

Sick/Beautiful/Freak: Nonmainstream Body Modification and the Social Construction of Deviance

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Abstract

Nonmainstream body modification practitioners actively demonstrate a confounding agency that often results in the stigmatization of their physical characteristics, their moral constitution, and their behavior. By inscribing meaning and identity in visible ways rather than allowing society to project expectations onto them based on their gender, age, race, sexual orientation, and so on, nonmainstream body modifiers present a unique challenge to American conceptions of what is healthy, what is beautiful, and what is human. Using Patricia Hill Collins' idea of *controlling images*, Erving Goffman's conceptions of *stigma*, and Arthur W. Frank's *styles of body usage typology*, this article examines constructions of deviance within the embodied framework of unconventional body modification practices.

Keywords

body modification, deviance, stigma, identity, health, illness, beauty ideals

Introduction

Contemporary Western culture views the practice of nonmainstream (extreme) body modification as, alternately, an attention-seeking trend, the sign of a masochistic or sadistic personality, a symbol of affiliation with a deviant group, or a symptom of psychological instability. Therefore, dominant society often questions the motivations and mental capacity of individuals who engage in nonmainstream body modification and, in the process, ascribes labels of social deviance, personality disorder, and/or psychopathology to those who modify their bodies in unconventional ways. Although some individuals who engage in body modification activities do exhibit outstanding psychological comorbidity, research shows that body modifiers are not at any higher risk of mental illness than the general population (Favazza, 1996; Larratt, 2003; Musafar, 1996).

To interrogate these and other common assumptions, my research focuses on the individual as the agented subject of social action rather than the passive object onto which society projects meaning. Because nonmainstream body modifiers actively demonstrate a confounding agency that often results in the stigmatization of their physical characteristics, their moral constitution, and their behavior, my assertion is that it is through the conscious process of reappropriating and redefining *controlling images* (Collins, 2000) that nonmainstream body modifiers (perceived as insane, ugly, monstrous) recapture a measure of power from dominant society and, in the process, prove their humanity to others. Furthermore, I suggest that by inscribing meaning and identity in visible ways

rather than allowing society to project expectations onto them based on their gender, age, race, sexual orientation, and so on, nonmainstream body modifiers present a unique challenge to American conceptions of what is healthy, what is beautiful, and what is human. In addition, because of the highly stigmatizing and discrediting effects of possessing nonmainstream body modifications (“mods”), body modification practitioners (“Mods”) themselves are often labeled by dominant culture as monsters, curios, and sick freaks in desperate need of mental health intervention. Because of the deep social implications of such labels, this article examines the concept of *freakery/monstrosity* as a salient theme found through analysis of adult respondents' surveys, and examines dominant culture's tendency to conflate bodily appearance with psychopathology and Western beauty norms with definitions of masculinity and femininity.

Review of the Literature

The literature describes myriad themes when it comes to the motivations behind and social implications of body modification, from the personal to the political, the social to the pathological (Bensler & Paaauw, 2003; Favazza, 1996; Featherstone, 2000; Larratt, 2003; Musafar, 2002; Pitts,

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2003; Sweetman, 1999; Vale & Juno, 1989). However, five main themes seem apparent in the literature.

The first theme is *tribal ritual/identification with an indigenous culture* (Camphausen, 1997; Gay & Whittington, 2002; Mercury, 2000; Musafar, 2002; Rush, 2005; Vale & Juno, 1989). As technology advances, so does our human need for connection and identification. The “modern primitive” movement remains in full force as individuals seek group affiliation with others who share their cross-cultural interests in body rites and intentional ordeals, characterized as “physically, emotionally, and spiritually challenging activities that are pursued for their potential psychological, social, and spiritual benefits” (Dryer, 2007).

The second theme is *reclamation of the body* (Orlan, 2005; Pitts, 2000, 2003; Sweetman, 1999). Many Western body modifiers view the physical body as a potential landscape for representation and inscription, a site of political and personal negotiation. These themes are not new, however, as noted by contemporary body theorists Bryan S. Turner (1984), Arthur W. Frank (1991), Chris Shilling (2003), Victoria Pitts (2003), Anthony Synnott (1993), John O’Neill (1985), Elizabeth Grosz (1994), and Mike Featherstone (1982). Across time and space, the corporeal body has been a site of discursive debate for, as these theorists suggest, embodiment is key to such systemic phenomena as sexism, racism, ageism, and other sociocultural concerns. Without a physical body to oppress, abuse, and subordinate, such acts as lynching and rape, for example, would be impossible. Thus, the very fact of our physical embodiment, and the explicit auto-manipulation of the corporeal landscape by self and other, calls into question the status quo of body politics, beauty ideals, race relations, and gender norms as well as many other sociological discussions (Bogdan, 1988; Grosz, 1994; Pitts, 2000, 2003; Terry & Urla, 1995; Thomson, 1996).

The third theme is *sexual enhancement/body adornment*. With the sexual revolution of the 1960s and 1970s, the body became a focal point for inscribing sexual preferences and freedoms, a site of pleasure and pain, as well as a particular kind of sexual ownership—via adornment—and decoration (Larratt, 2003; Musafar, 2002; Vale & Juno 1989).

The fourth theme is *self-expression/identity construction* (Camphausen, 1997; Gay & Whittington, 2002; Larratt, 2003; Mercury, 2000; Musafar, 2002; Pitts, 2000, 2003; Vale & Juno, 1989). Some writers have noted that by modifying their appearance in what some label *monstrous* ways, body modifiers are in fact reifying the stereotypes and associated behavioral expectations they claim to be resisting through their body modification practices (Adams, 1996; Bogdan, 1988; Edelman, 2000; Pitts, 2003). One example of this proposed reification is the modern day “freak” show, in which individuals with anomalous bodies put themselves on display in performance settings for the entertainment of “normals” (Bogdan, 1988; Cook, 1996; Goffman, 1963). Another example is the association of tattoos with a criminal stereotype, that is, prison tattoos. The concept of “monstrosity” is

particularly salient when considering body practices that, because of their overt unconventionality, lie far outside what mainstream society deems acceptable for male and female bodies as far as gender, sexuality, and appearance norms.

