people) from an anxiety disorder. Each type of disorder can have a mild, medium, or severe level of effect on daily life functioning.

**Mental Health and Social Stigmatization**

Individuals with mental health conditions are not only affected by the associated symptoms, they are also distressed by the tremendous amount of stigmatization that inhibits certain life opportunities (Corrigan et al., 2016; Harnois & Gabriel, 2000). Since Goffman’s (1963) work on stigma’s nature in society, psychologists and scholars have further investigated stigma’s association with mental health (Ben-Zeev et al., 2010; Corrigan, 2004). Stigma has additional internal and external dimensions beyond how society views mental health. The choice to avoid seeking professional help and to avoid being stigmatized by the public, has been theorized as ‘label avoidance’ (Schomerus et al., 2019). According to research, self-stigma is the number one barrier for treatment and recovery amongst individuals with a common or severe mental health condition (Coleman et al., 2017; Corrigan et al., 2016; Schomerus et al., 2019).

Corrigan (2004) distinguishes public stigma as a standard response by society, while self-stigma is the internalized psychological result of the overall public negative perception. Self-stigma is the loss of self-esteem and self-efficiency, where the individual begins to agree with the stereotypes (Ritsher et al., 2003). A typical reaction of society to mental conditions is that those individuals are inherently dangerous (Bathje & Pryor, 2011; Corrigan & Watson, 2005). A modified labelling theory can assist the clarification of internalized stigma by explaining that once a person develops a social meaning of how society perceives mental illness, they become labelled (Link et al., 1989; 1999; Wu et al., 2017). Pryor and Reeder’s (2011) model of self-stigma conceptualizes both the fear of being exposed to stigma and the potential internal feelings of being associated
with the negative views surrounding mental disorders. The model also suggests that stigma can impact others that are associated with the individual who has a mental condition, for example family and friends. Lastly, structural stigma, is defined as discrimination based on institutions and ideological systems (Pryor & Reeder, 2011; Bos et al., 2013). Similar to how most stereotypes are formed, mental health stigma’s primary cause is misrepresentations in multiple media outlets (Smith, 2015).

Although awareness of the negative perceptions of mental health has increased, stigma has not decreased (Link et al., 1999). The public’s mental health literature reports understanding mental disorders in regard to symptoms, causes, and treatments; however, media continues to negatively depict disorders (Fennel & Boyd, 2014). Past research has suggested that individuals with a mental health condition are depicted through the media as violent, undesirable, dangerous, and untrustworthy (Corrigan, 2004; Smith, 2015). Smith cited a review, conducted by the National Mental Health Association, that the public gathers their information regarding mental illnesses through forms of television (70%), news channels (51%), news magazines (34%), and the internet (25%). In the United States, one-fifth of popular television programs portray adult characters with a mental health condition (Stuart, 2006). Furthermore, one in four of these mentally ill characters murder another character while approximately half will hurt someone else (Signorielli, 1989; Smith, 2015). Lawson & Fouts (2004) conducted a study observing mental health depictions in 34 Disney films and found 85% referenced a mental condition. Mental health misrepresentations are being embedded in the public’s perceptions at a very young age through fictional media, however, it also continues in what children and most people believe as factual.
Mental Health Coping Mechanisms

Coping is a psychological process used to manage the internal and external stress to adjust or tolerate negative situations (Bartram & Gardner, 2008; Watson et al., 2016). A distinction between coping mechanisms refers to the type of approach, which is either problem focused, emotion focused, or avoidance (Bartram & Gardner, 2008; Ben-Zur, 2009). Andresen et al. (2003) investigated the recovery process of those with mental health conditions and found it to be more effective when the individual is cognizant of the conditions and can find meaning in life, such as within employment, social relationships, pursuing and accomplishing goals, and spirituality. However, there is still a disagreement in literature whether having awareness of mental conditions can positively impact functioning and overall quality of life (Or et al., 2013). Recently, researchers have suggested that stigma can explain the reasons for going untreated despite the available resources (Corrigan et al., 2016; Or et al., 2013; Staring et al., 2009).

Although coping mechanisms are unique to each person, they have been clinically divided into either positive (adaptive) or negative (maladaptive) behaviors (Holubova et al., 2016). Adaptive coping behaviors decrease stress and promote long term benefits, while maladaptive coping strategies bring temporary relief but ultimately maintain and strengthen stress (Bartram & Gardner, 2008; Kaysen et al., 2014). Frequently viewed maladaptive coping behaviors can include denial, self-blame (Watson et al., 2016), excessive drinking (Fledderus et al., 2010), smoking (McGee et al., 2013), and substance use (Bittner et al., 2011). A very serious form of a maladaptive coping strategy is self-harm, or non-suicidal self-injury (NSSI). NSSI behaviors are intentionally damaging to oneself, commonly by cutting or burning the skin (Hasking & Boyes, 2018; Nock, 2010). An abundance of literature has fixated on the reasons behind self-harm
and NSSI, concluding that incidences occur because of poor social support, lack of self-esteem, adverse life events, unwanted emotions, and trauma (Ammerman et al., 2017; Andrews et al., 2013). Although NSSI has been traditionally linked with occurring in teenage years (Nock, 2010), additional studies have found evidence supporting NSSI developing in a range of ages (Ammerman et al., 2017; Hasking & Boyes, 2018; Klonsky, 2011).

Engaging in NSSI has been linked with other psychological distress stigmatized by society, such as depression, anxiety, and interpersonal difficulties (Lewis & Hasking, 2020). However, Hasking and Boyes (2018) argue that NSSI is more of a behavior and coping mechanism than a “disease”. They note that language is a powerful tool that can shape and define public perceptions and judgment, leading to an abundance of stigma associated with self-injurers. Youth associated with LGBTQ+ are two to four times more likely to self-harm than the non-LGBTQ+ (King et al., 2008), as are women of ethnic minorities (Cooper et al., 2010), and trauma survivors (Howard et al., 2017). Not only do NSSI have shame from physical scars, but they also do not seek treatment due to the public stigma (Lewis & Hasking, 2020). Misrepresentation, lack of knowledge, and stigmatization have been detrimental in pursuing management or recovery in cases of mental health.

Adaptive coping strategies can be an effective treatment for stress, mental health symptoms, and the overall reduction of self-stigma (Holubova et al., 2016). Research has found that individuals with high self-esteem, self-compassion, and self-awareness are more likely to adapt to positive problem-focused coping mechanisms (Allen & Leary, 2010; Lazarus & Folkman, 1985; Sirois et al., 2015; Thoits, 1995). Specific adaptive coping strategies studied included cognitive restructuring (reframing stressful events in a
positive light), problem-solving (planning and awareness), social support seeking (friends and family support), and distraction (engaging in alternative activities).

Additionally, past studies have suggested adaptive coping and stress reduction being associated with exercise (Cairney et al., 2014), spirituality (Alleyne et al., 2010; Cole, 2005), and mindfulness (Sharma & Rush, 2014).

**Mental Health and BDSM**

BDSM practitioners must confront stigma and discrimination based on their sexual orientation or gender identity while also dealing with the prejudice against mental health conditions. Traditionally, psychological literature theoretically views personal interest in BDSM as pathological (Beckmann, 2001; Kernberg, Moser & Klienplatz, 2005; Pitagora, 2013) and presumed to be the consequence of childhood trauma or abuse (Thomas, 2020). The largest contributions to this concept were famous past theorists’ assumptions (Freud, 1953; Krafft-Ebing, 1886/1965) and BDSM characteristics being placed in the DSM (APA, 1980; 2013). The tremendous amount of stigmatization surrounding the BDSM culture and mental health in general can result in higher amounts of self-stigma, reducing efforts to obtain treatment.

Multiple studies have examined discrimination of BDSM participants seeking mental health resources (e.g., Barker et al., 2007; Dunkley & Brotto, 2018; Hoff & Sprout, 2009; Kolmes et al., 2006; Yates & Neuer-Colburn, 2019). Specifically, the National Coalition for Sexual Freedom (NCSF) reported 49% of 3,058 respondents reported discrimination from a mental health professional and 25% from law enforcement (Wright, 2008). In Kolmes and colleagues (2006) study of therapeutic experiences, some BDSM practitioners reported disclosing their interest to their therapists and being told that to continue therapy they would have to quit engaging in those activities. The number of
studies providing insight on how BDSM practitioners are treated in the mental health field has encouraged additional investigations in this area of research. These studies have found that BDSM participants are at no greater risks of mental health problems and that participating in BDSM activities can contribute to positive mental health outcomes (Connolly, 2006; Cross & Matheson, 2006; Weinberg, 2006; Wismeijer & Van Assen, 2013).

In the early 2000s, studies examining links between BDSM and mental health started to emerge. Conolly (2006) conducted a survey using commonly used self-reported measures of psychopathology and found that amongst 132 self-identified BDSM practitioners, the majority tested normal in depression, anxiety, OCD, and PTSD. Similarly, a national survey conducted by Richters et al. (2008) found that the respondents that engaged in BDSM had no difference in past sexual abuse and had lower levels of psychological distress. Wismeijer and Van Assen (2013) utilized several psychometric instruments comparing BDSM practitioners with a control group and found that in general BDSM practitioners were psychologically healthier. Specifically, BDSM practitioners scored higher on measures of well-being, rejection sensitivity, extraversion, openness to experience, and conscientiousness, and lower on neuroticism and agreeableness. Additionally, Bazreh et al.’s (2012) interviews of 20 BDSM participants found that 13 were aware of kink desires by the age of 15, and seven by the age of 10, pointing to kink fantasies emerging during the time of a normal sexual development. Lastly, studies have advocated that most BDSM practitioners do not report distress concerning kink desires, instead they report distress from the constant mistreatment and discrimination prompted by the lack of understanding of the lifestyle (Waldura et al., 2016; Wright, 2006; Yates & Neuer-Colburn, 2019).
Chapter 3. Current Study

The objective of this thesis is to address the social stigmatization attached to BDSM interests by qualitatively speaking with BDSM community leaders regarding health and safety principles that have been incorporated into their lifestyle as an alternative approach to mainstream institutions. Following a similar path as the LGBTQ+ community, BDSM communities face constant struggles to find acceptance and follow a lifestyle that feels normal to them, without fear of negative responses. Historically, we have seen the BDSM community progressively break free from an underground scene and become more of an artistic movement of resistance; however, this has also brought additional obstacles associated with societal perceptions and seeking assistance from institutions. Since mainstream institutions cannot meet the needs of BDSM community members, the culture has developed a set of cultural values, safety principles, and alternative spaces.

While there has been a growing amount of social science research examining and conceptualizing the BDSM culture, none has focused on exploring the truth of the culture beyond a sexual or psychological lens. This study does not focus on a specific academic discipline, but instead grasps the true voices, experiences, and strategies of the overall culture as it is socially understood by BDSM community leaders. Glimpses into the lives and experiences of respected and recognized BDSM community leaders will mitigate the damaging negative perceptions shaped and produced by society that contributed to a long-standing tradition of stigmatization. In addition, this thesis explores the health and safety practices that have been created as an alternative to mainstream resources and institutions. Furthermore, findings will contribute to the reduction in stigmatization of
“subcultures” as our society has already become a cluster of non-traditional norms that needs to be understood rather than disapproved.
Chapter 4. Methodology

Study Design

Semi-Structured Interview Technique

The most effective way to grasp the true experiences and perspectives of any culture, is to qualitatively speak to those who participate in the lifestyle. An in-depth, semi-structured, interview style was determined to be the most appropriate as it is administered conversationally with one participant at a time, offering respondents the chance to explore issues that are personally significant to them (Longhurst, 2003). The use of interviews was particularly important given that our intention was to give a voice to BDSM participants and empowerment to the BDSM community. Surveys or other forms of controlled research methods were not used because they would not have sufficiently captured personal outlooks of individuals who practice BDSM activities. Instead, interviews promoted a deeper understanding of each participant’s viewpoints on a social construct. Finally, individual interviews were selected over focus group discussions to support participants in speaking about their lifestyle choice without feeling self-conscious, judged or influenced by other participants reactions or responses.

Description of the Interview Guide

The start of each interview began with a short introduction to clarify the role of the researcher, purpose of the study, and roughly how long the conversation would last. The majority of the interviews lasted between one and two hours, with some occasions lasting longer than two hours with acknowledgement and approval from the participant. Once the researcher has given a detailed description of the overall study and reviewed the interview process, each participant verbally consented (Appendix A) before the initiation of questions (Appendix B). By consenting to partake in the study, the participant
understood that the interview would be audio recorded and had the choice of having
direct quotes presented in future publications. Participants were also informed that they
could have their data removed from the study at any point after the interview had been
carried out. Lastly, before the start of the general questions on the interview guide, the
participants were asked if they needed any additional clarification or have any questions
regarding the interview. Once all of the general interview questions and supplementary
conversations came to an end, each participant was thanked with gratitude for their time
and sharing their viewpoints. The interview question guide contained a list of
predetermined, but open-ended, questions. This guide adopted the responsive
interviewing model (Rubin & Rubin, 2016) to create an environment based on
comfortable conversation rather than a research subject being aggressively interviewed.
The list included a combination of descriptive, structural, and contrast queries all seeking
a specific goal.

