

FINDING HOME AT DEATH'S BUS STOP: TOUGH BODIES
AND TENUOUS EXPERIENCE IN AN INTERNET COMMUNITY



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AND TENUOUS EXPERIENCE IN AN INTERNET COMMUNITY

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Tough Bodies and Tenuous Experience in an Internet Community

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DECLARATION OF ORIGINALITY

I, Dan Tcaci, certify that

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- this thesis contains no material that has been submitted or accepted for a degree or diploma in any other educational institution;
- this is a true copy of the thesis approved by my advisor and thesis committee at Boğaziçi University, including final revisions required by them.

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ABSTRACT

Finding Home at Death's Bus Stop:

Tough Bodies and Tenuous Experience in an Internet Community

In this work, I look at posts from alt.suicide.holiday (ASH), a defunct unmoderated internet community frequented by suicidal people, to analyze narratives that they share in an environment not subject to “expert” oversight. I claim that breaking the silence around suicide described by Baril (2018) and Webb (2011) allows ASHers to constitute a tenuous experience within the narrative space of the group that is denied to them elsewhere. Using ASH as a surface of visibility, I look at wider social, discursive and material structures shaping ASHers’ degraded living such as narrative processes of redirection, obfuscation and erasure (that contribute to the further degradation of their experience), a peculiar form of secondary subjection constituting suicidals as fragile subjects, and an organization of the field of practice around suicide that qualifies it as a form of consumption in Certeau’s (1984) terms with important consequences for how ASHers experience their bodies.

ÖZET

Ölümün Otobüs Durağında Evini Bulmak:

Bir İnternet Topluluğunda Çetin Bedenler ve Mütelevvin Deneyim

Bu çalışmada, hâlihazırda aktif olmayan fakat geçmişte intihara meyilli insanların uğradığı alt.suicide.holiday (ASH) adlı internet topluluğunda paylaşılan iletiler incelenmiştir. Uzmanlar dâhil hiç kimse tarafından denetlenmeyen bu grupta paylaşılan kişisel hikayelere bakılmıştır. Baril (2018) ve Webb (2011) kişisel anlatılarda intiharla ilgili sessizliğe dikkat çekmişlerdi. Grubun anlatısal alanında bu sessizliği bozmanın, müdavimlerinin mütelevvin bir deneyim tesis etmelerine imkân tanıdığı ileri sürülmüştür. Ayrıca grup, üyelerinin bozulmuş yaşamına şekil veren daha büyük ölçekli sosyal, söylemsel ve maddi yapılarının izi sürülebilecek bir görüş sahası olarak ele alınmıştır. Bu tahlil üç farklı yönden yapılmıştır. ASH üyelerinin deneyiminin daha da bozulmasında rol oynayan yeniden yönlendirme, örtme, silme gibi yaygın anlatısal süreçlere bakılmıştır. İntihara meyilli insanları kırılğan özne olarak tesis eden ikincil özneleşme yapıları anlatılmıştır. Son olarak, intihara yönelik mevcut önleyici pratiklerin şekillendirdiği sahada intiharın Certeau (1984) tabiriyle bir tüketim pratiğine dönüşebilmesinden ve bunun bedensel deneyime önemli etkilerinden bahsedilmiştir.

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Finally, I thank my family for supporting me, believing in me, and wholeheartedly sharing my joy in the belated completion of this work.

For lack of time, this text has fallen short of fully reflecting the wealth of insight that I have been fortunate to receive. I hope to remedy this in a future revision.

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NOTES ON SPELLING AND TRANSLITERATION

This work is based on textual material that has been collected from discussion threads in the Usenet newsgroup ASH. Excerpts from the discussions appear throughout this work and are clearly marked and numbered as such in each chapter. The original spelling has been preserved, including typographic and orthographic errors. These are quite numerous given the informal context of the original discussions and I have abstained from marking them with the customary “[sic]”.

Some of the posts have been formatted in a deliberate way by their authors (for instance, the text might be arranged in a diamond shape or use peculiar spacing). Being an early form of internet art and part of the original author’s expression, such formatting has been preserved where present. Some messages had titles which I also kept.

As explained at greater length in the introduction, the collected material that appears in the excerpts was originally open and publicly accessible by design, but most of it is no longer retained and cannot be easily found. The great majority of the original messages was written between 2003 and 2010 and was collected between 2008 and 2011. For all intents and purposes, the excerpts have been treated and should be considered as witnessed and reported ethnographic content.

CHAPTER 1

INTRODUCTION

I write to say what I mean.

1.1 Induction

1.1.1 ASH—A different narrative space

In 2003 Suzy Gonzales, a 19-year-old college student in Florida, USA, committed suicide by ingesting potassium cyanide, a poison that she was able to procure by mail-order by posing as a jeweler. The event was reported extensively (including in high-profile media such as the CNN and on the Oprah Winfrey show) and had a big public impact.

The reason for this extraordinary interest was that for a few months before her death Suzy Gonzales had frequented ASH (alt.suicide.holiday), an Internet community¹ that discusses matters related to suicide in an untraditional fashion.

The media reports focused on the frank discussions on suicide methods (and on their effectiveness) taking place in the community and on its non-interventionist stance. Indeed, the readers of ASH knew of Suzy's suicide plans (including the timing) and that she had a sure-proof method available at hand. Moreover, an older member (R.) had talked to her on the phone a day before she committed the act and had helped her with some non-essential details² in her plan. R's assistance and the fact that nobody intervened was what was most appalling and incomprehensible for

¹ ASH was a Usenet newsgroup. The Usenet is a decentralized worldwide discussion system with a peculiar culture and posting paradigm. Newsgroups are the functional units of Usenet. They resemble unmoderated discussion boards that focus on a topic or theme and are organized in categories and subcategories. The Usenet is highly anonymous and posters are very difficult to track down. The Usenet will be discussed in more detail later in this introduction.

² Suzy had already successfully ordered the poison at the time before she started posting to ASH (although she had lurked on the group for some time before that) and before she befriended R. R. helped Suzy with her suicide note and taught her how to send time-delayed mails—assistance that was unessential for the success of her enterprise.

Suzy's parents, the reporters and the public, and it automatically qualified ASH as a pro-suicide community in their eyes. A large public campaign was started to pass a bill ("Suzy's law") making owners of Usenet servers liable for information on suicide methods stored on their machines and thus close the lid on ASH.

ASH did not describe itself as a community supportive of suicide. Instead, it defined its position as "pro-choice". Suicide is considered by most ASHers a needed civil right and ASH is imagined as a place where suicidal people could talk frankly about their lives (and the suicidal ideations, feelings and plans that are often part of them) in the company of sympathetic people dealing with the same issues and without the social pressure which they experience when they breach the topic of suicidality elsewhere. In view of this aim, respect for the other members' decisions (including the decision to die) was essential for the operation of the group. R. considered that he was justified in acting in the way he did because he acted as Suzy's friend. He respected Suzy's decision to die and supported her in it, although he knew he would miss her—saving Suzy would have been a betrayal of trust and friendship. These claims were reported summarily in most media coverage of the issue, but they were met with ridicule and suspicion in the media and in public debate.

ASHers were appalled by the portrayal of their community and of its role in Suzy's death in the media. They were also highly distressed by the huge traffic of non-sympathetic non-ASHers that this portrayal had drawn to ASH. In a petition addressed to CNN (that had written two articles and aired a TV program on Suzy Gonzales' suicide), ASHers accused the media company of having committed "errors of omission" in its coverage with the result that ASH was falsely represented as a community encouraging suicide. In CNN's reports (that are quite typical of the wider

coverage of the issue in the media) the story of Suzy's death was narrated on the basis of the contrast³ between her apparent gaiety (and success) and her suicidal act. In ASHers' opinion, this contrast served to present Suzy's suicide as incomprehensible in terms of her life circumstances and thus attributable only to the nefarious influence of ASH. But, according to ASHers, such a contraposition glossed over important elements of Suzy's story, namely all the issues that Suzy struggled with in her life and that she recounted on ASH⁴. Saying that ASH failed to intervene in what was a "cry for help" misses the point that Suzy had attempted to seek assistance elsewhere but was put off by the reactions: she recounted her woes only on ASH exactly because of its non-judgmental and non-interventionist policy.

If ASHers' version of the story of Suzy's death was seen as a ridiculous attempt at self-justification in the public debate, then the publicly circulated story was seen in ASH as misleading because of being incomplete. The fact that Suzy's story was recounted so differently in ASH and outside it despite the narrators' access to the same narrative elements betrays the work of two different modes of emplotment⁵ (in ASH and outside it) and leads us to the conclusion that insofar as stories like Suzy's are concerned ASH should be considered a distinct narrative space. Outside of ASH Suzy can most easily be talked of as a vulnerable "young, impressionable person who was given advice on how to kill herself"⁶. Conversely, on ASH Suzy is told of as a determined young woman who had tried in various ways to deal with her unhappiness, had decided to kill herself when she reached the

³ This contrast was present in all the media narratives of Suzy's story that I have found *without exception*.

⁴ The reporters could access Suzy's posts on ASH and have probably read them.

⁵ I borrow the term "emplotment" from White (1980).

⁶ This expression was used by Suzy's father

conclusion that she could not deal with it, and went about her decision with courage and determination.

In the light of such a conceptualization, the reproach with “omission” coming from ASH could be reinterpreted to say that there are very important stories about suicide and suicidality that can be told in ASH but not elsewhere, stories that, if weaved into the plots of *public*, non-ASH narratives of suicidality, would impact those narratives in such a way that their direction and, more importantly, their morals would be altered beyond recognition. The main purpose of my research is to take this message from ASH seriously, to investigate its claims and why it needs to be uttered and to ponder the implications.

This task leads me to a number of questions. What stories were told on ASH that cannot be told outside it? How and when were these stories told, and what prevented them from being told at such moments and in such a fashion outside of ASH? Who are the ones that need to tell such forbidden stories and what use do the tellers find in them? What does it mean for such tellers to keep their stories to themselves outside of ASH, what does it mean for them to counter their urge to speak with a compulsion to be silent? What does it mean for them to tell such stories outside of ASH and to be misunderstood (as in the case of Suzy’s story as told by the petition)? How is the violence of such misunderstandings and forced silences experienced by the ASHers (tellers) and how were these experiences recounted in ASH? How does this violence imprint itself upon the selves and the bodies of the frustrated tellers and how is this frustration lived and recounted? These, I believe, are the kind of questions that will allow me to thread ASHers’ narratives through the stories woven in the non-ASH narrative space on suicidality and thus transpose the silences (“omissions”) of the latter into manifest representations of lack—

meaningful, articulated, informative and politically-pregnant admissions of how and to what effect popular discourses on suicidality misrecognize ASHers in particular, and by extension suicidal people in general. This is the first focus of my present research.

1.1.2 Finding a home at Death's Bus Stop

alt.suicide.holiday became a meeting point for suicidal people accidentally. It was created in 1990 as a pun on the urban myth that suicide rates go up during holidays. The group was announced as a place to “discuss reasons and methods” with “the holidays coming up”⁷ and the creator clearly intended it to become one of the many humoristic newsgroups that flourished on the Usenet. Surprisingly, the jokesters were soon joined by people that initially wrote long epistolary accounts of their lives and in all seriousness discussed their unhappiness and suicidal thoughts. After about four years of uneasy co-existence, the jokesters gradually whittled away leaving the group to the serious posters. For various reasons, the group spawned a number of offshoots that collectively became known as ASHspace or ASHweb.

The Usenet is a radically unmoderated medium in which nobody can be prevented from posting to a group and no post can be deleted (moderated groups are a technical option but see very little use). Usenet newsgroups rely on *netiquette* and the group charter to curate their virtual space—methods that depend on voluntary compliance.

Combined with the controversial nature of ASH, this led to extreme pressure on the group to justify its existence and to preserve itself as a distinctive space. External posters expressed horror, anger, pity and indignation, tried to respond in a

⁷ The announcement was made on alt.config—a special newsgroup that has the purpose of introducing new groups to potential contributors.

more conventional way to expressions of suicidal ideation, challenged the group's attitude towards suicide and, in an unexpected twist, sometimes turned vicious and abusive. Responses to such interventions helped crystalize the group's identity, a process that culminated in an interaction that generated a celebrated metaphor for the group (Death's Bus Stop) and in the publication of ASH FAQ—a 13,000 words document drafted and edited by prominent ASHers over the years, in which the group explicitly defined itself as a subculture and tried to explain its purpose to accidental visitors.

ASH had become a space where topics such as life, death, existence, presence, recognition and belonging, unhappiness and mental illness, suicide prevention, autonomy and the helping relationship, hospitalization and the nature of the human body were discussed and made meaning of in an original fashion, with important consequences for how ASHers represented their experience, how they chose to act (especially with regard to suicide) and how they imagined themselves as members of their societies. The FAQ and the polemical exchanges with the outsiders reflected that fact.

For the ASHers themselves, perhaps the most important feature of ASHspace was the relief it provided as a liminal space of intelligibility where such meanings could be shared, such stories told and understood, where, indeed, words could be found for expressing (even if only to a very limited audience of fellow ASHers) lived experiences whose very ambiguity and intractable silence had made them such a difficult load to bear:

Excerpt 1.1⁸

This [ASH] is a place where I feel joy. Joy in knowing that what I'm experiencing is not unique. Joy in knowing that someone somewhere understands the world I see every day, understands the neural black that has

⁸ *Excerpts* are the words of ASHers, mostly collected directly from ASH, but sometimes (as here) collected from secondary sources.

obscured everything else in my life. Where else would one tell you this but here? This is a natural human need, I think—to know that you’re not alone, to know that someone hears you. (Stokman, 2002)⁹

Excerpt 1.2

Sometimes I feel that everything in my life has fallen away, that I’m invisible, that I’ve lost the ability to affect anything. This is a test—if I scream, will anyone hear me? If I post to Usenet and no one replies—did I actually say anything? And I don’t want someone to tell me to feel better, and I’m not looking for answers or solutions. I can handle that very well on my own. I am looking for evidence that One—I exist and Two—that someone else on this planet has peered from the bottom of this black hole and is willing to talk about it. (Stokman, 2002)¹⁰

Another ASHer in Stokman’s documentary speaks of ASH as a home: a place of increased intimacy and repose where one can be comfortably unguarded, where little effort is needed to be correctly understood, where one puts on one’s slippers and lounges about, unconcerned about the prying eye and damaging speech of a potential stranger¹¹.

The ASH FAQ explains how a frank and neutral discussion of suicide is a crucial part of what makes such a “home” possible: making broad and categorical denials of suicide as a possible option in reaction to any expression of suicidal intent intrudes upon the only sanctuary ASHers feel they have for a free and honest discussion; it forces people to retreat “into the silence of their hearts” and ironically deprives them of the support that might help them survive another day.

The pervasive imagery of the threatened privacy of a home in the context of an utterly discursive milieu brings to mind Butler’s (1997a) discussion of the potential of injurious speech to uproot; to degrade one’s place rendering it uninhabitable¹². ASH has been dysfunctional since the late 2000’s mostly because of

⁹ An ASHer interviewed for Walter Stokman’s documentary *ASH, Worldwide Suicide*

¹⁰ An ASHer interviewed for Walter Stokman’s documentary *ASH, Worldwide Suicide*

¹¹ From the words of another ASHer interviewed in Stokman (2002).

¹² “To be injured by speech is to suffer a loss of context, that is, not to know where you are. Indeed, it may be that what is *unanticipated* about the injurious speech act is what constitutes its injury, the sense of putting its addressee out of control. The capacity to circumscribe the situation of the speech

the publicity occasioned by Suzy Gonzales' case. A U.S. legal initiative in the aftermath was responsible for the disappearance of most ASH offshoots. Finally, in 2016, Google, the only custodian of an archive of all Usenet posts going back to the 1980's, closed access to old ASH posts in a characteristically untransparent decision¹³. In a recent development, a private, incomplete but quite comprehensive archive of ASH and other Usenet newsgroups has been published by its owner and has become accessible (though not easily searchable) in 2025.

1.1.3 Beyond ASH

ASHers' extraordinary, and ultimately unsuccessful effort to protect their "home" and the intense emotion coloring the little virtual monuments of remembrance left in hard-to-find online corners (pages collating beautiful or significant posts, commemorating the group and members of the community etc.)¹⁴ bear witness to the short existence and the swift erasure of a valued, liminal space of experience—a forced exile to a "place that is no place" as Butler put it.¹⁵

This story of a studied, directed *silencing* that brought into play various social and institutional actors makes me wonder if the thickening mist that seems to obscure our landscape of social intelligibility and action as we approach the towering, oppressively visible pillar of the "anomic" act itself is as uninteresting an object of

act is jeopardized at the moment of injurious address. To be addressed injuriously is not only to be open to an unknown future, but not to know the time and place of injury, and to suffer the disorientation of one's situation at the effect of such speech. Exposed at the moment of such a shattering is precisely the volatility of one's 'place' within the community of speakers; one can be 'put in one's place' by such speech, but such a place may be no place". (Butler 1997a, p. 4).

¹³ Only posts going back two years or so can be accessed at the moment (through other means). These recent posts hold no value to ASHers or to me because the trolls and spammers that have taken over the group have rendered it a characteristically untransparent decision. In 2025, some old ASH posts have again become accessible due to the publication of a large private archive of Usenet posts by an individual.

¹⁴ ASHers' marked concern with memory and with rendering the death of their companions meaningful is an important theme in itself, especially considering the halo of unintelligibility surrounding suicides. This will be discussed in greater detail in Chapter 2.

¹⁵ Butler, 1997a, p. 4

sociological inquiry as the almost unquestioned causal attribution of the act to a disordered individual psyche implied by our current intervention schemas suggests. I would like to propose that this silencing itself, its necessity as evidenced by the story of ASH, its institutional and discursive conditions of possibility, its truth-effects and unintended consequences are important objects of sociological study that I propose to examine thematically following the threads of inquiry that I have discovered in my time researching ASH before Google's ban hammer struck. How is this zone of silence created and what uses do we have for it? This is the second focus of my present research, that carries me beyond ASH and questions the effects of the social logics of action directed at suicide, disperse in their source, structure and effectivity yet combining to constitute ASHers' landscape of action with such silencing as one of the effects.

Here the analytical gaze turns back upon ourselves forcing us to consider how living and dying is recognized and reckoned, as suggested by an ASHer reproaching a "concerned" visitor suddenly turned abusive:

Excerpt 1.3

You have no idea how insulting this is. After reading your savior-posts, I cried for the first time in months ...

Do you want to "save" my life? Do you even know what life is? I don't think you do- you're much too caught up in it. Does saving my life entail ensuring that my heart is beating, that I am respirating? Does God pay you by the heartbeat? I would certainly hope he doesn't pay you commensurate to the joy I experience; you wouldn't be able to purchase a cup of coffee in Heaven.

Aside from various poets I've encountered the people who post here are some of the few people I've met who I believe know what life is. Why? Because we miss it. Because we want it more than you'll ever know.

Life is being touched.

Life is being loved.

I am NOT living a life. For whatever reason, my circumstances have chosen to tear me, unkindly and in whole, from the fabric of human experience. Right now, I am a lump of flesh carrying out sundry clinical functions. For you to suggest that I even have a "life" to save, only shows that you have absolutely no empathy for my situation."

—*Kafkaesque*

Kafkaesque opposes a lost, concrete life of human meaning and connection to an abstract life couched in organic and functional terms that lives on in public reckoning (or rather is “made live”, to distort Foucault’s well-known turn of phrase¹⁶). The problem of which life is saved and which is lived (or lost), and of how these different lives (and deaths) are told and inscribed inside and outside ASH will make up the core of Chapter 2.

The conflict between the two articulations—between a publicly reckoned abstract life and a privately lived concrete but hitherto undeclared, unwitnessed and unmourned death—comes to a head when a suicide occurs. Suicide is the ultimate, public, indelible and incontestable inscription of one’s existence as unlivable (quite independently of whether the person committing the act intends to make such a statement). Suddenly the unmourned death irrupts, ripping asunder “our” fantasies of whom and how we make live and let die. This manifests in the sense of temporal disruption in the sequence of events through which stories about the person are told and memories about her are built, as it is clearly exemplified by Suzy’s case—a rupture so much expected that the suicide note exists as a common instrument in which an attempt is made to bridge it.

Notably, the crisis of suicide appears as a re-articulation about the person and without the person¹⁷. Our visceral reaction to the suicidal’s final successful inscription on the “fabric of human experience” is much more about “us” than it is about “them”, about “our” public reckoning rather than “their” private making sense.

16 See Foucault (1976/1978, p.138). In this translation: “One might say that the ancient right to take life or let live was replaced by a *power to foster life or disallow it* [emphasis added] to the point of death”. I refer to the more popular rendering “a power to make live or let die”.

17 I was happy to find out that my formulation mirrors a slogan that was widely used by disability rights activists as documented by Charlton (1998, pp. 3–19) who has made it into the title and focus of his book: “Nothing about us without us”.

This realization, I believe, lies at the heart of what is misrecognized about suicide today¹⁸. It suggests the need for a shift of focus from the oppressively visible pillar of the inscription (suicide) to what it would indicate if the suicidal could in fact speak¹⁹—that space of degraded living indicated by Kafkaesque of which suicide is but one optional, if important feature, for many people who “know life because they miss it” will never commit or even attempt suicide²⁰.

There have been a number of works that have acknowledged and attempted to trace out the landscape of degraded living.

One of the earliest was Durkheim’s (1897/1951) formulation of *anomy* as one of the causes of suicide in his famous monograph. Durkheim describes anomy as a state of dysregulation of individual passions caused by a degree of disturbance in the social order. Such a disturbance can be temporary as in the case of a crisis. However, Durkheim argues that some degree of localized disturbance is always endemic to the functioning of a society in proportion to its organic complexity. For Durkheim, society is a *sui generis* category of human existence that corresponds to the human representational and moral capacity simultaneously. As a disturbance of social organization, anomy is at once a representational and a moral crisis. The degrading of representational horizons erodes support for meaning, ordered time and even one’s sense of reality (see pp. 216–217). For Durkheim, sociality is a fundamental and defining aspect of human existence and anomy is a state of detachment from all but mere animal (biological) life—a suspension of what is properly human about life.

¹⁸ See Webb (2011) for an account written from a more personal perspective that emphasizes that silence and remarks on the need to reflect suicidal people’s experience in suicidological and other literature on suicide.

¹⁹ See Baril’s “Can the suicidal speak?” (2018) for a seminal article examining the suicidal’s constrained speech and its effects (in French).

²⁰ An important finding of this study, discussed at length in Chapter 2, is that the silence around suicide makes it difficult to even articulate that knowledge and that lack. It is, as one ASHer describes it, a “loud silence”. ASH makes such an articulation possible, and this is the main way in which it is useful to ASHers.

Despite its use of theoretical constructs that have with time fallen out of favor²¹, Durkheim's account remains powerful, resonating with more contemporary notions such as Agamben's bare life (detached from the polity and materializing the outside to the polity's inside) and with Kafkaesque's account in Excerpt 1.3. Particularly astute is Durkheim's observation of the relationship between degraded living and the erosion of the possibility of experience. I found evidence of a similar, though differently-structured erosion in many ASHers' lives, as discussed in Chapter 2.

A space of social death that is produced as a by-product of subjection appears in Butler (1997b). She speaks about the "production and maintenance of those socially dead"—objects detached from desire—some of her examples being drug users, prostitutes, AIDS sufferers (p. 27).

Biehl (2013) also envisages a "zone of social abandonment" (in title) that his analysis constantly links with death. Catarina, the protagonist of Biehl's ethnography, is detached by force of circumstance from the previous course of her life and ends up in custodial care in *Vita*—an institution pervaded by death imagery (ironically so, as the literal meaning of *Vita* is life).

Chatterji (1998) in his excellent ethnography of dementia emphasizes the death imagery through which the person with Alzheimer's disease Mr. Rijder is imagined and described in the late stages of his illness by his wife and social worker and how this is reflected in the care he receives by the institution he stays in.

In the case of most ASHers, their "social death" is often not recognized, or that recognition is verbally denied though tacitly present. Following Butler's (1997b; 2000) work on performativity and subjection, we can question the inhabitable limits

²¹ Such as the idea of society as a *sui generis* whole, though Durkheim often manages to use this rather unwieldy construct with great flexibility and to good analytic effect, as is the case in the present example.

of our current modalities of inscription as they apply to ASHers' lives and, guided by what ASHers tell us, inquire about the conditions of intelligibility that would have made their lives possible.

1.2 Intro-duction

1.2.1 Towards sketches of ASH

In trying to outline the domain of intuition and how it relates to analysis, Bergson (1912) gives the example of a painter going through Paris and sketching various places and buildings that he finds notable or interesting. Making each sketch involves a vision that disconnects the painted object from its surroundings, and thus abstracts it from the material and non-material fabric connecting Paris into one whole. Under each, the painter writes "Paris". Later, he might use the sketches to remember what Paris is like. But to do that, the painter has to rely on his intuition of Paris as a whole that he developed as he walked and inhabited the city. Without such a guiding intuition, the sketches, no matter how many and how accurate, cannot give someone an appropriate sense of what Paris is like (pp. 26–28).

This passage goes a long way to explaining the role of a place in ethnographic practice. A place appears as it is lived. The ethnographer lets the eddies of that life carry, muddle and misplace her theoretical objects, and then, pretending to be an archaeologist, she goes out to recover them, noting down which ones she managed to find, how, where, and in what condition.

In that awkward roundabout way, the theoretical constructs themselves are taken on a tour of "Paris", the eddies of difference-producing processes (Gupta and Ferguson 1997a) hopefully breathing the life of situated intuition into theoretical clay.

Gupta and Ferguson (1997a; 1997b) are quite concerned with what it means to try and bound “Paris”. The eddies, after all, do not swirl around separately within rigidly bound confines, but rather constantly converge and diverge, envelop and release forming shifting crests and hollows which *are* those confines, vulnerable to the ravages of life and time. Only if faithful to that vision can the ethnographer prevent the “veil of Maya”—the trace of representation—from receding from view, condemning imagined boundaries to an “Egyptian stiffness” (Nietzsche, 1999, p. 51), pulling the ethnographer too far into the dream for them to be able to anymore say “this is a dream, I will dream on” (p. 16).

Gupta and Ferguson’s concerns are very relevant to a work that starts in a location that is a transient location rather than a true place, such as ASH. Indeed, in selecting Death’s Bus Stop as the master metaphor for ASH, its denizens also take care to appear the veil of Maya so that they do not misrecognize ASH for an inhabitable place and the relief brought about by each other’s companionship for concrete life. The degraded space of living can only be faithfully appeared as a threshold²², a transience—ASH’s commitment to such mimetic faithfulness in its self-representation is unique among all suicide-related internet communities that I have visited.

This is explained by its openness to the road ingrained in the Usenet paradigm: the eddies buffeting ASH are strong and stubborn—journalists, researchers (such as myself), “p-docs” (psychiatrists etc.), “evangelists” and “shiny-happies” (people who are convinced that they know the reasons why ASHers should be happy), trolls, saviors, distraught parents, voyeurs, abusers, scientologists,

²² My use of the term “threshold” is more descriptive than analytical and does not refer to the work of Jacques Derrida and Giles Deleuze who, as I later found out, have also used the term. There seems to be some convergence between my usage and the more theoretical elaboration of the term by these authors.

predators and simply well-meaning people who disagree flow in and out in cool rapid currents forcing ASHers to bristle and painfully feel their own skin in the unmoderated pell-mell. Any modern internet forum worth its salt would nip such behavior in the bud with the sovereign hand of the moderator. Perhaps then ASH could indeed have become a “community of affirmation” (Niezen, 2013)²³ as many believe it is.