The fifth theme prevalent in the literature is *pathology/mental illness* (Bensler & Paauw, 2003; Favazza, 1996). This theme is common to psychological discussions of body modification. Body modification—also known as body alteration, body invention, body adornment, body technology, body aesthetics, body projects, and body customization—has been a means of personal, social, and political expression in American society since the early 1970s (Vale & Juno, 1989; Musafar, 2002). Although forms of body modification such as tattooing have been prevalent among the American working class since the turn of the last century, and was used to indicate group membership status or familial connections, by mid-20th century, this type of body mark had become more closely associated with counterculture groups such as motorcycle and street gangs as well as those who had spent time in prison (Edelman, 2000; Mercury, 2000; Myers, 1992; Pitts, 2003). This visual signifier of affiliation officially relegated members of these subcultures to the socially constructed category of *deviant* in the public consciousness, a problem currently faced by many contemporary body modifiers. Today, body modifiers cite many reasons other than social affiliation when discussing their particular forms of body alteration, and claim that their actions are in no way an indication of an unstable mind, as some literature suggests (Bensler & Paauw, 2003; Favazza, 1996) but rather a process of expression, invention, and reception (Larratt, 2003; Musafar, 2002; Myers, 1992; Orlan, 2005; Pitts, 2003; Sweetman, 1999).

In rebuttal to mainstream society’s ascriptions of monstrosity, deviance, and mental illness, Mods point out that in fact *all* people modify their bodies, whether by means of commercial cosmetic application, hair dye, aerobic exercise and weight-lifting, dieting, or plastic surgery (Featherstone, 1982; Gimlin, 2002; Pitts, 2006; Sweetman, 1999; Thesander, 1997). They assert that body modification—in particular, the signification of the corporeal body as a symbolic landscape to be used and manipulated as a means to reinforce or dismantle common cultural assumptions, reinforce societal norms, create identity and/or status, or influence the larger social body—has been practiced in one form or another for centuries and is evident across gender, class, and racial lines, transcending socioeconomic and cultural boundaries (Favazza, 1996; Mills, 2005; Musafar, 2002; Rosenblatt, 1997).

Theoretical Considerations

Because this article examines constructions of bodily deviance, the term *deviant* warrants clarification. Erich Goode, following Lemert’s (1951) discussion of *primary* and *secondary deviation*, defines extreme deviance in terms of “behavior, beliefs, or physical traits that are so far outside the norm that they elicit extremely negative reactions”

(Goode, 2008, p. ix). Whereas *primary deviation* refers to simple nonnormative behavior that may or may not elicit punishment, condemnation, or scorn from the members of any given group, *secondary deviation* refers to the more serious and pervasive acts of deviance that can result in deviance labeling on the part of mainstream society, or what Goode calls “the audience.” Deviance labeling is a process whereby members of the in-group begin to view the rule violator as a deviant rather than viewing the act itself as deviant. The result is the internalization of the *deviant* label on the part of the norm violator, whereby the violator begins to view himself or herself as a deviant rather than simply someone who committed a deviant act. The label, in essence, becomes an important component of his or her actual identity. Both *primary* and *secondary deviance* definitions are crucial to understanding how Mods view themselves, how they view society-at-large, and how they think mainstream society views them. It is worth noting here that *deviance* is not inherent to the individual committing the norm violation. Rather it is a label imposed on the norm-breaker based on the reactions of those around him or her, and is a product of commonly understood and widely accepted cultural norms and their perceived violation.

Hand-in-hand with acts of social deviation is the concept of *stigma* or disgrace. Erving Goffman (1963) proposes three sources of stigma. The first, an *abomination of the body*, is defined as a physical characteristic or trait that is either an aesthetic violation or a physical impairment. The second is a *blemish of individual character*, defined as a weak will or unnatural passions. The third source of stigma is *that which is transmitted through lineage*, such as race or religion. For analysis purposes, this article largely incorporates Goffman’s first and second sources of stigma—an abomination of the body (violations of normative appearance) and a blemish of individual character (pursuit of unnatural passions), which often earn Mods a deviant identity in the eyes of mainstream Western society. In addition, Goffman’s term *normal(s)* is used to indicate members of mainstream (conventional) society as compared with individuals who occupy a stigmatized status, such as those who practice nonmainstream body modification.

To illustrate the interpersonal strategies many Mods use to neutralize potentially negative reactions within specific social environments, Arthur W. Frank’s (1991) *styles of body usage typology* will also be referred to. For Frank, the corporeal body is an essential component in how individuals experience their bodies not only as active agents but also as socially constructed and constituted entities whose contingency is part and parcel of the social process. Frank offers four dimensions, or “action problems,” that a body must confront in social interaction with other bodies: control (predictable or contingent), desire (lacking or producing), other-relatedness (monadic or dyadic), and self-relatedness (alienation from or association with corporeality). Furthermore, Frank argues that individuals, as social actors, employ a primary style of body usage to accomplish tasks and reach their goals

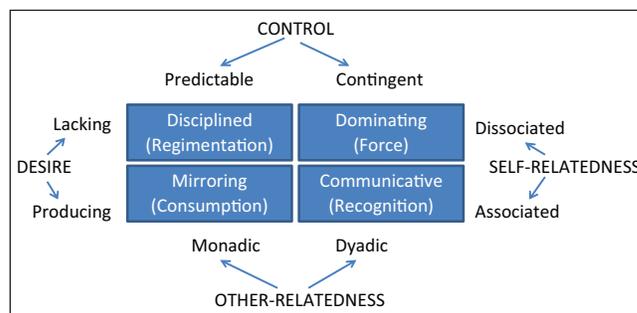


Figure 1. Arthur W. Frank’s styles of body usage

regarding specific action problems. The four styles of body usage are the disciplined body, the dominating body, the mirroring body, and the communicative body (Figure 1).