Questions fell into three broad categories: Icebreakers, BDSM Activities and Health
and Safety, comprising a total of 15 general questions with follow-up queries when
applicable. To gain rapport, the first couple of questions were simple icebreakers that
helped ease into the interview. For example, what pseudonym they preferred, how they
started participating in BDSM and what role(s) they self-identified with inside the
community. The next set of questions incorporated the participants’ view on terminology,
responsibilities and curiosity in BDSM activities. The last section focussed on health and
safety by asking questions regarding societal conceptions, practices, and community
resources available. Understanding that some of the information presented may be
sensitive to some participants, three voluntary general demographic questions were
placed at the end of the interview to ensure comfort when disclosing their personal
information. While there was structure throughout each interview, the order of the questions was adjusted based on how the data collection evolved. This technique allows the researcher to blend open-ended questions with follow-up why or how questions to explore unanticipated information from participants (Adams, 2015).

**Ensuring Trustworthiness**

For qualitative methods, trustworthiness is the equivalent to the concepts of validity and reliability. During the interview development stage of this thesis, strategies to establish trustworthiness and rigor were studied, understood, and practiced by the researcher before conducting the interviews. Trustworthiness is determined through credibility (whether findings accurately represent the data), transferability (whether findings are applicable to other context), confirmability (whether findings are biased by the researcher), and dependability (whether the findings are consistent) (Bloomberg & Volpe, 2018; Creswell & Poth, 2016; DeJonckheere & Vaughn, 2019). In this thesis, credibility was established by designing an interview guide that would result in a prolonged interaction (expected to be one to two hours) with the participants (Creswell & Poth, 2016). The participants were also given the choice of having the final transcript sent to them for validation on answers or if they would like to add or change any information presented, a strategy known as member checking (Creswell & Poth, 2016). We used rich descriptions to demonstrate transferability by collecting a mixture of experiences to provide an accurate representation of reality among BDSM practitioners. To address dependability in this study, all interviews were audio recorded, transcribed and thoroughly coded multiple times before interpreting the data. Confirmability can raise concerns on whether the findings of a study are shaped by the participants and not through bias of the researcher (Pandey & Patnaik, 2014). To confirm confirmability, the
researcher aimed to maintain a self-reflexive attitude throughout the entire interview, remembering to acknowledge that the researcher’s assumptions can influence findings. In addition, while analyzing and collecting emergent themes from the interviews, the research team meet multiple times to share and discuss findings. These reflections allowed further explorations, but more importantly, they ensured the findings replicated the participants’ voice and not the researcher’s bias.

**Maintaining Anonymity and Confidentiality**

The goal of this study was to ensure that the interview participants’ voices were heard and represented accurately. As a result, this can also raise ethical concerns that the researcher must be aware of. Because the participants of this study are from a stigmatized and vulnerable community, special considerations were taken to assure informed consent, confidentiality, anonymity, and how the data were stored. The participants had the option of using a pseudonym to disguise and protect their confidentiality for quotations and information presented in the research. Most individuals in this community already have nicknames, so some participants were comfortable using that as their pseudonym. To guarantee anonymity, all personal or identifiable information was excluded or disguised from the final publication. The audio recording of the interview was discarded once the data were collected, transcribed and thematically coded by the researcher. Participation in this study was completely voluntary, allowing the participants to refuse to partake in the entire study or part of the study without any hostility. This included providing a safe and comfortable environment to opt out of the study while it was still in progress. The consent form that includes all of this information was provided to the participants via email in advance. This allowed the participants time
to carefully read it over and bring any questions to the meeting before verbally consenting to participate in the interview.

**Data Collection**

**Recruitment**

Due to the challenging nature of overtly finding participants from the BDSM community, respondents were recruited through a type of non-probabilistic convenience sampling called snowball. Snowball sampling, or chain-referral sampling, is a useful technique in qualitative social research when the population being studied is unlikely to respond due to vulnerability or stigmatism (Robinson, 2014). The initial group of interview participants was obtained through being acquaintances of the research team. At the end of each interview, we asked participants to assist in contacting their social networks for additional interviewees. The first round of interview respondents came from a predominantly White racial background. Therefore, a second round of recruitment was used to fill in gaps pertaining to racial diversity. This was done by contacting individuals who were openly part of an online social group that created a safe place for racial minorities in alternative sexual communities.

Participants were selected based on their belonging to the BDSM community and acknowledgment as a community leader. A leader in the BDSM community has similar characteristics to a leader of the general population regarding experience, knowledge, and support. According to Holt (2016), a BDSM leadership role is a respected person with a position of power, allowing the individual to have input when banning members that cause harm to the community. For our study, a BDSM community leader included someone who organizes meetups, hosts events, and/or educates the community through workshops and classes.
To ensure safety for all participants during the current pandemic, interviews were administered through a secured online Zoom meeting room. An advantage of online meetings was allowing interviewees to choose a private and comfortable location for the meeting to take place. Participants were contacted via email to coordinate a suitable date and time for the interview process. During that initial correspondence, potential participants were given a copy of the ethics approval certificate, consent form, list of interview questions, and contact information for the research team. Approval was obtained from the San Jose State University Institutional Review Board (IRB #F18087). The consent form consisted of a brief description of the study, the research questions that prompted the interviews, and the interview protocol. The interview questions were provided to prospective participants due to the sensitive nature of the topic for some people and the research team wanting to ensure that participants understood that this was a positive and welcoming study. Interviews were audio recorded and subsequently manually transcribed, to capture the conversation without assumptions from the researcher (Bloomberg & Volpe, 2012; Creswell, 2014). Once the transcription was completed, both the video and voice recording were discarded and only the transcription was saved for future analysis.

**Characteristics of Participants**

At the end of each interview, participants had the choice to provide demographic characteristics pertaining to their age, current occupation, and general educational background. Before answering these concluding questions, participants were given a brief explanation on how the data would be aggregated to ensure confidentiality. The final research sample consisted of 18, adult, BDSM community leaders from Canada and the United States, with the majority being along the West Coast. Participants ages
comprised of one between 20-29, six between 30-39, seven between 40-49, and four over the age of 50. All participants had at least a high school diploma. More specifically, one went to trade school, eight obtained a bachelor’s degree, three a master’s degree, and one a PhD. Three of the participants went to college but decided to take a different route and not acquire a particular degree. Participants had a wide range of careers including education, counselling, managerial positions, technology, engineering, communications, and art. When asked what role they most self-identified with during the interview, most of the participants expressed classifying as more than one role. Respondents disclosed identifying as a slave, bottom, submissive, switch, sadist, sadomasochist, top, dominant, and/or master. All participants had been active within the BDSM community for at least ten years, with the longest being over thirty years.

**Analytical Procedure**

**Grounded Theory Approach**

To properly analyze the data for this study, a qualitative method known as the grounded theory approach was employed. The strategy originated from Glaser and Strauss’s (1967) idea that a researcher should begin with a completely open mind without any preconceived viewpoints of what the findings will be. Glaser and Strauss’s purpose was to introduce a legitimate qualitative research procedure by scientifically collecting data, constantly comparing analyses, and generating a unified theory that closely connected with the data gathered (Glaser & Strauss, 1967). In addition, this thesis incorporated a social constructionist approach. According to Charmaz (2008), a social constructionist approach is compatible with the grounded theory method when attempting to make sense of the social world by allowing the researcher to address the why question. Charmaz also notes that this theory is not only a method for
understanding research participants but also allows the researcher to construct abstract ideas throughout the research process. The grounded theory method is particularly helpful when analyzing interview responses to determine appropriate codes and themes.

The grounded theory method uses an inductive, comparative, and iterative approach when coding data (Charmaz, 2006). During the inductive reasoning step, the researcher will start with a general question or issue and end with overall theories. According to Thomas (2006), an inductive approach (1) briefly summarizes extensive data; (2) establishes clear linkages between the research intentions and the findings derived from the data; and (3) develops a theory or theories from the connections found in the data. The grounded theory is an extensive and repeated version of the inductive reasoning approach. One way to conduct an inductive analysis is through a constant comparative method, another element in grounded theory (Glaser & Strauss, 1967). During this method the researcher develops concepts from the data by combining inductive coding with a simultaneous comparison of analyses (Glaser & Strauss, 1967; Maykut & Morehouse, 1994). Both the inductive and constant comparative approach allows the research design and theory to emerge with the nature of the study.

**Three Step Coding Procedure**

Before coding the interview data, I utilized an iterative approach in which each transcript was listened to and read multiple times after each interview. Charmaz (2006) defines coding as “naming segments of data with a label that simultaneously categorizes, summaries, and accounts for each piece of data” (p. 43). This method of coding provides the researcher to comprehend the *what, how* and *why* queries related to the research subject (Charmaz, 2008). In grounded theory, *theoretical saturation* is a key concept that is embedded into the iterative process. This point of saturation occurs when
additional data that is being gathered is not sparking new themes and all of the collected categories have been identified and explored (Hennink, Kaiser, & Marconi, 2017; Thornberg, & Charmaz, 2014). Qualitative research that applies the grounded theory method utilizes an iterative three-step coding process on the collected data to create a deeper understanding when developing theories.

The three-step coding process is comprised of open coding (identifying distinct themes), axial coding (categorizes the themes), and selective coding (connecting categories to a core concept) (Williams & Moser, 2019). Strauss and Corbin (1990) admitted that the three coding phases can be implemented concurrently, however, each phase also requires a distinctive intervention. For this study, the coding process went in order with open coding treated as the initial step by repeatedly reading the data line by line and identifying themes in as many ways as possible. Being patient, persistent, and extremely rigorous during this process will lead to theoretical saturation (Moghaddam, 2006). The second step in coding, axial coding, is described as a set of procedures that brings the data back together in a new way by making connections between the themes found in open coding (Strauss & Corbin, 1990). While open coding distinctively divides the data, axial coding focusses on the elements that contribute to the phenomenon being studied (Kendall, 1999). Lastly, selective coding is choosing and integrating themes into categories from the axial coding list (Williams & Moser, 2019). Flick (2009) explains “selective coding continues the axial coding at a higher level of abstraction through actions that lead to an elaboration or formulation of the story…” (pg. 310). This step is crucial in working towards framing and developing the main theory of the study.
Thematical Coding (NVivo12)

NVivo 12 was used to document and code the interviews, to provide clarity to the analytical procedure. Qualitative research software does not conduct analyses, instead it is an efficient tool used to support the coding and analytical procedure (Williams & Moser, 2019). Once the audio recordings of the interviews were transcribed, the transcripts were uploaded to the software to begin the coding process. Distinct categories of themes were already recorded during the open and axial coding cycle, so nodes were created in the software based on these themes. I then read carefully through each interview and labelled data with the nodes according to the predetermined themes. This was done more than once to ensure data was properly coded, allowing any new themes to emerge.

Before coding the interview responses in the software, each research member listened to the recording and read the transcripts multiple times, taking down notes and conceptualizing themes. Following this step, the research team met to present, discuss, and debate if the themes emerged from the participants responses. Once it was time to code through the software, the initial set of themes consisted of: (1) perceptions of BDSM, (2) BDSM in popular media (3) mental health in BDSM, and (4) BDSM safety. Within these themes, nodes or codes were created to be more specific, including negative misconceptions, history, movies, books, positive mental health, negative mental health, abuse and unhealthy activities, law enforcement, transformative justice, and community policing. Once all data were coded and themes were finalized, this thesis encompassed four themes of common misconceptions including (1) BDSM Beyond Leather and Sexual Pleasure, (2) BDSM as a Coping Mechanism, (3) Healthy BDSM
Requires Education, Preparation and Acceptance of Mistakes, and (4) Ensuring Kink Community Safety.
Chapter 5. Findings

Components of BDSM Beyond Leather

Taken together, multiple participants’ responses suggested the largest misconceptions of BDSM are that activities contain non-consensual torture and dynamics only involve sexual encounters. When people hear the acronym BDSM, they immediately think costumes, heavy whips, chains, and latex (Charlie, Robin). Walter expresses that popular media represents BDSM practitioners as individuals that are fixated on their kinks and fetishes. He acknowledges the depiction is similar to the gay community, where society only looks through a lens centered on sexual identity. This thesis has found BDSM to have more components than pain, control, and sexual bondage. The kink culture was developed through including and not excluding people, embracing acceptance of what is otherwise misunderstood and shamed. Specifically, the BDSM subculture’s foundation is consent, which is acquired through conversations centered around trust and honesty. Additionally, BDSM dynamics encourage personal growth by overcoming boundaries, discovering new attributes, and being mindful of one another. When looking beyond the sexual lens, BDSM journeys can contain a full exploration of life.