Be that as it may, I could not resist the temptation to induce through a story rather than introduce through a conceptual sketch in preparing my reader’s first encounter with this unusual anthropological location. Now I would like to reframe this encounter by taking a step back to see what has become of my theoretical objects, at least the ones that I can still find.

1.2.2 A theoretical reformulation of the aims of this study

In this work I examine the organization of a complex of social action²⁴ around degraded spaces of living as well as completed, attempted, and potential suicide at

²³ Niezen (2013) defines online communities of affirmation as those that “attempt to normalize or promote life choices widely seen as pathological” (p. 310) providing their normally marginalized members with “the potentially life-changing realization ... that their socially isolating obsessions are in fact shared with others” (p. 310). He is careful to note that unlike many peer communities centered around positive diagnostic criteria (e.g. Aspie communities), peer suicide-related forums do not have a strong focus on identity and have “porous boundaries” (p. 316). Niezen identifies malicious actors (such as voyeurs and trolls) rather than regular denizens as the main threat on open suicide-related forums. He only sees the potential for suicide-related forums to become communities of affirmation if they are closed to outsiders and very restrictive in granting access to any but a very narrow group of people (p. 316). Niezen’s account of affirmation, being elaborated straightforwardly around the notion of identity, cannot foresee a surprising and subtle possibility of affirmation of life in suicide communities (already somewhat apparent in the excerpt by Kafkaesque) that will be elaborated in Section 2.3.

²⁴ I intentionally use the term “social action” abstractly. Like in a mathematical equation, this abstract use of the term (corresponding to the unknown in my analogy) is meant to define the term’s domain of reference while postponing an elaboration of its specific content and structure. Just as in mathematical or logical reasoning, the idea is to work out the latter from the former over the course of this work, eventually ending up with a much clearer idea of what “social action directed at suicide” is content-wise. I endorse, with minor reservations that are not important to discuss here in detail, Max Weber’s (1921/1968) classical understanding of social action as formulated in the opening pages of his *Economy and Society*. Weber describes action as behavior to which “the acting individual attaches a subjective meaning, whether overt or covert, by omission or acquiescence” and further qualifies it as social when the subjective meaning of the action “takes account of the behavior of others and is

the end of the twentieth and the beginning of the twenty-first century by starting from a very peculiar anthropological location—the Usenet newsgroup alt.suicide.holiday (ASH) accidentally established in November 1990 and frequented by suicidal people until it gradually became dysfunctional in the late 2000’s. I argue that by sitting at a very specific intersection of internet history and of the history of practices directed at suicide, ASH became an unusual vantage point from which crucial patterns (of organization) of that social action could briefly become visible before the newsgroup was erased as a space of memory and inscription in an avalanche of directed social, legal and technological action culminating in Google closing access to the ASH archives in 2016²⁵. That vantage point, unlike the watchtower in Bentham’s infamous *panopticon*, was inhabited: it was a tenuous, impermanent, and nevertheless valuable space of presence and companionship for its members best described by the metaphor they came up with to describe it to an abusive outsider—ASH was “death’s bus stop”. More than one ASHer has called it a home. The warmth with which it was regarded overflows in the many messages posted on ASH and on the couple of websites commemorating it. The main aim of this study is three-fold:

- To understand the need ASHers had for such a space. What kind of presence, experience and memory, what kind of meanings and stories were only possible at death’s bus stop? What use did ASHers make of it?

thereby oriented in its course” (p. 4). In the light of later work by Merleau-Ponty and Bourdieu, I would replace “subjective meaning” with “sense”, including habitual and non-reflective dispositions that Max Weber clearly intends with his definition (as witnessed by the general body of his work) although he cannot, in my estimation, consistently theorize them by reference to subjective meaning alone.

²⁵ Only posts going back 2 years or so can be accessed at the moment (through other means). These recent posts hold no value to ASHers or to me because the trolls and spammers that have taken over the group have rendered it inhospitable and unsafe.

- To understand the need non-ASHers had to degrade, shut and erase it. What uses do we make of that silence, indeed of the energetic *silencing* that ASH elicited and that brought into play various social, legal and institutional actors? How far does that silencing extend, what are its discursive and ideological conditions of possibility, which affective and material surfaces does it create, and what kind of subjects does it image and de-image?
- To follow the thread of stories told in ASH and see what they reveal about social action organized around degraded life and suicide from the perspective of those who claim such lives. Three thematic nuclei have emerged:
 - A thinning, decentered presence experienced by ASHers as a sustained but incomplete detachment from affective surfaces nourishing concrete life; techniques of obfuscation, de-inscription and erasure that preserve that incomplete detachment (discussed in Chapter 2);
 - Secondary structures of subjection that aim to attach²⁶ what I have called “fragile subjects”—subjects that are to be “helped” to perform their own autonomy—and the space of abjection that such structures foreclose. Those structures are analyzed as part of the help relationship, both at a personal level and as it is institutionalized in medicine, psychology, suicidology and psychiatry. The twin excesses of the help relationship: abandonment and intimate violence (discussed in Chapter 3)
 - Tough bodies engendered by techniques and material practices of suicide prevention (and emergency medical care): As people attempt

²⁶ see Butler (1997b, pp. 6-10).

suicide, they unwittingly encounter a material setting that has been modulated to thwart such attempts. Under these conditions, the effects of such modulations in the material environment are imprinted on the bodies of people attempting to commit suicide as they strive to overcome them, resulting in an embodied sense of toughness and uncanny resistance to death. The action landscape of suicide attempts and suicide prevention is organized around a lack of a technology of suicide. This makes both failed serious attempts and successful abortive suicidal gestures possible (discussed in Chapter 4).

My work will have a “bifocal” (Durham, 1997) structure foregrounding ASH as an anthropological location against the effectivity of discourses, texts, institutions, practices and techniques that straddle and polarize multiple spaces producing differences²⁷ that can only be properly understood in their wide dispersion. ASH is intended as a space of visibility where threads of such effects can be found and then traced outside of ASH as well as inside it.

I have used the following sources of material:

- posts from ASH that I had collected before Google shut down access and the ones salvaged by old ASHers and published on public websites. (Usenet groups are public and Google’s ban has the advantage of making the original poster untraceable).
- Interviews with ASHers in Walter Stokman’s documentary *ASH, Worldwide Suicide*.
- Thematically similar material from other sources.

²⁷ I borrow the idea of focusing on the production of differences from Gupta and Ferguson (1997a, p. 43) where they propose such an approach in avoidance of relying on problematic unities that tend, among other things, to essentialize locations and to elide connections between them that are best seen by taking an unanchored view of the wider processes territorializing them.

- Psychological literature on suicide, including theoretical material, sources providing guidance to clinicians, popular psychology and public statements by psychologists.
- An interview with a clinical psychologist that has worked with suicidal patients (conducted for another project).

1.2.3 Contextualization in terms of literature on suicide as an object of discourse

An important perspective and body of scholarship that I have yet to engage with is the one that has studied suicide as an object of discourse.

I have deliberately formulated my research aims in terms that have come from the concerns of the newsgroup. The emerging picture was one of a strenuous attempt to preserve a space of expression that ASHers considered unique.

We have seen that there was more to this than a lens trained exclusively on suicide could reveal—the pervasive metaphor of a home shows that ASH concerned the living of ASHers as much as their dying. The patterns of meaning that an engagement with the ethnographic material suggests are slightly unusual and can seem nebulous at a first glance. Yet I believe that it is essential to develop them organically and map points of contact with relevant theoretical constructs as they arise rather than bending such emic patterns to categorizations that appear obvious and natural *ex ante*. After all, critical suspicion of what appears obvious in such a way has been a hallmark of sociological thought and ethnographic work for good reason.

It was then all the more important to protect such emerging patterns of meaning from contact with a general discourse on suicide that, as Ian Marsh (2010) has shown, has become “normatively monolithic” (p. 66), thus restrictive, and more

and more structured around a “compulsory ontology” (p. 43) that posits the individual’s internal pathology as a mandatory principle of all knowledge about and understanding of the events that are connected to it.

However, it is now time to come to terms with the fact that ASHers are currently understood primarily through the lens of suicide and, more importantly, that it was the topic of suicide that for the most part brought them together (although it wasn’t the only reason why they stayed). An engagement with a discursive view will allow us to enrich our contextual understanding of ASHers’ landscape of action and to resolve an apparent contradiction between the modern proliferation of discourse about suicide²⁸ and the silencing of which ASHers complain. That resolution will clarify the position of my own approach with respect to other critical literature on suicide.

The most important fact that arises from an examination of the literature on suicide as a discursive object is its relative newness. Suicide emerged as a unitary descriptor for a number of acts only in the seventeenth century (Marsh, 2010, pp. 90–92); the popularization of the term took still longer (Szasz, 1999, pp. 3–4). Marsh (2010) has shown that such unity and the monolithic normativity that it currently engenders is traceable to the secularization and medicalization in Europe of the Christian prohibition on self-murder (pp. 93–94).

Previously²⁹, acts that we would today discuss under the single label of suicide were considered under a variety of discursive designations and phrases that allowed considerably more multifarious schemas of interpretation and logics of action. After making this observation based on linguistic work by David Daube

²⁸ I thank Kutluğhan Soyubol for driving home this point and for introducing me to the literature discussed in this section.

²⁹ Especially before the gradual elaboration of self-murder as a sin by the Christian Church in late antiquity.

(1977) and Anton van Hooff (1990), Marsh notes, “Descriptive variety becomes possible when a number of terms are available within a language, and these terms can allow for apparently similar acts to be given different meanings” (p. 79).

Timothy Hill (2004) quoted in Marsh (2010) gives examples of suicides in the Late Roman Republic–Early Roman Empire period that are described by classical authors as political acts carried out in public, with the knowledge and support of the suicides’ families and friends who did not attempt to “save” them but instead took part in the pre-mortuary proceedings (Marsh, 2010, pp. 80–81, 83–84). Van Hooff (1994) is quoted to the effect that classical texts reveal no interest in associating “self-accomplished death” (Marsh’s preferred neutral designation for the act) with psychic forces (Marsh, 2010, p. 82).

Marsh notes on numerous occasions how the current schema of suicide restricts valuable possibilities of making sense of the various kinds of acts that it subsumes (see for instance p. 194). On page 219, he can conclude: “It has been argued that an individualised, ‘internalised’, pathologised, depoliticised and ultimately tragic form of suicide has come to be produced, with alternative interpretations of acts of self-accomplished death marginalised or foreclosed”. Szasz (1999) also comments on the restrictiveness of suicide as a unitary category that is called upon to make sense of qualitatively different acts (pp. 1–9).

In a chapter on suicide in *The Taming of Chance*, that has been extremely influential in this body of literature, Ian Hacking (1990) has shown how the growing effectivity of suicide as a unitary category in the early nineteenth century has to do with the rise of what Michel Foucault calls biopolitics—a form of power that objectifies the population as an object of discourse and governance. Hacking notes how the fervor with which statistical data on suicide began being collected,

quantified and studied in England and France during that period was motivated by a scholarly debate that saw numbers on suicide as a “moral indicator of the quality of life” (p. 64). This is indicative of the action of biopower, a power “situated and exercised at the level of life” (Rabinow and Rose, 2003 cited in Marsh, 2010, p. 97) to “foster ... or disallow it to the point of death” Foucault (1976/1978, p. 138). Such life, imagined and governed at the level of the body politic, but particularized at the level of the individual, corresponds to the publicly reckoned abstract life that Kafkaesque recognizes in Excerpt 1.3 in opposition to her privately reckoned concrete life of personal attachment and belonging. Foucault (1976/1978) remarks on the relationship between suicide and biopolitical power:

It is not surprising that suicide—once a crime, since it was a way to usurp the power of death which the sovereign alone ... had the right to exercise—became, in the course of the nineteenth century, one of the first conducts to enter into the sphere of sociological analysis; it testified to the individual and private right to die, at the borders and in the interstices of power that was exercised over life. This determination to die, strange and yet so persistent and constant in its manifestations, and consequently so difficult to explain as being due to particular circumstances or individual accidents, was one of the first astonishments of a society in which political power had assigned itself the task of administering life. (pp. 138–139)

For Hacking (1990), the emergence of suicide in its final capacity as a biopolitical object of moral significance (by reference to a general, qualifiable life of the body politic) was a complex process that relied on a number of practical conditions including the fact of counting itself, medical formulations of suicide, probabilistic constructs, ideas of causation in medical and probabilistic events, and finally the combination of some of these (pp. 68–69)³⁰.

Having dealt with the vigor that biopolitics lends to suicide as a unified term, let us move on to other discursive formations that underpin it and that have an

³⁰ Hacking (1990) sees Durkheim’s (1897/1951) analysis in his monograph *Suicide*, especially his formulation of anomic suicide (one of his four types) as the pinnacle of a theoretical elaboration possible on the basis of such a biopolitical reckoning of life (p. 64).

independent effectivity of their own, in some cases (medical discourse) greater than that of suicide as a biopolitical object.

In his article *The Suicide Weapon*, Ian Hacking (2008) gives a good overview of the currently hegemonic understanding of suicide:

In the past couple of hundred years our industrial civilization has almost totally pathologized and medicalized suicide ...

Here is a headline from an Irish newspaper: “Suicide Is Caused by a ‘Culture of Despair.’” ... In the course of the story we hear a psychiatric nurse: “A lot of times, people do make that cry for help and we should never ignore that cry for help.” There are three ideas here: suicide is caused by depression, it thrives in a culture of despair, and attempted suicide is a cry for help. These three pretty well sum up our present conception of suicide. They are the folk wisdom distilled from expert medical opinion and, though brief, well represent present scientific knowledge. As a corollary, news of a suicide among us has an immediate response: horror. (pp. 2–3)

Suicide is predominantly considered a misguided impulsive act caused by an internal pathology, a view that Marsh (2010) has traced back genealogically to an influential early nineteenth-century account by Jean-Etienne Esquirol, a French alienist for whom suicide was occasioned by a sudden “excess of passions” that causes a short-lived lapse of judgment (p. 106). Though Esquirol’s formulation has suffered changes over time, the kernel of his conception, “the fatalism of an uncontrollable inner destructive force” (Marsh, 2010, p. 71) is still at the center of psy- and folk discourse on suicide today.

Importantly, such discourse has a strong tendency to supplant and replace discourse on suicide organized according to different logics, on the pretext that the latter might somehow occasion suicide. Marsh (2010) has aptly identified this as a “compulsory ontology”: there is a positive duty to formulate suicide in terms of an internal pathology and to correct non-complying descriptions.

When non-conforming or suicidal speech is erased, orthodox discourse is often plastered on top in a curious palimpsest that has become extremely common.

For instance, in 2023, SaSu³¹, the most notorious current English-speaking forum of people discussing suicide and suicide methods, was banned in Turkey. A Google search for SaSu's full name now brings out a link to a suicide hotline in Turkey, whereas SaSu's own domain does not appear in the search results.

Through self-reinforcing patterns (Marsh, 2010, pp. 31–42, especially 39–42) and aggregative effects, discourse on suicide tends to become “normatively monolithic” (p. 66). This plays out most clearly in media guidelines for covering suicide, currently adopted as part of national and international strategies (Marsh, 2010, pp. 48–62): a detailed script is provided to the media ensuring depiction in a way that is considered safe. The link between suicide and mental illness has to be emphasized and any romanticization must be avoided (which in practice results in a psychological objectification of many elements of the life story (p. 48–49)). Fragile subjects, at the beck and call of their effervescent passions, are vulnerable to suggestion and prone to imitation. Discursive orthodoxy is called upon to minimize the risk. However, this restricts and marginalizes “possibilities for other readings of acts of self-accomplished death” (p. 66). This will hold true for the two press accounts of Suzy Gonzales' death discussed in Chapter 2.

Suicide is also formed as an object in two other types of discourse that are currently less pervasively effective but remain important:

- 1) There is a legal connection between completed/attempted suicide and the notion of legal competence (the officially recognized right to govern one's own affairs within usual bounds). Suicides are, in practice, almost always recognized as “not of sound mind” (*non compos mentis*) and, if the attempt was unsuccessful, liable to being put in someone else's

³¹ This is an abbreviation. I prefer not to identify the forum by its full name because of privacy concerns.

custody for being a danger to themselves. Historically, *non compos mentis* originated as a legal mechanism to waive legal penalties imposed on suicides and their families; for centuries it was a true judgment made with deliberation without there being an automatic assumption that the suicide was not morally responsible for their deed (Marsh, 2010, pp. 88–89, 93–94). The current form of *non compos mentis* (almost universally applicable to all serious attempters) confers officiality to the (performative) judgment that suicide indicates a deficit in one's capacity for autonomy. This is an important reason why autonomy plays such a large role in my analytical framework in Chapter 3: legal autonomy can only be claimed by mentally competent subjects³².

- 2) Suicide has been seen, in a variety of ways throughout history, as a kind of moral failure—sin, degeneracy, and deficiency of character being perhaps the most notable elaborations (Marsh, 2010). While the effectivity of moral discourse with regard to suicide appears, at a first glance, to be close to non-existent, this is misleading. As it will become apparent in Chapter 3, an ethical field is inherent to the structure of subjection interpellating suicidal people, the latter being subject to many moral judgments in the everyday reality of the help relationship. Marsh (2010) is overly hasty in his claim that by acquiescing to subjectification through reference to a compulsory ontology of internal pathology, the patient is absolved of moral accountability which is thereby transferred to the doctor (pp. 59–62). His own example (pp. 206–207) from Chapter 11

³² While psychiatry nowadays embarrassedly disowns insanity as a general category, mental incompetence and “illness” as it appears in patient-directed psychiatric discourse are modern continuations of the binary logic of sanity and insanity.

illustrates a much more intricate economy of accountability: self-harming and other problematic behavior is not the patient's fault since the patient is, in the doctor's view, ill, however the patient should take responsibility for their own actions and not "allow" the illness. Allowing the illness can mean, for instance, refusing a specific proposed treatment or medication or engaging in other forms of therapeutic resistance. The patient's ethical responsibility for their own action is considered in the secondary practical/ideological context where they are imagined to *perform their own eventual capacity for autonomy*. It is thus merely displaced to a different field of ideological practice with different ethical norms. Such logics of action will be discussed in greater detail in Chapter 3.

Discourse on suicide constituting it in terms of an internal pathology or lack of competence institutes a logic of action that mobilizes what Foucault (1982) has called "dividing practices":

In the second part of my work, I have studied the objectivizing of the subject in what I shall call 'dividing practices'. The subject is either divided inside himself or divided from others. This process objectivizes him. Examples are the mad and the sane, the sick and the healthy, the criminals and the 'good boys'. (pp. 777–778)

This observation is seconded from within critical psychiatry by Laing (1965) in *The Divided Self*:

The most serious objection to the technical vocabulary currently used to describe psychiatric patients is that it consists of words which split man up verbally in a way which is analogous to the existential splits we have to describe here. (p. 19)

As the subject is divided inside itself and from others, the experiential aspect of the person's existence is complicated and the very possibility of experience is imperiled. The reflection of such dividing practices in the lived experience of ASHers will be a recurrent important theme in this work taking the form of decentered existence (with

two focuses of selfhood) in Chapter 2, split spaces of autonomous and fragile subjectivity in Chapter 3 and ambivalent body practices of suicidal consumption in Chapter 4. Benson et al. (2013), in a pioneering qualitative study that deserves wider recognition, have given proper attention to such divisions and how they affect the experience of suicidal people in an insightful analysis of first-person accounts. They report that suicidal people experience “1) loss of consistency and/or coherence in their sense of self; 2) a disruption in the reciprocal action between self and world; 3) serious depletion of their mental resources; and 4) a disturbance of embodiment” (p. 56). This rare psychological work that engages with a multitude of first-person accounts by suicidal people from the point of view of experience anticipates many of my findings in Chapter 2. However, Benson et al. (2013) consider such divisions and disruptions “as is” and do not explore the possibility of their being partly constituted through engagement with therapeutic and larger psy- discourse.

While the foregoing selective review of literature on suicide as an object of discourse has offered important theoretical points of contact with my own research in this work³³, I will now retake stock of my own position which, while less antithetical to a discursive perspective than it appears at a first glance, is nevertheless quite distinct.

The most important reason why I choose to depart from a discursive analysis is that it tends to surreptitiously reify discourse by placing its categories at the center of all making-sense and ends up confusing the subject for the person as Judith Butler (1997b) warns us against in *The Psychic Life of Power*:

"The subject" is sometimes bandied about as if it were interchangeable with "the person" or "the individual." The genealogy of the subject as a critical category, however, suggests that the subject, rather than be identified strictly

³³ Especially the notions of a compulsory ontology of pathology and of the emergence of a normatively monolithic discourse around suicide, to which I will make frequent reference throughout this work.

with the individual, ought to be designated as a linguistic category, a placeholder, a structure in formation. Individuals come to occupy the site of the subject (the subject simultaneously emerges as a "site"), and they enjoy intelligibility only to the extent that they are, as it were, first established in language. The subject is the linguistic occasion for the individual to achieve and reproduce intelligibility, the linguistic condition of its existence and agency. (p. 11)

In the case of ASH, such an approach would result in a highly distorted account since ASHers in many cases make a point of disattaching themselves from specific discursive surfaces of intelligibility, which I would like to be able to register as qualitatively different acts rather than simply another strategy made possible by discourse.

In *Archaeology of Knowledge*, Michel Foucault (2002) defines discourse in a way that abstracts from any originary unity. Later formulations, though distinct, keep the same anti-phenomenological kernel. Discourse appears as a limit non-subjective disperse potentiality of the event, determined only at concrete points of contact with actuality, but also imagined between actual events as an endless disjunctive potential: no two events are close-set enough not to be able to admit another event between them. Discourse is therefore inexhaustible in its generative capacity and any supposed unity derived from known events can only extrapolate from discourse, filling in, as it were, the empty cells of the archeologist's table with counterfeit findings.

Yet in the work of discursively-minded scholars, it is often discourse, illicitly solidified into a unity, that produces contraband when such scholars turn to the subject. The contraband thus produced parodies life, filling in spaces between concrete discriminations that the business of their own (and other people's) life imposes upon the scholar. Discourse, as a limit objective order of things and potential happenings, abstracts by design from the business of life that is the concrete

basis of the discrimination between one thing and another without which any order of things remains abstract.

Conversely, it is the concreteness of those discriminations in the normative unity of a life³⁴ (which is coincidentally the living blood of ethnographic writing) that I am unwilling to renounce as an ultimate ground and guiding principle remembering with Canguilhem (1989) that “all human technique, including that of life, is set within life” (p. 130)³⁵.

In Marsh (2010), through a consistent slippage, discursive constitution becomes construction and the constituting aspect of the subject is smuggled away by its constituted counterpart (see for instance p. 22). Yet it is the co-actuality of the two in the taking up of her own situation that distinguishes the subject and properly³⁶ intends the person from within language. Marsh sensitively recognizes the distance between person and subject when discussing how the categories of suicide prevention can appear decentered from the perspective of a “relationally defined person within the context of culturally meaningful ‘life events’” (p. 62) yet ultimately collapses the same distance in his analysis of Sarah Kane’s play *Psychosis* (pp. 210–211)—there the discussion ends in a critique of the self-contained unity of the individual which he describes as ahistorical and sovereign, thus misrecognizing norms of life for facts of life. Nikolas Rose (2007) often commits a similar slippage

³⁴ As discussed in more detail in Chapter 2, Canguilhem (1989) understands the normativity of life as the capacity of the organism to set its own norms by discriminating between things and situations, valuing them positively or negatively, and to organize its behavior accordingly (pp. 125–127, 201).

³⁵ Studying social action directed at suicide in the context of life requires an understanding of life that is not hacked up *a priori* into individual subjective existences—pre-formed, self-consistent and complete and thus fundamentally disconnected and solipsistic. Life can be seen not as readily individuated but lived with others in the midst of things in an open world—its individuation a continuous, ongoing bounding process rather than an *a priori* given, as the work of Gilbert Simondon has taught us. Such theoretical formulations allow us to make sense of the general and objective aspect of life—how we find ourselves and others in the world—without losing side of its singular and subjective aspect—that is, how we take up whom and what we find.

³⁶ In the appropriate noetic modality.

in *The Politics of Life Itself*, sometimes taking at face value discursive truth effects that have not yet etched themselves into life and are therefore of limited effectivity, as in his discussion of neurochemical selfhood where a small linguistic qualification is not sufficient to counterbalance an undue anchoring of persons in neurochemical rationality (p. 223).

The relationship between the person and discursive surfaces can often be quite intricate and unexpected, mediated by circumstances that require a non-discursive approach to explicate. Especially for people whose very possibility of experience is challenged by dividing practices of subjectivization, only careful attention to such experience where it does emerge can help properly contextualize, weigh and connect discourse and other structures in a balanced analytical account informed by how these are taken up in their lives.

A different, more subtle slippage in Foucault himself will allow me to clarify what I mean by a zone of silence around the act of suicide despite the accelerating production of all kind of discourse on suicide in modern times as analyzed by Hacking and Marsh. In the face of the fact of that proliferation, it is very tempting to adopt Foucault's (1976/1978) attractive critique of what he calls the "repressive hypothesis" in the context of his analysis of modern Western discourse on sexuality (pp. 15–49) to our purposes and claim an unprecedented modern accumulation of discourse on suicide betraying an impatient and long-winded desire to speak of it rather than the other way around. Foucault later admitted that, despite his efforts, the repressive hypothesis had persisted as an aporia in the text. Perhaps he noticed that through such flattening all discourse becomes, in a sense, equal—an unpleasantly indiscriminate uniformity. One can desire directly, or with more gusto through an

injunction, but desire itself will flow nonetheless. Thus, all augmentation of discourse should be counted towards one's wealth of pleasure.

That is patently not true of discourse on suicide from the perspective of a suicidal person. ASHers would be less than pleased to find access to the newsgroup barred and information on "resources" plastered on their screen instead. Webb (2010) is not satisfied with the ocean of suicidological discourse instead of the first-person voices whose lack in the literature he feels:

Suicidology ... seeks to identify and develop the best 'evidence-based' interventions for suicidal individuals. But the evidence base that suicidology draws on is incomplete and inadequate due to its determined failure to enquire into what suicidality means to those who live it. (pp. 5–6)

It is significant that both he (p. 129) and posters on ASH speak of a noisy silence that pervades degraded living. Thus, all discourse is equal, but some discourse is more equal than others. In setting norms for itself (Canguilhem, 1989, pp. 126–127) life discriminates between discourses of different value just as it does with all other surfaces that it finds itself attached to. Such discrimination is crucial and it allows us to recognize silences and erasures even as we also note the general modern proliferation of discourse on suicide.

The emergence of analytic discriminations that will break the current tone-deaf tradition in suicide-related literature noted by Webb (2010) can only happen with reference to first-person voices that would flesh out a sorely needed context—that of the lives of the people affected. Analytical discriminations about people cannot be completely severed from the way in which people discriminate in their own lives, making distinctions between things and how they matter to them. This work is intended as a contribution to a fledgling body of literature that attempts to mend the currently existing rift between etic and emic discriminations in thinking on degraded living and suicide.