Method

The primary research instrument was a qualitative survey questionnaire, the URL link to which was posted on the foremost website designed specifically for nonmainstream body modifiers (www.bmezine.com). The questionnaire included an informed consent page, 6 demographic questions, and 15 open-ended questions concerning motivation, social resistance, family, and views of mainstream society’s perceptions concerning gendered bodies and nonmainstream body modifications. Only adult participants (age 18 and above) who met the operational definition of nonmainstream body modification were considered (see Table 1). Respondents ranged in age from 18 to 47 with an almost even split between being employed and being a student. The total number of self-reported males was 20, with a total of 55 respondents self-reporting as female. One respondent reported being female-to-male transgender, 2 respondents identified as androgynous, and 1 respondent declined to answer. Twenty-three females reported being married or in a relationship; 25 females reported being single. Nine males reported being married or in a relationship; 10 males reported being single. Five females and 1 male reported being gay, bisexual, or queer. One female respondent reported being in a long-term slave/master relationship. A qualitative content analysis was conducted using an inductive approach. Confidentiality and anonymity issues were handled in accordance with institutional review board (IRB) protocol and per the informed consent page indicating that actual names would not be used. To completely avoid the potential identification of respondents, any reference to a specific respondent or direct quote taken from a questionnaire is acknowledged only by the first letter of the first name provided by the respondent, followed by his or her survey number. For example, if the respondent provided the name “Chris” and Chris was the 23rd respondent, the attribution shown would be “Mod C23.”

Although some scholars may consider the Internet a questionable and unreliable venue for gathering social scientific data, the nature of this research, with regards to discreditable

Table 1. Nonmainstream Body Modifications

<i>Gauging/elongation:</i> Earlobes, anal, nipple, penile, scrotal, labial
<i>Skin:</i> Branding, cutting, scarring, keloiding
<i>Chiseling/scalpel:</i> Bone, cartilage
<i>Tattooing:</i> Facial, full body, ocular; anomalously placed
<i>Piercing:</i> Genital, facial, anomalously placed
<i>Genital:</i> Bifurcation (splitting), saline/silicone injection/pumping, inversion, excision, penile subincision (cutting underside of the penis), superincision (cutting both the underside and top of the penis), incision, bisection, labial or penile frenectomy (removal of restricting ligament), meatotomy (splitting of underside of the glans penis)
<i>Implants:</i> Genital, ocular, subdermal, microdermal, transdermal, beading, teeth
<i>Nullification/negation:</i> Genital, extremity, phalange, carpal, ocular, nipple, teeth
<i>Oral:</i> Teeth filing, tongue bifurcation (splitting), lingual frenectomy (removal of restricting ligament), piercing, tattooing
<i>Other:</i> Any other body modification that would be considered <i>nonmainstream</i> by Western societal standards

identities, mandated that the population researched for this study be assured a level of anonymity so as not to stigmatize them further. Therefore, approaching potential respondents via online forums that already offered a level of control to their members over issues of impression management seemed the most efficacious method for gathering transparent data, offering respondents the freedom to express themselves without fear of negative sanctions and public exposure. An unanticipated result of posting an open link on a web forum was that it allowed Mods from outside the United States to respond. In the end, this served to broaden the scope of perspectives concerning nonmainstream body modification in Western societies.

Operational Definitions

There are numerous definitions of *body modification*, so it is necessary to define this term. *Body modification* is generally defined as any permanent or semipermanent, voluntary alteration of the human body that is not medically mandated. Bodily alterations that are commonly accepted under the plastic surgery umbrella, diet and exercise regimes, and procedures such as permanent and nonpermanent cosmetic application fall under this definition of body modification. *Nonmainstream body modification* in my research is defined as any permanent or semipermanent, voluntary alteration of the human body that is not medically mandated and that transgresses and challenges common assumptions and expectations of bodily presentation and/or aesthetic, and therefore may be considered extreme and/or deviant by members of mainstream Western society. Therefore, conventional plastic surgery, while permanent/semipermanent and presumably voluntary, is not included in my definition of nonmainstream body modification. Tattoos and piercings, in general, are not considered. There is an exception to this exclusion, however. Full-body tattoos/piercings, genital tattoos/piercings, facial tattoos/piercings, and tattoos/piercings that may be considered within mainstream society's standards as egregiously norm-breaking, unconventionally placed, and/or excessive may fall under the definition of

nonmainstream body modification. This definition therefore excludes conventional earlobe, tongue, nose, navel, and eyebrow piercings, traditional male circumcision, and the practice of genital mutilation on female children in some African and Middle Eastern societies (see Table 1).

Sick/Beautiful/Freak: Confronting Controlling Images

Through detailed content analysis of the returned surveys, several themes emerged, highlighting the pervasiveness of specific controlling images that nonmainstream body modifiers must confront in their daily interactions with normals. The first is the attribution of psychopathology, or a "sick" mind. The second is the normative perception of modified bodies as being less beautiful because they fall outside conventional gender norms and beauty ideals, and the third is the attribution of monstrosity, or "freak," which implies a normative view of nonmainstream body modifiers as being less than human. The following section examines these controlling images and the impact they have not only on the social interactions Mods have with normals in daily life but also on identity construction processes and interpersonal communication styles.

Sick

Skin—as private canvas and public target—has played a role in every aspect of social interaction and construction of self since the dawn of humanity. As such, the highly visible sensorial human exterior is vulnerable to what Patricia Hill Collins (2000) terms *controlling images*—symbols of inscription that are projected by dominant society onto the bodyminds¹ of people, individually and collectively, to create and promote stereotypes. According to Collins, stereotypes serve two primary functions: (a) They serve to conceal or normalize oppression by making it seem like something the subjugated person wants or something that is fundamental to the subjugated person's inherent nature and (b) they serve to influence people, consciously and uncon-

sciously, into behaving in certain ways (Collins, 2000). In Collins's view, controlling images entail the conjoining of different features (i.e., race, class, gender, sexuality) and complicate the dynamic between acts of oppression and acts of resistance.