Embracing Diversity in the Kink Culture and BDSM Dynamics

Most participants indicated at some point during their interview that the kink community is an accepting place that welcomes all types of people, particularly those who feel like outsiders or abnormal. This outcast feeling brought additional mindsets. Participants expressed that in the past they have felt like a monster (Alex), confused (Gem), alone (Walter), and broken (Steven). One participant, Naomi, voiced that the kink community attracts individuals who do not fall into what society has categorized as
normative. One unfortunate quality of most human beings is that comparing themselves to others is embedded into their daily life. It is well established that when humans feel disconnected from societal norms, they can feel empty and isolated. Naomi explains that once a person is able to take that first “leap” into understanding that they aren’t what society considers normal, “leaps” in other directions of life will be attainable. Specifically, Naomi notes:

I think the reason why we have ‘weird’ people is because of that thing where it requires you to think about relationships in a way that is really different and creative. And I think people who think in a really different and very creative ways that are interested in challenging norms, they are just more likely to challenge norms in other directions.

Similarly, Nelson points out that discovering others who also identify as different provides support and encouragement to further investigate non-normative interests. He believes this is the reason why queer individuals are over-represented in the kink community. Ironically, identifying as different generates a shared space of connection and belonging for individuals who have had a long history of sexual and gender discrimination.

The kink world is commonly comprised of monogamous relationships, consensual non-monogamous relationships, open and casual partnerships, BDSM-only dynamics, and everything in between. Being in the community for over thirty years, Lady D points out that the problem with the larger society is that it has become an extremely judgemental place. If everyone does not follow societal norms, individuals can be targeted and isolated because they are different. Beyond acceptance, the kink community promotes respect in the sense that it is central in any type of relationship. With this centrality around respect, the BDSM community has a sense of embraced diversity, an understanding that everyone has unique desires and that is okay. The
important aspect is to find people who produce the greatest satisfaction and fulfillment.

As Walter stated:

I want us to stop the world from having an idea that there's a certain right way to have sexuality and relationships and there's a wrong way. I want us instead to have principles that do make people whole. Are you engaging in something to add to everyone's fulfillment and holiness? Not are you engaging in a set of behaviors and a set of protocols.

Creating a community without assumptions or expectations allows individuals to explore their differences and sexualities openly. The BDSM lifestyle empowers an evolution of self-exploration. As Lady D emphasizes:

I truly believe that this lifestyle is definitely all about self-exploration. I think it allows us to get in touch with all parts of ourselves, mentally, physically, emotionally, and spiritually. It gives us a lot of awareness. It answers a lot of questions that were always had. The why am I different? Why do I not like the same things that everyone else does?

Overall, participants voiced that there is no right way or best way to be kinky.

The BDSM subculture is an expression of sexuality through an assortment of roles and relationship dynamics that are interchangeable regarding sexual and gender identities. Nelson presents the idea that labels are a way to divide people through a black and white concept, while identifiers allow individuals to provide their own framework of a specific role. Nelson clarifies:

When I think of labels, I think of labels on a jar, and this is what is in this. So, it kind of applies, but the reality is we are not the same all the time. I mean there is days that I have no need to be in the master role, or want to, because I'm not in the right frame of mind. If you put that label on there and people get this thought process where you must be that all the time. I do not agree with that.

Similarly, Walter conveyed that all types of labels, inside and outside of the community, can bring limitations. However, he clarifies that identifiers can additionally be just as broad as labels; people need the complete information to fully understand someone. In discussing specific roles and responsibilities inside the kink community, personal
descriptions slightly varied, but were all very similar with a common conceptualization. Some dynamics consist of just play and some go outside of fantasies into intimate relationships. Most of the participants acknowledged that sex is definitely a key component of BDSM, but it is not the driving force. For example, Gem explains that for some people it is actually less about the physical sex and more about "intellectually and emotionally exploring themselves." BDSM practitioners are able to examine what they most identify with by testing roles and behaviors outside of sexual pleasures.

Further discussing the roles in BDSM, participants described the incorporation of power and control within relationship dynamics. While all interviewees spoke on dynamics involving some type of exchange of power, to most this did not mean that one person completely surrenders all power to another. The term “slash” generally signifies the way in which people identify a particular behavior. Tops, dominants, and Masters (the left side of the slash) were all described as the ones motivating and implementing the activities. While bottoms, submissive, and slaves (the right side of the slash) were all categorized as receiving the activities. Although from an outsider’s perspective, the left side of the slash is assumed to retain the power by having the responsibility of actions, it has been argued that the left side has the illusion of power while the right side has the absolute power. Three participants spoke to control over the scene by choosing to stop. In fact, a common response amongst the participants was that power is distributed through equity rather than equality. In particular, Trudy describes power as a “mind trap”, that if one person stops, so will the other. Trudy clarifies this equilibrium by comparing a BDSM dynamic to a football team:

So, you have a football team and there is only one quarterback. But if everyone else doesn’t do their part, y’all can’t win the game. The quarterback doesn’t win the game by themselves. The coaches cannot win the game by themselves. It is a team effort. Everyone has to do their part and has to feel fulfilled in their part.
Another response to which side of the slash holds the power varied on the people involved in the relationship through their distinct negotiations. Since dynamics can be ambiguous, identifiers are effective in the sense that they bring the feeling of connection to then promote the start of a conversation.

**Negotiation, Trust and Consent through Conversation**

Consent represents a central foundation in BDSM relationships, whereby individuals voluntarily interact with preestablished guidelines and mutual understanding of what behaviors and activities will take place and when. It was unsurprising then that elements of, and references towards, consent and trust were mentioned throughout each interview, regardless of the question being asked. Jay expressed that his values have a higher standard that goes beyond consent:

> Where it is encased like a negotiated clear communication. Where there is awareness by both partners, of not just the technical details of what we are going to do, but also the potential, emotional, and physiological consequences. Has there been sufficient, conscious communication? It’s the communication that raises the awareness of the protentional consequences of play.

Consent can be easily coerced or misjudged when there is not an explicit sexual, sensual, and mental outline containing all elements of a dynamic.

A key ingredient to any healthy relationship, BDSM-related or otherwise, is effective communication, honesty, and trust. Andie, Bubba, and Taylor pointed out that because the BDSM community is based on communication, trust is fostered early on. No matter how light or intense a scene or relationship is, trust is integral. Taylor suggests individuals interested in BDSM should start off slow so that they are able to gradually comprehend what their boundaries are, making it capable to establish and maintain trust with potential partners. Many of the community leaders mentioned that negotiation and consent should go outside physical play to also include mental and sensual boundaries.
Hard and soft limitations are equally important and should be a highlight of the discussion. Participants explained that it is each person’s individual responsibility to be aware of these risks for the health of everyone involved. Robin reported that there is a non-judgmental aspect rooted in the kink and BDSM community, making it a bit easier to express and negotiate personal attributes.

I feel like people within the BDSM community or other kind of more underground communities, such as queer communities, non-monogamous communities. The people in those communities have had to do a lot of emotional and psychological work on themselves in order to get to the place where they are accepting of their kinks. I think that is part of it, you’ve already had to do a lot of that self-work in order to get into the community. …It is also really important to negotiate things about mental health.

Additionally, there is less sensitivity to rejections since negotiating is a process to work through, a compatible dynamic without assumptions and expectations.

Building trust in dynamics is not restricted to the initial negotiation process, as trust progresses during and after play. The majority of participants provided statements advocating that initial consent is not a static concept as practitioners dynamic conversations are surrounded by ongoing negotiation and affirmative consent. There needs to be constant open-minded discussions to build trust and cultivate the partnership, whether they are casual or intimate. Andie expresses the importance of regularly checking in and reflecting on what is working and what isn’t working, so that everyone is on the same page. Along these lines, Michael mentions the significance of aftercare, whether that be after a soft or intense scene. He explains that BDSM is more than the scene itself, it is about being attentive toward one another and reconnecting through conversation. He provided examples that varied from offering basic essentials, like water and a blanket, to giving relaxing intimate massages. Aftercare can also include an overall debriefing session focusing on processing and conversating physiological and
psychological experiences from the scene. Furthermore, Trudy mentioned that relationships are grounded by nurturing and mutual growth, as soon as there is no longer mutual growth, it is time to reassess. Constant open communication allows individuals to improve their dynamics by correcting interactions, resolving misunderstandings, and entailing personal growth.

**Mutual Personal Growth Through Mindfulness**

Being attentive in the negotiation process provides a platform for partnerships to support one another in overcoming personal challenges. In various forms of expression, participants commented on mutual personal growth through the value of mindfulness. It is common in kink for relationships to develop as separate individuals but also be aligned and grow together (Andie). When choosing personal dynamics, individuals are encouraged to surround themselves with people who genuinely inspire one another towards being the best version of themselves (Nelson). Personal growth does not only come from acquiring the support from someone else but also through providing encouragement to another (Victor). Mutual reinforcement offers opportunities for further exploration in curiosities (Charlie, Lady D), it can boost confidence (Andie, Trudy), and inspire control (Alex, Naomi, Taylor). Throughout each interview, participants voiced the significance of self-awareness and self-acceptance to ensure honesty and mutual growth.

There is a general challenge for people to acquire self-acceptance when certain types of explorations are consistently shamed. Yet, for many, kink has provided opportunities to acknowledge and experiment with those explorations without guilt, blame, or judgement. While acceptance into the community is immediate, participants
noted that it took time to obtain self-acceptance. Metaphorically, Lady D compares self-acceptance with an onion:

That memory is held within you. So, if you have not taken the time to unpeel that onion, unravel some of that stuff and get to the basis of the pain. Then the pain is still with you and you may very well come into the lifestyle and so someone else is the person that is giving you the pain, but the reasoning hasn’t changed. Which is very different than coming [into the BDSM community] and you have dealt with your demons and now we are incorporating some of that in activities.

Deeply understanding yourself and distinguishing personal desires starts the process of peeling back layers until you find your true self. In addition, by unraveling built up emotions, individuals are able to get to the basis of any negative feelings, disapproval, or pain that can now be incorporated into their lifestyle. Multiple community leaders reported that at some point in their BDSM journey they started accepting what they believed were vulnerable characteristics, promoting self-growth.

Two participants expressed that they believed reasons behind denying personal attributes was due to their family background and how they were raised. For instance, Steven acknowledged:

I was never comfortable with who I was sexually. That’s not changed. I come from a traditional family. In the sense that you take care of the women, respect the women because they will be the mother of your children. But I have fantasies in the back of my head, or thoughts in the back of my head, that contradicted my belief system and my values. …I had these fantasies in my head, but then I was like no, I can never do these things to the person I love. This makes absolutely no sense. Like I love this person.

Before delving into the kink community, Robin found herself judging other people’s certain behaviours, for example, homosexual activities. She proclaimed that the conservative family background she was raised in left her with learned behaviors, specifically being judgemental. However, growing and becoming more involved in the BDSM community, she realized that as long as individuals are consenting adults, they can do whatever they want with zero judgement. Robin disclosed the BDSM community
has given her the exploration and platform to go against her family’s traditional values and ended up coming out as queer herself.

The kink culture is well known for practicing body positivity, providing a safe space to investigate and overcome all types of personal insecurities. Robin immediately realized upon entering the kink community that everyone acquired and accepted different body shapes, sizes, and colors. A common personal growth amongst participants was with self-acceptance of appearance, sexuality, and gender. BDSM gave Trudy the opportunity to feel satisfied sexually, making her feel more confident with her body in the real world. Andie expressed that, individuals in the BDSM community are far more attractive based on linkages through kinks and fetishes than appearances, leaving her with feelings of optimistic approval of her own insecurities. Sara notes:

I think [BDSM communities] positively impacts women because we are taught to be ashamed of them, unless you meet that perfect standard of superficial beauty, you are not accepted, and you are not welcome. And there is so much negativity attached to body image and body weight, but not in the kink community. It’s a concept that everybody is okay and everybody is not judging, especially when dealing with trans issues and stuff like that. And people who are queer, who do not identify as one gender. Radical body acceptance is a big deal in the community and is it not okay to be critical in the kink scene, whereas its totally dine in the normal world.

Additionally, as Robin became more involved with BDSM, personal growth and acceptance allowed her to identify as queer. Charlie voiced that without being part of the kink community, they would have never felt comfortable coming out as non-binary. They clarify that this community has given them the “space, language and contact with other people who did not express their non-binary-ness in the way that we’re so used to.”

Awareness and skills learned from a BDSM lifestyle can also be implemented in non-kinky everyday situations. Jay explained that the kink community has helped him become more open minded with sexuality and gender.
I think in general, my sexuality as helped me improve the way I relate to other people. And not just in relationships or in sex, but just in relating to human beings in general and improving my communication skills. It has improved my leadership skills because I got involved as a leader pretty early in my experience in BDSM.