1.2.4 ASH as an anthropological location: not a place but a threshold

1.2.4.1 ASH in the context of the Usenet

ASH was established in November 1990, the same month that Tim Berners-Lee proposed the World Wide Web, a distributed, decentralized, non-hierarchical information-management system organized around the construct of hypertext, or the link (see Berners-Lee & Caillau 1990; Berners-Lee, 1990). The World Wide Web would be a network made up of interlinked textual and possibly non-textual content that would not have a clear hierarchical organization and would not aim to be complete; the resources would be retrieved from their permanent storage location on remote computers through a program called a browser (Berners-Lee and Caillau, 1990).

In a few short years, Berners-Lee's vision would become the central organizing paradigm of the internet, contributing greatly to its being perceived as a unitary space and shaping the way in which the vast majority of information is exchanged over wide-area networks up to the present day. The role of a relatively humble technical construct (the hyperlink) in the reterritorialization of virtual space would itself make for an interesting object of sociological inquiry.

ASH was (and technically still is) part of the Usenet, a differently imagined and organized network of content that bears a great resemblance to modern internet forums of which it was one of the original inspirations. Similarly to internet forums, information is organized hierarchically each level (called a newsgroup) being a separate discussion board. ASH (alt.suicide.holiday) is three levels deep ("alt" meaning "alternative"—a hierarchy for miscellaneous topics).

There are, however, significant ways in which a Usenet newsgroup is different from an internet forum, all of which were crucial in shaping ASH as a space and vantage point. The Usenet was imagined separately and before the WWW. It has a different master paradigm, a different technical structure and mode of operation, and a different culture with different norms of behavior (collectively known as *netiquette*).

The collective term for content on the Usenet is “news”, and this gives an idea about how it was originally envisioned. The Usenet is meant to enable knowledge sharing about topics that people find important. Recent content receives higher prominence appearing on top.

But from this point onward, its paradigm diverges from that of a modern internet forum. Like real-life news, all content is unrestricted and available to any Usenet user. Like news meant in an informal sense, Usenet content spreads through what is called a *propagation algorithm*, perhaps modeled on word-of-mouth, to multiple machines and users instead of being stored and retrieved from a particular permanent location like content on the World Wide Web. I like to imagine this process like liquid spreading through a sponge. The retention window for these messages is determined by the individual providers³⁷.

In a radical presaging of social media, anyone can write “news”. Only the notion is pursued to the end of its radical intent: anyone can write in any newsgroup and it is, in practical terms, extremely difficult to delete (“cancel”) a message written by someone else. Canceling is very rare and is typically resorted to only in cases of severe spamming. Usenet imagines a collective curation of virtual space through

³⁷ DejaNews was the only such server provider to archive all Usenet message all the way to 1980. Google acquired Deja in 2001 and became the custodian of that information. In 2016, as mentioned before, Google shut access to ASH messages on the grounds that the newsgroup encourages suicide.

methods that rely on voluntary compliance. The lack of moderation is in line with the optimism of early internet culture and reminds one of the virtual garden project described by McLaughlin et al. (1997) in which people could visit a website to control a robotic arm remotely and tend a garden in real time together. Like the virtual garden in McLaughlin et al., the Usenet newsgroups were supposed to be tended together by all readers and contributors, being kept clean, relevant, and pleasant by discovering undesirable patterns and finding collaborative ways to remedy them. Many negative internet phenomena (most of which are still relevant today), such as spam, flaming and flame wars (discussions degenerating into personal spats), trolling etc. first appeared and were dealt with on the Usenet.

Undesirable behavior was handled through polite personal warnings, educating the offender by referring to documents developed and accepted by the community in which desirable attitudes and potential pitfalls are articulated and the purpose painstakingly explained. Such documents exist at the level of the entire Usenet and at individual newsgroup level (as mentioned before, ASH has a 13.000-word FAQ). Where boundaries were not clear, they were hotly discussed and contested. The aforementioned optimistic paradigm lent vigor and passion to such discussions.

More dangerous situations such as the presence of malicious or deceitful people in a newsgroup was handled through frequent warnings sent as separate messages or public responses to those malicious people exposing their past behavior.

A specific brand of warm and quirky humor is an integral part of Usenet culture. There are numerous newsgroups that exemplify it, the most popular being the Usenet Oracle where people ask for and receive tongue-in-cheek prophesies. ASH was intended on the morbid side of such humor.

Usenet culture is currently a thing of the past, having gradually degraded as Usenet became accessible through the World Wide Web in the late 1990s to late 2000s. ASH saw most meaningful traffic during this gradual degradation of the medium. Currently the Usenet is used mostly for content piracy.

There is significant anonymity on the Usenet. Usenet technically allows an easy modification of message headers—the part of the message containing the user’s email and other such potentially identifying information. Unlike on modern internet forums, users cannot be easily traced down to specific IPs that would give out their location. This is crucial for ASHers, for it makes intervention by non-sympathetic readers extremely difficult.

The propagation algorithm was likewise crucial to the continued operation of ASH. An internet forum on the World Wide Web, and even more so a resource on modern social media, has its content stored on a small number of particular machines with traceable owners. The importance of such ownership regimes in structuring online content and subjecting it to wider economic, technological and ethical fields has recently become more and more recognized. Varoufakis (2023) has coined the term “technofeudalism” to analyze the effects of the recent concentration of such ownership in the hands of a few actors, comparing it to arrangements around land ownership under feudalism and noting the extraction of labor and of a sort of moral rent that is inherent to the functioning paradigm of large, privately owned technological platforms.

Multiple internet forums on the World Wide Web with controversial content regarding suicide have been closed due to legal challenges to the owner of the machine storing such content. Multiple other such forums, including short-lived moderated offshoots created by some ASHers in the late 2000s have self-regulated

(forbidding conversation of methods, restricting other expression of suicidal intent) to try to avoid such challenges and, in the process, became completely different discussion spaces. The fuzzy, dispersed nature of Usenet content has protected ASH from such challenges, allowing it to continue to operate as a spontaneous space of communion between its dedicated members and forcing outsiders to voice opposition only in discursive terms, foregoing more coercive means.

1.2.4.2 ASH as a threshold

Excerpt 1.4 Waiting for the bus

I'll try to explain what this ng is generally about. See, a.s.h. is sort of like Death's Bus Stop. We're all sitting around, waiting for the bus, shooting the shit. Eventually, we all intend to get on (occasionally, one of us does), although it's not exactly an easy thing to do, for various reasons. So while we're waiting, we discuss ways to make it easier, among other things. But here's the deal: this newsgroup is for people who have already decided that, at some point, we are gonna GET ON THAT BUS. We're not the least bit interested in being talked into getting up off the bench and going home. And we don't care if that seems sad, or pathetic, or whatever.

—*onionhead in response to an abusive savior*³⁸

What kind of a place is Death's Bus Stop and is it a place at all?³⁹ As I noted before, it is a threshold rather than a true place and cannot be truly inhabited. A bus stop is at most, "a space on the side of the road" (Stewart, 1996) where, on a good day, people keep each other company and relieve the tedium of "waiting for the bus" as best they can: perhaps by telling each other stories, or by offering snacks in improvised paper plates and cups. A bus stop is not a place to live, and the companionship of fellow

³⁸ onionhead's metaphor for ASH became wildly popular and referenced in the group. An important response from another ASHer complemented onionhead's post: the other ASHer said they had not decided whether they would be getting on the bus or not; they were walking down the road and, feeling tired, sat down with the others, joining the conversation.

³⁹ I thank my co-advisor Saygun Gökarıksel for challenging me to think about whether and to what extent ASH could be considered a place and/or a community given the nature of the communication between the group denizens and how it was mediated by the newsgroup medium.

travelers is not that of people who share a life in common. They do however share a voyage. ASHers are, like most travelers, generally anonymous to one another. Yet they are also strangely personal. What does their companionship accomplish?

I am very happy of the coincidence between the master metaphor of ASH and the title of Kathleen Stewart's book. For Stewart's interlocutors, the inhabitants of a small US town scarred by its past involvement in the mining industry, the space on the side of the road was a place "coming into view" as a result of an interruption of "the ordinary flow of events" and the sequential temporality associated with it. The space on the side of the road is the place requiring a story and it emerges as a scene of a story—a scene "palpitating with vulnerability", featuring "uncertainty and challenge" where "there is more to things than what meets the eye". Indeed, the space on the side of the road is a place where people "make something of things", a space of production (p. 37). What is produced is meaning and culture itself, but not as a static semantic code but as an "engaged", but "partial" "attachment to re-membered things" that is the effect of the performance of a "nervous 'cultural' system" (p. 24).

ASHers' companionship at Death's Bus Stop accomplishes such an engaged but partial attachment to re-membered things—nothing more and nothing less. In the process, it appears as the site of the story and a place requiring a story.

Saussure (1959) imagined the constitution of a linguistic sign like the cutting of a piece of paper: the signifying medium is the front, the signified medium is the back and one cannot cut up one without the other. In his example sound was the front and thought was the back, and language produced meaningful distinctions (difference) between words by an architecture of cuts (p. 113).

ASH actively and continuously signifies the degraded space of living described by Kafkaesque in Excerpt 1.3. In the process, it articulates and re-members that space, making an engaged but partial attachment to its surface possible, appearing it as a transient location. Before ASH, the voyage was individual and silent. With ASH, travel companions appeared, the scene was set and a story was required—the one that emerged was that of Death’s Bus Stop.

ASH is not a condition of possibility for the degraded space of living it represents. It is rather a condition of visibility. The point is not that in the absence of ASH people would not be able to represent family, friends, employers, psychiatrists, hospitals, psychology, the help relation, saving etc. in the way in which they do as members of ASH, but rather the other way around: that given such a medium these people choose to represent their relation to these subjects, discourses, social actors, roles, and institutions in the way in which they do.⁴⁰

ASH functions in this study as a retina—a surface of visibility—and this function redoubles one of the main uses ASHers make of it.

I would like to return here to Gupta and Ferguson’s (1997a; 1997b) problematization of the usual way to think of anthropological locations. Gupta and Ferguson argue that in reifying spatial demarcations that suggest themselves immediately to the anthropologist as bound and consistent unities, one risks missing connections between such locations and disperse processes that help territorialize them.

There are two aspects to this. On the ground, a focus on “stable territorial communities” (1997b, p. 33) fails to produce a full account of the effectivity of

⁴⁰ ASH was, to some extent, the condition of possibility for new practices such as the development of a proto-technology and proto-techniques of suicide. That is the subject of Chapter 4. The help and saving relation as a modality of subjection for degraded life and how it organizes personal relations, medical relations and memory is analyzed in Chapter 3.

processes with disperse effects such as the market, the media, political activity (or in the case of ASH, psychiatric discourse, therapeutic and popular techniques of the self, emergency medicine and practices of suicide prevention among others).

Looking at the processes within the discipline of anthropology itself, such a focus tends to create virtual villages where there are none. Gupta and Ferguson (1997b) mention the pressure Joanne Passaro felt from colleagues to “construct a ‘homeless village’” while working among the homeless “imagining a stable territorial community even for people defined in the first place by their mobility, marginality and lack of any stable home” (p. 33). For example, she was encouraged to concentrate her efforts on a homeless shelter. Passaro, instead, opted for using a variety of interrelated sites offering different modalities of vision meaningfully interlinked through the purpose of the project, an approach that Gupta and Ferguson (1997b) approve of:

our focus on shifting locations rather than bounded fields is linked to a different vision, one that sees anthropological knowledge as a form of situated intervention. ...

our approach insists that anthropological knowledge coexists with other forms of knowledge. We see the political task ... as forging links between different knowledges that are possible from different locations and tracing lines of possible alliance and common purpose between them (pp. 38–39).

What makes such a way of imagining the anthropological endeavor particularly suited to ASH is that it is mimetic of ASH’s own found purpose: on ASH, English-speaking people separated by large distances and different local circumstances, suddenly found themselves, in some sense, not alone on their journey. The sense emerged not before, but with the finding, which is exactly the point. This makes ASH an ideal starting hub for the kind of itinerary through different sites of knowledge that Gupta and Ferguson suggest.

I do not want to imagine ASH as a “village of suicidals”. ASH was a largely anonymous⁴¹ discussion space (though friendly members could establish personal contact and even, on occasion, marry one another) that found, with some surprise, a paradoxical sense of community emerge. But ASHers were subtly and humorously aware of what that did or did not entail. “Hello and goodbye”, goes a common greeting. When the ASH FAQ defines the ASH newsgroup as the home of the ASH subculture, the word *home* appears in quotation marks. But perhaps the best example is the customary ASH greeting “Welcome to ash, sorry you are here.”

While there was genuine warmth, ASH was a place from which one could depart and return as the need was felt. Many people, like myself, “lurked” (read but never posted, or posted only once). Some dropped by at large intervals posting for weeks or months before disappearing again. Some were constantly present.

I know about as much about the demographics of the group as Usenet’s and ASH’s code of discretion allows. You do not pry at cloaked strangers at a bus stop and I did not pry - I only listened in, which was considered acceptable.

The main factors limiting who could easily access the group were

- a knowledge of English,
- access to computers and the internet (important in the 1990s and early 2000s when it was much more restricted)
- awareness and use of the Usenet (though the possibility of accessing ASH through the World Wide Web made this irrelevant later on).

Because of being initially developed around universities, the Usenet (including ASH in its very early years) had a strong core of users affiliated with academia.

⁴¹ This should be qualified: while anonymity was the rule and indeed a norm, people knew to some degree who knew each other personally. Questions about what happened to a person if they were not there for a while, or after an attempt, were asked and often answered in ways not exposing that person.

Geographically, ASH seemed to see use predominantly in English-speaking countries and across Europe, although reference to other locations were also common. Different age groups were represented and I could not determine a particular gender pattern. Knowledge of personal attributes was always hazy on ASH, informed only by rare disclosures and sometimes nicknames. From the content of the posts, most users of ASH seemed to inhabit urbanized environments, which is important for my discussion of the material landscape of suicide and bodily techniques around it in Chapter 4.

1.2.5 Relevance

I have tried to give a sense of why I feel this work is important throughout this introduction. I will gather some of my arguments here.

ASH was the oldest meeting place for suicidal people on the internet. As such, it set the ground for later such communities. Terms originating in ASH such as “catch the bus” are still in use on suicide forums today, although most people do not know much about the original group.

The Usenet medium lent ASH some special characteristics that differentiated it from later forums. Radically open to all participation and de-tethered from reliance on any particular machine (with its owner) and moderator, ASH was a much more complex environment than later forums.

I argue that it was this that allowed the group to coalesce around a sense of identity that was subtle enough to represent its own provisional nature full of tensions and contradictions, as clearly manifested in the group’s language. I will argue in more detail in Chapter 2 that such mimetic faithfulness made ASH a specially illuminating vantage point for studying the complex of social action around

suicide and the space of degraded living as experienced by many people. It is significant that most posts that originated key metaphors for the group and that were cited and reproduced over and over were responses to non-sympathetic or abusive outsiders.

ASH's significance is also indicated by "our" stubborn determination to erase it, evidenced by its story. Reversing this erasure in the particular case of ASH is an important aim.

While superficially, a study of a more recent "suicide group" might seem more up-to-date, I agree with Benjamin's (1969) critique of such a perspective on knowledge production. Speaking of news, with his usual subtlety, he noticed the quickly growing pile of irrelevant old newspapers under the freshly printed and singly relevant today's issue. What a shame that this shiny new issue will become irrelevant as quickly as a newer one can be produced! I would like my account to be less like news and more like a story that, as Benjamin tells us, similar to a carefully stored seed, retains its "germinative power" for a long time (p. 90).

I have continued to think with and about ASH for years after my involvement in the group. I believe in its germinative power. That is why I wish to write about it.

1.2.6 More on methods; limitations, and some ethical considerations

It is important to mention that this work is not a full-fledged ethnography, but rather falls somewhere between discourse analysis and ethnography.

I observed the interaction in the newsgroup closely from 2009 to 2011, at the very end of the period when the group had any utility for its members. The beginning of that period coincided with the greatest degree of articulation of the ASH

subculture. I also relied on archived messages, accessible through Google Groups until the ban in 2016, to study old messages going back all the way to 1990⁴².

However, aside from once announcing my presence (arousing a very limited positive to neutral reaction), I did not post in the group or establish personal connections with its members.

The fragility of my “subjects” from the perspective of my institution was a significant limitation. According to the regulations of the relevant ethical committee, a psychologist would have to be ready on hand during any interview with an ASHer to intervene in case the interview causes the person to relive a traumatic event. Given ASHers’ ambivalent attitudes towards psychologists and psychiatrists, that was not a very workable arrangement. In Judi Chamberlin’s brilliant *On Our Own* (1977), she describes the silencing and slide into therapeutic and/or psychiatric ideology that is an inevitable effect of even limited mandatory involvement of psychiatrists or psychologists in ex-mental patient mutual support initiatives (pp. 99–119).

I recognize the reasonable side of such precautions in my own reluctance to get too involved with the operation of the group, which I initially interpreted as mere social ineptitude, but now realize contains the seed of a more fundamental misgiving. While I am “aware of the existence of the ash subculture and share its values”, which qualifies me as an ASHer according to the ASH FAQ, I am one but barely. Each further degree of active involvement, each inquiry that would be casual under other circumstances (e.g. about the person’s background or location) is pregnant with consequences and responsibilities (whether felt or assigned by others) for the living and dying of other people. Therefore, I follow the tact that is deeply ingrained in

⁴² Since I bookmarked most of the material I gathered in the form of Google links that now no longer work, most of it was lost. What survived were the posts that I felt were important enough to gather in thematic documents. I now think of that as a sort of natural selection and, given Google’s ban, the remaining posts gain extra importance as documentation.

ASH and crucial to the kind of space that ASH was. Being an ASHer involves a heightened sensibility to the appropriate level of response to other ASHers and involvement in their lives. You ask only what you need, you give only when it is wanted, you share about your own life whenever you feel like it, but at your own initiative. You sit at the center or at the side of the bench—whatever feels right. I have sat at the bus stop, but I have not pried. Perhaps I have learned to be a better ASHer.

This, however, translates into significant limitations. Personal connections are one of the most important ferments of the ethnographic endeavor, responsible for much of the richness of the result. They are important for finding nerve points, for distinguishing between different actors in a more than merely schematic manner. Their lack will be felt in this analysis.

This would be a fatal flaw if a true “village of suicidals” existed. In a transitory space on the side of the road where the regulation of visibility is a major normative concern for its denizens and where people who want to have a more personal conversation or relation take a short walk to the side, it is not ideal, but it is an appropriate balance to strike.

CHAPTER 2

TENUOUS EXPERIENCE AT DEATH'S BUS STOP

another life. that would be fine. another life, another me.

—jill heather, message on ASH

2.1 ASHers' failure to experience: Thinness of being

In this chapter, I will analyze what ASH provided to its members as a space of representation. My analysis revolves around visibility and occlusion, and possibilities of inscription. Here I will focus on the practices of de-inscription, obfuscation and erasure around degraded living and how ASH functioned to make such practices visible and, to some extent, countered them. I will argue out my claim in the introduction that this made possible the constitution of tenuous experience at ASH exactly through the representative work done by the group.

I have emphasized in the introduction the uncanny visibility and reach of a completed suicide, which I have called the ultimate inscription of a life as unlivable. It generates a hurricane of discourse, an explosion of affect and a visceral reaction that are about as strong and far reaching as any act by that person might ever hope to accomplish.

Not the same can be said about the period before suicide and, more generally, life under the shadow of an explicit detachment from life, whether it ever ends up in an attempt or not. ASHers describe a thinness of being that borders on insubstantiality and dissolution: a corrosive loss of touch and consequence that seeps through, eating at boundaries, invading one's core until it loses consistency, penetrating one's being like water breaking down a lump of sugar, making one "grow thinner every day" until one becomes transparent and ultimately invisible. A "loud

silence” pervades and one is mute. As one dissolves, losing solidity and structure, surfaces lose their accustomed meaning:

Excerpt 2.1

You missed me S.Holmes? It is a small joy that I come across your months-old post today. That sense of waifish transparency that I feel at times like this is v. strong today--can you see me? *Like a ghost who can walk through walls* [emphasis added], I feel as though I can't/don't affect anything around me. This post is what? An acknowledgment that I exist, that I sent something out into the universe that was perceived.

Surfaces no longer delimit or polarize space, structuring a true landscape of action: a “ghost who can walk through walls”⁴³, one moves across boundaries as well as along them. Surfaces are no longer bearers of the consequences of contact, for one cannot really impact them, stain them, leave a trace on them. They no longer offer anything to touch, or resistance affording the sense of touching. Touch is replaced by a spectral trace that reminds of its lost possibility and signifies its lack. “People bump into me”, says another ASHer, “they say they don’t see me”. Even amidst a dancing crowd one is invisible⁴⁴. The ruckus of bodies in tumultuous, sensuous contact (“booties” shaking, crotches grinding, shirtless bodies pressing close to one another) seems to slide by and around even as they offer a spectacle of a festive indulgence in the touch that is so sorely missed. In an unintentional parody of Deleuze, this radically “de-territorialized” way of life yearns and mourns for surfaces, and for discrimination between connections and directions, for what Canguilhem (1989) calls the polarity of life, “the norm, which is the activity of the organism itself” (pp. 128–129).

To this corresponds a public inscription of the person’s life that is “decentered” (Merleau-Ponty, 2012). There is a reason why the silence is “loud”.

⁴³ This exact metaphor was used by at least one other ASHer and spectral imagery was especially pervasive in ASH.

⁴⁴ The dance example comes from another ASHer’s post.

The person certainly continues to leave traces behind: depending on how isolated they are, they continue to matter to their close ones—children, spouses, parents, friends, pets—and carry out roles in their lives to a higher or lower extent. They often generate what Harre (1984) cited in Chatterji (1998, p. 369) calls a “file self”: discursively linked reports by experts such as by doctors, psychiatrists, and social workers. The person may, independently or with the help of others, keep up a “facade of normal living” (Chatterji 1998, p. 368), showing more or less subtle signs of dereliction. They might continue working or studying, in which case a professional trail persists. Or this might be limited to a struggle to keep up with the basics of caring for one’s cleanliness and physical appearance, living space and living arrangements more generally. Financial and fiscal reckoning is, of course on-going (taxes being, after all, the second certainty in life besides death).

This is how Merleau-Ponty (2012) introduces the notion of decentered life in *The Phenomenology of Perception*:

Even in waking life, things do not proceed otherwise. I arrive in a village for the holidays, happy to leave behind my work and my ordinary surroundings. I settle into the village. It becomes the center of my life. The low level of water in the river, or the corn or walnut harvest, are events for me. But if a friend comes to see me and brings news from Paris, or if the radio and newspapers inform me that there are threats of war, then I feel exiled in this village, excluded from real life, and imprisoned far away from everything. Our body and our perception always solicit us to take the landscape they offer as the center of the world. But this landscape is not necessarily the landscape of our life. I can “be elsewhere” while remaining here, and if I am kept far from what I love, I feel far from the center of real life. Bovarism and certain forms of homesickness are examples of a decentered life. (p. 299)

Similarly, from the perspective of the suicidal person, all the aforementioned traces, contacts and surfaces appear off center and are often felt not to be part of a true life and true touch, as evidenced by Kafkaesque’s post quoted in the introduction (Excerpt 1.3): “life is being touched. Life is being loved ... I am NOT living a life”. jill heather expresses this at length with great poetic force:

Excerpt 2.2

*"send me out into another life
lord because this one is growing faint
i do not think it goes all the way
-ws merwin, "words from a totem animal"*

another life. that would be fine. another life, another me. i don't know it would be that bad, being a shiny-happy⁴⁵. if i were happy, i don't think i'd care. oh, i mightn't be me, but that's no great loss to the world. there's nothing i could do someone else can't, and people get over loss eventually. i'm not irreplaceable. and i don't like myself so much that i would mourn my own passing. perhaps it's a cliché, wanting to die because the pain won't stop any other way. i want to want to die for another reason. any other reason. because no one will ever love me -- no, that's not true. i am loved by friends, and i suppose if i could do a relationship, i would be loved there. because no one cares for me is less true. i fit into my place in the world. i could be happy, if i weren't so desperately unhappy. but i am. i am.

nothing is wrong with my life. i can go out and have lovely conversations with people and laugh. i can read. i can play with my sister, bike with my father, go for breakfast with my motherauntgrandmothersecondcousin. i have a lot of money, for my age and place. i can do my job, i can do my school. i like my school. i like the people around me. i like my clothes. the only problem is the hole in my heart, the sadness that leaches out and poisons my blood, whispers death to me. such a minor problem, and so much that should be, is good. i don't want it anymore. fit someone else in my shoes. it hurts and i'm always sad. even happy, even up, i'm sad, somewhere. i don't allow myself touch. i don't want it, except that i desperately do. and it's meaningless.

all of it is, though. all meaningless.

there have to be other personalities that would fit in my skin. i don't. i wear skirts and dresses and heels, colourful usually. pink, today, with little flowers. it looks fine, except i am not pink with little flowers. my hair's all wrong, my face, my figure. i ought to be little and fragile, with long slightly wavy dark hair. i ought to be someone else, outside or inside, but someone else. i do not fit, inside and out. a waif. that's what i ought to be. (something borne or driven by the wind. something waving or flapping. a person who is without home or friends; one who lives uncared for; an outcast; an unowned or neglected property. a piece of property which is found ownerless and which, if unclaimed within a fixed period after due notice given, falls to the lord of the manor.) which of those is the right definition? although i'd like to be blown down by the wind, pushed over, torn apart, i am too solid for it. (or is it too solid for me?) and i do not wave and flap but drown. i have friends, and if not a safe home, a home nonetheless. an outcast? perhaps. neglected certainly.

the last gives me pause, though. ownerless, of course, because who am i to claim ownership of this self i did not want? unclaimed, i think, or claimed and then discarded. so who is the lord of the manor? i would hope death. due notice was given years ago, that this person is no longer me, and over 8 years have passed, and it is time for someone else to take over.

⁴⁵ A shiny-happy is a non-ASHer that tries to impress on the members of the group the beauty of life, the wonder of the world, or to induce a general sense of hope for no concrete reason. Here, jill heather likely uses the word to mean simply a carefree, very positive person.

"i feel so funny sometimes, as if i'm not anyone, as if i'm a shadow or a dead petal that's dropped off and someone will sweep me away. when i put my ring on i feel a bit more real, i get to be the person who wears the ring."
 i can see that. wearing clothing makes me real, holds me into some bits of cloth. i put things in my hair to weigh it down, and jewelry makes me visible, look at that interesting necklace she's got.
 perhaps i am a dead thing just filling up a body. i died, years ago. no sense insisting that i can be brought back to life. even were it possible, i would be rotten and mouldy with holes where a life used to be. ...
 just once, i would like a suicide discussion to focus on the reality of suicide: not everyone who suicides is alone and old and dying of cancer. some have no reason. They're tired of life, even though they're not old. everything may be fine, except that they want to die. this is not being maladjusted, this is not some illness soluble by proper application of drugs. it is just reality, tired and grey.
 —jill heather

jill heather's extended trope counterposes two selves that do not correspond. Her actual self she does not claim ("ownerless"), but its claim on her she cannot escape. Then there is the self she understands she could, perhaps she should by all reason be. The two cannot be merged, cannot be swapped. The unclaimed self cannot be escaped—jill can't defect to the other self she sees she could be, and also cannot die. Once again spectral imagery pervades: jill's actual self—too light to make its weight felt, too heavy to entirely dissipate—keeps her trapped in the interstice, trying in vain to satiate its hunger for being by weighing her down into the world with solid, inanimate matter: rings, clothes—pink with little flowers as she is not.