One controlling image that Mods directly challenge is the notion that skin (particularly female skin), the body's protective external barrier, should never be breached, marked, or otherwise "damaged," unless these practices serve to move an individual closer to a dominant ideal of attractiveness. Mods, by virtue of their overtly marked appearance and pursuit of "unnatural passions," do not meet the standards of *health* as defined by dominant culture. Therefore, because Western society continues to create and perpetuate arbitrary dualisms in every aspect of human behavior, there is only one other category available to normals in which to locate Mods—that of the unwell, the sick, physically and psychologically. According to the comments made by many survey respondents, Mods are regularly judged by mainstream Western society as psychologically unsound (i.e., mentally ill) and therefore potentially dangerous to themselves and others. Elaborating on the illness motif, Mod M20 notes that Mods are viewed as "freaks, sadists, dirty, worthless, and insane."

The language used in psychological literature implies, not so covertly, that individuals who intentionally cut themselves, burn themselves, or otherwise inflict pain on themselves, for whatever reason, suffer from some inherent mental defect or have experienced some type of emotional trauma in their lives that drives them to harm themselves. The implication is that these individuals are in need of intensive treatment to "correct" the disorder (Favazza, 1996; Pitts, 2003). Medical institutions, in particular, seem to have categorization and pathologization of *difference* as their primary goals, whether that difference manifests in "deviant" sexuality, transgression from the White male norm (i.e., the pathologization and subsequent medicalization of gynecological processes) or seeking a nonnormative appearance by having silicone horns subdermally implanted in one's head. Mod R63 elaborates on normals' tendency to connect body modification with emotional trauma: "Someone once asked me if I was abused as a child and if that was the reason I hated my body enough to do everything I do to it," and Mod H31 notes that "mainstream Western people automatically assume that if you have an 'extreme' mod there's something wrong with you."

When confronted with others' assumptions of illness or emotional trauma, Mods are quick to defend their body practices, differentiating themselves from "self-mutilators" and those who exhibit some type of documented psychological infirmity. Analyzing nonmainstream body modification within the context of the illness motif and the communicative style of body usage (see Figure 1) sheds light on how Mods reappropriate the controlling image of mental illness, turning this image and its social implications into possibility rather than limitation.

One goal of the communicative body, particularly the communicative body in illness, is to free itself from societal codes that constrain expression so that it can seek out new codes of its own invention (Frank, 1991). One way the communicative body does this is by sharing the personal story of its corporeal journey. In doing so, the individual has the opportunity to neutralize the fear, confusion, shock, anger, and despair that often accompany a diagnosis. In the case of nonmainstream body modification, it is mainstream society (normals) that diagnose and ascribe illness to the bodyminds of Mods.

Many Mods employ interactive strategies in an attempt to actively neutralize the fear, confusion, and shock their appearance sometimes elicits. One way Mods mediate others' reactions to them and reappropriate the controlling image of illness—thus creating new narratives surrounding mental and physical health—is by responding in an unanticipated manner, interrupting a potentially negative social exchange by calling out in the normal a wholly novel response that forces the normal's recognition of the Mod as *human*. Mod H29 illustrates this transactive approach: "I get asked questions which I wouldn't mind if people were polite about it. But just because they're not polite doesn't mean I'm not going to be," and Mod S42 writes, "I've never been rude to someone asking about mods, and I think that can influence their reactions." Mod M01 writes, "Some [people] seem weirded out at first, but most are understanding after they meet me and find out I'm not an asshole." Mod S49 uses humor to neutralize the encounter: "I get a lot of people asking me if it hurt, how I got them done and stuff. I just tell younger teenagers that I got a giant hole punch and they actually believe me most of the time." Mod H31 notes the efforts of some normals to establish a familiar kinship: "Most often than not I get curiosity. 'Wow, did that hurt?' 'How many tattoos do you have?' 'I have a tattoo! Wanna see?' It's nice because 5 years ago that almost never happened." Elaborating on the curiosity of normals, Mod S50 writes,

Generally, I don't have any issues with people . . . children are honest though. I see children staring at me as their parents try to drag them along. Children want to look at someone that looks different, but parents don't want to be caught staring. I've caught a few people trying to surreptitiously take my picture.

And Mod M02 highlights how Mods, as a stigmatized group, feel they have to employ certain tactics to prove their mental stability:

To me the mods feel natural and normal so I'm not going to announce them, but on the other hand, I do take my time explaining them because I don't want [people] to think there's anything mentally wrong with me.

Mod H23 demonstrates personal agency (with a hint of social resistance) in her interactions: "The general public

believes I am over the edge, crazy, not in the right mind, and I enjoy every moment that I can prove their shallow outlooks false.”

In terms of the (ill) communicative body in nonmainstream body modification, this process of story sharing serves to create social cohesion rather than the monadic isolation that many Mods experience as a result of their deviance label. Furthermore, a dyadic other-relatedness and an associated self-relatedness are achieved when Mods actively pursue interactions that result in the healthy establishment of their humanity and their sanity because “when illness is told, its lack becomes producing, and as desire becomes producing, contingency becomes possibility” (Frank, 1991, p. 88). This narrative sharing opens new possibilities for normals and Mods alike to realize their own bodies in relation to others who share the corporeal story not only of weakness and affliction but also of pleasure and imagination. Among the unwell and infirm, as among performance artists who use their bodies as a means to communicate dissent and resistance, narratives are fundamentally embodied and therefore vital to the mutual recognition of bodies and lives as interwoven with the bodies and lives of others (Frank, 1991).

Cultural psychiatrist Armando Favazza (1996) emphasizes the need of psychological and psychiatric institutions to have a more inclusive, holistic view of “self-mutilative” behaviors, asserting that reducing these acts to nothing more than a passive attempt at suicide, a cry for help, the sign of an afflicted mind, or an attention-seeking scheme is a gross oversimplification of a very complex aspect of human behavior.