Other participants mentioned that personal attributes adapted from the BDSM culture have been useful in the outside world. For example, Bubba realized that consent culture needs to be engaged a lot more, not just within interpersonal relationships but in everyday actions. It needs to be implemented when people greet each other with a hug or borrowing an item. Furthermore, he noted that BDSM conversational skills can translate to certain non-kinky situations. Since he is employed in a supervisor position, individuals come to him for guidance, and he finds himself applying mindfulness strategies to resolve issues and encourage growth in the workplace. Likewise, Michael noticed parallel benefits in the workplace during difficult conversations. He expressed because he has confronted, made aware of, and discussed his personal hidden desires, he is more comfortable communicating problematic issues at work.

Self-acceptance is tough without self-awareness as the two go hand-in-hand. Nelson advocates that being in a community with other people who have similar characteristics has provided pathways toward self-awareness. Without being able to have a deeper understanding of your own wants and needs, it is hard to empathise with others who are experiencing similar feelings. Alex felt a sense of ease when meeting practitioners who had a matching, yet opposite, version of what he needed. He explains:

I think it is what put me at ease with BDSM. …Part of why I was uncomfortable with needing and wanting this thing. If there is not a matching partner, it makes me feel like a monster. If there is a matching partner, it makes me compatible.

When something extreme is presented in Andie’s personal dynamics, she reflects on the potential short-term and long-term consequences. She questions if the activity will move
her partner forward or backwards, especially around things like phobias, traumas, PTSD, and other mental health concerns. Andie clarifies:

In my relationships, there needs to be progress and moving forwards. And growing as a person and growing together. Otherwise, I don’t think it is healthy and it needs to be both people, not just one sided. I think it is more common in kink relationships, you know supporting each other and growing as people. But then again, it could just come down to the fact that we all talk so much with constant negotiations and conversations.

Mutual personal growth comes with constant challenges, redefining boundaries, reaching limitations, and exploring more difficult vulnerabilities.

**BDSM as a Coping Mechanism**

The most common misconception is that those who engage in a BDSM lifestyles are mentally ill or have experienced some type of trauma in their past. The largest contribution to kink stigmatization is the fact that sexual sadism and sexual masochism are still listed in the DSM-5 within any context (Taylor). Additionally, every participant mentioned the popular trilogy *Fifty Shades*, explaining its negative depiction linking BDSM to pathology and childhood trauma. While BDSM practitioners fall across a spectrum and some do have a traumatic past and/or mental health issues, a majority do not. Community leaders stated that they observed the kink community to be equal to any other community regarding mental illnesses and mood disorders. However, the kink community is a lot more likely to be open about these conditions because of the acceptance aspect and potential health risks. As trust magnifies in BDSM relationships, some practitioners allow partners to invite more vulnerabilities into their lives and overcome once protected boundaries. This can be a healing experience while coping with mental or physical boundaries with the proper safety preparations and precautions.
Psychological Management

Although BDSM is not a replacement for therapy, careful negotiations can lead to emotional release and be therapeutic. Mental health illnesses and mood disorders addressed in the interviews included posttraumatic stress disorder (PTSD), bipolar, depression, anxiety, and attention deficiency/hyperactivity disorder (ADHD). Although therapeutic can have a different meaning for each person, it commonly refers to a de-stressing strategy. Psychological management is not something that comes naturally in BDSM dynamics, it must be addressed and thoroughly discussed. The two individuals must have an intense trust level and understanding that there are risks (Alex). Even a simple scene may be negotiated that can bring up an unforgotten psychological trigger (Lady D). It is necessary to do extensive research and speak with a kink-aware therapist before incorporating mental health conditions into negotiations, especially with PTSD (Andie).

When discussing limitations and boundaries, it is important to take the initiative to bring up diagnoses to open the conversation for others to feel more comfortable sharing other possible risks. With a background in psychology, Robin encourages self-evaluation with knowing triggers and what leads up to episodes. She also recommends identifying and being cognitive on each health condition separately. Robin discloses:

I am bipolar, I was diagnosed with PTSD when I was five years old. I also had postpartum depression. I’m ADHD. Like most mental health cases, it’s not just one thing, it is a whole bunch of things. And it’s important for me to know myself and to be constantly kind of managing my own health... there are times when I have said, you know what, I am not in the best state right now to play. I don’t think it’s the best idea. I think I need to work on managing my mental health a little it and do some self-care before I can engage in whatever behaviors.
Furthermore, multiple participants emphasized the importance of awareness and informing others when talking about BDSM activities because consent is needed for potential risks, even if mental health conditions are self-managed.

When partners have mental health issues, it is important that it is addressed in a respectful and compassionate way. Several participants provided examples of assisting with managing partners mental health concerns. Alex states:

I find that kink lends itself to caring for these people in an interesting and special way. Like, take my current partner with her anxiety for example. Sometimes, I’m able to force her hand to do a thing, to push through her anxiety. And it is very constructive for her. Which you wouldn’t be able to find in a healthy, normal relationship without it being abusive behavior.

Mia says she knows a couple where one person struggles with mental health and sleeping. She explains that this person’s partner introduced structure by shutting the phone off at a specific time, making sure they get a certain amount of sleep, and reminding them to exercise. Depending on the dynamic and negotiations placed, psychological needs can be managed in BDSM dynamics. Beneficial approaches can regulate emotions through counteracting feelings of depression, manic states, anxiety, or ADHD. Some participants expressed being in dynamics where they consensually managed impulses and desires of self-harm (Alex, Andie, Naomi).

There are many actions in society that are deemed as self-harm, such as cutting, that are practiced routinely within BDSM contexts. However, from the interviews the main difference between the two is the directed motivation of the act. When asked the difference between self-harm as a coping mechanism and BDSM practices, every participant replied with the word “intent.” Non-suicidal self-injury is misunderstood and stigmatised, where it is an active choice to experience pain and typically is not disclosed to others. Although BDSM practitioners use consensual pain as pleasure, the vast
majority of participants agreed that self-harming falls in a completely separate category due to self-awareness. Gem and Mia acknowledge that they have seen a collection of individuals come into the BDSM community with a history of destructive self-harm. Sara reports:

I think a lot of cutting or burning yourself, or those kinds of self-harm tactics, are often prompted by mental health, or depression, or anger or something. Like for me, I use to burn my hand. And it was a manifestation of emotional pain, and it was a way of turning emotional pain into physical pain. And I think sometimes when people enter BDSM, they can actually have that need met in a different way. Because you are manifesting mental pain into a physical pain, and you can engage in that activity safely in a BDSM situation. You don’t necessarily need to do it to yourself … and sometimes you can be healed by it.

BDSM meets this need in a different, safe, and managed way. Gem also noticed that self-harm behaviors would suddenly stop once it was channeled into mindful erotic activities because individuals found a different form of management. Mia voices that society categorizing activities, like cutting and burning, as self-harm creates the assumption that it is only physically injurious. In reality, self-harm can be any type of activity attached to a reaction of an intense emotion. Similarly, Bubba provides examples of other activities that can be considered a form of self-harm:

I think that self-harm is not the act that is happening, it is the intent behind it. Eating is not self-harm, overeating and overindulging is. Exercising is not self-harm, over exercising and doing too much is. …I always tell people when we are talking about BDSM, that something is a disorder when it negatively impacts a person’s life. …But at the same time, is that not just an effective way to possibly cope with something that is going on. I think we have created this negative word called self-harm, and I don’t necessarily think that self-harm is a bad thing. I think what happened is, we have put a label on things and decided what is bad. With kink, with what is considered a crime and what is not, what is socially acceptable and what is not.

Bubba theorizes that self-harm has been placed with an unaccepted negative label, similar to so many other concepts in society, but essentially self-harm can be an effective coping mechanism if done safely.
The BDSM community significantly differentiates hurting someone and harming someone. Non-consensual harm causes long lasting physiological and psychological damage that can be permanent, no matter if that involves mental, physical, emotional, or spiritual (Lady D). As an active self-injurer, Naomi believes:

Self-harm coping mechanisms is powerfully comparable to kink. I think there is ways in which it is not necessarily about actions but about intentions. For certain, if you are going into a scene thinking, I have been very emotionally disruptive and I need this violence to achieve some sort of catharsis or some sort of feeling that I am doing something with my emotional unrest and the thing that you get out of the scene is a sense of peace. I actually do not fundamentally understand how that is different than performing harm on yourself to achieve that emotional outcome. Like, you are using another person for certain, but you are doing the exact same thing.

Other participants consider differences beyond intention. They add that individual self-harm is unsafe and can have lasting emotional damages concerning shame and hopelessness, while BDSM is cathartic with the process of aftercare. Alex explains that the intent of BDSM pain is pre-negotiated, so people involved aren't going to deliberately leave with regret, permanent risks, or a negative psychological impact. Charlie and Trudy both confided that they sometimes practice cutting as a part of their BDSM activities. The difference for Charlie is that the action of cutting is not the only remedy. It can be a part of it, but it will never be the entirety of addressing the underlying reason behind it. Trudy vocalizes the difference as:

I have clean equipment. I've trained how to do it. I've done it with people who had knowledge about it. I bought the correct aftercare. I don't have to hide my items. I don't have to hide my scars. There's no shame around it. I have a community of people who understand why I do it. I've done it for artistic reasons, spiritual reasons, sexual reasons. And when I'm done, I feel better afterwards, it heals.

Overall, while some practitioners may incorporate self-harm activities in their BDSM practices, the key element is being aware of the intentions of the act and not the act itself.
Reframing Past Trauma

Trauma is psychologically and physiologically linked, making it difficult to process and escape. In addition to therapy, some participants disclosed that BDSM scenes can be used as a coping mechanism to heal past trauma. Participants revealed playing with traumas surrounding sexual assault, rape, and domestic violence. Andie voiced that she felt trapped in a past relationship of abuse even with resources available because it was non-consensual. People who have dealt with trauma usually do not have a proper support system that understands. Some key elements in BDSM practices that are not present in past trauma included consent, control, predictability, boundaries, trust, and aftercare. Three participants gave detail of re-enacting their partners’ original trauma in BDSM scenes, allowing the survivor to confront and reframe the trauma by reclaiming their power and body. When one of Andie’s partners decides to play with trauma, she requires them to both see a kink-aware therapist three times a week, has her partner be honest with her individual therapist, become educated on PTSD, and follows other safety procedures. In addition to proper preparation, Andie notes that trauma re-enactment characteristics should slowly be incorporated into the dynamic before acting the full scene out. Similarly, Robin suggests being in a neutral environment and to do the absolute minimum to gradually build up triggers. After re-enacting a rape scene, Alex will spend meaningful time building his partner back up through reflection and conversations of the scene, sometimes even weeks or months later.

While playing with trauma, Robin and Trudy touch on the significance and consequences of what dissociation encompasses. Robin told a story of a time where one of her partners dissociated during a scene from a trigger and continued as if nothing was wrong. Although her partner kept consenting and acknowledging everything was
fine during the scene, she ended up having a major emotional breakdown afterwards. That scene left both Robin and her partner with lessons for future instances containing potential dissociation during activities. Specifically, Robin now negotiates responses along with triggers and what to do if situations like this occur. Juxtaposed is Trudy, who experiences dissociation spiritually. She described dissociation as “being above, looking down, not really in your body and not fully feeling everything.” She further defined it as a meditative space where it feels as if you are floating. Trudy states, “the spirituality of sadomasochism is about the ways in which you can process pain and use it to take you to different places.”

**Physiological Management**

Exploring the pleasure of pain can contribute to an array of feelings from confusion to escape. Some practitioners focus on mindfulness practices in their BDSM lifestyles. Trudy clarifies that the amount of pain can fluctuate on a daily basis, so the benefit of meditative practices allows an individual to not only experience the pain but move past it. She explains that pain one day can be a pleasure the next. Participants expressed that BDSM activities can offer alternative solutions to masking pain. Instead of running from pain, activities invite you to challenge pain and progressively tolerate it. Like Trudy, Victor expresses that pain has a clearing effect on one’s mind and draws him to the present. He notes that it is hard to ignore someone when they are causing you pain, thus he is able to get out of his head and focus on the moment in that scene.

When incorporating coping mechanisms in BDSM practices, it is important to be aware that there may be a balance of positive and negative attributes. Taylor discussed how kink activities have both helped and hindered her chronic illness:

I feel like engaging in kink that involves experiencing like consensual pain or a pain that I choose can help draw attention away from the pain that I don't choose.
The pain that I don’t consent to. As someone who has inflammatory bowel disease, possible undiagnosed arthritis, and joint pain. But also at the same time, you have to be careful negotiating with my play partner about whether any of the chronic illness or pain symptoms that I am experiencing aren’t exacerbated by the activity. For example, I deal with a moderate amount of wrist pain and if it is acting up a certain day, I might not want my response during a scene because that might draw my attention to that pain in a non-sexy way.