We can think of the loss of concrete life told by jill heather and Kafkaesque as an abstract kind of death: a life taken up⁴⁶ as if it were death. Ironically, concrete death—that which cannot truly be lived—is in this case even more avidly appropriated from outside (and decentered from the person's own making sense) than the abstract life preceding it. The hurricane of discourse and affect, the visceral reaction occasioned by suicide (and to a much lesser extent by an attempt) is, as

⁴⁶ According to Merleau-Ponty (2012), existence is the taking up of a situation. By this he means that no set of objective circumstances determine existence. Rather, existence is defined by an excess over one's situation that inaugurates time—the act of taking it up in a particular way leading to a new situation that will be, in its turn, taken up again. The term originally appears in the work of Hegel.

discussed in the introduction, a readjustment of the public reckoning of the person's life, rather than a true engagement with how the person made sense of their life, the public crisis around suicide being very much about the person and without the person.

Suzy Gonzales' was a case in point. Suzy did write about why she committed suicide:

Excerpt 2.2⁴⁷

1. Im bored. I am bored with life. I cannot possibly think of anything I want to do that is worth doing. I just want to sleep all day.
2. I am not living for myself. Sure, I am just in college, but this is not what I want to do. Every day, I wake up with "Jesus, I don't want to get up." I am afraid of failing, not for myself, but for my parents. Thus, I am not becoming educated for my own purposes, it is for my family and those I look up to.
3. Im just so fucking tired and sad all the time. I cry for no reason, and I can't help but feel that I'm bothering others which my whining. I'm sorry to everyone. It would just be best if I would go away.
4. (I know you asked for three...) I don't enjoy anything. Eating food is good, but seriously, that's about it. I don't like sex. At all. It's not displeasing, it's just nothing. I don't care to do it and I feel bad for anyone I may be with.

The CNN coverage⁴⁸ not only did not mention any of this, but made a point of starting with a quite discordant external description of Suzy's life. The article starts: "A bubbly 19-year-old with loving parents and good friends, she was also a strong student and earned a science scholarship for college."

Another publication, SFGate⁴⁹, does mention some of Suzy's comments, making sense of them exclusively as symptoms of depression. Suzy's own words

⁴⁷ This is the longest of a number of posts in which Suzy discussed her dissatisfaction with her life. In other posts Suzy also reflects on not having it worse than other people in any objective sense. She mentions having a supportive family and friends, not being dissatisfied with her appearance; she describes herself as relatively well-off materially. She was also doing well in her studies. But like many ASHers, Suzy had little patience with arguments about how she should be feeling about life based on such considerations: "There is no one who has it any worse than anybody else. She's got cancer. His girlfriend left him. She went bankrupt. He is depressed. These are all different problems. People put different levels of importance on their problems."

⁴⁸ Gutierrez and McCabe (2005).

⁴⁹ Scheeres (2003).

appear at the end of the factual exposition exemplifying what she wrote to the group and closing out the section:

Over the next two months, she posted more than 100 messages to the group. She described taking antidepressants that didn't improve her mood, dropping out of Florida State, where she majored in math and meteorology, and calling a suicide hot line about "a friend" before losing her nerve and hanging up to cry. "I have a wonderful family who will support me in all that I do," she wrote.

"I make enough money to get by. I have a few close, excellent friends. I'm not hideous nor morbidly obese. I'm no toothpick supermodel, though.

"I am just your average Joan who has everything to lose and is willing to lose it for absolutely no reason. I am tired. I want to sleep." (Scheeres, 2003).

The text leaves Suzy's words up in the air and then answers them rhetorically in her mother's words:

"They never told her that people do work through depression and get better and go on to live happy lives," said Mary Gonzales, whose voice often dissolves into silence when she tries to put into words what happened. "They never gave her hope." (Scheeres, 2003).

This reply to Suzy is, for Mary Gonzales, an obvious responsibility of any person that would hear such words from anyone. The generality and impersonality of such a response, betrayed by the word "people", is not accidental or unusual. Most savior posts on ASH are general in a very similar way, revealing a discursive regularity. One does not need to know much about Suzy in order to give her such an answer. For many ASHers, this renders such expressions vacuous, dismissive and presumptuous. Abstaining from such general statements is a central norm on ASH and it is understood to make speaking openly and honestly possible at all.

A paradoxical structure of action imagined for suicidal people is revealed in the two news articles above. Most decisions related to the course and direction of one's own life made by an adult person would be considered self-sufficient: a person's decision to leave their job or current relationship or move to another country would not elicit the kind of necessary coda that a decision to end one's life does. In

the former two cases, the reflexive arc of the person's intention is allowed to close in on itself, recognized as an autonomous act of that person and allowed to bear material consequences. In the case of suicidal action, however, the reflexive arc is interrupted and a superseding, externally defined, potential structure appears—in this case the hypothetical Suzy that could work through her depression—that, despite its imagined and potential nature, professes a claim to act in Suzy's own name irrespective of her wishes. There is a spectacular clash between a Suzy that is bored and tired (as she describes herself) and a Suzy that would be motivated to fight tooth and nail to “work through her own depression” with highly uncertain prospects. Yet, there is an implied belief that the second exists somewhere within the first, and on the moral plane, an obligation that Suzy find that motivated, fighting self wishing to live within her present anomic one. Only the self wishing to live is truly recognized as acting and can mobilize wider social forces in that process. But I wonder what becomes of bored, tired, sad Suzy that is thus displaced out of the zone of effective action. Where is she exiled to? Perhaps, repelled by all surfaces that support action, to an interstice where she constantly fails to make her mark?

To use Allison and Prout's (1997) excellent terminological novelty, bored, tired, sad Suzy has been “de-presented” by the little narrative of “working through her depression”—she has been scuttled away from the present into an inchoate temporal position, her opening to present tense and prerogative for action usurped by a hypothetical “fighting Suzy” that she can scarcely find⁵⁰. Notice how the phrase “working through depression” is indeed a miniature narrative featuring depression as a dream-like space outside proper narrative time (the person's life), like the “big

⁵⁰ I adapt the term “de-presenting” from Allison and Prout (1997) who use it to highlight the fact that modern childhood is mostly represented as either a stage of becoming, or a space for nostalgic remembrance, but almost never as a lived present state.

black woods” in Ricoeur’s (1980) reading of the story of the Little Red Riding Hood (p. 181). ASH, I argue, attempts to perform the representation of this dream-space as a proper lived experience (i.e. as a lived dream-space, a lived liminal state) onto what Ricoeur (1980) calls “the time of the quest” (here life, existence).

Before going into a more detailed analysis of de-presenting and the narrative side of ASH, I would like to return to the issue of thinness of being as described by many ASHers, and look at it from the perspective of its relationship to experience. Kafkaesque, speaking of her own thinned out being in Excerpt 1.3, reports “being torn ... from the fabric of human experience”. An attempt to understand this involves us in a difficult discussion about experience and how it relates to action in general and to the social dimensions of action in particular.

Desjarlais (1994) makes the important observation that there are two related, but distinct ways in which we understand experience. In a more general and non-technical sense, we understand experience to correspond roughly to “all that is lived” (also referred to as “lived experience”⁵¹). However, in a more technical and specialized sense, we associate experience with a particular way of structuring existence around such norms as unity, interiority, temporal consistency and referentiality, interpretative depth, amenability to being narratively represented, organization around a reasonably stable self etc.

If we understand “experience” in Kafkaesque’s quote in the first, more general sense, then we cannot make sense of her claim, since everyone has some kind of

⁵¹ I will preserve the term despite some associations that I dispute. Unlike many authors using the term “lived experience”, I do not consider it to be insurmountably private. I also do not agree with the idea of lived experience as an indisputable ground on which a person can make an epistemological claim. Following Merleau-Ponty, I consider that a person’s lived experience structurally presupposes the existence of others and is inherently communicable. However, communicability is distinct from correspondence: contra Bergson, I do not believe that I understand a fellow human being by achieving correspondence with their lived experience through an act of intuition, but rather by taking up the world “as if” I were that person—a projection that intends what another lives without subsuming it under one’s own self, that being the essence of communication.

lived experience by the tautological nature of the term. Kafkaesque's post clearly involves a value judgment—a rejection of a particular kind of existence and a yearning for another (that she deems inaccessible). Canguilhem (1989) has argued that such an evaluative act is what defines life: a living being is what sets norms for itself (rather than merely executing or maintaining a set of objective norms, as a functional view would have it) (pp. 125–127, 201). An organism's vitality is commensurate to its ability to set norms for itself under a wide range of conditions and its health is a sense of freedom and flexibility in that respect⁵² (pp. 137–139).

We must then understand “experience” in Kafkaesque's quote in a narrower sense, akin to the second, specialized sense in Desjarlais' (1994) account. Yet, if we take Canguilhem's insights to heart and allow Kafkaesque to set the norms of her own life, we have to note the discrepancy between her narrower understanding of experience and Desjarlais' own. For Kafkaesque, “life is being touched, life is being loved”. Life is being cared for out of more than a bare sense of obligation. Being torn asunder from the fabric of human experience means being deprived of true human connection, struggling to preserve meaning, being unable to feel joy. Conversely, Desjarlais' narrower understanding of experience, borrowed from the literature that he criticizes, follows the lines of a philosophical tradition that goes back to Kant and his predecessors (such as the British empiricists and, to some extent, Aristotle) who theorized experience as a form of synthesis. Let us keep this important discrepancy

⁵² One of the examples given by Canguilhem (1989) is that of a sports person. An athlete's striving to run as fast as possible, for instance, is not the manifestation of a functional organic norm, but rather an act through which the sports person sets a norm for herself as she goes about the business of life. Ultimately, the norms that life sets for itself are originary of organic norms rather than the other way around. The practice of medicine objectifies such self-given norms and discovers new regularities and even types of events within them, but does not sever the reference to them. A judgment of limb health is very different depending on whether it concerns an athlete, a cart wheeler, or a person with a stationary occupation.

in mind as I turn to Desjarlais' account, that is nevertheless extremely instructive for our purposes.

Desjarlais (1994) criticizes the overuse of the term experience in anthropological literature. He argues that many works of social science use the term uncritically, conflating the general and narrow meaning of the term. According to Desjarlais, experience in the narrower sense has to be considered a particular rather than universal structure of being with concrete conditions of possibility, including material, social and historical conditions. A homeless mentally ill person whose routine is externally impinged upon by rigid rationalities out of their control (the homeless shelter with its policies, the police with its way of regulating public order etc.) and by the unpredictable, discontinuous nature of the street environment, whose social ties with peers (e.g. at the shelter) are likewise precarious and potentially short-lived, who has no space and time for privacy does not make sense of their life and time in the way modeled by the vague and general notion of a self-reflective experiencing subject⁵³. Instead, Desjarlais finds that his collocutors "struggle along" (p. 886), finding tactical ways of passing the time, "making do with day-to-day contingencies" (p. 898), ideally aiming to achieve a smooth, uneventful day (p. 896). "The aesthetics of this form of life center on the pragmatics of stasis, expediency, staying calm, and holding oneself together." (p. 896). Particularly interesting is Desjarlais' observation of his collocutors' way of remembering and narrating life events: their remembrances are described as fleeting, dreamlike and of limited narrative compossibility:

In the shelter, the routines of the clock, the realities of power, the influence of pharmaceuticals, the constant exchanges, and the relative lack of privacy and structure create a sensitivity toward singular moments and exchanges and

⁵³ While such a subject is not always spelled out explicitly in such works, it is often implied in overly hasty recourse to notions of agency that rely on such a subject structure, with its strong interiority, self-reflexivity, strategic positioning and universal temporal referentiality.

desires. We cannot speak of a strong narrative line here, for while people tell stories and events tumble along, the episodes rarely add to a narrative wholly dependent on a poetics of coherence, continuity, and climax - as narrative is usually defined. (Desjarlais 1994, p. 896)

Stories can be accumulated and even exchanged, being one of the many tokens in the economy of the shelter, but their temporalities lack the inter-referentiality necessary to accrete around a single narrative core.

An important insight from Desjarlais (1994) is the idea of experience as a process—*experiencing*—linked to specific conditions of possibility rather than an automatic given. This allows us to consider experiencing a performance that can fail. Desjarlais’ discussion never turns to the question of whether experience is something that his collocutors would find valuable. He is content with documenting “struggling along” as a structure of existence different from experience, as evidenced by its different “aesthetics”—holding together, enduring, rather than focused purpose radiating from a self that changes and can keep track of its own changes through narrative accrual. But, in fact, what Desjarlais calls aesthetics is what Canguilhem (1989) recognizes as normativity.

Excerpts 1.3, 2.1 and 2.2 make it clear that experience is in fact desired and missed by ASHers—it is an important norm that they set for their lives, and one in which they feel they are failing.

I will not go into an exploration of the reasons or motives of that experiential failure. Such an undertaking would bring me perilously close to an attempt to explain or understand suicide in general, which would be antithetical to my theoretical stance in this thesis⁵⁴. As discussed before, and noted by a number of other writers, notably

⁵⁴ For the reader might be tempted to see in failure to experience an inverted image of suicide given the unescapable fact that suicide will loom large over this text despite my constant effort to weaken its pull and uncover the multiplicities that it tends to cover up when, in the dramatic fashion typical of its modern affective schema, it draws all attention to itself.

by Marsh (2010, p. 79) and Szasz (1999, pp. 1–9), the extreme generality of the term suicide and the normative uniformity that its current association with an internal pathology brings to the table is historically contingent (which is to say, not at all mandatory) and suffocates other ways of making sense of things. The weakness of suicide as a collective label for events to be understood (and it is all the weaker if by that it is meant “explained” or “predicted”) in one coherent fashion is reflected in the failure of psychological literature to find either sufficiently sensitive and specific predictors or sufficiently comprehensive theoretical conceptions for suicide⁵⁵. Suffice it to say that such reasons and motives of failure to experience, as expressed in ASH, are extremely multifarious and can be a mix of the kind of material, social, narrative etc. circumstances that Desjarlais’ (1994) analysis highlights. ASHers generally share Suzy’s frustration (see footnote 47 above) with external attempts to attach an objective or generalized explanation to their sense of malaise. Such explanations, many of which tend to be formulated in terms of what Ian Marsh (2010) has aptly called a “compulsory ontology of [internal] pathology” (e.g. p. 43) are strongly anti-normative in ASH, being considered at once too general (in casting too wide a net) and too specific (in making unwarranted assumptions about specific people). Instead

⁵⁵ Psychological literature has identified risk factors for suicide expressed in terms that objectify difficulties in living or patterns of behavior. The DSM IV-TR (an example of an authoritative nosological source) associates the following disorders with a high incidence of suicide: substance-related disorders (10% commit), major depressive disorder (15% die of suicide), schizophrenia (20-40% attempt, 10% commit), bipolar disorder type I and II (10-15% commit). In the same source, brief psychotic episodes are reported to be associated with a very high incidence of suicide, though no figure is given; dystonic (e.g. sexual and gender identity) and body dysmorphic (e.g. anorexia) disorders are likewise associated with high rates of suicide (American Psychiatric Association, 2000). Additionally, attempts have been made to associate traits (behavioral characteristics considered to be rather unchanging and determined to a great extent by the neurobiological makeup of the individual) such as trait-impulsivity and trait-aggression with suicide (Gvion and Apter, 2011). However, efforts to find predictive factors with good enough sensitivity and specificity to be relied upon in a clinical context have met with very little success (see Marsh, 2010, p. 62). This is symptomatic of the overly general and interpretatively decentered nature of the term suicide: in the concrete interpretative context of an individual life, all objectified designations and their intersections remain too broad. In designating a *negation* of one’s life as livable, the term suicide is quite clear, however attempts to find a coherent *positive* conceptual core beyond that have focused on different kernels of meaning (e.g. hopelessness, psychache, aggression directed at oneself) that have resisted merger.

of dissecting thinness of being / failure to experience in itself, I will follow the interpretative direction suggested by ASHers' constant reference to the value that the very possibility of expressing such things in the group has for them. We will find that this will bring us back to the notion of experience, this time as it is constituted narratively and discursively in the group.

2.2 Listening at the bus stop: Narratively re-centering failed experience⁵⁶

Why do ASHers keep sharing and returning to stories of thinness of being and failure of experience on ASH? What do these stories accomplish?

Excerpts 1.2, 1.3, and Excerpts 2.4–2.5, 2.8 below, among many other posts on ASH, point to the importance of the newsgroup as a place where the group members can listen to each other and be listened to.

This is a good starting point but it provides only part of the answer, for it only defers the question. Why does such listening happen on ASH rather than in other places, for instance in the therapist's office, or between ASHers and their close ones? Obviously, a different kind of listening becomes possible on ASH, one that ASHers value. What is distinctive about it and how does the group environment make it possible?

⁵⁶ The reader should keep in mind that due to the focus of my exposition in this section (successful experiential and narrative performance in ASH), it paints the logic of representational action in the group through the idealized lens of its completion. This is a drawback (and perhaps even a flaw) of my approach here and it risks to deceive the reader by presenting the group as if it were a smoothly functioning harmonious whole. It is important to keep in mind that the performances that are described in this chapter used to be accomplished (when the group was still functioning) with great effort and despite what can in truth be a rather harsh environment. ASHers used to complain a lot about the open, unmoderated nature of ASH and how tiresome it made the curation of its virtual space. Ironically, such openness was one of the conditions that made the feats of representation discussed later in this chapter possible. Numerous moderated alternatives never managed to satisfy ASHers. This is one of the few constitutive tensions of ASH that ASHers do in fact misrecognize. It is a very significant aspect of the story of ASH, but it can only be given its due in a separate work or, perhaps, a dedicated chapter if this work is to be expanded. At this stage, I will content myself with warning the reader to not confuse the effortless image of the logic of performance of experience and narrative repetition in the following sections for an actual lack of strain in that performance as it was accomplished in practice.

One important and obvious piece of the puzzle is that, unlike in other settings, on ASH the stories are heard by other ASHers—people with whom they form what Liisa Malkki (1997) has called an “accidental community of memory” (p. 91):

A community of memory does not refer here to a local or national community, but rather to a less explicit and often more biographical, microhistorical, unevenly emerging sense of accidental sharings of memory and transitory experience ... [that] do not necessarily take ... public, socially visible, narrativizable, or ritualized forms.

Examples of such accidental communities of memory might be: people who have experienced war together, whether as civilians or as combatants; people who have lived in a refugee or internment camp together for a certain period; people who were bombed in Hiroshima or Nagasaki; people who all fled a particular revolution; people who are stricken by a particular illness; or people who worked together on a particular humanitarian or development project. In these examples, the intent is to suggest that it is the communities that are accidental, not the happenings. There is indeterminacy here not because these or other historical occurrences are haphazard, but because they bring together people who might not otherwise, in the ordinary course of their lives, have met.

People who have experienced such things together carry something in common—something that deposits in them traces that can have a peculiar resistance to appropriation by others who were not there. These momentary, out-of-the-ordinary periods of shared history can produce (more or less silent) communities of memory that neither correspond to any ethnologically recognizable community, nor form with any inevitability. They might not even be articulated as communities. (Malkki, 1997, pp. 91–92)

ASH solidifies such an accidental community of memory and provides a space where ASHers can articulate the elusive but concrete traces of degraded living.

Excerpt 2.4

Being the 'freak' that I am, I don't fit in too many places but ash has certainly been a home for me. Back in Sep. 98, having only had my computer a little over 2 months, I somehow found ash and it saved me. I've been welcomed and welcomed others. I've laughed and cried. I've commented on everything and then lurked. I've learned and, hopefully, taught. I've spent late nights pouring my heart out and spent other late nights trying to comfort others who've poured their hearts out. I've come to know some of the most honest people I've ever encountered through ash and even met one and hopefully am going to meet 2 more soon. Ash feels more like a home than I have ever had where I was never encouraged or even allowed to express any emotions. I am always listening - and sometimes spouting off. I'm thankful, more than anyone could ever know, for the existence of ash and its posters and lurkers

Excerpt 2.5

Before I came to ASH I was existing in a lifetime's habit of never saying anything, pass-timing, small-talking, how-do-you-do and what-do-you-do-ing. Of course, in all this, I was actually talking a lot (but saying nothing) and making plenty of noise. Now I talk very little (and my old friends think I am mute): but I wonder if I am now saying more.

I never thought a day would come when I would feel minded to say the things I have, openly and publicly. And I never thought I'd see a day when I'd hear such things, and be able to hear them, and be strong enough to read and re-read such things.

Maybe 'belonging' to ASH, in communion with other ASHers, has its paradoxes, not least that I wonder if it has strengthened me. I came here originally, in March I think, merely to research a method, very matter-of-factly: I'm still here in December, my method perfected and filed away and almost forgotten. But something else has happened: I've started to engage with other people, like I've never engaged before. That's why every time I think I should be leaving ASH I just can't. ...

Of course I still want to die.

Tell that to the Daisies with their certainties and their truths lifted straight out of books

It is the “resistance to appropriation by others” (Malkki 1997, p. 92) of such embodied traces that explains why, like the patients in the PTSD clinic studied by Young (1995, pp. 216–217), ASHers generally value the stories and help of other ASHers while those of outsiders have little or even negative impact.

A lead to the second, less obvious part of the answer to the question of what is special about listening on ASH can be gleaned in Excerpt 2.4 which exemplifies a rather remarkable feature of the newsgroup—it seems that for the author ASH has instituted a new sense of temporality that she shares with the rest of the members. The short, active sentences indicate concrete reminiscences—lurked, commented, learned, taught, cried, come to know—that are, moreover, centered unlike the actions in the outside world as reported in Excerpts 2.1, 2.2 and 2.3. When they say “I am always listening” (Excerpt 2.4), “I am now saying more” (Excerpt 2.5) the authors are squarely in their own present tense rather than in some provisional temporal limbo with no opening to possible action.

There is a strong case to be made, that such a centered presence in the space of the newsgroup is made possible by the group's collective norm of nurturing and cultivating each ASHer's individual normativity understood along the lines of Canguilhem's (1989) theoretical formulation discussed above (see p. 55)⁵⁷. Unlike in many other settings in their lives, in the space of the group ASHers feel ownership of their actions. It is their bored, sad, tired, pained, weary etc. selves—not always believing in the fight, not coerced into an abstract hope that they can rarely recognize themselves in⁵⁸—that choose to tell their stories, to listen and to support others, or to engage in lighthearted posting.

The significant stories, the commenting, the support themselves become events, as do more mundane details of the newsgroup routine—sharing minute daily happenings and emotions, posting and/or requesting songs, sharing favorite poems, discussing the news, dealing with trolls, abusive posters and well-meaning outsiders etc.

⁵⁷ For similar examples from autonomous ex-mental patient communities see Chamberlin (1977, pp. 86–105).

⁵⁸ Such abstract incitations to hope are typical in posts of mostly well-meaning “shiny-happies” (as they are known in ASH) who try to convince ASHers, of whose lives they are usually absolutely ignorant, that for some unknown reason at some unspecified time in the future things will be better. As such an abstract offering of hope has nothing to do with anything concrete in the recipient's life and has no connection to their current way of making sense of their situation, this is another instance of de-presenting: in the discourse of the shiny-happy, the recipient's “self that can and should hope” hangs saintlike in midair with open arms, supported by nothing but cliched and formulaic sentiments (colored by a more or less ill-concealed sense of moralistic insistence in their own universal validity) above a concrete “sad, bored or tired” (etc.) self from which it is alienated and temporally severed by the very nature of the gesture. In other settings, ASHers often accept such professions just because it is the easiest way to interrupt the conversation. This usually satisfies the shiny-happy helper (who, tellingly, often considers his duty fulfilled and the matter in need of no further attention) and is deeply unsatisfactory to the ASHer who is aware of the helper's insincerity but is often unable to confront him with it (these observations come from a whole genre of stories shared in the group). In ASH, such empty invitations to hope are challenged. The ASH FAQ explains: “Traditional support newsgroups often attempt to delegitimize suicide by offering a ‘positive’ view of life, ‘like a lighted window in a winter storm,’ as one author put it. But to the person viewing that life from outside, it only acts to emphasize the distinction between the warm ideal of life and the person's own cold despair.” This clearly expresses how such gestures can serve to reproduce decentered, impoverished existence (thin presence) and reinforce the recipient's alienation from their own present.

Bonilla and Rosa (2015) in their research on the “ad hoc publics”⁵⁹ arising around hashtags such as #Ferguson on Twitter during protests discuss, among other things, the shared temporality opened up by such spaces (pp. 7–8)⁶⁰. Bonilla and Rosa highlight the capacity of the Twitter medium to enable real time engagement during ongoing protest actions or clashes with the police. By keeping track of #Ferguson, people could watch the ongoing events on multiple live streams, could coordinate with one another on the ground and read thousands of reactions in the heat of the moment. For Bonilla and Rosa, this allowed users to “experience the heightened temporality that characterizes all social movements: the way days marked by protest become ‘eventful,’ distinguishing them from quotidian life.” (p. 7).

A different, much slower and more loosely embodied type of “heightened temporality” exists on ASH and is evidenced in extraordinary exchanges such as the one originating Kafkaesque’s response in Excerpt 1.3 and onionhead’s Death’s Bus Stop metaphor for the group in Excerpt 1.4, in farewell threads, in engagements with press coverage of the group⁶¹ or pernicious actors etc.

However, unlike in the case of #Ferguson, the routine (quotidian) temporality generated by the group is as important for ASHers. As we have seen in the first section of this chapter, many ASHers are detached from the routine motions of their everyday through a decentered mode of existence. We have also seen that many ASHers are in fact centered in their actions on ASH. This confers extra significance to the tenuous sense of embodied routine permitted by the intertextual Usenet medium. The day-to-day small actions in the group—such as acts of listening and

⁵⁹ Bruns and Burgess, 2011 cited in Bonilla and Rosa, 2015, p. 6.

⁶⁰ I thank my co-advisor Saygun Gökarıksel for introducing me to this excellent article and the body of literature with which it converses.

⁶¹ ASHers co-authored and supported petitions to the relevant publications (one was sent to CNN after their coverage of Suzy’s suicide) and coordinated their efforts to contact writers and editors in an attempt to rectify what they considered misleading representations of the newsgroup.

support, ranting, sharing mundane tidbits of one's day that can only be of interest to people emotionally invested in the person, asking a goofy question, even dealing with trolls—sediment in intelligible repeated patterns of habituality that support the sense of coziness expressed in Excerpts 1.1 and 1.2 and are responsible for the valued sense of comfort and homeliness that many ASHERs describe finding in the group. It is the group routine with its relative clarity and predictability but also direction that gives the group the feel of a home⁶².