It is clear that the individual human body mirrors the collective social body, and each continually creates and sustains the other. Misperceptions of reality, feelings of guilt, negative self-images, antisocial acts, and all the other symptoms we associate with personal mental illness defy understanding without reference to the psychological, social, cultural, and physical integrity of the communal “body.” (Favazza, 1996, p. xiii)

In other words, situating the individual behavior within a broader social context is crucial to understanding the motivation behind phenomena such as nonmainstream body modification. Mods are not chronically, terminally, or psychologically ill simply because they choose to modify their bodies in nonnormative ways. However, mainstream society, in its quest for continued binary categorization opportunities, ascribes illness to heavily modified bodies in an attempt to understand what is healthy and what is not. *Healthy*, within the context of corporeal bodies, is defined as a pristine, smooth, firm, youthful, capable presentation. *Unhealthy*, by dual opposition then, is defined at the opposite end of the dichotomous framework that bodies are often forced into—in this case deficient, blemished, flabby, old,

and incapable. By restructuring the illness motif, one of many controlling images constructed around Western ideas of ableness, and creating new narratives surrounding health and ability, Mods actively and tacitly attempt to counteract society’s projection of pathology onto their bodyminds. In this process, Mods inscribe new meanings and create new codes that assert not only their humanity but their mental and physical health as well.

Beautiful

Like such body practices as pumping iron, dieting, using hair dye and applying cosmetics, as well as socially acceptable plastic surgery techniques, some nonmainstream body modifications reflect an individual’s desire to achieve a perfected version of himself or herself. However, what is considered the “perfect” or “beautiful” body is greatly dependent on cultural definitions of feminine and masculine bodies and how they may or may not digress from the characteristics and expectations of gendered behavior and appearance.

Mods who cite aesthetics as a primary motivating factor behind their body modification practices enjoy adorning and decorating their bodies in unique ways because they find the end result aesthetically and artistically pleasing (i.e., beautiful), despite the social ramifications of their body practices. Demonstrating this confounding agency, Mod A64 explains,

I find body modifications of all types to be aesthetically enhancing. I like the way you can accentuate a particular feature of your body with a modification, or draw attention away from a part of your body you find less desirable.

Contemporary media outlets reproduce depictions of the young, hypersexual, and/or infantilized female body and the youthful, hypermasculinized male body, constantly messaging through these images how men and women, girls and boys, should *want* to look. Any physical presentation that transgresses these normalized (controlling) images, whether it’s the morbidly obese woman or the effeminate man, is met with disdain, judgment or, in some cases, outright aggression on the part of normals. These controlling images are often associated, overtly and covertly, with relevant messages regarding marriageability, fertility, strength, youth, vibrancy, and healthy body integrity—all of which are symbolic indicators of successful bodily presentation according to Western beauty and gender norms.

Accepted body modification procedures such as breast implants, liposuction of fat cells, relocation and tightening of facial tissue, and silicone implants designed for the cheeks, buttocks, and pectoral areas of men’s bodies are just a few examples of Frank’s mirroring style of body usage. Not only do these practices make the body predictable in many ways but they also help to recursively reproduce unconscious

desire, which manifests in isolated monadic consumerist behavior. By ceaselessly producing in individuals a superficial desire aimed at the materiality of things that consumer culture promotes as necessary (youthful appearance, on-demand sexual function, etc.), certain capitalist institutions and the values they promote become more firmly rooted in the collective consciousness regarding what is available for immediate consumption—physically, emotionally, spiritually, and mentally. Because of this, the mirroring body style is of particular interest when considering the divergent consumer practices of Mods and the predictability they seek through a contradictory form of consumption that they find beautiful and make apparent to others through their highly visible modified appearance, the presentation of which causes an expected outcome, thus offering the Mod a measure of control in social encounters.

As noted, Goffman's (1963) first source of stigma (an abomination of the body) is particularly relevant to non-mainstream body modifiers and their lived experience, as any perceived violation of the corporeal landscape forces a reconfiguring of common assumptions about body integrity, appearance, and function not only for the modifying individual but for conventional society as well. Many Mods implicate the American beauty ideal of smooth, pristine, firm skin as one source of their discreditable status and their rebellion, whether social or personal, against it.

Illustrating the perceived hypocrisy of normals who differentiate between mainstream and nonmainstream body modification, positively sanctioning one practice while demonizing the other, Mod H31 writes,

No one looks twice if you've got a nose job or boob implants, or if you get botox once a week . . . choosing to be modified does not make someone sick, twisted, insane, a satanist, or any other negative attribute. [Mods] should be given the same respect and opportunities as anyone else.

Speaking to the automatic assumption of bad character, Mod L11 writes, "Having visible modifications does not make me a worse student, human being, etc. I can't wait for the day when I stop being judged based solely on my appearance," and Mod A62 shares, "I don't have a motorcycle or breed snakes in my parents' basement or do drugs. Body modification is not about bikers and rappers. It's a very personal choice." Addressing the manufactured connection between health and beauty, Mod E75 writes,

I do think we should try to be healthier, but not aspire to a prototype of beauty, but one that makes US feel beautiful and confident. Me and my body mods make me feel enough confidence to feel extremely attractive, and in my experience that makes me attractive.

Mainstream society defines as abhorrent such modifications as facial or genital piercings, scarring, cutting, branding,

burning, and tattooing of the skin. The perception of abhorrence on the part of normals is what makes these acts deviant, not the act itself, especially when compared with more conventional body enhancement practices that reify and reproduce the American beauty ideal, rewarding and privileging those who strive *toward* the positively sanctioned representations of what a woman or a man "should" look like. As Mods show through the deliberate cutting, burning, marking, and scarring of their flesh, definitions of beauty do not always follow social protocol. These forms of appearance norm-breaking can and do result in scorn and ostracism. Mod J34 illustrates this point, "Society in general is quite hateful, and I've yet to figure out why some color on one's skin or a few pieces of metal alter who a person is in the eyes of another." Mod J19, also noting Western society's emphasis on appearance and the consequences of having a nonnormative physical presentation, writes, "[Mods] are often stared at and cast aside because they look different from everyone else. I find it sickening that [Mods] are not treated with respect or like a human being, they are treated like an animal." The concept of humanness and the desire of the bodymind to not only comprehend but also to prove its humanity is an interesting component of the interactive social strategies used by individuals who practice nonmainstream body modification.