Taylor also highlights the effectiveness of endorphins that are sometimes released in BDSM activities. Not only during the scene can Taylor distract her body from pain, but endorphins can last a few hours after the scene, providing added relief from non-consensual pain. Instead of double shaming survivors of past trauma, the BDSM community provides education on how to safely address the pain they did not choose in both psychological and physiological ways. The community leaders in this study continuously noted that extreme activities like trauma play and dissociation should not be taken lightly, nor attempted without proper education and understandings.

**Healthy BDSM Requires Education, Preparation and Accountability**

Another misconception presented in the interviews with community leaders was that BDSM activities are spontaneous, unsafe, and do not involve education or skill. Bubba voiced, “I think, what people who observe it do not recognize is… all the work that goes into the vast majority of those scenes includes training, preparation, and safety stuff.” However, even with all the preparation and precautions, things can go wrong and that is normal (Mia). Participants recommended utilizing the tremendous amounts of resources that communities can provide to increase prevention and reduce problematic situations (Bubba). When engaging in healthy BDSM practices, practitioners attend educational classes, workshops, and conferences for knowledge, skills, and networking (Alex, Andie, Robin). There is preparation for activities with self-education, medical understanding, and aftercare planning (Gem, Jay, Naomi). Past generations also take on a role of
mentoring, passing down wisdom through experience, advice, and support (Bubba, Charlie, Lady D, Nelson). Furthermore, an important learning opportunity comes from taking accountability of mistakes when they happen (Sara, Victor).

**Educational Resources**

Some BDSM activities do not require a lot of expertise while others are completely dependent on knowledge and preparation. Regarding education, participants were asked, *what do you feel are the best ways to learn about BDSM?* Participants reported a variety of different considerations and resources that continuously overlapped. Every respondent included self-exploration with books, the internet, classes, workshops, and conferences. In many ways, when practitioners gain additional information about their kinks, they will reach a more intense satisfaction and fulfillment (Naomi, Walter). Lady D recommends:

> But the truth is that, as a master, my job is to make you the very best that you can be. And a lot of times what that means is, that you are learning how to maneuver in life inter-dependently. Not in an independent way and not dependently, but inter-dependently. For you to learn how to be able to do those things, to help you get over some of those boundaries, to help you to see maybe frailties. And what does that mean? That means that my ass needs to be making sure that on a daily basis, I am doing my self-work too. I got to be able to see where my weaknesses are as well. Because the truth is, you can’t lead from a place of weakness. And you can’t lead when you are in a place of thinking that you know it all, you have it all, you’ve learned it all, you can do no wrong.

Steven emphasizes the importance in staying true to oneself while exploring kinks through different educational opportunities. He notes that there is no right way to learn about kink, instead individuals should start off by following learning techniques that they are most comfortable with, and as time goes on, they may explore different learning avenues. When it comes to kink education, available resources can be an experimental learning journey depending on one’s own level of involvement in the community.
A gateway into learning about BDSM for beginners is through books and the internet, since they provide privacy when first exploring and understanding certain desires. The best BDSM learning theory for Jay was well vetted books written by experienced authors and literature published by educational companies. He clarifies:

And the reason I say books is because if somebody reads a book that requires sort of sustained concentration, which is an important element of BDSM. And also a lot of these books cover a wide variety of scenarios that you are not going to get from other learning experiences. So, for learning the theories of word, I point people in the direction of reading actual books. Again, not necessary a collection of articles and stuff.

Similarly, other participants expressed that books and educational videos were a great starting point in BDSM, especially when discovering what types of kinks and relationship roles piques a person’s interest (e.g. Charlie, Robin, Sara, Taylor, Victor). However, some participants point out that these types of resources can be problematic with differentiating fantasy from reality (Lady D, Michael). This was also a major concern when pornography came up as a learning technique because of the inaccuracy with the portrayal of BDSM practices (Andie, Charlie, Nelson, Mia, Walter). Although porn is a great way to acquire ideas and explore practices (Bubba), it should not be used as a form of learning (Taylor). For Andie, BDSM pornography was very exclusionary and discouraged her exploration at the start of her kink journey. She believes that individuals need to be around like-minded people to explore true and accurate kinks safely. As community leaders, the majority of participants have taught or continue to teach classes, workshops, or at conferences and encourage newcomers to start there.

Conferences, workshops, and classes are considered to be the most beneficial educational format and source for exploration with new kinksters and practitioners who have been in the community for a long time. Most individuals first attempt at practicing their kinks does not look like the work of an experienced BDSM practitioner or
master/mistress. The BDSM community provides an array of educational opportunities that can cover, but not limited to, language, techniques, roles, activities, and safety. Some of the educational topics the interview participants mentioned teaching included alternative lifestyles (Lady D), impact and age play (Trudy), therapeutic scenes (Lady D), correction, discipline, and punishment (Andie), emotional consequences (Alex), leather history (Charlie), poly and queer dynamics (Trudy), religious abuse and spirituality (Trudy). With the endless number of classes and workshops available, Trudy consistently changes up her course topics to deliver new ideas and for her own growth in learning. Not only do these in-person resources provide access to information, exploration, and hands-on practice, they also create a safe place to meet like-minded individuals. Conferences allowed Alex and Mia to develop a supportive network of people who understand and can help navigate exploration. Additionally, multiple participants expressed the importance of taking time to get involved with a local community (not just online), ask questions, and become educated before jumping into BDSM activities or a dynamic (e.g. Charlie, Lady D, Taylor, Robin, Nelson).

**Preparation for Practices**

There are not only many technical skills and educational lessons for the activities done in BDSM, but there is also preparation for practices through general safety groundwork, aftercare planning, and advice from mentors. The community leaders were asked, *what types of medical/safety understanding do you feel people participating in BDSM should have?* Regardless of the type of play, some participants expressed people, kinky or not, should have general safety knowledge including basic first aid care (Alex, Nelson, Sara, Victor), CPR (Andie, Bubba, Lady D, Jay, Nelson, Trudy, Victor), hygiene (Taylor), cleanliness (Michael) and mental health (Charlie). Majority of the
participants noted that the BDSM community already has a lot of people with medical backgrounds that come forward and assist in these types of situations. Nelson and Walter reported knowing multiple practitioners in their community who are either paramedics, doctors, or nurses. Robin believes it is not a coincidence that health care professionals are involved in the community since they are aware of the human body with the appropriate knowledge. Likewise, the events that Lady D organizes always have a medical professional present:

There is so many medical people that are in our lifestyle, it is very seldom that you can even go to a dungeon and there not be a doctor, nurse, nurse practitioner, or paramedic there. I mean they are all infiltrated in our lifestyle, so there is usually someone that can handle cases of emergencies. But I just think that having and knowing CPR is something that could save somebody’s life, period, whether you are in the lifestyle or out of the lifestyle. It is just a good thing to know.

However, this does not mean kinky medical professionals should be relied on. Most authoritative roles in the community, specifically dungeon monitors, facilitators, and party organizers/hosts, are required to have basic first aid and CPR certifications (Bubba, Jay, Lady D). Overall, all of the participants responses were centered around safety preparation being dependent on the type of activity they were engaging in.

Self-education and research are significant elements for BDSM activities, everyone has their own responsibility to be prepared for all potential risks that may occur. Victor advises every person involved in a risky activity to take time to make it as risk minimal as possible. One person’s risk management strategy may be completely different from another person’s approach, even if they are engaging in the same activity. Preparation has helped Walter develop various types of medical information and skills that can be implemented inside and outside the kink community. He explains that awareness, risk mitigation, and self-education provides room to take greater risks to grow as a person.
and as a community. In addition to understanding medical safety and individual possible risks, Naomi adds that it is important to acknowledge that some activities may expose others to non-consensual risks if the activity is held in a public space. For example, exposure to types of fluids or triggers. Jay highlights that safety is not only around medical understandings, but that communication is a huge safety factor and is often forgotten in safety talks. Although negotiation and consent are the base of BDSM activities, it is essential to ask questions about partners health risks that may be associated with the activity.

Preparation before a scene is just as important as being prepared for after a scene, especially if the type of activity is physically or mentally intensified. Practitioners who are new to the community or scene activity may struggle with being prepared to negotiate aftercare needs or be familiar with their limitation, so they might have a delayed reaction. Lady D defines it as the act of caring after playing with someone, no matter how simple a scene may be and no matter if the person did not previously mention needing aftercare. She notes that sometimes triggers are unknown or forgotten, so merely asking how your partner is afterwards is important just in case they were not previously known or discussed. Additionally, Andie emphasizes that both parties may need to be built up after for reassurance. Bubba clarifies:

Immediately after, all parties might be fine and happy with how it worked out. A day or two later, people might have a very negative response once the endorphins have worn off. On the top side, they could be feeling bad about themselves for doing something they see as ‘horrible’ while on the bottom side they might internally judge themselves for enjoying something like that. Societal norms and expectations certainly come into play with that.

In terms of debriefing, Bubba and Andie also mentioned the importance of checking in the day after or even a couple days after because sometimes endorphins can take a while to wear off, resulting in a change of emotions. Similarly, after re-enacting a
traumatic experience with one of his partners, Alex’s strategy consisted of building her back up by writing a debrief, or a report, about what the scene entailed. He noted:

Talking to me and coming to me sometimes weeks or months later to discuss things. And that has been very different than somebody who needs a lot more direct and hand on work, like my current partner, who I spend a lot of time building up. Regardless of whether I have broken her down, just working through her psychological issues.

Michael, Lady D, and Bubba provide lists of prepared essential items for aftercare including blankets, water, food pillows, or whatever is negotiated dependant on the practitioners. Although there is a lot more attention for specific education and skills in the BDSM community, Bubba and Lady D highlight that as BDSM becomes more mainstream, aftercare is becoming less recognised.

In addition to exploring education and general safety strategies, some of the participants recommended mentorship as a form of learning and preparation (Bubba, Jay, Charlie). Although Lady D notes that the role of trainers and mentors have definitely changed from thirty years ago when it was more based on classism, Bubba mentions it is still a key component of kink and BDSM. He defines a mentor as someone who promote safe practices and prevents future problems from occurring. For Trudy, mentorship is a non-sexual BDSM partnership that is helpful and available; a person who not only teachers but provides a safe space to discuss personal desires and ask unclear questions. As highlighted by Charlie and Nelson, true mentoring comes from having multiple mentors at a time to gather a variety of viewpoints, advice, and feedback. Specifically, Nelson, who has been a mentor, points out that it is important for education to be passed down from an older generation who have gone before them and have made mistakes. Overall, a significant aspect of mentorships is trust, not only trust in your trainer but also trust in yourself to be aware and accepting of mistakes.
Self-Awareness and Acceptance of Mistakes

Awareness has been connected to every theme that has existed in most of the findings for this thesis. It has been presented in the initial acceptance into the community, self-awareness through the negotiation process, and mindfulness of others in relationship dynamics. Self-awareness and acceptance are essential when mistakes happen while practicing BDSM and it can be seen as a form of preparation to combat related mishaps presented in the future. It has been understood that there are several factors to consider before engaging in BDSM activities, all depending on the needs and limits of the people involved. However, mistakes will happen no matter the amount of education, negotiation, and preparation. Mia notes that a large issue with society is that mistakes are hidden and not normalized, holding back individuals from addressing unintentional harm. Mistakes and long reaching consequences are a part of growing for Naomi as individuals need to explore openly and accomplish change to learn. For Bubba, it is not just about being aware of mistakes, it is about recognizing when something is wrong and taking accountability.

Three participants disclosed situations where they made a mistake, acknowledged and accepted the mistake, and then were able to turn that mistake into a lesson that can be to be advised to others. Both Andie and Robin mentioned accidently continuing a scene where their partners were in an unnoticeable dissociative stage, resulting in new triggers. By being aware and accepting of their mistakes, Andie re-established trust by slowly working through the trauma with her partner and Robin learned to be prepared by addressing responses to potential triggers during negotiations. In another circumstance, noticing and admitting to a mistake can lead to understanding life values. Although Alex does not specifically seek out individuals who have gone through past trauma, he does
explore that side of history during the negotiation process to understand a person’s relationship with pain. In some of Alex’s more serious and trusting dynamics, trauma re-enactment, along with outside therapy, was an occasional activity. Unfortunately, he mentions that at times those more intense psychological scenes can create additional damage that may end the relationship. With his nurturing and supportive characteristics, he has learned to reconcile that he has to accept consequences if it means helping someone reclaim their power. Additionally, he notes that individuals who are seeking to work through traumatic situations will find someone to assist one way or another. Whether that is through a predator that can easily abuse their vulnerability or safely with a partner who can provide support consensually and caringly. Taking personal accountability when mistakes happen is crucially important to grow as individuals, build trust in relationships and be prepared in future situations.