As put by the author of Excerpt 2.5, there are paradoxes involved in the eventfulness generated by ASH. One of them, of which ASHERs are pointedly aware as manifested by the ASH FAQ and many posts, is that many of the significant events in the group are particularly powerful expressions of failure to experience, or particularly emphatic refutations of challenges to such expressions. The centered event in the temporality of the group often references and articulates the decentering itself. Saying “such things” and hearing them “openly and publicly”, reading and re-reading them (Excerpt 2.5), things that many ASHERs were not able to put into words prior to finding the group, renders them concrete and intelligible. Each ASHER's failure to experience is detailed in that articulation, acquires specific characteristics (“thisness”) and becomes her own through its expression in the group⁶³. Later such expressions by each ASHER, together with how she acts in the group, become ways in which she is known and remembered by the others:

Excerpt 2.6

This is my last post. I want to address the Newbies first. I remember when I first posted here, I read of people saying goodbye. In their posts they'd say

⁶² Importantly, unlike in mental institutions and other such places, in ASH the routine emerges spontaneously out of ASHERs' own actions rather than being superimposed.

⁶³ Passive listeners also benefit from the new intelligibilities made possibly in ASH by finding apt expressions resonating with their own lived experience in other ASHER's posts. For many ASHERs these are aha moments providing a new narrative or discursive seed around which they can make discursive sense of what was priorly inexpressible and lived silently.

their farewells to others, like it was a big club I'd never be able to join. Not so.

In time, you will make connections. Either you'll post something that really hits a nerve, and you'll get personal mail on top of ash posts. People will get to know who you are. Sometimes they'll be blunt with you but that's because they care. Or you have a question that remains unanswered, and – you'll – contact someone. I used to feel out of place here, and now that I'm really comfortable, it's getting close to the time to catch the Greyhound by the crossroads at midnight. *sigh*

Let's get out the magic mirror. Ooooooh, I see Sidhe sighing, and Tik-Tok tocking, and Steward with his wise advice, and Cider's got the blues, and there in the past is the Queen of ASH, Sylvia Plath, from whence I, Brian, got my fake name. And I see everybody!^{64 65}

ASHers that “catch the bus” are commemorated in a number of different ways in a stretch of time that typically starts some time before the deed and can continue indefinitely after the person has committed suicide.

Active ASHers (non-lurkers) often let the group know some time in advance that they are approaching a firm decision (or, if that decision has been taken some time in advance, that they have “got their ticket” (perfected the method)). This typically originates more intense discussion within the group. Other group members interact more with the person, if she is still vacillating, they do their best to help the person clarify what he wants through listening, responding to his rants, giving their opinion and advice when solicited, helping with practicalities (e.g. the will, scheduled messages, more rarely method-related details) etc. The person planning the deed will typically post more (or more intensely) than usual. He could go through

⁶⁴ Sidhe, Tik-Tok, Steward and Cider are other ASHers. The Greyhound is a known bus line operator in the USA. Sylvia Plath is an author known, among other things, for her vivid descriptions of degraded living in her novella *The Bell Jar* and in her poems.

⁶⁵ This particular post seems to imply that newer members will be able to “catch the bus” in time, which, in isolation, might be interpreted as a general pro-suicide message of some sort. The full communicative context makes it clear that the author was speaking about the valuable ties he had developed with the group seen in hindsight by a person who would now be departing ASH in one of the few possible ways to do so (ASHers can also announce leaving or taking a break from the group when they feel better and enter a fuller period of their lives. On such occasions, their renewed attachment to life is celebrated by the group, even as members express how much they would miss the person). Farewell messages are typically very matter-of-fact and concrete, if emotional, and contain few general statements, least of all general pro-suicide messages (which would be frowned upon, for they are anti-normative in ASH and expressly proscribed by the ASH FAQ).

emotional swings, or doubts, or tough moments. The group typically supports the person and his decision (whatever it is shaping out to be) in the process and wishes him well in whatever he decides. If the person changes his mind, or postpones or abandons the plan, the group is as supportive of that as of a decision to catch the bus: indeed, the group will often celebrate the value of the person for the group and express some joy in the fact that they would be able to continue enjoying his companionship.

If the person does decide to “catch the bus”, she starts a farewell thread, saying her goodbyes to other members, often expressing gratitude. ASHers respond warmly, wishing her well in whatever happens (for she might fail or change her mind). Those who know the person well, or have appreciated her posts write more personal and specific missives celebrating and remembering that bond⁶⁶.

In the aftermath, people often do not know if the attempt has been successful. If the person has personal friends in the group, some information might be known and shared with the group by them. Otherwise, there is a period of uncertainty. The person might reappear a long time afterwards (if her attempt has been unsuccessful and she was involuntarily committed).

ASHers that are known to have died are remembered in subsequent posts by recollecting their past contributions to the group as their presence and touch is missed. Small commemorative webpages are often created by other ASHers collating the person’s especially memorable words, bits of online activity, blogs, songs and poems that she liked etc. A photo is often included, the overall impression being that of a rather extensive personal memorial.

⁶⁶ Therefore, farewell threads can be quite generic or quite involved and emotional depending on how much they have made their mark on the group.

In line with Seremetakis' (1991) analysis of a community's relationship with the dead, ASH's relationship with the deceased ASHer continues (see especially pp. 216–217). The marks of care left by her on the group (“the mark of the one on the many”) persist embodied directly in the textual body of ASH and more subtly in the lives of those whom her words have affected. The marks left by the group on the deceased—their care and tending for her as traced out in her being (“the mark of the many on the one”) are estranged through her death and become objects of desire (*pathos*) and pain (*ponos*). The deceased ASHer remains part of the shared substance of the group molded through a reciprocal ethic of care, but her death is a “liquefaction” (p. 217) and exile of that substance to an outside (*xenitia*) through which she becomes “a foreign part of the self” (p. 216) for the survivors. In Seremetakis' terms, such memorials serve to resolidify leaked share substance and make it subject to a continued, if reshaped, ethic of care. Importantly, ASHers know that they can look forward to such a way of being remembered.

Such remembrances are very different from the ones structured by the “monolithic normativity” (Marsh 2010, p. 66) of currently hegemonic views on suicide (e.g. the press coverages of ASHers' deaths exemplified earlier in this chapter and even the way in which their close ones remember them outside of ASH). In the space of the group, the crisis of a contributor's dying appears continuous rather than sudden or unexpected. There is no sense of a surreptitious, uncanny break, no blaming and little to no pathologizing language. The kind of death (and subsequent memory) that has been made possible by the space of the group bears some resemblance to the Roman suicides described by Marsh (2010, pp. 80–86) with reference to Hill (2004): public and reasoned acts, carried out in full knowledge of one's friends, mentors and family and with their participation in pre-mortuary rituals.

On at least one occasion, a deceased ASHer's loved one from outside of ASH has benefitted from the group's memory of him: the father of an ASHer that had committed suicide subsequently wrote on ASH, and after talking with other ASHers said he was happy to know that his son had found companionship in the group; his son had been "alone all his life"⁶⁷.

ASHers' knowledge and remembrance of each other is embodied in a way that strongly relies on the textual medium of the group (especially the archive of old posts) for material support⁶⁸. This is exemplified by a desperate and unsuccessful attempt by an ASHer to reach an old post of great significance to them after Google closed down access to the ASH archive. A post from 1996, stored by the author in the form of a Google Groups link that no longer worked, was important enough to inspire a four-year long quest to retrieve it more than twenty years later:

Excerpt 2.7⁶⁹

I have been trying to get in touch with Google / groups / admins in all sorts of ways.

I want to access a thread (most importantly, the first message) from the group alt.suicide.holiday 1996. It means a lot to me personally.

Before they closed the group, the thread used to be here: [link given])...

Hi, are you the same (*user name of tech support person*) who answered my (same) question in 2016 (*link given*)?

As you see, I am no closer. ...

I just want one single post, that's all. The linked post, from Dawn Smith, 1996. How can this possibly be escalated to someone who can act? Give me access, just for a period? Or just pull that post and e-mail it to me? We are talking about a single post that changed, and possibly saved, my life.

This emphasizes the importance of inscription on ASH. As important as the moment-to-moment communion of ASHers as an accidental community of memory is the fact

⁶⁷ This was remembered by an ASHer in a later thread.

⁶⁸ The embodied aspect of computer-mediated acts is often overlooked. A naïve view suggests, to the contrary, disembodiment. While it is important to keep in mind the qualitative differences between computer-mediated and face-to-face communications, an analysis of such differences in terms of differently structured forms of embodiment is much more satisfactory. See Cöbek (2022) for an enlightening account of swiping on dating apps as an embodied practice.

⁶⁹ From a thread on Google support dated 2020.

that the product of these conversations persists, visible and tangible, “out there” in the open. The author of Excerpt 2.5 expresses his joyous incredulity at being able to say and hear, to read and re-read the kind of things shared on ASH “openly and publicly”. Listening can only happen on ASH in the way and to the effect that it does because of the possibility of such inscription.

Listening by itself, even by others in the same accidental community of memory is not enough to have such effects. Listening takes many forms: it can be private or public; purposeful, intense and continuous or furtive, accidental or even implied; spontaneous or within established roles (such as the help relationship discussed in Chapter 3) and settings; open to new ways of making sense or bound to pre-set ideological categories such as those dictated by a compulsory ontology of pathology identified by Marsh (2010, p. 66). These circumstances motivate how listening affects the sharer and the listener. Some listening does not leave behind new verbal articulations of such tangibility and persistence. Listening can have effects that are otherwise embodied: people can feel warmth and a sense of temporary refuge (or conversely cold, distance, longing and even loss), they can feel loved and cared for (or only formally assured of being “not alone”).

Because of the textual trace it leaves behind, on ASH listening aggregates and sediments into new patterns of making-sense that offer solid ground for further acts. Newer things that are said retrace and deepen the furrows left behind by older discourse in the group. As new ground is broken, the furrows connect into discernable patterns offering novel vistas of intelligibility that afford yet newer speech.

Here the aggregative textual nature of the Usenet medium comes to the fore. For Ricoeur (1971), text is a suspension of communication by speech, an interception

of reference decontextualizing it from the speaker and the common, situational context (p. 138). The ASH archive is a record and material repository of such suspensions. Although, as in most texts, the signature persists as the author's mark, posts on ASH are no longer only or even predominantly their author's own. They become tangible statements in a common universe of discourse that can expand exactly because these statements are out in the open and visible to all. They are also expressive gestures that, detached from the other particularities of the original speaker, can be retraced by those who carry that something in common resistant to appropriation, described by Malkki (1997, pp. 91–92) sedimented in their being as they ran the course of similar happenings.

Finally, the ethic of care that informs listening on ASH is very different from that of help described in Chapter 3. In the newsgroup, listening flows in an uninterrupted flow between equals subject in a non-calculative economy of affect. While the listener can change, listening itself can be depended on, unlike the brittleness and danger inherent to the act when part of "help". Most emotionally significant sharing on ASH conforms in spirit with Sara Ahmed's (2014) description of the sociality of pain in *The Cultural Politics of Emotion*:

The sociality of pain—the 'contingent attachment' of being with others—requires an ethics, an ethics that begins with your pain, and moves towards you, getting close enough to touch you, perhaps even close enough to feel the sweat that may be the trace of your pain on the surface of your body. Insofar as an ethics of pain begins here, with how you come to surface, then the ethical demand is that I must act about that which I cannot know, rather than act insofar as I know. I am moved by what does not belong to me. If I acted on her behalf only insofar as I knew how she felt, then I would act only insofar as I would appropriate her pain as my pain, that is, appropriate that which I cannot feel. (p. 31)

The suspension of pathological language in ASH makes possible "what cannot be known" to appear as such for both teller and listener, which assuages ASHers' slippage along and across surfaces ("like a ghost who can pass through walls" in

Excerpt 2.1) and helps constitute a “contingent attachment to the world” through that which is missed (Ahmed, 2014, p. 28). This is how Kafaesque can claim in Excerpt 1.3 that she and other ASHers know what life is since “they miss it more than you ever know”. “As I touch her cheek,” writes Ahmed referring to her mother in pain, “I come to feel that which I cannot know” (p. 30). It is only through such unpresumptuous, non-penetrative touch that interlocutors on ASH solidify each other’s being by making their pain (in Sara Ahmed’s broad understanding of it as attachment through that which is missed) present and subject to ethical action without presuming to exhaust or remedy it.

The non-calculative ethic of care on ASH produces a sense of intimacy. For Chatterji (1998), intimacy is a way of being answerable to another that can be recognized in its irreducible surfeit over any normative or rational designations of duty (pp. 371–372, 376). Mr. Rijder, the person with advanced dementia at the focus of Chatterji’s (1998) ethnography, feels a lack of intimacy despite the ministrations of the care home, and Mrs. Rijder feels continuing responsibility and guilt despite deciding to admit her husband only when she became completely incapable of coping with the situation on her own. Intimacy for the sole sake of duty is not considered genuine on ASH (as illustrated by Excerpt 1.3 among many other posts).

Some find moments of true intimacy on ASH:

Excerpt 2.8

When I go to ASH, I could create another family... There are people that I knew on ASH to whom I could talk to specifically about my problems, I could tell very deep feelings to, that I didn’t feel comfortable talking to my wife about.

What is truly unusual about ASH is that (mostly) un-pathologized expressions of degraded living can be listened to by peers in such a public context and can leave behind such visible verbal traces. The permanence and openness to elaboration of

these verbal traces is very untypical for such expressions⁷⁰. It is also a necessary condition for reaching others who are part of the same accidental community of memory and for the constitution of the kinds of temporality and intelligibility discussed in this section.

The texts that elicit the highest degree of emotional involvement from ASHers, indeed that open up a “heightened” rather than quotidian temporality in terms of the distinction made by Bonilla and Rosa (2015, p. 7), are narratives from ASHers’ lives and related discussion, including with outsiders. The heightened temporality characteristic of ASH does not take the form of a short intensely experienced episode of time driven by real-time engagement as in the case of interaction around #Ferguson. Rather it is an unhurried (re-)turn towards what is lived accomplished through narrative repetition in an act of memory. Paul Ricoeur (1981) describes the process aptly in *Narrative Time*:

Memory, therefore, is no longer the narrative of external adventures stretching along episodic time. It is itself the spiral movement that, through anecdotes and episodes, brings us back to the almost motionless constellation of potentialities that the narrative retrieves. The end of the story is what equates the present with the past, the actual with the potential. The hero is who he *was*. (Ricoeur, 1981, p. 182).

As they are etched into the textual medium of ASH, ASHers’ narratives settle in such a pattern of repetition that institutes memory in interreferential time, each return rendering the constellation of potentialities spanning the emerging narrative space more visible, and the situation of ASHers, whose actuality is centered and enfolded in that space, intelligible in novel ways. This institution of time is a collective

⁷⁰ The monolithic normativity of discourse around suicide, by targeting what appears transgressive from the point of view of an ideology of help structured around imagined fragile subjects who are not allowed access to autonomous action due to their constitution around an internal pathology (see Chapter 3) also contests, erases and redirects the kind of speech discussed in this chapter. Spaces such as ASH are legally and informally challenged, or pressured into complying with “psychiatric ideology” (Chamberlin, 1977, p. 93). When suicidal speech is erased, orthodox discourse is often plastered on top in the kind of palimpsest discussed in Section 1.2.3.

activity for, as Ricoeur (1981) reminds us: “narrativity, from the outset establishes repetition on the plane of being-with-others. ... The public time ... is not the anonymous time of ordinary representation but the time of the interaction” (p. 184).

As the patterns of repetition gain strength, so does injurious speech (Butler, 1997a, p. 4), such as that of shiny-happies, saviors, p-docs, evangelists etc. threatening to disturb narrative compossibility. Discursive regularities reveal themselves in such speech, they become objects of action and occasion counter-discourse aiming to preserve the narrative space. Such counter-discourse is sometimes earnest, sometimes polemic, hyperbolic and sarcastic, and functions by making tangible (and therefore more challengeable) the type of injurious discourse itself with its obfuscations and excesses.

A vivid example of counter-discourse revealing such a type (“you shouldn’t feel so bad because there are people that have it worse”) appears below:

Excerpt 2.9

(a) somewhere in this world is a person who is worse off than absolutely everyone else.
for years people have been minimizing my burdens by assuring me that somewhere there was somebody worse off than myself.
what i've never been able to understand is how somebody elses misfortune miraculously eases mine.
somewhere the poor guy who has only a head, no limbs or torso, is being
told to cheer up because the guy in the next room only has an anus connected to a rudimentary spinal cord.
what they cheer that guy up with is anyones guess.

—adamlong4

Other ASHers responded with hilarity and shared stories of being shut down in the same fashion recounting their visceral reaction on such occasions:

Excerpt 2.9 (continued)

(b) LOL. That's funny. But I do understand what you mean. And not without good reason. Just recently I was speaking about being suicidal at an AA meeting and afterward this guy comes up to me and says, "You know, Kathleen, no matter how bad you have it, someone else always has it worse."

That enraged me. ...

Even the people in my church shut me down. They don't want to hear about it. They love life and want to talk about loving life. That pretty much leaves me out. ...

—*Kathleen*

(c) Several years ago I had counselors and pdocs say those things to me. One couns⁷¹ was baffled because I'd go to the sessions and stare at the floor and cry the entire time, mostly mute. I don't even remember what she or the carpet looked like.

I wasn't trying to be difficult; I was just so sad and didn't understand why. I was extra extra sensitive to any outside stimuli because nothing made sense and everything hurt. She would tell me, nervously, as the silence made her fidgety and she kept clearing her throat, "Um.. well compared to some people I see, you don't really have it that bad. Some people are addicted to crack..."

I looked up briefly at her, incredulous. I begun to feel very misunderstood but could not find the words to explain myself. ...

there was no way I could have explained back then, because I didn't understand any of it myself.

—*pepsi-zen*

The kind of sarcastic, polemic engagement exemplified by the original post sharply refracts the injurious speech it targets, representing it in an “image of a language” (Bakhtin, 1981, p. 336). Now represented as well as representing (p. 336), such speech becomes tangible as language of a type (“there are people who have it worse”) reverberating with the ideological position it harkens back to (p. 335). This tangibility is essential if one is to be able to stand back from such language and challenge it in new narrative or discourse, as pepsi-zen’s words at the end of Excerpt 2.9c illustrate. An even clearer example of such “heteroglossia” (p. 335), rather common in ASH, appears below:

⁷¹ Counselor

Excerpt 2.10

What they say:
What they really mean:

Just snap out of it!
You're starting to annoy me...

Pull yourself out of it!
I'm just feigning sympathy for you but I could really care less.

I wish there was something I could do..
I wish there was something I could do to make you stop whining.

Maybe you should talk to someone.
Maybe you should leave me alone and go bother someone else.

Did you take your meds?
You're much easier to be around when you're asleep.

Heteroglossia detaches and repels ASH's narrative space from more hegemonic forms of speech around suicide, clarifying the work of memory. This detachment is significant from the point of view of temporality and experience, since many of the injurious languages that come into view on ASH such as abstract exhortations to hope, generic clichéd advice from a distance, decontextualized entreaties to seek "help" etc. are grounded in an imagined structure of action that de-presents the suicidal person (see footnote 58). Thus, the work of detachment through narrative repetition is at the same time a re-centering.

2.3 Tenuous experience in ASH

At the end of the first section of this chapter, we established that experience (considered narrowly as a specific mode of existence dependent on specific conditions of possibility) is valuable to ASHers and that they consider themselves to be failing in its performance. Excerpts presented throughout the second section have reinforced this conclusion showing ASHers' predilection for experience both in

Kafkaesque's (Excerpt 1.3) and (roughly) Desjarlais' (1994) formulation over other modes of being.

Considering the routine and heightened temporalities instituted by ASH, we cannot help but notice that they exhibit characteristics suggestive of experience.

In terms of the norm of experience formulated by Kafkaesque—being touched, being loved—the group has proven capable of supporting a specific kind of mutual listening, knowing and remembering in an “accidental community of memory” (Malkki, 1997, p. 92) that afforded ASHers a sense of warmth, cozy belonging in a homely space, and even intimacy.

In terms of the norms of experience identified by Desjarlais (1994), we have seen how the routine and heightened temporalities of the group have tended to push ASHers towards the center of their own field of action by re-presenting (re-connecting to the possibilities of action inherent to the present tense) their unified but displaced (“bored, sad, tired” etc.) self at least in the context of their activity within the group. Paradoxically, ASH has allowed ASHers to know and remember each *other through the particular ways in which they failed to live* as these found expression in the group. Such an event structure, despite its inner tension, has shown itself capable of sustaining:

- a significant capacity to stand back reflectively from one's situation and to regard it with interpretative depth.
- narrative repetition of surprising vigor and compossibility generating consistent collective reference and memory.
- a continuous memory (remembering) of active members including when representing their estrangement in death.

We have seen that the constitution of such experience in the group has been possible through the following:

- Narrative possibilities afforded by the spontaneous communion of an accidental community of memory.⁷²
- Possibilities of textual inscription lending material support to the persistence of embodied narrative and discursive memory thus supporting the constitution of new intelligibilities.
- Material possibilities and limitations⁷³ of embodiment occasioned by the Usenet medium (especially important for the constitution of routine temporality in the group).

Nevertheless, due to the tension inherent in the event structure on which it rests (constant reference to degraded living) and reliance on conditions of possibility only available in the space of the group, experience constituted on ASH can be only partially effective in structuring ASHers' existence and the events in their lives. Like a plant sprouting roots in hard, rocky ground, experience performed in ASH struggles to penetrate the structural core of its event (degraded living) which, like a pebble enveloped and squeezed by the plant's spreading roots nevertheless usually remains intact. This is what I mean when I call such experience tenuous.

ASH's self-representation as Death's Bus Stop is mimetically accurate in acknowledging and reflecting that fact. ASH is not a place to inhabit—it cannot sustain life and can only be a transient location. Another class of heteroglossia in the language of the group reflects the come and go between sometimes antithetical

⁷² These occurred in the context of an unusual partial suspension of the effectivity of the hegemonic, normatively monolithic (Marsh, 2010) discourse on suicide occasioned by the specifics of the Usenet medium.

⁷³ By including "limitations of embodiment" I refer mostly to the conditions that make intervention difficult on ASH and relatively anonymous sharing possible.

ideological (lived) positions that the kind of experience constituted in ASH entails.

The best example is the traditional ASH greeting “Welcome to ASH, sorry you are here”, at which we can now look in greater detail. The ASH FAQ explains:

Excerpt 2.11

Glad because of their [newcomers' or returning ASHers'] presence, ashamed because we basically get something positive out of this persons misery.

These opposing emotions are the origin of the customary ash welcome: "Welcome to ash, sorry you're here."

Our true wish is that ash would be empty, but not because the former readers would have committed suicide. We wish that all ashers find happiness and contentment, however we know this is not always possible. Due to our altruistic desire for ashers to have better lives, some ashers find it difficult to admit that they are selfishly happy when someone returns to ash. However, ashers understand this conflict.

—*from the ASH FAQ*

The irreducible thinness of being at the core of the event in the horizon of experience opened up by ASH manifests itself here in the come and go between the desire for the suffering of other readers to stop, which would take them away from the group, and joy in their company in a “sociality of pain” (Ahmed, 2004, p. 31). Importantly, ASH does not misrecognize this ambivalence and faithfully represents it in a refractive motion between the two images of language constituting the phrase “welcome to ASH, sorry you are here”.

The uninhabitable nature of ASH finds expression in the desire that ASH were empty. But that desire itself contrasts with the welcome and is portrayed as such.

The subtle mimetic faithfulness with which ASH represents itself speaks to the interpretative depth afforded by tenuous experience in the group. Such faithful self-representation repeats the unstable motion from the achievements of tenuous experience to its recalcitrant kernel of thin presence still holding predominant sway over one’s existence. It attaches to a sociality of pain through a sociality of pain, that is through what that sociality itself lacks, which is attachment to life. In a roundabout

way, it is an affirmation of attachment to life in the very experience of its lack. Such an extraordinary feat of affirmation, which I daresay would have made the Nietzsche of *The Birth of Tragedy* proud, is clear as day in Kafkaesque's words in Excerpt 1.3: "the people who post here are some of the few people I've met who I believe know what life is. Why? Because we miss it. Because we want it more than you'll ever know."



CHAPTER 3

THE FRAGILE SUBJECT AND THE HELP RELATIONSHIP

You raise the blade,
You make the change,
You rearrange me 'til I'm sane.
You lock the door
And throw away the key,
There's someone in my head, but it's not me.

—*Brain Damage, Pink Floyd*

3.1 The problematic of the fragile subject

In this chapter, I will be looking at the kind of subjects that ASHers are, with a special focus on the dynamics of the help relationship

ASHers are generally regarded as people to be helped. That they should “seek help” is the most common appeal made to people that express their suicidality or that are suspected to harbor such tendencies. Help is the buzzword in the mandatory messaging that accompanies most representation of suicide in film or print. There are many consequences to this, including ASHers’ very disqualification from the possibility of coming together in spontaneous, unsupervised discussion.

However, ASHers are only one of many possible subjects interpellated through the help imaginary. There are many other subjects that need help: children, the elderly, the disadvantaged, migrants, refugees, people affected by a natural calamity or suffering from an economic crisis, even nations in an international context can be subjected in such a manner. ASHers are a specific kind: people who are considered to be more or less temporarily incapable of accurately perceiving and caring for their own best interests in light of their inner state of mind and whose situation, when witnessed, creates a moral obligation for positive assistive action. I

will call this particular kind of subject-to-be-helped a fragile subject and it will be the focus of this chapter.

There is a strong tension between the two conceptual poles of the subject-to-be-helped. On one hand, subjecthood is strongly associated with autonomy and discussions of agency can scarcely do without reference to the subject. As Althusser (1994) has aptly put it, the subject is what appears to function all by itself (p. 136). Needing help, on the other hand, indicates some deficit in autonomy (in the specific case of the fragile subject, an internal pathology (Marsh, 2010) is assumed to lie at the origin of that deficit).

This tension functions as an unresolvable lived contradiction that plays out in different ways for different kinds of subjects-to-be-helped. Importantly, it redoubles and deepens a constitutive tension that, as noticed by Althusser (1997) and neatly formulated by Butler (1997b), lies at the heart of all subjecthood:

The notion of the subject has incited controversy within recent theoretical debate, being promoted by some as a necessary precondition of agency and reviled by others as a sign of "mastery" to be refused. ... How can it be that the subject, taken to be the condition for and instrument of agency, is at the same time the effect of subordination, understood as the deprivation of agency? If subordination is the condition of possibility for agency, how might agency be thought in opposition to the forces of subordination? (p. 10)

Thus, in order to analyze the logic of action instituted by the fragile subject, we need to both 1) account for the tension between agency and subjection in the subject in general and 2) trace out the specific form that it takes in the fragile subject⁷⁴.