By marking their bodies in highly visible and potentially discrediting ways, as opposed to adopting routines that validate and reward aesthetic conformance, Mods seemingly move *away* from the American beauty ideal of pristine, unblemished, youthful skin and body presentation, and *toward* what dominant society deems an unacceptable appearance and body presentation. In showing a unique kind of agency when it comes to their consumer habits and tastes—an agency that could be interpreted as blatant rejection of bodily conformance—these Mods directly challenge Frank's construct of the mirroring body as a purely passive and oblivious receptor of dominant consumerist ideals.

Beautiful Girl, Handsome Boy

As noted, the negative comments and reactions of others do little to stop a Mod from modifying. Mods will engage in a variety of strategies, including covering, passing, information control, and impression management (Goffman, 1963) to avoid and/or neutralize normals' gestural and verbal condemnation of their body practices, practices that actively violate the American beauty ideal of what male and female bodies should (want to) look like. However, nowhere is the disapproval Mods experience more egregious than in the family milieu.

In answering the question concerning how family and friends react to their body modifications, many Mods noted the negative responses of their parents and relatives, while stating that their friends are more accepting of their body practices. Mod S08 writes, "My family has never understood the reasoning behind my modifications and have been unsupportive of my decisions," and Mod T48 writes, "My parents

have not been so accepting of my modifications. My mom even said to me once, ‘How many holes are enough?!’” Mod S42 shares, “I’ve not told my family about [my tattoos] to avoid confrontation. I’d rather my short visits home are happy rather than end up with me being shouted at.”

Differential socialization of boys and girls is a given. Examples of body control tactics abound in literature and popular media, reinforcing not only strict gender roles but also the expectation of conformance to a cultural ideal, whether that ideal be aesthetic (beauty), material (status), cognitive (beliefs), or expressive, as in the case of socially acceptable demonstrations of masculine and feminine behavior. While my questionnaire did not include the parents of Mods as potential respondents, parents—as socially and historically situated members of dominant culture—appear to share the attitudes of mainstream normals when it comes to unconventional bodily alterations. In particular, the comments female Mods relayed concerning their parents’ reactions indicate an anxiety on the part of mothers and fathers that seems to stem from a fear that their daughter will, through her alternative body practices, alienate a potential life partner. Mod S49 illustrates this point: “My dad always got angry at me and told me I’d never meet a good guy that did anything useful because of my stretched lobes and my tattoos,” and Mod C17 writes, “[The main question is] ‘Don’t you have a hard time dating looking like that?’” Mod A64 writes, “My mother does not know I have [mods]. She would go nuts.” Mod M02 shares a deep frustration when it comes to communicating any aspect of her modifications to her family: “I try to make [my family] understand what it means to me. No matter how much they love me, they will not understand. They’ve drawn a line and I’ve crossed it.”

As in most aspects of social life, embodied experience can be understood in terms of gendered experience. Nonmainstream body modification—as an embodied, agented endeavor—is no different. As the above statements suggest, how bodies are perceived and treated by conventional society depends greatly on how that body looks and behaves in accordance with social norms, including acceptable expressions of masculinity and femininity. Survey respondents had much to say when answering the question concerning how male and female bodies are perceived by society, with many of them again pointing to the American beauty ideal and (controlling) media images as sources of discontent regarding acceptable bodies. Exemplifying the power and cultural scope of these controlling images in contemporary society, Mod E75, a male Mexican national, writes,

Most people are surprised that someone “like me” (professional, business owner, commercial director, come from a good family) has body modifications. We make way too much preconceptions and the media tries to sell us this image of rockers or actors that we should pursue.

Mod M20 addresses the increasing pressure young men are experiencing as the target of media images that create and reproduce the ideal masculine body: “Men should be straight-laced muscle bound healthy clean cut and professional and girls should all look like models, if not you suck and you’re not accepted.” Taking this notion a step further, Mod K22 writes,

[We are] fed the thought that you should be a provocative, skinny, smart but ditsy, pink plaid wearing college graduate that drives a BMW or a clean cut businessman. There is a fine line between what is okay and what isn’t.

Mod H23 notes how controlling images concerning ideal bodies can be internalized and thus affect a person’s self-concept:

Male and female bodies seem to be set in a narrow view of what is beautiful and what is not. Females must be thin, decently breasted, and have a pretty face. Males have a broader range on how they may look to be acceptable. Plastic and cosmetic surgery is becoming widely acceptable but it’s shoving people through a narrow viewfinder on what they think of themselves.

Confronting the conformist mentality expected by normals, Mod K30 writes, “There is too much pressure on men and women to keep their bodies looking a certain way in our society. Tall, thin, muscular, blonde, tanned . . . all of these make people look like sheep.”

One particular comment, by Mod S50, stood out because it is a profound observation concerning attitudes toward gendered appearance:

Western society is still very male oriented; maybe being part of the group that largely has power confers partial immunity towards body objectification? Women seem to end up more concerned with whether they have the “right” appearance than men do. I catch female students complaining about breast size regularly (too small, too big), but I have yet to find any group of male students complaining about muscle mass, body fat composition, height issues, penis size.

This comment by Mod S50, who identifies himself as a heterosexual male, warrants special attention because it implies the differential judgments male and female Mods experience. Some body practices are more acceptable for men than they are for women, and vice versa. For example, being a heavily tattooed and/or pierced woman elicits more comments from normals about sexual promiscuity, attractiveness, childbearing, and marriage than it does for male Mods, who are often grouped under the “criminal” label.

Mod T82 elaborates this point: “Women with piercings are still looked upon as wild women who are too overtly sexual. Men with modifications are often grouped with White trash or gangsters or other degenerates of society,” and Mod M79 writes, “Females are definitely looked down upon when they are modified. Men can be a little dirty with a few tattoos, but girls are seen as downright skanky gang-related bitches.” Mod S42 shares,

Some people have even had the reaction “you’d be so much prettier without all that” when talking about my modifications and yet made no comment about my boyfriend’s tattoos and piercings, which also gives me the impression it’s okay for males to heavily modify themselves and yet women should only have their ears pierced

These comments support tattoo and body-play artist Sheree Rose’s assertion that “tattoo is one of those big taboos for women, although it’s always been something that men could do when they get drunk” (Vale & Juno, 1989, p. 109).