**Ensuring Kink Community Safety**

The last conception presented in the interviews was that BDSM is, overall, extremely abusive, unhealthy, and dangerous. Contributing to this is the negative representation of BDSM in crime television shows. Two participants noted that CSI and Criminal Minds have had characters symbolizing certain BDSM roles as predators and murderers. Since there is not a distinct set of authority and laws in the BDSM community, the larger society perceives BDSM as a way to be out of control and secretly harm others (Charlie, Trudy). Some participants predicted that people outside of the community consider BDSM practitioners as abusers, perverts, molesters and pedophiles (Alex, Nelson, Trudy). Contrary to the prevalent misconceptions, BDSM can be healthy or unhealthy depending on who is involved in the relationship. While previous findings have placed emphasis on strategies to promote healthy individual BDSM dynamics, the larger
community ensures safety by organizing different ways to avoid unhealthy BDSM. In addition to educational courses addressing abusive and predatory characteristics, the community relies on a form of self and community policing to regulate the predators in local areas.

**Healthy vs. Unhealthy Practices**

To gather information on unhealthy practices, we asked community leaders, *what is the difference between healthy and unhealthy BDSM practices?* Responses mainly focused on unhealthy and abusive signs, since healthy practices had already been emphasized throughout the interview. Lady D voiced, “I don’t particularly call them unhealthy BDSM practices, I call them unhealthy practices. Because if you are unhealthy in the world, you are unhealthy in this lifestyle.” Majority of the participants explained that the health of BDSM relationships are no different than non-BDSM relationships.

Generally, healthy relationships are built on communication, mutual respect, trust, and personal development. Nourishing practices add to the quality of life, while unhealthy practices comprise anything that tears someone down without the ability or support to build them back up (Charlie). Once again it is all dependent on the individuals involved, something healthy to one person may be unhealthy to another (Jay, Mia, Michael, Walter). Bubba illustrated:

> I think a healthy relationship is one where parties help each other grow in different ways and they support each other. I think although society probably doesn’t want to look at it this way, I think that a lot of traditional relationships, let’s say if you go back to the 1950’s… relationships can incorporate characteristics of a dominant/submissive dynamic. You have the one who took care of things and the one who doled out punishment and made rules.

However, Bubba also notes they were more prevalent and considered healthy in that time period. For instance, the man (dominant) of the house was the breadwinner and the one that creates the rules of the household, while the wife (submissive) was presumed
to be on a lower level, following the set rules. Additionally, Lady D points out that non-BDSM relationships still portray a type of power dynamic, they just do not refer to it in that way. She gave an example of a couple being in a grocery store, where one person is complaining that they want to be done with shopping and the other makes them wait. Although participants expressed the difficulty in distinguishing individual unhealthy and healthy BDSM practices, they were able to provide red flags and examples of abusive and predatory characteristics.

**Abusive and Predatory Characteristics**

When asked the difference between impact play and abuse, every participant said consent and intent. Of course, not everyone in the kink community will be decent human beings. Every community has their share of predators, abusers, and immoral individuals. Some people who are dangerous outside of the community will bring that into the lifestyle. Participants expressed that most of the time these types of individuals will prey on new people entering the BDSM community (Alex, Andie, Bubba). Jay expresses smart predators will target individuals who are less educated with less experience, giving them the advantage of the victim not knowing the steps to report them or they begin to blame themselves. In addition, experienced dominants or tops can easily convince newcomers that their way of the lifestyle is the right way, in a manipulative and exploitive manner. Andie provided an example where a young woman was paying their masters bills for four months simply because he said that was her job. In another example, Bubba disclosed that he has seen people prey on the vulnerable individuals who do not understand their own boundaries and limitations just yet. He notes that when he is introduced to someone new, he advises them to ask three other community members perspective on someone before they engage in BDSM activities with that person. Other
red flags that were mentioned included sticking with only an online dynamic, not allowing people to watch them play, and not being involved in the community (Sara, Nelson, Robin).

Self and Community Policing

The last set of questions focussed on safety and policing inside the BDSM community. Specifically, the community leaders were asked *what role, if any, does law enforcement play in your community?* The vast majority of participants expressed never wanting to involve law enforcement in situations, mostly due to the misunderstanding and the negative perceptions placed on their culture. Alex expressed:

> Unfortunately, the way our system is... you go in with a rape claim you're more likely to get shamed. You tell them that you did this thing and it's kinky, they're not going to try to understand that they're going to tell you, you are asking for it. Like the odds of things going well with law enforcement and then actually filling this role in a way that is understanding and helpful towards victims and all of these things is very sad... And in a perfect world, there would be a third-party organization that is particularly adept at dealing with consent issues, who could be contracted or outsource to sort through these issues, whose recommendations we could listen to.

Similarly, Mia notes that incidents like sexual assault are already a difficult route to take in the justice system, adding BDSM to the mix can make it even more challenging. If someone has been a victim of a crime, law enforcement should have the appropriate training and education to know how to deal with that. As queer identified, Naomi expressed her concerns, that in any situation involving law enforcement usually results in a more severe consequence, especially for marginalized individuals. She highly believes that law enforcement should only be called upon if the person in the situation makes that decision for themselves. Additionally, Jay and Walter both point out that a lot of the activities and characteristics in the BDSM culture can be considered abuse or rape in the eyes of uneducated law enforcement. Overall, from the responses, BDSM
practitioners would rather not involve law enforcement when situations may need policing.

Instead of relying on law enforcement, the BDSM culture implements a system of self-policing and community policing. For Charlie, community policing is exactly how the term sounds, policies to police themselves and each other. They note:

So, my leather family, we police ourselves accordingly to our values and how we actually want to interact with folks and in the world. It is really difficult because outside of that, most folks don’t know how to not something, like personal beef, and not make it a community issue. …We police in these tiny bubble communities and sometimes the bubble communities will overlap and the information will be shared. But a lot of folks don’t even know what their own personal values and ethics actually are, so they don’t even know how to begin to police themselves outside of what a larger community will do for them.

Overall, as long as individuals are respectful, there shouldn’t be any issues. Both Sara and Jay explain that a lot of the community leaders know one another and will constantly keep each other informed on predators or dangerous people as a “whisper network”. Alex, Andie, and Bubba also note that in regard to the whisper network, there are concerns when rumors are passed around, simply because someone was holding a vendetta or disliked another. However, being in the community for a long time, both Lady D and Nelson worry that with the BDSM community expanding, it is becoming more difficult to police. Multiple participants expressed similar concerns, especially since BDSM practitioners usually hold a different identity and name to not be outed, making it easier for predators and abusers to jump around communities in different areas.

In terms of consent, Taylor emphasised that the BDSM culture established a community where victims of abuse and consent violations feel comfortable coming forward to the respected leaders. Specifically, she notes that in the last few years her community has begun to incorporate a transformative justice to try and provide justice for those who have experience harm. Taylor describes this type of policing as taking
accountability of violations and making amends with the people they have harmed. This provides an even greater establishment on consent by providing a space and tools to understanding the harm done, learn additional communication skills, and prepare for future mishaps, while also supporting the survivors. Specifically, Victor has practiced transformative justice with his community, although it has only been a couple of cases and notes they have had positive outcomes.

I think that's where restorative justice [transformative justice] plays a very important role because there is not just this… I don’t want to say liminal space but there’s definitely a grey area, where punitive justice can't help us. But someone needs to do something, and restorative or transformative justice is so effective. I have found in those small grey areas where it's like, hey, this is the experience someone had with you. It is not about whether you did it. It's not about you being punished. It's about you understanding you are giving people the experience. If you don’t want people to have this experience of you, there are things you could to change. Here is an impact statement from that person and here are some suggestions, just to be helpful. …Here is the experience of view that you have given someone in this one moment, it doesn't define you.

The most important attribute is holding accountability and working through violations, especially when one might not understand. Transformative justice promotes healing with the victim or survivor and the assumed offender.
Chapter 6. Discussion and Conclusion

Perceptions and conceptions of subcultures within society can lead to social stigmatization of those within the subgroup. When activities conducted by the subgroup are viewed by society as deviant, it can lead to members hesitating to seek support and/or utilizing resources. This becomes especially problematic when it prevents subgroup members from obtaining mental health and criminal justice services. The goal of this thesis was to dispel stereotypes surrounding BDSM communities by using in-depth, semi-structured, interviews with 18 BDSM community leaders. While each community leader’s experiences, strategies, and perspectives were unique, commonalities in practices and principles emerged. Therefore, findings from this thesis make three important contributions to understanding BDSM culture and practices: (1) BDSM participation extends beyond sexual pleasure, (2) BDSM dynamics can incorporate mental health therapeutic coping mechanisms, and (3) the BDSM community provides alternatives to the criminal justice system.

The central finding from the interviews suggested that BDSM communities create alternative institutional spaces outside of mainstream resources, particularly in healthcare and criminal justice systems. These findings illustrated how the BDSM culture goes beyond sexual pleasure and develops, enforces, and embraces healthy and safe alternatives to mainstream institutions. These alternative practices were designed to meet the needs of BDSM practitioners and overall communities in ways that mainstream institutions may not. More specifically, the findings from this thesis demonstrate how BDSM communities enact subcultures as resistance by producing cultural principles and practices that exists in opposition to the dominant culture and social institutions. The
alternative BDSM health and safety principles can be viewed as useful models for other subgroups and society as a whole.

**BDSM Beyond Sexual Pleasure**

There has been extensive research on the practice of consent within the BDSM lifestyle; however, this literature has focused mainly on the overt element—consenting to sexual/physical pain and pleasure. This has led to only a surface-level understanding of consent within BDSM. It is important that we recognize that within the community, and society in general, consent is not just about physical touch but incorporates a wide variety of fundamental elements. When it comes to consent within BDSM, it is not just simply “yes, I consent to receiving physical pain,” but rather it involves an extensive discussion of a myriad of elements that needs to be considered and explored more in-depth within the literature. These include topics such as mental health, self-exploration (e.g., personal growth), expectations, and triggers. In addition, discussions around consent can be unique, depending on who is involved and what is being negotiated, and can constantly change. Within BDSM communities, this can include identifying activities (e.g., face slapping) that are triggering as well as similar activities (e.g., slapping the chest) that are acceptable. As BDSM consent guidelines typically include obtaining a better understanding of a person’s background and conditions that lead to boundaries and what a person does and does not consent to, it can serve as an appropriate model for others going forward in a post #MeToo society (see Fileborn & Loney-Howes, 2019; Newman & Haire, 2019). This can influence change in norms surrounding sex and formulate more thorough consent laws that better fit all types of sexualities.

Societal perceptions of sexual and physical pain/pleasure playing a central role in BDSM participation is accurate. However, it is important to recognize that it is not always
the driving force and that other components are also often present. For example, there is typically an emphasis on personal and mutual growth within dynamics, which is facilitated through consistent conversations and reflections over time. Functioning as an open-minded community, those who join have the opportunity to explore and accept personal desires, hidden boundaries, identities/roles that were previously shamed, etc. In doing so, there is an opportunity to break down barriers and judgements that have built up over time through societal perceptions. BDSM comprises of being aware of, and working through, insecurities, overcoming past traumas or phobias, acknowledging and understanding mistakes, adapting to alternative coping mechanisms, and lastly, developing and practicing learned skills through education. Instead of stigmatizing the culture, society should learn and follow similar social etiquette by expanding understandings surrounding explicit consent, boundaries, and open communication without labels or judgement.

**BDSM as a Form of Serious Leisure**

Society upholds traditional norms that have influenced the general population to only view BDSM through a sexual lens, leading to negative perceptions and misrepresentations surrounding its purpose. However, the considerable amount of time and determination participants place acquiring certain skills, experiences, and learning specific BDSM practices point to it needing to also be understood as a form of serious leisure rather than simply a lustful indulgence (Sprott & Williams, 2019). For many practitioners, BDSM participation is about more than just pleasure and/or pain. There is an emphasis on purposeful participation in activities, stress relief, positive emotional behaviors and engagement, adventure, and relaxation. Therefore, BDSM integrates hobby attributes that promote everlasting opportunities to learn and grow, not just at an
individual level but also with like-minded people who provide motivation and support. By recognizing BDSM as both a serious leisure and sexual pleasure can assist in debunking societal misconceptions claiming that BDSM is comprised of the dangerous and mentally ill, when in fact, BDSM promotes healthy outcomes.