⁷⁴ An objection can be made to my choice of autonomy as the main theoretical means to formulate agency. I do not wish to suggest that autonomy is a universal way to make sense of agency in the abstract. Indeed, people have made sense of agency in very different ways which are in no way inferior considered generally with no reference to a particular context. The reason why autonomy plays such a role in my own account is that the concrete processes of subjectification that interest me here make explicit reference to it. (As it is typical for an ethnographic perspective, autonomy is both an emic and an etic category). A group of ASHERs talking to one another in a digital town square can be challenged on the basis of the fact that each ASHER is a vulnerable kind of subject whose independent judgment of what is or is not good for her cannot stand on its own. From a legal point of view, an ASHER who speaks of a suicidal intention can on that basis be determined to require custodial care and, being thus impugned, suffer a real loss of autonomy. Or conversely, an ASHER can be

The tension at the heart of the subject-to-be-helped has been analyzed by writers questioning the help relationship in the context of a critique of humanitarianism⁷⁵. A notable work that, like my account in this chapter, tries its analytical lens on the helpers rather than the helped and does so with great attention to the work of imagination and fantasy in the constitution of the help relationship is Liisa Malkki's *The Need to Help* published in 2015. Malkki looks at the motivations of Finnish volunteers in Rwanda, Congo and other locations around the world where they were dispatched on humanitarian missions. She interrogates their "need to help" and shows how it often presupposes and reproduces a very particular image of the help recipient depending on the underlying imaginary schema: a distant suffering stranger only "basically human" in their urgent need (p. 7), or the remote child in need to be consoled and cheered preferably by a toy bear imprinted with the intense but alienated affectionate care and warmth of the lonely person who knits it themselves at home in full knowledge that it is "something" but always "less than" what is needed (pp. 122–127). Malkki shows how the affective power of the imaginary schemas runs away with the helpers producing material and symbolic excesses: humanitarian agencies are swamped with the home-knitted aid bears that have captured the imagination of kind, well-intentioned, but lonely people in Finland for whom such contact with the faraway signifies an escape from social deprivation

indicted for encouraging the suicide of whom he is speaking to on the grounds that his collocutor is a vulnerable person. Ironically, in a conversation between two ASHers, these two roles (encourager and victim) can be interchangeable and it is very much a matter of chance who is perceived as whom. This has come to play in the press coverage of a suicide pact between two ASHers. As the death of one of them (LHG) was the one covered, the second ASHer by definition became the perpetrator. One puzzled ASHer remarked in the aftermath that LHG was as liable to be considered an encourager as a victim given the dynamic between the two. Psy-discourses, another important surface of emergence for the fragile subject, in their wide variety of approaches, likewise make reference to categories that are denominated in autonomy: functioning in the nosological and diagnostic corpus (i.e. the DSM) as well as in developmental psychology, the strengthening of the ego in one branch of psychodynamic theory, the language of boundaries, the notion of dependence/codependence are some examples among many.

⁷⁵ I thank Souad Ali Osseiran for drawing my attention to this fascinating body of research.

at home and even participation in a fullness of life that is imagined exactly in relation to the basic and concrete nature of the help recipients' need (pp. 117, 7, 8–9); images of needy children that are irritating in their clichéd representation of various aspects of universal basic humanness are nevertheless reproduced in publicity campaigns through the inner logic of the help effort (p. 17, pp. 79–91). Such material and symbolic excesses are traces that serve as “repressed points of reference” (Žižek, 1999, p. 92) to the full personhood of the people receiving help—overwritten and obscured by the imaginary relationship constituting such people as subjects-to-be-helped, yet always overflowing and transcending the frame of such subjection whether silently or narratively and discursively.

Much less work exists analyzing this tension in *fragile subjectivity* with a focus on the helper's imaginary support. Within psychology and psychiatry, the psychoanalytical (and psychodynamic) tradition has tackled the matter with most sophistication and intellectual honesty under the category of counter-transference (Maltsberger and Buie, 1996; Schneidman, 1996; Hendin, 1996). Practicing clinical psychoanalysts have noted how the therapeutic dynamic can place them in the position of a devalued object of attachment⁷⁶ destined to confirm the patient's disappointment and sense of impotence. This is especially relevant to suicidal patients, whose neurotic reenactments of despair, according to such analyses, require a therapist that is useless, or conversely, one who hates or rejects the patient, or who helps but unwillingly and out of bare duty confirming the patient's worthlessness, or who deceptively plays endless mind tricks on them etc. If the therapist, mindless of the dynamic structure, impulsively submits to such valuations, they may come to hate, resent, or lose interest in the person, or come to see themselves as indeed

⁷⁶ In using object here, I merely report common psychodynamic terminology. I consider the term subtly but significantly inappropriate.

worthless as Excerpt 3.1 from a thread discussing the termination of a therapeutic relationship exemplifies:

Excerpt 3.1

Today was the final meeting between myself and my headmech . I've been seeing this guy on and off for about 5 years during which time I've developed nothing but utter contempt for this man. So I says to this guy, "look, I'm sorry this is just not working out." He asked "what do you mean?" I says, "I come here a week after week and it's beggining to feel more like going to a gym except I'm not getting any exercise done" He says, oh he says, "It's becuae you are not prepared to let go of your negative side. You always seem to think that you figured yourself out pretty well. Let me tell you ..." I stopped him "Look, every time I'm being honest all you can do is patronise me. I try to accommodate. But what the fuck's point of tring to accommodate nothing? Doc, I'm just here to tell you that I am through with your half-arsed attempt at being some kind of physician, I'm through with your shoddy advice about medication. Most importantly I'm sick of both of us sitting here preting we're doing something. Let's not waste any more of each others time. I'm sorry to have wasted your time and I'm sorry that I had to waste mine with you. I'm sure you'll go out there and save somebody. Look at me doc (this is when I got up to leave) this one got away ..." As I was about to leave his office the doc started to cry - I was astounded by this as any of you would be. He says, "I always thought we had a special connection. If it's that bad what the hell am I doing in a doctor's chair". He started sobbing. I says "sorry man, got enought problems of my own. All the best." I could hear him sobbing outside the door. I think I broke my headshrink. I feel like crap.

—UBQ2s⁷⁷

In the therapeutic or psychiatric context, the mishandling of such affects by the therapist can lead to disastrous consequences (and in view of the material presented later in the chapter, can be assumed to be partially responsible for the intensity of the abuse that can be directed at suicidal people in particular in hospitals, the emergency room, the therapy office, but also in informal social relations). Despite being extremely valuable, such work remains biased by the compulsory ontology of pathology and the split/divided subjectivity that lies at the heart of the therapeutic

⁷⁷ This story elicited different responses from ASHERs. While some saw a lack of professionalism in the psychologist's reaction, others appreciated it precisely because, in breaking with what was mandated by the therapeutic script, it was genuine and human. Many were touched and one ASHER said that the therapist was "one of the good ones". This highlights some of the complexities that, as discussed later in this chapter, are due to the tension between subject and person inherent to the logic of help: ironically, help is often most impactful (i.e. useful or hurtful) in moments when it overflows its own schema and when the helper's full personhood overflows her own function as a helper-subject. The reasons for that will become clearer as we go along.

rationality. The transference-countertransference analytical dyad registers many important excesses on both sides of the help relationship but often misrecognizes their structural underpinnings.

On the countertransference side, despite recognizing and regulating negative affects such as those described above, psychoanalytical writers cannot recognize the systematic nature of the abuse and harm occasioned by the inevitable frequent mismanagement (or worse) of negative countertransference by mental health professionals. In a prospective cohort study following up the hospitalization of people diagnosed as psychotic over the course of ten years in Suffolk County, New York, Paksarian et. al. (2014) found that 69% (or a total of 268 people) when interviewed on their experiences “reported that at least one of their hospitalizations was traumatic or extremely distressing.” (p. 266). While this is but limited evidence, combined with narrative accounts by ex-patients⁷⁸ and the deserved poor reputation of mental institutions, it is indicative of a systemic logic that cannot be captured through a conceptualization in terms of professional competence/negligence.

On the transference side, suicidal patients are described as having a tendency to manipulate the claim to other people’s attention that they can make by threatening to take their own life (Hendin, 1996, pp. 430–432). This, however, fails to take notice of the fact that such “manipulativeness” is only possible in the context of a social logic of help that mobilizes with great urgency to preserve abstract life, but is much less forthcoming and more conditional in its operation when there is a loss of concrete life. The so-called manipulateness of suicidal people has to be considered in the context of a social landscape of action that imposes abstract, or “basic” human life (Malkki, 2015, p. 7) as an obligation while being more than comfortable with

⁷⁸ See Chamberlin (1977), Madness Network News, recent PSSD related accounts among many examples.

postponing the nourishment of that life in its concrete fullness. Unsurprisingly, the supposed insidiousness of a whole category of subjects-to-be-helped serves to obscure a social logic of help that is in itself in need of ethical reassessment, as it is currently reproductive of a limbo (whose signification Death's Bus Stop has emerged as)—a zone of social death where bodies are “made live” only in a basic, biological sense, and are not “let die”.

Another body of literature, not written from a therapeutic perspective, reveals some other patterns of excess mostly in relation to autonomy as an explicit norm. A fragile subject's need for help can be understood in two different ways that are often interwoven in discourse on help. 1) A person can need some degree of external intervention (more or less frequent and intense, depending on the situation) in order to be able to sustain their own autonomy; or 2) a person can be seen as utterly dependent.

Of the two meanings of help, the first is the one that relevant discourse feels comfortable displaying. That is the model of support. The second one, corresponding to the custodial aspect of care, is uncomfortable, seedy and somewhat “incorrect”, therefore it is often found in linguistic refractions (Bakhtin, 1981, p. 324) rather than the enunciations themselves; between the lines, so to speak.

The guiding ideology of most institutions imputes normative autonomy even to people that their carers consider severely lacking.

Mr. Rijder, the person with advanced dementia that is the focus of Chatterji's (1998) ethnography, is evaluated in terms of autonomy according to a piecemeal functional measure called ADL (activities of daily life) that measures his ability to dress, take care of his personal hygiene etc. (p. 369). The language of the committee's assessment takes meticulous notice of the smallest behaviors and clearly

denotes autonomy in each as a norm, although it is clear that such autonomy is not achievable by Mr. Rijder.

According to a homeless shelter employee in Desjarlais (1994), Freddy, one of the dwellers, has “choices”—to break down things and be sent to an in-patient ward or to ask for more medication when feeling anxious and stay in the general area (p. 890). Other dwellers likewise can choose to observe the rigid set of rules governing minute details of their lives (many of which they find vexing, unnecessary and paternalistic) or to sleep on the street. The position of a choosing agent in which Freddy and the other homeless people are instated by this discourse is severely undercut by the threatening nature of one of the “options” and the hidden exercise of coercive power.

Chamberlin (1977) unveils excesses in the language of relatively “enlightened” mental institutions in which basic rights such as, for instance, wearing one’s own clothes or walking outside, are cast as privileges to be earned by the patient that makes the effort to “improve” (p. 121). This is the so-called token economy model of treatment⁷⁹, used to the present day, and considered, by those singing its praises, an innovation that empowers the patients’ autonomy. Sarah, the patient whose experience is retold by Chamberlin in the passage, reported her stay at a hallowed institution offering the then new-fangled treatment as particularly damaging, comparing it unfavorably with her sojourn at a “truly grim” other mental health hospital of older treatment philosophy persuasion. As Chamberlin concludes, “Treatment aimed at restructuring the personality of unwilling subjects is rightfully viewed by them as torture.” (p. 121). These accounts serve to emphasize once again the importance of following Canguilhem’s (1989) subtle understanding of

⁷⁹ For one of the foundational texts, see Ayllon and Azrin (1968).

normativity as it applies to life: normativity in its fullest sense means the ability to set norms for oneself, rather than to abide by general functional norms, even if the latter are abstracted from an accurate study of life (p. 127). The shortcomings of the token economy model of treatment, and to a lesser extent, of the ADL measure in Chatterji (1998) are due to an attempt to impose functional norms of autonomy rather than truly support the patients' own normativity.

Chamberlin also documents the ill-masked contempt that often erupts from underneath the hospitals' superficially benign framework of help. In a particularly illustrative encounter, Anthony Brandt, a fake patient that was actually a journalist in disguise, shared with the psychiatrist his plan to return to his wife after discharge (p. 100). Didn't he think, the doctor congenially asked, that his wife would perhaps want a 'real man'?

The casual disregard for individuals that is commonly displayed by mental health professionals, in all kinds of mental health facilities, communicates an unspoken message. 'Good patients' are patients who know their place, who go along with these subtle put-downs. (Chamberlin, p. 101)

Such dynamics are indicative of repressed patterns of desire on the side of the helpers. The desire of suicidal and mentally ill subjects has been pulled apart and put back together in countless analyses many times over. Much more can be done to explore the rosy-cheeked, healthy desire of the helpers. Yet, given the silence imposed on the suicidal subject, it is that desire that I am interested in articulating. O we analysts! Perhaps we should turn our searching gaze inwards and heed a slightly-repurposed common admonition to our older brethren the physicians: analyst, analyze thyself!

A cursory second look at "help" for fragile subjects, has already revealed it as a phantasmatic structure, supported by the imaginary, that calls to mind Žižek (1999)'s analysis of the flight safety instructions for plane passengers (p. 91). The

guidebook with its pictures of people calmly putting on life-saving jackets and exiting the plane in an orderly fashion, the flight attendant's confident gestures and the announcer's calm voice produce an image that contrasts violently with the panic and terror of the actual situation should it occur. For Žižek, that discrepancy is the space of fantasy where the operation of desire can be traced: "fantasy conceals this horror, yet at the same time it creates what it purports to conceal, its 'repressed' point of reference"⁸⁰ (Žižek, 1999, p. 92). What is that space for the help relationship as it applies to fragile subjects? What are the hidden terrors and uncomfortable affective currents it conceals? The examples above have indicated that the language of autonomy in the context of help can mask (and mark) the excesses of hate, indifference, anger, despair, coercion and contempt.

I will continue my exploration of the excesses of the help relationship in later section of this chapter. Before that, I would like to return to an analysis of the constitutive tension between agency and subjection in the subject in general, which will gradually lead to an elucidation of the specific structure of that tension in the fragile subject. For that, I will turn to a performative account of subjection following Judith Butler.

3.2 The subject—a tropological figure

One of the theoretical views that engage with the subject's intricate entanglement with discourse, ideology and fantasy is Judith Butler's performative account. I will weave in and out between Butler's general analysis of subjection in *The Psychic Life of Power* and her work on gender specifically, in which some ideas are elaborated in

⁸⁰ Like many other authors, I will use the term "trace" to refer to that "repressed point of reference".

greater detail. I am greatly helped in this exposition by Vikki Bell's excellent scholarship on the matter.

In *The Psychic Life of Power*, Butler (1997b) starts by making a distinction between the subject and the person:

"The subject" is sometimes bandied about as if it were interchangeable with "the person" or "the individual." The genealogy of the subject as a critical category, however, suggests that the subject, rather than be identified strictly with the individual, ought to be designated as a linguistic category, a placeholder, a structure in formation. Individuals come to occupy the site of the subject (the subject simultaneously emerges as a "site"), and they enjoy intelligibility only to the extent that they are, as it were, first established in language. The subject is the linguistic occasion for the individual to achieve and reproduce intelligibility, the linguistic condition of its existence and agency. (p. 11)

If the person is a concrete life in the fullness of its potentialities of attachment, the subject is a discursive category to which the person comes to correspond by turning upon itself through the work of conscience. This turn, which Butler (1997b) calls a "tropological figure" (p. 4) in view of "trope" meaning "turn" in Greek, is the turning of a will upon itself, a "gesture" through which it attaches itself to an order of things (discourse) in order to ensure intelligibility and thus existence (p. 6). This is an act that institutes an ethical field. The attachment is found rather than chosen and comes with a price—it forecloses certain possibilities of desire and produces a "psychic effect"—an image of one's own psyche that is the trace of the subject's division against itself and can moreover perpetuate that division.

Simplifying greatly the foregoing to state the general relationship between the various orders of structure involved, we can say that, at a first rough elaboration, the process of subjection is a continuous turning back upon oneself whereby the person attaches to discourse and is confronted with a psychic image that is the result of that turn. In that process, the person ensures her survival but forecloses certain possibilities of attachment and being, as discussed above.

I will add that later the psychic image can mediate the linguistic turn. Therefore, an imaginary support is involved in the continuous attachment to discourse, open to the ravages of fantasy and possibilities of excess.

I will now, with Vikki Bell's help, refer to some of Butler's more specific writing on gender to detail some aspects of her performative account of the subject that are better developed in that context. In the following, identity and similar markers will roughly correspond to the psychic image in the general account.

3.3 Performativity of the subject

In an article on the performativity of gender, Butler (1988) talks about gender as an identity constituted "through a stylized repetition of acts" (p. 519). This is something that is characteristic of identities that are constituted through what Butler calls rehearsed performances under duress. As Vikki Bell (1999) has argued, in the case of gender as analyzed by Butler, such mimicry (rehearsed performances) is understood not so much in terms of motives of active cultural reproduction, but rather as a means for bare cultural survival (p. 152). Stylized norms of gender performance are surrounded by "disciplinary mechanisms" ready to respond to deviations through "shaming and punishments", a possibility of which the performer is conscious⁸¹ and which s/he most probably occasionally experiences as more or less veiled episodes of institutional violence. The fact that the performance of gender is accomplished "under duress" means that the rehearsed acts (and the occasional episodes of disciplinary violence) exercise a strain on the body that they engender: they tire it, train it in the production of elaborate corporal signs (Bell, 2006, p. 215) and even

⁸¹ I call the violence "institutional" in reference to the fact that it takes place within a social dispositif as Foucault, for example, uses that term (not necessarily in a formal institution).

form it (the acts quite literally sediment in the material form of the body⁸²). This strain is exiled from the realm of the symbolic, but manifests itself as melancholia, a sense of irresolvable grief for the foreclosed possibilities of attachment and desire that both preserve the engendered subject and threaten it with dissolution, marking the limits of its power and reflective capacity (Butler, 1997b, p. 23).

For my purposes, I would like to unhinge Butler's argument from its concern with the performance of a particular ideological category (gender) while keeping faithful to its commitment to stylized performance under duress as detailed above⁸³. Indeed, as we have seen above, in the *Psychic Life of Power*, Butler (1997b) applies a similar theoretical schema to the wider problem of the subject. What interests me in Butler's account is the two qualitatively different types of spaces that it presupposes: on one hand the imagined space of spontaneous ("free") but stylized and strained performance—a space where bodies and subjectivities ideally act and are ordered "all by themselves" (to again quote Althusser), and on the other hand the spaces of multiple disciplinary dispositifs that order bodies and subjectivities by more or less openly castigating them. The dynamics of this mis-recognized fragmentation provides the best theoretical framework for exploring the help relationship.

That fragmentation and its politics of visibility is at the core of what animates Butler's project. The denaturalization of gender involves for Butler belying the

⁸² This statement refers to both the body's physical form and (more importantly) to its cultural form as a habitual body—a body of spontaneous but ordered predispositions to certain practices and corporal styles (i.e. what Bourdieu calls a "socially-informed" body—a body crisscrossed by cultural vectors and concerted by their means with other performing bodies). Butler's account differs from Bourdieu's in its pointed focus on the strain involved in some cultural performances and on the consequences of deviance (object subjects). In Bourdieu, cultural performance often appears effortless, and deviance is virtually invisible. This fantasy of effortlessness is not accidental, as it will be discussed below.

⁸³ I will argue later in this chapter that in my analytical schema, *the capacity for autonomy* itself takes the place of gender as the ideological category that is performed. As seen in the examples in Section 3.1, autonomous subjectivity can and often is performed under duress. A failure to act all by oneself will exile the subject to a secondary subjection loop predicated upon the first. In that secondary subjection loop, the subject struggling to function by itself will perform its ability to function by itself.

notion that its performance is effortless (i.e. the mere process of an unharnessed (free) body blossoming into its essential being[sex]). By showing the strain inherent to the performance and the “failing” abject bodies that its ideal marks for social death, Butler reveals the body’s freedom-for-essence [sex] as an impossible freedom-for-constraint at the origin of the heterosexual discourse on the body.

The image of effortless performance splits engendered and abject bodies apart, positing the former as “functioning all by themselves” and disciplining the latter. The split is redoubled *within* the engendered body as it finds itself disciplined at moments of strain or as it “learns to gender”. The split between the stylized repetition of acts and the identity it performs is the trace that both conceals and signifies the strain involved in the performance (and the possibility of failure and abjection). To discuss the significance of that split coming into view, I shall refer to Aretxaga’s (2001) article on the strip-searching of female political prisoners in penal institutions in Northern Ireland.

Aretxaga (2001) has shown how a technique justified on rational grounds of safety (strip-searching) could only be applied thanks to a fantasized scenario of sexual violence that provided, in Rose’s terms, “the psychic glue”⁸⁴ for the social reality of that interaction. The phantasmatic scenario was betrayed by the excesses that punctuated the allegedly calculated interactions between the guards and the prisoners, excesses that “could not be contained by the symbolics of purposeful rationality” although they were intrinsic to the reality of the relationships presupposed by that rationality (p. 3). In Aretxaga’s argument, there is a clear visibility split between an imagined space where rational surveillance was performed and spaces where bodies were abused (although the space of sexual violence is

⁸⁴ Rose (1996) cited in Aretxaga (2001, p. 4).

inherent to that of performed rationality). The wedge between the rationality performed and the acts of performance is epitomized in Aretxaga by the blanket that the prisoners, in a political action, refused to take to cover their nakedness at the end of the search. The blanket, claims Aretxaga, is used not only to cover the bareness of the stripped prisoners but also to de-articulate their experience of violation by perpetuating the disassociation between the strip search imagined as a necessary rational security measure and the intersubjective dynamics that it presupposes (pp. 16–17). The rejection of the blanket performs an eruption of excess in the conscious rationalized scenario and thus enrages and embarrasses the guards that, ironically enough, find *themselves* naked in the shameful secret of their fantasy of sexual abuse that is thus rendered visible.

The reason why fantasy is so useful in Aretxaga (2001) for accounting for visibilities and invisibilities is that it “is a structure traversing the boundary between the conscious and the unconscious”⁸⁵. The (embarrassing) eruptions of excess as examined by Aretxaga are exactly eruptions from the unconscious of the guards and prisoners into their conscious, on the ground of the fantasy that “glues” the social interaction between them.

In my own discussion, autonomy itself is performed under duress. Here, the important caveat in Althusser’s (1994) analysis of the subject comes into play: the subject seems to act all by herself as she reproduces the material conditions of her own subjection. Here the wedge lies between the repeated acts and the seemingly free subject it institutes within ideology (between kneeling and believing in Pascal’s well-known example). I will use Aretxaga’s (2001) insights to analyze that wedge and its eruption into visibility in the case of the fragile subject.

⁸⁵ Laplanche and Pontalis (1996) cited in Aretxaga (2001, p. 4)

3.4 Spaces of fragile subjects⁸⁶

E. had been feeling unhappy lately. The issue was complicated by the fact that there was no particular reason that made her feel that way (this is a very frequent tale in ASH, some ASHers call such occurrences “atypical depressions”). Unlike in previous such episodes, she had decided not to hide it. Previously she would go through her usual activities putting on a happy face, but this time she decided to let herself be. The effects were surprising. After a short period of concern friends, even close friends, had started drifting away. One of E.’s pretty close friends had started to behave as if she were not there at all. Upon E.’s demand for an explanation her friend told her that “she knew that she was feeling bad, but that she could not help her”. E. was puzzled. It was ok that she could not help her, but why couldn’t she simply be with her? Despite E.’s protestations to that effect, her friend’s attitude persisted until one day E. feigned normalcy again. “And then ... she came back”.

Through her persistence in deviating from certain norms of stylized performance E. had become for her friend as a fragile person-to-be-helped. As the story shows, this was not a trivial shift. E.’s friend felt that as long as E. “was feeling bad” she could only interact with her on the condition that she cast herself into the subjective position of a helper—a transformation that E.’s friend considered steep (and disagreeable) enough to reject it outright. In as far as E.’s friend was concerned, E. was effectively ousted from the space of autonomously performing subjects (with its appertaining schemes of interaction) to a different imagined space of ordered

⁸⁶ In this section, I make the polemic choice of focusing only on the imaginary support and fantasies of the helpers. This is not to say that ASHers’ attachments are not predicated on imaginary support liable to the irruption of excess. The polemic choice is made to counterbalance the much greater attention given to this aspect of attachment in the people that are helped because of the assumption of a compulsory ontology of pathology qua Marsh (2010). I thank my advisor Ceren Özselçuk for drawing my attention to my disregard of the fantasies of the helped in this section.

subjects—subjects-to-be-helped, a space assembled ad-hoc around E. independently of her will and of the availability of the other actors presupposed by its scenario. Importantly E.’s seclusion to a different space, her erasure from the stylized surface of performance (presence) was noticed by E., but mis-recognized by her friend. Indeed, in the light of similar stories that I have collected, I would not be surprised to find out that E.’s friend mis-recognized her own distancing from E., that she was caught by surprise by E’s consternated question and that her remark was directed at E. wanting “more” than her due (i.e. help). E’s friend’s lack of moral qualms clearly shows that she did not consider herself at fault as a friend. Moreover, it is possible that she did not consider E. as being subjected to any disciplinary regime⁸⁷.

Excerpt 3.2⁸⁸

There are lots of entities that work to prevent suicide (suicide.org comes to mind.) ash enables suicide and I’m not talking about the trolls⁸⁹. A group in which people advertise for suicide partners, discuss methods, talk about how they’ve got the ticket for the bus and if one more thing goes wrong they’re going to use it is not a good place for suicidal people...

Besides, if someone is so bad off that s/he is thinking of taking his or her own life, than maybe a couple of days respite [this refers to forced hospitalization in a mental hospital] isn’t a bad idea

As the excerpt above illustrates, the space to which fragile people-to-be-helped are confined is imagined as a space of shattered subjects that need “respite”, a space of

⁸⁷ I ask the reader to keep in mind that I have made the effort of quoting typical situations that exemplify the logic of help. These are not marginal or especially unusual unless so noted. The personal nature of many of the selected stories is intentional. As the foregoing analysis has made clear, disciplinary spaces arising around ideological performance under duress need not rely on a formal setting or institution, but are typically ad hoc despite revealing regularities in their logic of action. This makes them all the more insidious, in line with the misrecognition and erasure of strain, a misrecognition which lies at the core of performance under duress.

⁸⁸ These fragments are from the posts of a non-ASHer on a thread that evolved into a discussion of the merits of ASH. The non-ASHer could post such manifestly non-ASH material without eliciting the indignation of the group because the initial thread was cross-posted (it was sent both to ASH, and to the non-ASHer’s group). Thus, a respectful discussion between a non-ASHer and an ASHer on the topic ensued

⁸⁹ Trolls are people that are considered to be intentionally disturbing a Usenet community although they mostly pose as legitimate posters. There are indeed intentional attacks on groups by people who embrace the identity of trolls (they energetically deny their troll identity *in* the community they are trolling, of course), some of these attacks are even concerted and organized by special communities where trolls congregate. But additionally, the label of “troll” has evolved into a Usenet insult that is dealt quite indiscriminately to persistent posters that are considered offensive or disruptive.

help and recovery where well-intentioned people direct the fragile subject towards his own benefit, which is outside of his autonomous reach—hardly a disciplinary space in the common-sensical sense of the word. E.’s protestation that she didn’t need help proved to be irrelevant to the way in which she was imagined. Any other scenarios in which people-to-be-helped might be imagined (like their interaction in the space of autonomous performance, mis-managed spaces of fragile subjects [“bad” mental institutions], ASH) acquire a dangerous, or even nightmarish quality that reveals the nature of the people-to-be-helped as fragile subjects, subjects to be handled with care—and thus subjects that not anyone can, is entitled (or/and willing) to handle. The sense of danger imbuing the image of people-to-be-helped together without supervision manifests more clearly in the following excerpt from Keith Hawton⁹⁰, a psychiatrist asked his opinion about ASH:

If these people were in my office, I'd say, 'Let me get this straight: You're looking for advice for dealing with hopelessness and depression from someone who's hopeless and depressed? How logical is that?' . . .