In sum, by consciously moving *away* from conventional ideas surrounding ideal (i.e., gendered) bodily appearance and behavior and *toward* the perceived opposite, Mods directly confront the social constructs and institutions that demand a very narrow definition of attractiveness and gendered behavior. Mods do this by reappropriating, overtly and covertly, the controlling images Western society produces, reproduces, promotes, and expects—the positively sanctioned images of smooth, pristine, unblemished, youthful bodies that operate at a high functionality (defined as beautiful) and the demonized images of criminal, insane, defect, and monstrous (defined as ugly).

Freak

When asked how individuals with nonmainstream body modifications are perceived by mainstream Western society, and what the general public’s reaction to their specific body modifications is, an overwhelming majority of Mods made reference to the term *freak* and how having nonnormative physical characteristics can result in this disparaging, dehumanizing label. This is nothing new. Ascribing the *freak* term to individuals who exhibit “monstrous” or “abnormal” physical traits has deep roots in antiquated ideologies concerning race, experimentation in the name of medical science, and strict binary categorizations of gender (Bogdan, 1988; Cook, 1996; Terry & Urla, 1995). Some general characteristics that could earn someone a *freak* label included possessing too many or too few body parts, having a distorted or “monstrous” form, being much larger/smaller/thinner/fatter/hairier than the average person, possessing hair or skin of an anormative color with regard to sex/race/age, or having two or contradictive genders. Historically, individuals with some type of abomination of

the body were systematically studied, exploited, exhibited, and feared (Bogdan, 1988; Cook, 1996; Terry & Urla, 1995). Grotesques of days past were, alternately, targets of derision and objects of reverence.

Researcher Robert Bogdan (1988) explains the origins of two types of *freak*, each of them historically, geographically, physically, and metaphorically dislodged from their own social milieus and then systematically relocated and resituated within a Western context as *other*. The first type of *freak*—the “exotic *freak*”—is directly connected to the exploration of the non-Western world in the 18th and 19th centuries. As explorers and natural scientists struck out over the oceans and tributaries to investigate new worlds, they returned with not only countless—albeit exaggerated—stories of bizarre people and unusual cultures but also actual specimens of these cultures, sparking intense curiosity in the American public that provided an opportunity for the showmen of the age to capitalize on the differentness of these specimens.

Tribal people, brought to the United States with all the accoutrements of their culture out of context, stimulated the popular imagination and kindled belief in races of tailed people, dwarfs, giants, and even people with double heads that paralleled creatures of ancient mythology. The interest thus spawned was an opportunity, a platform, and a backdrop for showmen’s creations. (Bogdan, 1988, p. 6)

The second category of *freak* consists of those individuals who met all the criteria to be labeled under the medical term for people with obvious and, oftentimes, extreme bodily difference—the monster, the *lusus naturae*, the “*freak of nature*.” These were people born with a physical anomaly so severe that they were touted as “born *freaks*” (Bogdan, 1988), individuals who not only piqued the interest of the medical community but also aroused the curiosity of normals. Born *freaks* elicited reactions of pity and stunned horror, and showmen of the age played on audience members’ fears of bodily invasion, dysfunction, and disfigurement to entice them inside the mysterious tent in which the *freak* was housed. A widely known example of a born *freak* who was put on display and marketed for the sole benefit of curiosity seekers is Joseph Carrey Merrick, the “elephant man.”

Rachel Adams (1996) suggests the social construction of a third type of *freak*, the “normal *freak*,” a person of normal bodily constitution who emphasizes his or her difference from the average person by appropriating a special skill or by becoming a “made *freak*,” someone who does something to himself or herself to become unusual enough in appearance or ability to warrant exhibition. This *freak* can be found in the strongman, the snake charmer, the sword swallower, and the heavily tattooed man or woman. For obvious reasons, the concept of the made *freak* is especially relevant in discussions of nonmainstream body modification.

While no less than 43 comments appeared in the questionnaires regarding the *freak* attribution to those who possess a nonnormative physical appearance, the following statement from Mod H31 profoundly sums up the thoughts of the majority of survey respondents.

Mainstream Western people automatically assume that if you have an “extreme” mod there’s something wrong with you. That you’re a criminal, a freak, the dregs of the dregs. Right up there with fags, drag spics, niggers, or any other minority that is full of people that the “mainstream” don’t want to understand or know, because hating someone for something silly gives them something to feel better about. They can get up in the morning, look in the mirror, and say “gee at least I’m not fat/gay/Black/have horns implanted in my forehead.”

Many Mods undertake body projects as a means of outwardly projecting an internal self-image by inscribing their bodies with symbolic signifiers that indicate how they perceive themselves and how they wish to be perceived by others. Some Mods feel that their “normal” exterior presentation does not match their internal perception of how they “should” look. Several go so far as to say they view their bodies as anomalous or incomplete without body modifications, at times using language that implies aesthetic defect or impaired function. As a made freak, Mod A64 elaborates the related concepts of self-expression and identity this way:

Body modification enables me to express the person that I truly am. I feel it is a form of art and flesh is my medium. I wouldn’t say that body modification makes me who I am, but if for some reason I take out my jewelry . . . I feel uncomfortable, I feel naked and I feel as if a crucial part of me is missing.

Mod J19 writes, “I will always be changing different parts of [my body] to complete it or to make it look more like who I am on the inside and express my values, scene, culture, opinions, etc.” Mod K22 expands on this point: “[I modify] to be myself the way I see myself. I like feeling free. Expressing myself this way and telling stories on my skin is my way of growing,” and Mod H23 writes, “It’s purely become an expansion on a personal outlook of myself . . . it’s an exciting experience and makes me someone of my own making.” Mod J34 notes simply, “[body modification] allows me to feel as if I’m bringing what’s inside me out.”