Newmahr (2010) argues that the social process that shapes and reshapes the motivations of BDSM are often overlooked and BDSM has consistently been observed as only a sexual practice. My findings reflected similarities with BDSM practices going beyond a sexual component, however, it also identified additional elements in areas exploring personal growth and education that can also be a healthy form of serious leisure. Considering the leisure and sexual components more equally offers a more thorough understanding of the diverse attributes across the BDSM community. This thesis was able to look beyond the sexual and physical component of BDSM and discover several motivations within the practice including the development of social networks, opportunities for personal growth in self-acceptance and self-awareness, educational learning aspects, skill development, mindfulness, emotional release management, and overall self-exploration. However, it is important to bring attention to the dangers of classifying BDSM as only a leisure activity because it can result in society dismissing it as a significant attribute to one’s life (Sprott & Williams, 2019). With this thesis bringing corrections to most societal misconceptions, it is significant to move away from the perceived assumptions that BDSM is either sexual or a form of leisure and focus on how it can play a fundamental role under the broad umbrella concept encompassing serious leisure and sexual expressions.
**BDSM as Therapeutic, Not Therapy**

In general, mental health has a long history of being hidden and socially stigmatized (Corrigan et al., 2016; Harnois & Gabriel, 2000). For BDSM practitioners, the pathologizing of sadomasochism as perverse has led to increased social and self-stigmatization, including discrimination from mental health professionals (Bazreh et al., 2012; Wright, 2006). As a result, BDSM practitioners who have past trauma or abuse are hesitant to express this to a therapist, due to the fear of contributing to the stigmatization of BDSM as pathological (Barker et al., 2007). Because of this lack of support, BDSM participants have incorporated emotional release techniques into their BDSM activities. With careful negotiations, built around trust and proper education, some activities and dynamics can assist in therapeutic release and healing.

**Normalization as a Therapeutic Tool**

The focus on self-growth, openness, support, and acceptance within the BDSM community can function as an effective therapeutic tool for addressing mental health issues. Labels can have a negative effect on a person’s mental well-being, by creating feelings of isolation and discrimination and can be detrimental to coping and social skills (Link et al., 1989). The BDSM community’s open discussion and acceptance of mental health issues can promote less stigmatization and opportunities to obtain social support and explore adaptive coping strategies when managing mental health. Therefore, it may be that because mental health is openly discussed and addressed within BDSM communities, studies have routinely found that those who engage in BDSM activities present equal or better rates of self-esteem, depression, anxiety, OCD, PTSD, overall well-being, sensitivity to rejection, extraversion, openness to experiences, and conscientiousness than the general public (Connolly, 2006; Richters et al., 2008;
Lessons learned from the BDSM community and the #MeToo movement have parallels with combatting the social stigmatization attached to mental health. Normalizing the conversation surrounding mental health significantly reduces the public stigma associated with mental health conditions, creating a more positive, supportive, and help seeking social environment.

Adaptive Coping as a Therapeutic Tool

Psychological research has summarized effective adaptive coping strategies to include: restructuring (reframing stressful events in a positive light), problem-solving (awareness and planning), social support seeking (friends and family support), distraction (engaging in alternative activities, exercise, spirituality, and mindfulness) (Allen & Leary, 2010; Alleyne et al., 2010; Cairney et al., 2014; Cole, 2005; Sharma & Rush, 2014; Sirois et al., 2015). Whether intentional or accidental, many BDSM participants employ these same techniques/strategies through their BDSM activities via a different setting, thought out negotiations, extensive education, and a larger support system. Furthermore, BDSM practitioners who assisted others with healing and coping also acquired a boost in confidence and overall meaning of life by helping someone else grow. While engaging in BDSM can be a healthy form of healing and an adaptive way to de-stress (Schuerwegen et al., 2021), it should not be viewed as a primary treatment. Rather, it can be therapeutic in a healing, cathartic, and reinvigorating way by assisting as a tool for therapy. However, it is important that people obtain the proper knowledge and preparation before practicing therapeutic release and management through BDSM activities, especially when used as a tool to cope with trauma and other forms of pain control empowerment.
Mastering Trauma and Pain as a Therapeutic Tool

BDSM activities can also function as a therapeutic healing tool for survivors of past traumatic experience (e.g., domestic violence, sexual assault, rape, child abuse), chronic pain, and self-injury. This can include being able to openly discuss the experienced emotional or physical pain, take back control over the body and mind through exposure, progressively build coping strategies and boundaries surrounding triggers or maladaptive outlets, and establishing trust and proper preparation beforehand. While not every trauma or chronic pain survivor will find BDSM activities as a healing mechanism, it has been beneficial to some participants. This is consistent with research arguing BDSM activities can be beneficial with therapeutic healing by allowing practitioners to (1) decide how and to what level they receive pain, (2) have the consciousness that the pain is temporary, and (3) stop whenever they want (Sheppard, 2019; Thomas, 2020).

However, it is important to recognize the potential dangers with re-enacting trauma in BDSM settings with potentially re-traumatizing the survivor, without proper knowledge and preparation, and being more vulnerable to predators who distinctively seek out these individuals. BDSM practitioners who want to incorporate trauma into their activities should frame healing as mastering their trauma in education, skills, and progressively incorporating traumatic elements to overcome, instead of re-enacting the initial traumatic experience in one scene.

Similarly, individuals who come into the community with a history of NSSI can also master the impulses and desires by incorporating the same therapeutic release with BDSM activities. Community leaders notice an abundance of self-injurers that come into the community and transition previous maladaptive coping strategies to a more evolved and safe way to experience pain. Research suggests that NSSI can occur when an...
individual has poor social support, lack of self-esteem, adverse life events, and/or have experienced trauma (Ammerman et al., 2017; Andrews et al., 2013). This suggests that since the BDSM community offers support and avenues to work through mental health, maladaptive coping methods can transform to adaptive coping strategies, especially with NSSI. While BDSM characteristics from an outsider’s perspective may seem similar to NSSI, regarding activities involving pain, there are several differences, such as the intention of the act, proper support, boundaries, after-care, de-briefing, management and not feeling shame. It is critical to be aware of the intentions and negative impact in the situation, not just the act itself. Research has argued that social stigmatization attached to NSSI results with shame in scars and discourages individuals to appropriately seek help (Lewis & Haskings, 2020). This thesis provides a clearer understanding that by de-stigmatizing NSSI and allowing individuals to safely practice pain in an alternative way, individuals can experience the same emotional release without harming themselves and can overcome uncontrollable urges. These findings propose with the proper support and safety precautions there can be a reduction in hiding self-harm with a decline in the dangers that may come with practicing emotional and physical pain release alone.

**BDSM Strengths as Social Tools**

In addition to the healing and management strategies that can be incorporated into BDSM activities, participation can contribute to an overall healthy lifestyle. Awareness, acceptance, honesty, and accountability were consistent themes. Research has found that individuals with high self-esteem, self-compassion, and self-awareness are more likely to adapt to positive problem-focused coping mechanisms (Allen & Leary, 2010; Lazarus & Folkman, 1985; Sirois et al., 2015; Thoits, 1995). BDSM participants revealed that their once negative traits became strengths and followed them outside of their kinky
relationships, improving their interactions with non-kinky people as well. For example, when individuals practice discussing and analysing their needs with respectful and supportive responses, it can assist in speaking up in other non-kinky environments. Being cautious of others’ boundaries, being straightforward and honest in conversations, embracing diversity, focusing on consent with anything that involves touching, acquiring interpersonal skills, being able to have tough conversations and be rejected, the list goes on. These strengths in the BDSM culture provide support in building one’s self-esteem and confidence. While previous research has focused on BDSM qualities being implemented in the mental health field (Moser & Kleinplatz, 2006) and in social work training (Williams et al., 2017), these results demonstrate that BDSM strengths should be common daily practices, kinky or not.

**BDSM Alternatives to the Criminal Justice System**

The criminalization of some BDSM activities have resulted in the need to overcome the lack of support from the criminal justice system by creating a culture of extensive self-policing strategies, to ensure the health and safety of community members. One way in which oppressed sub-groups, including BDSM, have sought alternatives is through the implementation of transformative justice, which utilizes a community-based accountability approach that focuses on survivors and attempts to reduce additional harm. Research has shown that transformative justice practices are most useful in sexual assault, domestic abuse, interpersonal violence, socioeconomic and racism issues (Armatta, 2018; Kim, 2021; Pyles, 2020). The BDSM community can benefit from transformative justice strategies in instances of consent violations, assault, and abuse. However, participants acknowledged societal perceptions that some people within the BDSM community engage in predatory behaviors without accountability, which can
make transformative justice strategies difficult in some circumstances. This points to a need to improve relations between the criminal justice system and the BDSM community, so members can comfortably go to law enforcement if needed. However, this can be challenging for both sides. First, law enforcement and legal professionals are not very educated on the BDSM culture and can likely accept societal misconceptions as truths. Second, there is a significant amount of mistrust among BDSM community members of law enforcement officials which can result in lack of cooperation and underreporting of victimization.

**Educating the Criminal Justice System**

Incorporating into the criminal justice system laws that protect BDSM practitioners have been seen by some as problematic, since activities one may view as consensual and harmless another may perceive as dangerous and abusive. Historically, we have witnessed some nations such as Canada and parts of the United States start acknowledging BDSM as mutually consensual activities rather than violence, throwing out cases with insufficient evidence (Barker et al., 2007; State v Gasper, 2009). However, it is not just the laws that discourage BDSM practitioners from involving the criminal justice system. It is also the fact that law enforcement and legal professionals do not have the proper training and education, leading to constant misunderstandings and perceived judgement. In addition, many BDSM participants identify as LGBTQ+ and/or POC, creating an even greater hesitation and worry when it comes to the criminal justice system.

Legislation surrounding BDSM is still extremely controversial with a further need for education and proper assistance when dealing with BDSM situations, to build trust between the community and law enforcement. Although some courts have started
accepting consent as a legitimate defense, the lack of education on the BDSM community can also allow abusers to cover up domestic violence and sexual assault. For example, the powerful men previously mentioned that utilized the BDSM excuse in sexual assault cases and ended up not facing serious charges, although there were multiple accusation against them. Not only does this contribute to literature surrounding structural stigmatization and the concept of people with privilege and power, but it draws parallels with Bennett’s (2020) argument on the bogus BDSM excuse and the need to decriminalize BDSM activities. By decriminalizing BDSM, courts can better understand the culture and effectively distinguish false BDSM defenses and actual non-consensual abuse. In addition, courts should acquire well educated expert witnesses with cases that involve BDSM-related activities. Both the BDSM community and criminal justice system promote consent being the central foundation regarding sexual assault and abuse. However, when there is a consent violation in the BDSM community, the harm is not only to the victims but also to the already vulnerable reputation of the community.

**Predatory Concerns in Self/Community Policing**

BDSM becoming more prevalent in the mainstream culture has further promoted acceptance, however, it has also brought additional concerns regarding predators, abusers, and false accusations within the community. A large section of this thesis focussed on health and safety principles leading to understanding signs of unhealthy practices and characteristics of abuse. Participants commonly noted that predators in the community prey on the new people entering the community since they are assumed less educated and more easily manipulated. This also correlates with concerns surrounding negotiations, mental health conditions, and triggers. The present findings are significant in at least two major respects. First, research has noted that BDSM
participation can have a wide range of involvement from the intensity of activities to the motivation toward practices (Barker et al., 2007; Bezreh, Weinberg, & Edgar, 2012; Damm, Dentato, & Busch, 2018; Ortmann & Sprott, 2012; Pitagora, 2013). The issue with this is that when individuals come into the community wanting a light sexual experience and jump into intense activities without the proper education, they can become vulnerable to the abuse of predators. Secondly, research has shown internalized stigma can result in not seeking treatment and contribute to the avoidance of mental health conditions (Coleman et al., 2017; Corrigan et al., 2016; Schomerus et al., 2019). When individuals are not yet aware of their own boundaries and limitations, specifically if they have hidden trauma or ignored mental health disorders, triggers can lead to re-traumatization which can further result in making accusations against a partner that did not have the intentions to harm. The data contributes to a clearer understanding of the constant distresses and fear of predators regarding self-policing within the BDSM community.

Historically, individuals who engage in BDSM that have been in contact with the criminal justice system have received discriminatory legal actions (Bauer, 2014; Turley & Butt, 2015), ranging from criminal charges to custody battles (Bennett, 2013; 2014; De Neef, et al., 2019; Holt, 2016; Weait, 2007; Wright, 2010). Specifically, BDSM practitioners have had to defend themselves against negative perceptions in society that have flooded in other forms of social support resources with an insufficient amount of protection. It is no surprise that sex-positive communities, such as kink, BDSM, and alternative relationship structures have implemented an alternative form of self and community policing. From the current findings, it was a common concern that with the community expanding, it is providing a larger platform for predators to keep abusing. For
example, with BDSM still highly stigmatized, practitioners that are not ‘out’, usually create a disguised identity with a different name and appearance. Although this can be completely harmless to most, it can also allow abusers to alter their disguise and jump to different communities while avoiding carrying any reputation with them. These results can make it difficult to apply transformative justice in certain situations when predators are able to run from the focus of accountability. However, transformative justice can be implemented in terms of solving altercations with false accusations. Participants noted that community policing can be difficult when rumors are easily spread around the community for reasons including having a bad experience, having a vendetta, or simply just not liking a person. By not having the proper support from the criminal justice system and having extensive mistrust with law enforcement, communities tend to rely on alternative strategies. Transformative justice and self-policing are appropriate for most situations but can lack necessary assistance in others. Reclassifying subgroup labels such as ‘deviant’ could reduce the attached social stigmatization, thereby allowing these groups to comfortably seek out proper resources.