'These sites are dangerous . . . One of their founding theories is that they should be placed under no supervision whatsoever and feature no input from experts at all, and what you are left with is suicidal people counselling suicidal people, which is about as dangerous as it can get . . . A recurring feature of these sites seems to be the presence of voyeuristic people who get their kicks from encouraging others to commit suicide. There is definitely a seductive element. . . There seems to be no way of stopping or controlling them [“these sites”], just a sad, awful proliferation which will lead to the deaths of more people who, in an alternative environment, could be saved (Hill, 2003).

For Professor Hawton, ASHers are indisputably subjects-to-be-helped (saved).

Hawton cannot bring himself to understand how such subjects could possibly imagine themselves to be interacting in a space of autonomous performance (all by themselves). In Hawton’s opinion, ASH is quite simply a mistake arising from the

⁹⁰ A professor of psychiatry at Oxford University's Centre for Suicide Research at the time, Keith Hawton was interviewed by Hill (2003), reporting on ASH for *The Observer*. Professor Hawton’s words were quoted and discussed on ASH.

ASHers' mis-recognition of themselves as autonomous subjects, a mistake that, if possible, should be corrected at all costs. The pathos of Hawton's discourse on danger peaks in what seems to be an accusation against "these sites" long-term members of nurturing a perverse voyeuristic pleasure⁹¹. Hawton counterposes a safe "alternative environment" (that, not surprisingly, is left indeterminate) to the dangerous spaces of rambling autonomous suicidals, an environment in which the latter can be saved. Hawton is here blissfully unaware of the disciplinary nature of those alternative environments, or at least he is far from considering with any degree of seriousness ASHERs' protest against such environments on the basis of their nature as coercive and disciplinary. Quite literally he forgets that, as an ASHER neatly put it "We [ASHERs] are not in his office" and that this might be for some people a good thing. Hence he, like most people and unlike most ASHERs, uses the terms *saving* and *helping* without putting them in quotation marks.⁹² Conversely, I want to focus exactly on those quotation marks that professor Hawton and most people omit but which appear continuously on ASH—stalwart orthographic witnesses of the excesses that are inherent to "saving" and "helping" scenarios.

⁹¹ This argument was made (in explicit and specific terms) with a surprising spontaneous ease in countless forum discussions about ASH that mushroomed after the publication of articles on ASH in some high-profile media. I have all reasons to believe that such thoughtless accusations are counter-productive. Many of the most supportive denizens of ASHspace are long-term members. One might choose, however, to give Hawton the benefit of a doubt and assume that he is talking of people whom ASHERs call "predators" and whom they fight. Indeed, extremely unusual predators (including the type of voyeurism that Hawton is referring to) have attempted to ply their trade on ASH.

⁹² Please note that this passage is not an attempted argument with the opinions of Prof. Hawton, nor a personal attribution of intention. It is also not a personal attack, as he simply represents a typical instance of expert opinion. This exposition, made from the perspective of fantasy, has attempted to show slippages and excesses inherent to the help imaginary on the side of the helper. I have no doubt that Prof. Hawton desires the very best for his patients and does not want them to experience abuse or abandonment. The slippage whereby places where such abuse routinely happens comes to signify a place of safety is all the more significant for that matter.

3.5 Impoverished spaces of abandon

I shall start with revealing the excesses of “helping” and for that purpose I shall return to the example of E. and her friend (and the many similar stories that I purport to illustrate through it). E.’s enclosure in a space of fragile subjects might not have been experienced as a castigating act by E.’s friend; however, this doesn’t mean that her friend’s rejection did not have a disciplinary effect on E. The language of help⁹³ depicts an elated space of kindness, of enthusiastically embraced duties and responsibilities on one hand, and of innocent and obedient fragility and tasteful gratitude on the other. E.’s story brings into view the fact that reluctance to don the mantle of the helper and the resulting excommunication are inherent to such scenarios—in Aretxaga’s terms they are eruptions of excess. The spaces of fragile bodies turn out to be impoverished spaces, spaces of abandon—fact that didn’t fail to make an impression on E. and to induce her (at least once), through the action of an ad-hoc disciplinary mechanism (the rejection by her friend) of the kind Bell reads in Butler, to feign normalcy.

According to Hawthorn only “qualified” people can help, fact that transforms the help relationship in a “qualified” relationship and the space of managed fragile bodies in a qualified *and thus restricted* space. E.’s friend agreed with Hawthorn on the qualification issue (although they might have differed in details): she felt herself compelled to pass a qualifying threshold in order to be able to “help” and thus to be able to interact at all with E. (for she could not imagine her in any other subject-form). As we have seen, this qualifying leap was seen by E.’s friend as a drain and a burden and it occasioned an overbearing reluctance to undertake the helper role. This did not prevent E.’s friend from re-classifying E as a person-to-be-helped and from

⁹³ I am referring here to what might be called the glossy cover of the helping paradigm—a glossy cover codified, incidentally, in many moral codes.

encapsulating her thus in a lived space different and fragmented from her own—a space that remains, due to her rejection—empty of anyone’s presence but E’s.

Excerpt 3.3

If you recall in my last post I used the term "WESTERN DISMISSAL" ("you should talk to someone"). This "friend" had hurt me badly six years ago but she claimed to have learned that I was a good friend and that she was so very sorry for betraying my confidence and laughing at my pain. I stupidly accepted her apology and told her I would be a friend to her again. In the meantime she had written to me every now and then (she lives in Chicago). In 1999, I was diagnosed with aplastic anemia. To make a long story short, I felt sick and half the hair on my head fell out (and has not yet grown back). This illness has exacerbated my depression beyond fucking belief. ...

I kept my feelings to myself as I did not want to burden my "friends." Finally in Oct of last year, I told my friend in Chicago (via E-mail) about my disease and what it had done to me physically and emotionally. I told her that I think it would be better if I died. She responded via E-mail several days later after the computer indicated that it had been read (I guess she was too cheap to call me). She told me was that perhaps I should "talk to someone." Needless to say, I blew her off. I never responded and have not heard from her since.

—Lisa Marie

Lisa Marie’s post makes clear the well-known gripping cold effect the phrase “you should talk to someone” generally elicits from ASHers and makes visible the intense sense of abandonment, the more intense the closer one’s expectation of intimacy from the relationship, that pervades this exceedingly common kind of interaction. It is again made possible through the normative separation of fragile subjects into a separate space apart from that of autonomous subjects. It is also an example of qualification performing abandonment as an affective excess.

I will now use an example from outside of ASH to illustrate how truly impoverishing the effect of qualification can be. My friend B. had started research in the outpatient rehabilitation unit of a mental hospital that specializes in people that had been diagnosed and treated for schizophrenia. B’s initial interest was elicited by the fact that when asked to tell the stories of their distress the patients initially responded by talking of their symptoms, the medications that they’d taken etc., i.e. in

strict psychiatric terms. As trust developed between my friend and her research subjects, new topics were breached and qualitatively different stories started to be told. B's initial intention in her research was to listen to and analyze these extended stories of the patients' distress, internment and rehabilitation and to understand how the stories composed in psychiatric terms were concocted and why they had been given priority. B's supervisor protested the idea. She insisted that B. restrict her research to interviews with the doctors and to observations in group sessions. She was not to talk to patients, especially about their illness, as she did not have the expertise (sic: B. was a psychology/sociology major) and as it might cause the patients to regress to their earlier distressed state.

For B's supervisor, B's research subjects, regardless of the fact that they were officially "cured" and released, were fragile subjects that could only be handled by people having a stringent appropriate expertise. Although formally unrestricted in their movements, B's research subjects were confined to a space of qualified intervention, with the unwitting result that for B. they had to be reduced to silent ghosts that could only present themselves to B. by being represented by her. Insofar as I understand from B., the "qualified space" to which the patients are restricted is often tantalizingly empty.

Eruptions of such outright rejections as that of E. by her friend are rare enough to be slightly unusual. A story from ASH will show a much more common variation that will advance the discussion in a slightly different direction. (The poster was talking about the discrepancy between what people say they believe about mental illness and the actual way in which they treat the mentally ill):

Excerpt 3.4

Two or three weekends ago my car broke down and I just lost it. At one point, I actually laid down in the gravel on the side of the road and wept uncontrollably. I thought all I needed was a jump, but I was so mentally

exhausted and hysterical that I couldn't deal with calling a stranger for a tow, so called the cell of a friend who I knew had just recently been driving in the area, and who knows what I'm going through right now. He didn't answer. I then tried his house and got his wife. She had just gotten home, my friend was just behind her in his car. She told me to go lie down again for awhile until I felt better. To this day, neither of them ever called back to find out how I was doing, or whether I ever got my car started.

In this case, the friend whom the ASHer called did act in the quality of a helper as long as she was on the phone (she kindly told the ASHer to lie down and be calm).

However, she snapped out of that position as soon as she had the chance, again leaving the ASHer alone on a fantasized space of kindly managed fragile subjects.

Stories of brusquely interrupted kindness and of the tantalizing emotional effects of such episodes abound on ASH and (especially) on traditional support groups⁹⁴. The threshold of qualification (and more generally, the reluctance) afflicting the dynamic of the help relationship manifests itself for the ASHers in grotesque sequences of episodes of kind engagement and gross and sudden disengagement with the people in whom they confide their distress (in such cases the episode of engagement is often discussed in ASH as an eruption of selfish motives: the helper was keeping up appearances, formally fulfilling her duty, escaping from guilt, seeking self-gratification etc.), and in the visible reluctance coloring the help relationship. This reluctance is given various meanings on ASH, none of them benign: traces of the other's fear, indifference, exasperation or even contempt are often found in the relation and seen as motivating the reluctance.

⁹⁴ For each particular example of such a personal type of occurrence, the reader might object suggesting alternative ways of understanding the situation and this excerpt is particularly liable to that charge. We are driven to inquire about the context of the author's relationship with her friend. Alternative ways of understanding can be legitimate; however they do not delegitimize the way in which such events are made sense of in ASHspace, especially given the fact that they reveal patterns of regularities. The point is that these attitudes are typical features of the landscape of help. An alternative understanding that would place probable blame on an entire class of people (ASHers) would have to deal with question marks of its own, since such designation of entire groups of insidious subjects is often indicative of a misrecognition.

The psychological water-boarding (engagement-disengagement) to which the person-to-be-helped is subjected is thus inherent to the help relationship. The blistering, pulsating alienation transforms the space of fragile subjects into a desert where those whom it interpellates move forward, ever more waiflike, animated by the mirage of their right to kindness and salvation.

3.6 “Places of respite” or intensified abandon

Many ASHers are at permanent risk of being forcefully internalized into mental hospitals for expressing suicidal ideation, or for failing a suicide attempt. Such hospitals constitute the ultimate intensification of the help relation and of the imagined spaces of fragile selves. They are the environments that mental health professionals posit as safe alternatives to the danger of such places as ASH. The following are excerpts from tales of hospitalization on ASH:

Excerpt 3.5

The first time I was ever there, i sat down with the pdoc⁹⁵ and two other professionals. I started to ask questions and give feedback on my condition. A few minutes into the conversation the pdoc said something about "thinking too much" and "needing a break" and then dismissed me. The next thing i know this nurse comes up to me with pills. I never knew what they were....i never asked. I took them like an obedient patient. That was a monday morning...the next thing i became aware of was that it was wednesday. I was lucky that time to have a roommate who watched out for me. She filled me in on everything and after we had a good laugh because she said i walked like a penguin for two days. Scary though...i don't want to go through that again..

Excerpt 3.6

I mentioned my serious thoughts about this [suicide] and a few reasons, and that I was sort of pissed that this was all so difficult. I thought he should know that I had been extremely miserable, but I also made it clear that I had no plan and no intent to do anything yet. When he asked whether I would go to the hospital if I should ever have a plan and the intent, and I responded that this wouldn't make much sense, and besides, that I hated it there and didn't find it helpful when I was there before, he said I would have to go exactly there again. I said NO NO NO PLEASE NOT and started to cry, which confirmed his view that I was completely crazy. Three uniformed people

⁹⁵ Psychologist or psychiatrist

showed up and didn't let me leave the room. I wasn't allowed to talk to anyone else, like to the supervisor or the judge, to move, to go to the bathroom. I realized that trying to defend myself or to flee would make things even worse. I was just crying that I hadn't done anything and that they shouldn't do this to me or they had lost me, which made things worse as well. I was dragged to this mental ward like a serial killer, everyone was watching and no one helped me, they undressed me and searched my body, I couldn't keep important things or even lock the door to my room or the bathroom door, I was asked intimate questions about my thoughts all the time, I knew that everything I said could be used against me. After half a day I realized that I would have to be "cooperative" to ever get out of there, i.e. I pretended I renounced all thoughtcrimes and that I had come to love Big Brother.

And then there was this male nurse to whom I talked when I was very sad; don't want to say now in detail what he did and what he threatened if I should tell anyone and how safe it made feel. I still reported him the next day, and was told that this had been very "inappropriate", but he just got reprimanded, and I was being told to calm down, and I obviously couldn't leave. They told me my chances of getting out of there earlier were better if I should sign in "voluntarily", which would prove my understanding that I needed this kind of "help", so I did this as well, and they finally discharged me with a "treatment plan" that was fucking useless...

Excerpt 3.7

I spent 7 months there... it wasn't nice at all. They forced me to eat some fucking neurolept, thioridazine⁹⁶ (well, when i discovered this great invention i put the pill under my tongue instead of swallowing it and threw it into the toilet). One of the male nurses harassed the patients sexually, mostly just sexual talk when (of course he didn't rape anyone or anything worse)... mostly the treatment was like: "Do what we say and we let you go."

Excerpt 3.8

I spent time (two separate occasions) in a psych ward. The first time I was sixteen years old. My mother had me placed because I was in a bad spot at home and was talking of committing suicide. Had been thinking of it for several months. Spent five days in the adolescent ward. Was stripped, poked at and doped up. But hey, at least the food was delicious.

Excerpt 3.9

The second time was last year when I was talking of blowing my brains out. The pdoc had me committed to the local ward. A nasty scene I remember. I freaked out at the fact of having my freedom taken away from me. I had a violent tantrum. Most of which I don't remember. Four people held me down, or tried to, including a 300 pound social worker. The police and ambulance were called. Spent four days co-habiting with sex offenders, drug addicts, half-wits, and severely depressed/suicidal folks. Food was shitty too. Some of those people were also shitting on themselves. The ward stunk to high hell. Had one guy threaten to show me his little peter.

⁹⁶ Anti-psychotics

Ughhh... A boring experience. Just wandered the halls and slept alot. Put on paxil and some sleeping pill called halcion or haldon. Don't remember. A ton of arts and crafts classes. Bull-shit counseling sessions. A meeting with your pdoc for 3 minutes every other day. Ahhh... Total hell. Never again.

Excerpt 3.10

Not a lot to tell really, I just kept telling them the truth. Then one day I wised up and realized that if I wanted out I would have to tell them what they wanted to hear. I am not the sharpest knife in the drawer when it comes to stuff like that. The truth just always made more sense to me. I guess my mistake was thinking that they would see things my way. And when they didn't I got angry.

Excerpt 3.11

Personally, I think that the hospital is a waste of time. I've never left one feeling less suicidal than I was when I first go there. It's just a game that you have to play with them to get your freedom back. While you are there, you are treated like a criminal, with no rights at all. The first time, I spent four and a half days on a five minute watch with no smoking priviledges even. I had to have someone go to my car where it was parked several miles away and bring the lithium that was in the glove compartment to the doctor before he would even consider discharging me or even taking me off the five minute thing. You can imagine how embarrassing that was trying to find a friend to go get in my car and bring that stuff to the hospital. The last time, someone even went to my car to remove all sharp objects before I could leave. The whole thing turns into a game of seeing how long it takes you to convince them that you are *sane*.

I have quoted here a great amount of material with no commentary in order to allow the reader to immerse herself in the pervasive imagery and emotional style underlying all six of these different stories from six very different authors. The intensification of the help relation (into “saving”) in mental wards exacerbates in a grotesque fashion its two poles of intimacy and alienation. On one hand, bodies and minds are handled with an enormous familiarity (“motherly” and abusive nurses alike shape them, move them, reward or castigate them, subject them to time-tables and disciplinary regimes with a surprising freedom of hand). On the other hand, the very same intimate handling exudes a chilling alienation, separation and indifference (and worse in the case of abuse) that can acquire Kafkaesque proportions. One might have expected that the intensification of the help relationship—the patient’s

uninterrupted reception in the helper's intimacy—would have enriched the patient's imagined space. What happens instead is that the helper's intimacy reveals itself as performing alienation. This intimacy seems to revel pedantically in the unintelligibility of its ends and in the randomness of its actions. Indeed, it performs itself as the visible, intrusive intimacy of the helper precisely through the unintelligibility and randomness of its uniformly ordered practices for the non-uniform patients on which they are forcefully superimposed. This randomness and unintelligibility pervades the place as seen in ASHers' accounts: bodies are mixed up in defiance of their formerly constituted social identities, they are stripped, poked, watched, restrained, medicated, beaten, or violated in accordance to an alien logic, they are subjected to entirely novel and initially indefinite rigid time-tables and norms of performance (including verbal performance). The result is an experience of utter abandon.

In the next section, I will examine the ideological environment of the mental hospital to analyze how it effects changes in the patient through a secondary process of subjection. We will also see that the logic of secondary subjection extends beyond institutional walls to informal help settings. Foucault, in the last chapter of his *Madness and Civilization* expresses this dynamic beautifully: madness, now judged by its acts rather than by its intentions, is trained to disguise itself and to deny its own disguise⁹⁷. If the psychiatric process (or any helping process) is successful, then through the rehearsal a-la-Pascal of initially meaningless acts madness (here unhappiness and/or suicidality) will successfully perform itself as inexistent.

Such a successful performance requires, as I have discussed above, the obliteration of the wedge between a successful rehearsal of stylized acts and the

⁹⁷ Foucault, 2001, p. 238

content of one's presence—an obliteration whose symptom is the continuous abuse (that becomes manifest in episodes of phantasmatic excess) of people-to-be-helped in mental hospitals and without. ASH, by hosting such stories, plays a role in articulating that wedge, bringing it into view and making it possible for an ASHer to distance herself from her own acts of stylized performance at the hospital (even when she acts like a model patient) to reject the kind of recognition, steeped in the ideology of the clinic, that Chamberlin (1977) exposes as disdainful, and claim her experience as a person abandoned in a space of fragile subjects.

Like the refusal by the female political prisoners in Aretxaga's (2001) study to accept the blanket offered by the prison guards after arbitrary strip-searches conducted with obvious abusive excess, ASHers' refusal to interiorize the abandonment and intimate violence exuded like a dark liquid by the reality of the help relationship allows them to gaze back at the purportedly benevolent Subject that interpellates them in the ideological encounter, revealing embarrassing secrets about its embodied desire and limiting the reach of its constitutive power by articulating the split at the heart of the fragile subjectivity that it effects.

3.7 Secondary subjection

When we consider the subject as an ideological category, we recognize that it opens up an ethical field. Following Althusser's (1994) notion of a material ideology, the minute repeated practices that the subject is engaged in make him into a good subject or a bad subject depending on how such practices embody the subject's imaginary relationship with an order of things—whether they affirm the Law or invert it⁹⁸.

⁹⁸ The Law, imaginary etc. are here used with reference to a Lacanian understanding of psychoanalysis. The imaginary relationship should not be understood straightforwardly but rather as a support for intelligibility with important practical consequences. That is to say, a criminal does not necessarily have to take up her entire existence with reference to her having broken the law, however

In the previous sections, I have shown how fragile subjects can be removed to a distinct field of practice subject to a logic of action that is very different from that which governs the space of autonomous subjects. I have argued that, in line with the structure of performed subjectivity as theorized by Butler, Bell and Aretxaga, the disciplinary spaces populated by subjects that temporarily or permanently fail to perform themselves as such are imagined separately and governed differently though such spaces are often ad hoc, appearing and disappearing as the need is felt rather than permanent and demarcated by physical or other boundaries as we would typically expect of institutional entities, and despite exhibiting clear regularities that are traceable to the imaginary relationship at the core of subjection. We have seen that institutionalized spaces delimited by much clearer boundary processes also exist, the logic of help intensifying in such spaces.

This configuration entails a puzzle that we have not yet tackled: the existence of two fields of practice in the context of a material understanding of ideology indicates the existence of two separate, though related ethical fields. This is what Chamberlin (1977) means when she talks of the difference between being a good patient and being a competent person. A similar intuition lies behind the elaboration of the notion of a career of a mental patient by Thomas Scheff (1999) and Ervin Goffman (1961, pp. 125–171). Such a career, once embarked upon, can be extremely resilient to later attempts to put an end to it, illustrating the existence of distinct fields of action organized through distinct logics of social practice.

her landscape of action is to a great degree organized around that circumstance. Moreover, especially in formal situations, her criminal background would often function as an initial sketch of her character—an initial “handle” on what kind of person she is, to be detailed through further acquaintance. Such further acquaintance might serve to eventually supersede the person’s relation to the law as the primary way in which she is understood, but this would require a favorable set of circumstances and significant effort. Thus, the criminal cannot choose not to engage with the inverted image of the Law through which she is subjected. She can however engage with that image in a number of different ways—e.g. in repentance or in defiance or in trying to devalue the law by, for instance, subscribing to an alternative code of thieves.

One of the best sources that will allow us to approach the problem of the relationship between the two ethical fields (that of autonomous and fragile subjects) is Allan Young's *Harmony of Illusions* (1997)—a study of a medical center of psychodynamic persuasion treating people with PTSD and producing knowledge about them. Young (1997) shows how the ideological environment of the clinic is structured around completely different ethical norms—couched in terms of therapeutic categories—than those governing the world outside its boundaries (pp. 188–223). Thus, disclosing painful moments and working through them is a positive ethical norm that the patients are expected to conform to. The patients' behavior also becomes liable to interpretation in terms of categories such as resistance, acting out, abiding by limits, splitting (the latter predicated on a theorized ontology of PTSD in which the underlying pathology is assumed to be a splitting of the traumatized self). Acts that would not draw notice in an outside setting can easily register under one of the clinical categories. Thus, the patients' departure from the group therapy setting to use the bathroom can be designated as resistance and become the object of a protracted struggle between the patients and clinicians over what is acceptable (pp. 196–197). The regulative, calculative fervor of such reckonings of resistance (as enforced by the therapists) is illustrated by examples of obsessive determination in making ideological sense of what would be trivial behavior incapable of bearing much meaning in outside settings. Thus, a patient that simply wore his earphones on his neck during group sessions (it was against the rules to wear earphones on such occasions) was repeatedly challenged and eventually brought in front of a committee with disciplinary functions in the clinic (p. 197). The urination crisis escalated to a ridiculous degree of aggravation (a new rule that patients should relieve themselves in the room) (p. 196). The clinicians would not back down in such situations, a

manifestation of pedantry that is a well-known excess of the psychiatric help relationship (see Chamberlin, 1977 for numerous examples).

Young's (1997) description impresses how distinct the practical and ethical field of such an environment is. ASHers' stories of hospitalization contain less detailed accounts to the same effect. Decentered activities perceived as boring, but mandated by therapeutic ideology are a staple of hospital stays.

How does the relationship between the two ethical fields (inside and outside the institution) appear from the perspective of the help ideology pervading the center in Young's (1997) book and other such environments? In the medical center studied by Young, the aim of treatment is "the restoration of an integral self" (p. 201) by integrating the split-off traumatic part. Such recovery is understood to reopen avenues of self-knowledge and the patient's ability to relate (p. 201). Therefore, recovery, synonymous as it is with discharge, is at the same time a restoration of the patient's autonomy to an acceptable though not complete degree. From the perspective of material ideology, the minute practices of the everyday in the ideological environment of the clinic are meant to perform the patient's capacity for autonomy, upon the restoration of which he is returned to the space of autonomously performing subjects⁹⁹ from whence he had been expelled in the first place. Therefore, we can envision two connected loops of subjection—a primary circuit where the autonomous subject is ideally performed and a connected secondary circuit where subjects who fail to act all by themselves ideologically perform their own capacity to do so.

Both loops of subjection are subject to the same kind of possibilities: direct and inverted reproduction of the constitutive image, ad hoc disciplinary spaces, the

⁹⁹ The picture is more complicated than that since most discharges actually envision the continuation of the help relationship in a less intense form.

possibility of abjection and finally the possibility of driving a wedge between the execution of minute material practices and the production of the psychic ideological effect.

Thus, in the secondary loop, one can be a successful or unsuccessful patient (which, as Chamberlin 1977 has reminded us repeatedly, has very little to do with the person's own normativity out in the world), one can be disciplined for transgressions, fall into abjection (custodial care) or successfully graduate in one's career as a patient without, as much as that is possible, incurring the expected ideological effect of the dividing practices of treatment. The last option, favored by ASHERs during their stay in hospitals, requires the decentered performance of the required verbal and material acts while thwarting their performative effectiveness through an attitude of hidden cynicism.

Secondary logics of subjection also pervade informal, ad hoc help spaces. Thus, the appropriate expression of emotions such as sadness or anger can prompt threats to be hospitalized from ASHERs' spouses or parents. Normal everyday activities are compulsorily reformulated in therapeutic terms ("even breathing, the air itself is therapy" as one ASHER put it). The excerpt below illustrates a more trenchant but quite common type of consequence of secondary subjection:

Excerpt 3.13

for example, I have one acquaintance who told me a couple of years ago that I should try ECT. Since I chose to NOT do that, she has since written me off as someone who "doesn't really want to feel better."

Both intimate violence (illustrated by the helper's self-assured feeling entitlement in her unqualified suggestion) and abandonment are in their typical, illustrative form in this example. The phrase "doesn't really want to get better", one of a whole class of similar ones and uniformly despised on ASH, materializes in a nugget of faux wisdom the logic of secondary subjection. Unlike what was theorized by Marsh

(2010, pp. 59–62), a fragile subject is not absolved of moral responsibility, rather that responsibility is transferred to a different ethical plane and organized by a different field of action. In this particular example of failed secondary subjection, the helper imagines an inner pathology within an inner pathology: a subject who is not well *should* desire to get better and, in not being able to profess that desire, it is deficient. The deficiency doubles as a moral failing—the fragile subject both doomed to her fate and responsible for her own doom. The grotesque affective tenor of such ideological monstrosities is recognized as such and rightly mocked on ASH.

3.8 Other consequences of the logic of help

In consequence of the logic of help delineated in the sections above, the help relationship appears brittle and unreliable, liable in the best case to interruption and arbitrariness, in the worst case to abuse. An ASHer expresses poignantly how trust in a help relationship is irreparably imperiled by a surfeit of need:

Excerpt 3.14

there is no one i would ever trust completely, i dont think, so for me it wouldnt help if i had that. no one who i would trust if they promised me that i could. people arent trustworthy about certain things, it isnt there fault, would you trust someone to hold a grenade for you, *would you trust someone to always be there for you when you know you'd need them too much?* [emphasis added]

An important common figure on ASH that has managed to dodge my exposition in this chapter is the helper that unwittingly inverts the image of help in a misrecognized attempt to satisfy her own narcissistic needs. As Maltzberger and Buie (1996) perspicaciously observe in the context of therapy, “the three most common narcissistic snares are the aspirations to heal all, know all and love all...such gifts are no more available to the contemporary therapist than they were to Faust” (p. 275). Helpers in the throes of such Faustian yearnings can turn extremely abusive in the

face of failure, like the one who assailed Kafkaesque and occasioned Excerpt 1.3.