Several interesting observations are made when analyzing the made freak within the framework of Frank’s communicative style of body usage. The primary mode of action undertaken by the communicative body in social interaction is *recognition*. Self-expression (in this case narrative sharing in the form of visible symbolic inscription) and a desire that is conscious and producing in its pursuit of dyadic

other-relatedness and an associated self-relatedness are the main characteristics of the communicative body in non-mainstream body modification. These bodyminds confront contingencies and the action problem of predictability in their everyday encounters with normals. However, made freaks tend to be individuals who enjoy the narrative process, engaging normals in a dyadic exchange, thus helping the normal perceive the Mod as just one more human who has a story to share; they simply share it through unconventional means. In true communicative body form, Mod J34 eloquently clarifies this concept: “No matter our color or religion or wealth or sexuality or body appearance . . . we have a story to tell. Everyone else should be willing to listen,” and Mod S08 shares, “I believe that human expression is one of the most beautiful and responsible things for a person to do.”

As the statements of these made freaks illustrate, in using their bodies to personify identity through the inscriptive expression of the internal landscape, a declaration of body ownership becomes evident. In sharing its narrative, the communicative bodymind in nonmainstream body modification actively dictates how its physicality is to be understood and evaluated rather than allowing society to ascribe meaning to it. Furthermore, knowing the automatic assumptions of normals, many made freaks allow themselves to be viewed initially within a context of deviance (monstrous, criminal, insane) but then challenge those same assumptions through innovative bodily expression and dyadic social exchange. It is during this transactive exchange that the expressive, communicative bodymind turns the expected encounter inside out, forcing the normal to not only look at, but also really see, dominant culture’s contradictions and dualities. Mod L41 illustrates this interactive strategy:

When my face was more full of metal I had a lot of people stare at me and little kids nearby would try and touch them. If I get a glare, I can be rude. If they are curious (you can obviously tell the difference) I usually say hi to let them know it is obvious they are staring at me and any questions they have I would be happy to answer.

Deeply rooted in history, the term *freak* certainly has a controlling aspect to it. The term is employed by normals to communicate to Mods that their bodyminds lie far outside the accepted appearance and behavioral norms of Western society, and that there are consequences for these transgressions, such as being stigmatized as less-than-human and/or ostracism in the form of social isolation. Mod J15 shares, “I see ‘normal’ people’s reactions and feel alone, ugly and like a freak,” and Mod J12 notes, “It’s like the days of the old circus sideshow.”

As these comments illustrate, controlling images affect not only the subordinated individual or group but also dominant culture as the images are disseminated in everyday

media accounts and common discourses. However, as Collins asserts, controlling images can not only be created and used to dominate a specific group, promoting stereotypes and limiting the subjugated group's access to potentially liberating symbols, but they can also be reappropriated by the stigmatized group and turned into powerful symbols of liberation, resistance, and reclamation. As Mod A62 shares, "It's very important to me that I have this kind of strength/power represented on my body because it is everything I want to be in life." Bringing the ideas of spiritual identity, ritual, humanness, and body ownership together, Mod C32 writes,

I wanted to be happy with the skin I was in, so I made myself what I am. It's very spiritual to have that power. I also have strong beliefs in the significance of modification throughout human history. I feel that it is a part of what makes us human to modify ourselves. I like the feeling of having that connection to the rest of the world, past and present. It's very grounding to know that while we may be going off the deep end as a culture, I can still have a small link to the people who lived with the land instead of against it.

Conclusion

This article explores the ways in which contemporary non-mainstream Mods facilitate daily social interaction as a stigmatized *other*. Mods, as social agents, act on their environment as well as allow their environment to act on them. As a result, they are highly aware of the unique contingencies presented in social encounters due to their anormative appearance, demonstrating a deep awareness of how conventional society views them—as the mentally unstable nut, the ugly man or woman, the monstrous freak.

Because dominant society messages through controlling images what men and women should (want to) look like, the comments of Mods demonstrate that their unconventional body practices directly challenge society's expectations of beauty and health norms, gender expression and roles, corporeal presentation, and symbolic inscription simply by moving *away* from Western appearance ideals (beauty) and *toward* its perceived opposite (monstrosity). By blatantly opening, puncturing, excising, scarring, stretching, burning, nullifying, implanting, and tattooing various body parts, Mods defy accepted notions of skin as something pristine, pain as something to be avoided, body integrity as something to be preserved, and self as a fixed and rigid concept. As the testimonials of Mods show, their nonconformance to these normative notions has earned them the label of *deviant*—the dangerous and discreditable outsider, the freak that escapes definition and categorization, the perplexing oddity that challenges what it means in Western society to be a man or a woman, indeed what it means to be *human*.

Furthermore, as the self-statements of Mods show, images that are perceived as lying outside the realm of commonly

shared experiences can incite a fear response in members of dominant culture, resulting in pathologization and stigmatization of the offending individual, effects that could greatly influence that individual's sense of self and his or her continuing formation of identity, both group and individual. By showing agency in altering their physical appearance and/or function, however, Mods, like all people, stake a claim on their own corporeal presentation, declaring ownership of their bodies as well as their individual, social, and political identity. In doing so, Mods make the tacit claim that dominant Western social institutions do not—will not—dictate their public presentation or definition of self. If Armando Favazza (1996) is correct in his analysis of cross-cultural body modification practices, and if these practices are indeed the embodied expression of universal archetypes residing in our collective consciousness, nonmainstream body modification can be viewed simply as one more manifestation of a cross-culturally shared curiosity about the human body and its limits.

In sum, by inscribing their bodies with symbols that communicate entire biographies and ideologies, Mods and their embodied practices lend support to various theories of the body while challenging common assumptions about the body. Indeed, it could be argued that Mods are simply undertaking the most profound human endeavor—the enduring search for identity and meaning, the embodied quest for connection and recognition.

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1. To challenge Descartes's assertion that the body and the mind are distinctly separate aspects of self, I use the term *bodymind* to illustrate the obvious connections between the two.

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Bio

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