**Limitations and Strengths**

There are four important limitations of this thesis that need to be considered: (1) the researchers’ positionality, (2) disadvantage in resource access, (3) the sample size with location and characteristics, and (4) attitude fallacy. First, it is important to consider the researcher’s position as a non-member and previously uneducated in the community being studied. This can be considered a potential advantage and disadvantage to this thesis. Being an outsider can limit understandings during the interviews and analyses, since it is not something that has been personally experienced by the researcher. However, by being an outsider and not initially well-educated on the community also
contributes to trustworthiness by having a more objective examination of realities, to reduce the chance of bias when interpreting findings. Second, although this was written shortly after an educational boom in social science research associated with the BDSM community, this thesis was conducted during the 2020 pandemic, which brought limitations when conducting interviews in person and having access to appropriate resources. However, by being forced to conduct interviews online influenced the researcher to expand the thesis to a variety of participants from Canada and other parts of the United States.

The third limitation is the generalizability of the findings is restricted to a non-universal, small sample size from Canada and the United States. These two populations may have less stigmatization surrounding alternative sexuality lifestyles than, for example, Midwestern and Southern states or European nations. After interviewing the majority of participants, it was noticed that the sample consisted of predominantly White participants. Therefore, a second round of recruitment was used to fill in gaps pertaining to racial diversity. Since this was not a goal from the onset of the recruitment process, there was not an equal sum of diversity and the participants were categorized as either White or non-White, without additional racial backgrounds included. One of the main strengths of this thesis was that all the participants were recognized as respected community leaders and had at least ten years involvement in the BDSM community, ensuring reliability and accountability. However, interpretations were constrained by not having the voices and perspectives from new people just joining the community in present time. Lastly, the fourth limitation acknowledges that with all qualitative research, we must be aware of attitude fallacy (Jerolmack and Khan 2014), that words are not always consistent with behaviors. Limitations and strengths that were recognized while
conducting this thesis developed future research avenues for social scientists exploring the world of BDSM.

**Research Recommendations**

Four areas for future research that emerged from this thesis include (1) BDSM in the criminal justice system, (2) the historical roots of BDSM, (3) BDSM practitioners and diverse racial ethnic backgrounds, and (4) BDSM during the 2020 pandemic. First, the original thesis proposal stemmed from exploring the BDSM community regarding social stigmatization and the perceptions of law enforcement. There has been a tremendous amount of research examining marginalized communities’ uneasy relationship with law enforcement. Specifically, this thesis found an extreme fear and mistrust between BDSM practitioners and the criminal justice system. However, with the limitation of having a small sample size, there are still many unanswered questions regarding experiences and perspectives from the BDSM community toward law enforcement, particularly, law enforcements perspectives and training related to the BDSM culture. To properly address non-existent or negative relationships between two populations, the concerns of both groups need to be taken into consideration (Tyler, 2011). The first attempt at this thesis purposed to interview both BDSM practitioners and law enforcement, however, due to the current climate of the world, law enforcement agents were hesitant to participate. In addition to examining law enforcement, further research is needed to establish understandings from the legal side of the criminal justice system, specifically by talking with lawyers, prosecutors, and witness experts concerning laws and cases associated with BDSM activities. With these suggested research avenues, it is significant to acquire literature on accurate BDSM history, particularly on how the BDSM community progressed to where it is today.
The second research recommendation is additional research delving into the history of the BDSM culture. While exploring and studying literature for the current thesis, there seemed to be a lack of research regarding the BDSM community and its historical roots. Understandably, it can be difficult to acquire precise and chronological historical evidence with underground and stigmatized communities. However, some of the participants from this thesis noted that there is so much history entrenched in the BDSM culture that has made it what it is today. This also brings attention to the third research suggestion to study BDSM and race, as this thesis naturally recruited a predominantly White sample. While there is a small amount of literature surrounding White privilege as it pertains to alternative sexuality lifestyle choices, specifically BDSM participation (Cruz, 2015; 2020), it would be fascinating to interview the diverse racial ethnic backgrounds from all different areas of the world. For instance, recent research has connected BDSM activities with spirituality and rituals that are practices in other cultures. The interviews can also grasp the voice and experiences from individuals who have been challenged with racial disparity and the social stigmatization of practicing BDSM as they can intersect. It is extremely significant when studying marginalized communities to provide a platform to empower the intersectionality between other stigmatized characteristics. Lastly, with the current pandemic coming to an end, it would be interesting to explore the lives and experiences of BDSM practitioners during lockdown. Hopefully, research in these areas with begin to promote education, de-stigmatization, and overall equality.

Conclusion: Rethinking Subcultures as Deviant

There has been a long history of ‘deviant’ subgroups not being accepted by society (e.g., Rubin, 1984; 2011). Despite the major challenges and constant fight for approval, some non-traditional sexualities such as LGBTQ+, have become increasingly accepted
throughout society. The BDSM subgroup seems to be following the trajectory that the LGBTQ+ culture experienced, and the challenges faced with the enduring fight for sexuality equality. By labelling a characteristic as deviant or pushing them to the outside of normality discourages individuals to disclose information and seek support from societal resources, which could then result in additional stigmatization and can be detrimental to one’s health. Research has reported that LGBTQ+ populations started to have higher self-esteem, less depression and fewer suicide attempts with the increased amount of social understanding and acceptance of the LGBTQ+ culture (Russell & Fish, 2016; Ryan et al., 2010). Similarly, this thesis has contributed to a wide range of research promoting the BDSM culture as practicing a healthy and safe lifestyle, if done properly.

The BDSM community promotes a safe space where individuals can avoid negative labelling attached to the various stereotypes produced by mainstream society. Participants expressed coming into the community with insecurities surrounding body image, self-identity with gender or sexuality, mental health conditions, and much more. Although individuals begin to feel normal inside the community, they cannot feel the same in mainstream society without hiding their true identity and lifestyle choice. This thesis has acknowledged that societal perceptions of the BDSM community are in fact inaccurate, however, this does not mean that negative situations do not exist, as with all of society. Findings advocated that BDSM embraces diversity, establishes trust, supports personal growth, promotes healing, and ensures safety. In addition, the BDSM culture is broad including different levels of involvement and various motivations in practicing. This research has provided new insight that society cannot categorize individuals as one thing, rather allow individuals to identify with everchanging identities.
Channey’s (2004) theory proclaims that in a world encompassing a number of diverse lifestyles clusters, a dominant culture and standardized norms can no longer be conceptualized. If we reshape the way that we view subcultures, BDSM specifically, there are a lot of safe and healthy practices that can be carried out in other domains in life. It is important to rethink what is considered traditional and normal nowadays.
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Cases Cited:


Appendix A: Consent Form

REQUEST FOR YOUR PARTICIPATION IN RESEARCH TITLE OF THE STUDY:
Identifying Key Health and Safety Issues in BDSM Communities

NAME OF THE RESEARCHER
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PURPOSE
As BDSM has begun to more explicitly enter mainstream society through popular, albeit misrepresentative, media, it is likely that health care professionals (e.g., therapists, counsellors, doctors, ER nurses) and social control agents (e.g., police officers) will see an increase in their interactions with BDSM-related scenarios, and people seeking their assistance with related problems.

Linked to increased attention by society, and a greater acceptance of BDSM activities, is the potential for some to use BDSM (and the corresponding communities) as an excuse or justification for non-healthy activities or as a hunting ground to conduct abuse. For example, how do health care professionals and law enforcement officials differentiate a person who cuts themselves because of the pleasure they acquire from pain or the arousal of blood -both healthy manifestations- from a person who cuts themselves as a component of self-harm? Is there even a difference? From a legal perspective, how do we delineate between a person who engages in consensual sadomasochism, and a person who uses BDSM to justify sexual/physical assault? These questions point to an increased need for research into the BDSM communities, to distinguish healthy BDSM practices from predatory actions, and dissuade any perceptions from health practitioners and social control agents that all BDSM practice are inherently unhealthy and dangerous. That is, that a victim of assault during BDSM activities is not dismissed as consenting to the act; a common problem for sex workers who file rape charges against a client.

PROCEDURES
Interviews will be conducted with health professionals, sex educators, and BDSM community leaders about key issues surrounding the topics of mental and physical health, personal and community safety, and participation in BDSM lifestyle. Participants will take part in a one-on-one, semi-structured, interview of approximately one to two hours, with a member of Dr. Westlake’s research team. Audio from the interviews will be recorded for subsequent analysis. Those interviewed online will have the option to turn on or off their video (webcam) feed during the interview, while no video recording will occur for in-person interviews. Data, including direct quotes, collected from this study will be presented through peer-reviewed journal and conference publications. In addition, the data will help shape the development of an online survey to be administered to BDSM participants examining the same key issues.
COMPENSATION
There is no compensation for participation in this study. It is strictly voluntary.

CONFIDENTIALITY
Data collected in this study will be transcribed and thematically coded by the research team. Quotes from specific interviews may be used in publications or presentations to emphasize key findings. As a result, participants will have the option of using a pseudonym or not having direct quotes from them used. Regardless, any identifying information will be masked, while demographic data will be aggregated across participants and used to provide context rather than identifying individual people. Data will be passworded and encrypted by the lead researcher, Dr. Bryce Westlake, and available only to the research team. In addition to the current study, data collected will be used to frame and guide future research on the topic, in the form of an online survey. As a result, themes and topics noted by participants may be used, however, any personal or identifiable information will be excluded. As a university employee, the research team is required, by law, to report sexual discrimination, sexual harassment, sexual misconduct, dating and domestic violence, and stalking incidents when they are reported by a victim.

PARTICIPANT RIGHTS
Your participation in this study is completely voluntary. You can refuse to participate in the entire study or any part of the study without any negative effect on your relations with San Jose State University. You also have the right to skip any question you do not wish to answer. This consent form is not a contract. It is a written explanation of what will happen during the study if you decide to participate. You will not waive any rights if you choose not to participate, and there is no penalty for stopping your participation in the study.

QUESTIONS OR PROBLEMS
You are encouraged to ask questions at any time during this study.
- For further information about the study, please contact Dr. Bryce Westlake at Bryce.Westlake@sjsu.edu or 669-237-6592.
- Complaints about the research may be presented to Dr. James Lee, Department of Justice Studies Chair, San Jose State University, at James.Lee@sjsu.edu or 408-924-5866.
- For questions about participants’ rights or if you feel you have been harmed in any way by your participation in this study, please contact Dr. Pamela Stacks, Associate Vice President of the Office of Research, San Jose State University, at 408-924-2479.

AGREEMENT TO PARTICIPATE
Your completion of the study indicates your willingness to participate. Please keep this document for your records.
Appendix B: Interview Questions

Ice-Breakers
1) What generic and, unidentifiable, pseudonym would you like to be used in our research?
2) How long have you been practicing BDSM?
   a. How did you start participating in BDSM?
   b. What changes have you seen in yourself since you began participating in BDSM?
3) What role(s) do you self-identify as within BDSM (e.g., Master, primal, sadist, switch, etc.)?

BDSM Activities
4) For you, what is the difference between the terms Top/Dom/Master?
5) For you, what is the difference between the terms bottom/sub/slave?
6) What responsibilities does a Top/Dom/Master have to a bottom/sub/slave?
7) What responsibilities does a bottom/sub/slave have to a Top/Dom/Master?
8) Do you see certain personality types gravitate more towards certain roles or dynamics?
9) In your experience, how do you feel people start participating in BDSM?
   a. What role(s) do you think popular media plays in how people learn about BDSM?
   b. What do you feel are the best ways to learn BDSM (e.g., self-teaching, workshops, conferences, mentorship, etc.)?
   c. What do you perceive as the biggest misconceptions by mainstream society about BDSM?
10) At what age do you feel it is safe/healthy for people to start exploring and participating in BDSM?

Health & Safety:
11) What is the difference between healthy and unhealthy BDSM practices?
   a. Describe what healthy M/s or D/s looks like for you?
   b. How have you seen unhealthy BDSM play out?
12) What are the differences between impact play and criminal assault (or abuse)?
   a. How, if at all, do you see activities that one person may do as a form of self-harm, such as cutting, as being different than someone who does the same activity as part of their BDSM practice?
13) Do you believe that some BDSM activities are inherently dangerous or unsafe, or does it depend on the people involved?
   a. What types of medical/safety understanding do you feel people participating in BDSM should have?
14) What steps are taken by community/organization leaders to ensure safety within your BDSM community?
   a. Are there additional steps/activities you would like to see occur?
   b. What role, if any, does self/community policing take within your community?
   c. What role, if any, should law enforcement play in community safety?
15) What role, if any, do you feel that academic researchers, psychologists, and/or teachers play in educating mainstream society about BDSM?

Conclusion: The concluding questions are just for us to get some general demographics. However, if you are uncomfortable answering, do not feel you are required. When we report the findings, we will aggregate the information. For example, we will say “three participants between 40 and 50 years of age”.

16) What is your age?
17) What is your (general) occupational field?
18) What is your (general) educational background?