The following is an example of unintended heteroglossia in the group in which an inverted helper unwittingly exposes himself as such. The helper was aggressively blaming everyone from the very beginning of the interaction; he was not aggravated by the other posters:

Excerpt 3.15¹⁰⁰

OMG. So, you think people don't care enough about you, so you're going to cut yourself, and emotionally blackmail them about it?

This is what I'm talking about, Emma. Pure egotism. And egotism of the worst kind.

You have a bf, and you're doing a nice degree in college (physics, what I also did, btw).

If you're a reasonably good looking, young woman in a Western society, you have no reason to be depressed. Everything is handed to you on a plate, because you have tits and a pussy.

You will on average live longer, not have to work as hard, be less likely to be depressed, be physically healthier, have money spent on you as opposed to spending it on others, be far more likely to get custody of your kids if you ever divorce, not have to put any effort into seducing the opposite sex, etc. ...

Add to this the fact that you're obviously not a moron. You should be content.

All this "depression" stuff is just a device to get even more attention than you would otherwise.

I despise you for this. [emphasis added]

> So Henry, now that we can agree and have a nice civil conversation, > what brings you here? I recognise your name, but only vaguely.

I'm not here because I'm suicidal. I'm just here to help. [emphasis added]

All this is not to say that all ASHers are dismissive of all help. As Excerpt 3.14 illustrates, help is in fact needed and ardently desired by many, but considered improbable given the possibilities of action spanned by current logics of help. ASHers helping each other and the ethic of listening effective in the group (as described in Section 2.2) are considered in a positive light.

¹⁰⁰ This is a response to the previous message. By Usenet convention, ">" at the start of the line indicates text to which the current author is responding.

Perhaps the order of the day is not to renounce help entirely, but to take small steps towards the gradual collective constitution of more satisfactory modalities of help that, mindful of their intrinsic tensions, would be ever vigilant against the encroachment of the subject on the person that, given the current state of affairs, they will necessarily find themselves liable to. Most importantly, it is clear that if “help” is to become worthy of discarding its scare marks, it would need to become much more ready to suspend itself when necessary, with all of its theories and logics—whatever those might be at any moment—reconnecting in that modesty to the richer spring of an ethical relationship predicated on full personhood. This entails surrendering the Faustian gifts mentioned by Maltzberger and Buie (1996) cited above—a loss greatly mitigated by the fact that they were never in our possession to begin with.

This highly unsatisfactory conclusion is partly due to the limits of what can be done about the state of “help” in mere linguistic practice. The material presented in this chapter helps “shew” a way, as Wittgenstein would put it, but cannot provide a recipe, let alone a ready solution. I am content to acknowledge the limits of my contribution rather than succumb to the siren call of a misguided formulaic recommendation as always all too eager to see itself on the page. As Wittgenstein (1953) has taught us, there is a point when there is nothing more to say and one must be content to simply do (para. 217).

CHAPTER 4

THE TOUGH BODY AND SUICIDAL CONSUMPTION

Razors pain you;
Rivers are damp;
Acids stain you;
And drugs cause cramp.
Guns aren't lawful;
Nooses give;
Gas smells awful;
You might as well live.

—*Résumé, Dorothy Parker*

4.1 The easy way out?

Goddammit, suicide is hard when you get down to the technicalities of it. I wish I owned a guillotine.

—*in a message on alt.suicide.methods (ASM).*

One of the biggest surprises in store for the uninitiated visitor of ASHspace is realizing how difficult it is to kill oneself. It would seem that given a firm desire suicide is easily achievable. Indeed, in anti-suicide literature and some counseling-lore suicide is touted to be “the easy way out”. This phrase is the source of much ridicule and sardonic amusement on ASM, a discussion group dedicated exclusively to the meticulous planning of suicide attempts and of necessary preparations¹⁰¹.

ASHers are well aware of the formidable obstacles barring one's way to a successful, responsible and dignified suicide, the incredible number of artifices to which one has to subscribe in order to perform it and how easy it is to fail¹⁰². One of the reasons for

¹⁰¹ alt.suicide.methods (ASM) is a sister newsgroup of ASH. It is by and large frequented by the same people, being the most closely affiliated non-ASH group in ASHspace. For all intents and purposes, ASH and ASM can be considered two different branches of a single discussion space.

¹⁰² Three main factors can derail even well-planned suicide attempts: last-minute anxiety and hesitations, physical reactions (vomiting, withdrawing the gun's barrel in the last minute etc.) and what I call the tough body phenomenon. ASM is designed to plan against all of these, as such misses can leave one alive but seriously damaged or mutilated. I will focus on the third factor here.

this is what I call “the tough body phenomenon”, which shall be one focus of this chapter.

“The human body is a tough bastard”—says a poster on ASM. Indeed, when one watches this group of people on ASM tensely and meticulously planning every detail of their self-deliverance, sometimes for months and years at an end, one gets the impression that they are people fighting against their own bodies that have rebelled against them in their monstrous, almost inhuman toughness and capacity to regenerate and elude death—a striking contrast to the “fragility of life” imagined in other social contexts, and especially through the medical discourse. Here is an illustrative dialogue on a suicide group:

Excerpt 4.1

>Hey S. ... I don't think that I will ever understand why people ask for help to >die.. that is if they are serious. In asking for help to die...you are in essence >asking for help to live. The human body is a very delicate thing, and as you >know unless you are ignorant, that it is VERY easy to kill yourself. If you don't >know.. One bottle of Asprin, or any over the counter drug [...] will kill you.¹⁰³

sigh Another newbie....Take if from me *babe* [the first poster used this expression], one bottle of anything OTC [over-the-counter] will definitely NOT kill you. Not even if you take two bottles, and wash it down with a bottle of peroxide, on top of whatever booze you've indulged in for the evening. Just very, very sick.

Indeed, over-the-counter drugs will usually not do. Even more thoroughly-planned efforts with more potentially lethal drugs can easily fail. In a thread on ASM, a relatively new reader gives a detailed recipe for an overdose “cocktail”¹⁰⁴ of medicinal compounds and asks for feedback. The response from a well-informed member is not comforting—(s)he will probably survive, although (s)he will sustain liver and kidney damage: (s)he needs to plan better.

¹⁰³ By Usenet convention, “>” is used to cite part of another author’s message, typically before responding or commenting.

¹⁰⁴ This term is used on ASM.

In fact, most other basic suicide methods ingrained in popular imagery¹⁰⁵, or acts commonsensically believed to lead to death are unlikely to succeed and many ASHERs refer to their first suicide plans and attempts as “naïve”. The uninitiated might be struck by these typical stories about first attempts on ASM¹⁰⁶:

Excerpt 4.2

My first and only "real" suicide attempt was almost 14 years ago, when I was 19; I got really drunk for the first time in my life and spontaneously decided to throw a hairdryer into the bathtub, and when nothing happened, I tried my father's electric razor, and then my mother's electric curler, and still nothing at all, and my parents were just wondering later why all their stuff was broken, but unfortunately, I still wasn't, at least not physically. I then considered sleeping pills repeatedly for many years, but was always afraid of ending up as a drooling vegetable, and now I know of course that I probably would have only gotten very sick for some time or so. Last year when I got more serious about this than ever and I finally had internet access, I researched almost everything one can think of, and have come to the conclusion that suspension hanging is the only thing I could do in any sense of the word that has an at least 80 % of working, doesn't cause too much agony and mess and doesn't involve other people¹⁰⁷

Excerpt 4.3

In the span of 4 years, starting when I was 15 I have taken pills (over 300 including 25t3's) with no damage, taken pills again (cutting wrist to sweeten the deal) to no avail. I believe there were some bag over the head attempts in the pward [mental ward—"p" from the root "psych"]. But my crowning achievement would have to be my antifreeze incident. Downed 400ml's, went to sleep, woke up once to puke. Then somehow broke down the wall of junk I had barricaded myself into my room with. Went outside for a smoke thinking nobody was home, my sister caught me, and I couldn't pass for being drunk cause I couldn't even light a cigarette. ... I had 15hrs alone with it in me, I needed longer I'm not sure how long you would need but I was fairly close.

¹⁰⁵ There are some exceptions, most notably suicide by using a gun. In ASH/ASM the latter is considered a reliable method (despite the fact that in some cases people unconsciously attempt to withdraw the barrel in the last moment horribly disfiguring themselves ["shooting their faces off"], but staying alive), although many reject it on account of being “messy” and thus causing great distress to the one who finds the body. Methods such as jumping off buildings or in front of trains are usually similarly dismissed on ASH because of the public commotion and distress they would cause.

¹⁰⁶ As any suicidal that has “done the research” knows, improvised methods using electricity are highly unreliable.

¹⁰⁷ Suspension hanging is also not as easy as it sounds. Without going into unnecessary details—a bad knot, inappropriate rope and a weak point of suspension is what derails many “naïve” suicide attempts by hanging (not to mention the risk of being found and “saved”). This particular poster had been researching suspension hanging for a very long time and performed numerous controlled experiments, as her post history stands witness to. There are numerous technicalities involved in order to make sure one dies as surely, quickly and painlessly as possible by this method (it is possible to obtain a quite painless death) and that the corpse is not ghastly.

After a short time on ASM one gets to know that under typical circumstances options for a viable suicide are fairly limited, that most require some luck¹⁰⁸, skill and/or preparation and that almost all are fallible.

4.2 The material technologies and social techniques of the tough body

The toughness and fragility of bodies cannot be accounted for in traditional biological terms. Most ASHers' (and their detractors') social landscapes include a large variety of social technologies and ordered practices directed at the body that cannot be thought of separately from the material fabric of their bodies, for they act in and have concrete effects on that material fabric. To use Margaret Lock's inspired expression, the symbolization of bodies as tough/fragile and the tendency to represent bodies on the extremes of this symbolic continuum in ASM and elsewhere can only be analyzed coextensively with a *local biology* (Lock 1993, p. 373) of those bodies, a biology inextricably linked to the effectiveness of the material locality in which those bodies operate, including the ordered material permutations effected by the selective use of particular body practices, technologies, and techniques. Of such practices and technologies, the effects of two are especially important for my argument here: safety regulations and saving.

The dweller of "modern" -scapes does not usually give himself full account of the multitude of safety nets cocooning his existence. The development and spread of drug and product safety regulations over the last couple of decades account for

¹⁰⁸ I put "luck" on the list because of differing availability of methods in different places and for different people. In the USA people can easily get a gun unless they have an involuntary commitment in a mental ward on their record. In Mexico and some other countries drugs prohibited or heavily-restricted elsewhere can be found (most notably sodium pentobarbital, a drug called by an ASHer "the holy grail of suicide", because of its capacity to induce a certain and very peaceful death. Besides its heavily-restricted medical use as a sedative, Pentobarbital is used in legal euthanasia and in the euthanasia of animals)

much of this economy of safety¹⁰⁹. At present, in the countries where most ASHers live the life hazard of drugs, products and situations is monitored systematically by special institutions that have the authority to significantly influence the landscape of the everyday by removing from it or confining to restricted spaces things that are somehow considered to be unsafe¹¹⁰.

Thus, the safety (and the scarcity of exploitable life hazards) in ASHers' landscapes of the everyday does not arise spontaneously but is rather actively and systematically molded through such techniques. Poisonous substances (such as KCN for example) are restricted to use by specialists, similarly drugs that are found to result in many accidental or intentional overdoses are denied over-the-counter status and subjected to more or less lax prescription requirements or withdrawn altogether¹¹¹, product manufacturers are driven to minimize consumer risks in the case of any (even unorthodox) customer interference with the product, access to tall buildings and high bridges is restricted in various ways to those that have a functional need to use them and these places are monitored more closely by the police etc. Contraptions such as, for instance, safety nets placed below bridges are developed.

¹⁰⁹ Although minimally elaborate standards and laws attempting to regulate the safety of food, drugs, products etc. have started appearing in the earlier 20th century, since the 1960's the elaborateness, reach and effectiveness of such standards and laws have increased manifold. The development of toxicology and of food chemistry has had a large role to play in this.

¹¹⁰ In the United States, the Consumer Product Safety Commission (CPSC) collects data from hospitals on injuries caused by consumer products (through the National Electronic Injury Surveillance System shortened NEISS) and by other incidents (NEISS-All Injury Program, abbreviated AIP). CPSC develops and enforces safety standards, and is authorized to issue emergency recalls for products deemed hazardous. The Food and Drug Administration (FDA) has similar functions in regulating the safety of food and pharmaceuticals. Similar institutions exist in other countries. Data such as that gathered through NEISS, NEISS-AIP etc. is also used in wider scholarship. This indirectly affects policies, including suicide prevention initiatives, inspired by such scholarship.

¹¹¹ Also in such cases, replacements or chemical variations reducing the undesired effect (in our case lethal toxicity) are actively researched by the drug companies. The effectiveness of the system is quite impressive and it is the reason why the poster in Excerpt 4.1 can say with confidence that nowadays "nothing sold OTC can kill you" (just a few decades ago sodium pentobarbital was available OTC in the USA and elsewhere).

The social institution of life saving and the medical technology through which its goals are mostly accomplished provide a second safety net¹¹². Most unsuccessful suicide attempts recounted on ASHspace include an episode of “saving”, and in many cases the attempt would have resulted in death without the intervention. The poster quoted in Excerpt 4.3 was “saved” only due to an extensive medical procedure. I will quote here the bits of his/her story dealing with this procedure as they are a good illustration of the technological paraphernalia that proved to invisibly prop up his/her “tough” body:

Excerpt 4.4¹¹³

After a fun *ambulance ride* I was in a pink room for a while, *some fun stuff happened there*. Passed out, don’t remember the next 3 days woke up with a *dialysis tube* in my groin and a creatinin (sp?) [the poster is not sure about the spelling] of over 1400 then had a fun *3 weeks of imobilization in bed*, threw everything I ate up, couldnt walk *couldnt go to the bathroom*, got *pneumonia* from throwing up and inhaling it before pulling out my own intubation tube. It was quite the ordeal and I wouldn’t recomend this method” [emphases added]

The amazing pervasiveness and outreach of saving technology impresses itself profoundly on the posters on ASH and ASM. It is fairly easy to be “saved” and it is difficult to plan against it with any degree of confidence for any but the shortest period of time. Stories of “saving”, especially from serious attempts that can inflict great damage upon the body, are almost always stories of horror and anxiety.

This double safety net, a veritable system of production of safety, is in great part responsible for the tough body that one encounters in ASM. In a society that disqualifies suicide politically, a publicly available suicide technology is unthinkable, so people desiring to commit suicide (including actively suicidal ASHers) have to

¹¹² Medical technology is not all there is to saving. Saving also includes the general disposition to heed unusual situations (such as unusual sounds or absences, for example) and intervene if needed, the actions of the police (missing person calls and action on suspicious incidents such as the presence of a person on the roof of a high building) and many other techniques and procedures, some formal, some informal. A *third* safety net is provided by psychological techniques of suicide prevention. I will not devote a paragraph to them here because they have a more indirect influence on the materiality and symbolization of the body.

¹¹³ This is a continuation of the message in Excerpt 4.3.

adapt to this idiosyncratic aim artifacts, situations and technologies integrated in social spaces that are imagined and ordered on the basis of rationalities very alien and often hostile to that aim. In fact, ironically, many of the materials used for self-deliverance (drugs) are in fact integral elements of the functional space of saving (i.e. a space whose imagined rationalized effectivity is exactly to thwart death, including that fain effected by the suicidal act) and can be dislodged from that space only through elaborate tactical means¹¹⁴.

The toughness of ASHers' bodies is the result of their attempts to use the resources of a system producing safety for ends directly opposed to that system's rationality—in such attempts, ASHers' bodies are imprinted with the effectiveness of the system in and through the very act of opposing it¹¹⁵.

An analysis of this phenomenon in terms of Michel de Certeau's (1984) account of production and consumption will serve to better explicate how the material organization of social action directed at suicide shapes the suicide attempt as an eminently tactical act, indeed as a form of consumption in Certeau's understanding of the term, and how this motivates ASHers' bodily experience and practice.

¹¹⁴ Such means include manipulating and forging prescriptions, getting the doctor to prescribe a certain drug through false health complaints and, most importantly, ordering drugs from a handful of online pharmacies whose ordering systems have exploitable loopholes. Such tactics and more are discussed and coordinated on ASM.

¹¹⁵ This allows us to better understand the relation between the tough body in ASH and its much more widespread counterpart—the fragile body imagined and lived in many and various other contexts. If an attempt to thwart the production of safety embodies toughness, then moving along the lines of that production can embody fragility. Bauman (1992) has analyzed how consumption techniques structured around the ethic of fitness can constitute a fragile body (with the accompanying anxiety) by constantly measuring it up against a plethora of operationalized norms, standards and measures (pp. 77–80). Similarly, the many physical and practical demarcations that are used to ensure safety become signs of danger (think of the explosion of physical warning signs posted in public spaces for the most trivial reasons) producing hazard as an echo. Likewise, the many biomarkers monitored in numerous medical screenings and modulated through therapeutic regimes can be the source not only of a sense of accomplished care of one's body, but also of a looming threat of illness barely kept at bay through strenuous effort.

4.3 Suicidal consumption

In *The Practice of Everyday Life*, Michel de Certeau (1984) elaborates on the distinction between strategic and tactical possibilities of social action in terms of how the two relate to the power relations determining their context:

I call a strategy the calculation (or manipulation) of power relationships that becomes possible as soon as a subject with will and power (a business, an army, a city, a scientific institution) can be isolated. It postulates a place that can be delimited as its own and serve as the base from which relations with an exteriority composed of targets or threats (customers or competitors, enemies, the country surrounding the city, objectives and objects of research, etc.) can be managed...

By contrast with a strategy (whose successive shapes introduce a certain play into this formal schema and whose link with a particular historical configuration of rationality should also be clarified), a tactic is a calculated action determined by the absence of a proper locus. No delimitation of an exteriority, then, provides it with the condition necessary for autonomy. The space of a tactic is the space of the other. Thus it must play on and with a terrain imposed on it and organized by the law of a foreign power. It does not have the means to keep to itself, at a distance, in a position of withdrawal, foresight, and self-collection (Certeau, 1984, pp. 35–37).

Thus, for Certeau (1984), a strategic actor acts in her place and from her place, wielding coherent action schemas often aligned with institutional lines of force.

Strategic action can survey its own field, accumulate its effects, and transform uncertainties into “readable spaces” (p. 36). The latter feature makes technology possible, by which I understand action that intends the production of reliable outcomes given a relevant set of initial conditions. By contrast, tactical acts are impromptu growths on the field of practice polarized by pre-existing strategies.

Tactics are shifting and mobile, characterized by the “indeterminate trajectories” they trace on the field (p. 34). A tactic is an art that takes short-lived advantage of oversights in strategic rationalities and the tensions between them to unexpected effect, but “what it wins it cannot keep” (p. 37). Certeau's eminent example is *la perruque*—employees' illegitimate uses of company resources, such as spending time marked for production for writing personal correspondence, or using a workplace

instrument for a personal project (p. 25); Certeau describes this practice as “the worker’s own work disguised as work for his employer” (p. 25).

The distinction between tactic and strategy is introduced by Certeau (1984) as part of his attempt to theorize consumption, which he considers a particularly elusive phenomenon:

...a rationalized, expansionist, centralized, spectacular and clamorous production is confronted by an entirely different kind of production, called "consumption" and characterized by its ruses, its fragmentation (the result of the circumstances), its poaching, its clandestine nature, its tireless but quiet activity, in short by its quasi-invisibility, since it shows itself not in its own products (where would it place them?) but in an art of using those imposed on it. (Certeau, 1984, p. 31).

My favorite example from Certeau is that of a child doodling on her schoolbook (p. 31). This example highlights the errant trajectories that can be traced by consumption and the degree to which a product can be used in a way that, from the perspective of the producer, defies the logic of its design diverting it in unexpected and often undesired ways.

For Certeau (1984), consumption and production should be understood as fundamentally different modalities of action (roughly redoubling the distinction between tactics and strategies respectively). Certeau sees consumption as fundamentally durational¹¹⁶—a mode of practice “indissociable from particular moments and ‘opportunities,’ and thus irreversible” (p. 35). Conversely, production relies on the organization of space and on a meticulous accounting of its own spatial traces, reflecting the situated nature of strategies.

¹¹⁶ Certeau (1984) does not cite Bergson and uses the term temporal instead. However, his discussion of the concept of trajectory on page 35 is clearly a search for Bergson’s notion of duration. Certeau’s distinction between motion and the spatial trace it leaves behind closely mirrors Bergson’s (1912, pp. 48–52). Certeau does not manage to fully resolve his misgivings with the category of the trajectory, because of its inescapable allusion to the spatial trace of motion. On page 34 he parenthetically uses the word “traverse” (in noun form) for the same notion. That might have been a good substitute for trajectory (or a good qualification for the sense in which the word trajectory is used in the text).

Consumption cannot be described by the traces that it leaves behind (e.g. on the surface of the product). The child's *doodling* in the example mentioned a little earlier is different from the *doodles* that it produces. Only the former is consumption properly speaking in Certeau's sense.

As soon as we consider the same act through the prism of its objectified spatial trace, we find ourselves in the universe of events characterizing the space of (potential) production. One could, for example, collect and categorize the doodles of schoolchildren, measure how often each category appears on different types of textbooks or compare how much doodling is done during lectures of different lengths. For Certeau (1984), any such objectivist analysis fails to describe consumption, since it does not capture either its proper modality—"surreptitious and guileful 'movement,' that is, the very activity of 'making do.'" (pp. 34–35)—or the new sense its trajectories can trace out on surfaces organized by production (pp. 34–35).

Certeau's (1984) modal distinction between consumption and production has the drawback of creating a binary that complicates the analysis of intermediate and transitional forms. Consider his example of a person from North Africa settling into low-income project housing in Paris and striving to find a more comfortable and familiar way of inhabiting a building that has been constructed according to an alien, rigid, pre-determined order (p. 30). Clearly, the predominant modality is that of consumption. However, the person's actions modify the living space with some degree of purpose, foresight and continuity. New spatial adjustments can build on the old. Moreover, practical ways of making do with the restrictions of the space can be shared between members of the same community, collectively developed and coordinated. This originates evolving genres of everyday practicalities that are very

common in rigidly organized spaces such as project housing, dormitories, hospitals etc. and well analyzed by sociologists such as Erving Goffman. The loosely coordinated action of inhabitants of low-income housing clearly does not compare to the tight operation of an army or a company. However, the former clearly keeps track of its own spatial traces, and its trajectories are not as errant and unpredictable as Certeau's analysis would have us assume. Such action can be said to have proto-strategic elements.

Clearly, the two modalities are not completely separate and further work is required to theorize how they interact, coexist and shift into one another.

Now I would like to revisit the discussion of the material and technical context of suicide attempts in Section 4.2 in the light of the theoretical terms elaborated in this section.

One can call the improvised adaptation of various items for suicide *suicidal consumption*. Suicidal consumption benefits from Certeau's (1984) analysis in that there is an especially strong heterogeneity between the rationalities that order the space of production of the relevant consumer items and their use for suicide. As discussed in the previous section, there are significant forces that directly oppose suicidal intent and aim to thwart it.

However, anti-suicide measures only concern themselves with the preservation of abstract life as identified by Kafkaesque in Excerpt 1.3: breathing, a beating heart. The suffering of the many scarred survivors of failed suicide attempts does not figure in the rationalities of saving.

If a naïve first suicide attempt qualifies as pure suicidal consumption, then an attempt that has been informed by informal research on ASHspace, SaSu or any other suicide-related forum (or by reading books such as the Derek Humphry's

bestselling *Final Exit*¹¹⁷ often referred to as a suicide manual) relies on some accumulation of knowledge and has proto-strategic features.

It is possible to observe the kind of practical genres that I have alluded to earlier. Suicide methods go in and out of use according to shifts in the organization of the spaces of production¹¹⁸ within which suicidal consumption is embedded.

For instance, a method known as the CO method on ASH, involving using the exhaust gas generated by a car run on idle, became obsolete in the early 2000's as it became clear that newer car engines do not generate enough carbon monoxide.

Earlier in the twentieth century, the replacement of barbiturates with benzodiazepines as the treatment of choice for a number of psychiatric conditions significantly altered the landscape of drug use for suicide. Barbiturates are much more likely to result in a relatively peaceful death on an overdose. For that reason, they were a popular suicide method. Benzodiazepines, by contrast, have much lower potential for lethal toxicity. They also have a reputation on ASM for having particularly unpleasant effects after an attempt (they are not recommended on ASM). Despite their ineffectiveness, benzodiazepines have also been a popular method of choice. Part of this can be explained by the fact that they are more likely to be in possession of people who are more predisposed to suicide. Looking at the matter from the point of view of suicidal consumption gives an alternative possible explanation: barbiturates had carved out for themselves a tactical niche that benzodiazepines later filled. There was a diffuse awareness of the wide use of "this kind of drugs" for suicide, reinforced by artistic depictions, news articles and informal patient culture. Such awareness was not linked to medical knowledge that

¹¹⁷ See Humptry (1991).

¹¹⁸ Production is taken here in the wide sense in which it is used by Certeau (1984) to also include distribution and the management of availability.

would allow people to differentiate between the safety profiles of barbiturates and benzodiazepines. Such fuzziness, very characteristic of consumption practices, allowed benzos to be used where barbiturates were before, including for suicide.

The effectiveness of consumption patterns as a factor in their own right is even more clear in the case of razors—a particularly unreliable suicide method that has nevertheless persisted fueled by continuing depictions in popular culture among other things. Straight razors, in wide use until the earlier part of the twentieth century, could in fact cause death through rapid bleeding after a deep cut. This was still subject to the suicidal's ability to cause serious harm to themselves, which is, as Joiner (2005) has shown, acquired¹¹⁹. Safety razors, introduced in the first decade of the twentieth century and gradually becoming popularized ever since, are utterly unsuitable for that purpose. Nevertheless, they are the quintessential naïve suicide method with a negligible chance of success. It is likely that the popularization of safety razors has inadvertently reorganized preexisting practices of suicidal consumption and has thus played a role in the spread of cutting—a practice whereby people make shallow cuts on their limbs for emotional relief rather than with lethal intent. On ASH, ">>cuts<<" is sometimes used as a jocular replacement of the expression "(hugs)" common on ASH and the Usenet as a whole.

These examples show the ease with which suicidal consumption practices interweave and morph into one another following their own logic detached from the rationalities of spaces of production.

¹¹⁹ Joiner (2005) has noted that not all people with suicidal tendencies are equally capable of inflicting lethal harm to their bodies. The ability to countenance injury and the sight of one's own blood, to cut into the body or apply other damaging physical means to it is a habitual bodily disposition that can be acquired. Members of professions that require the acquisition of such habits, such as doctors, military personnel etc. are more likely to use lethal means successfully. (pp. 46–92)

4.4 Consequences of suicidal consumption

I need no better exposition of the consequences of current practices of suicidal consumption than that given by the ASHer quoted in Excerpt 4.2 in the same discussion:

Excerpt 4.5

It looks like all the currently available methods all have one drawback or the other and nothing is 100 % guaranteed or fun; not to mention all the other problems with this final project. But *it is so fucked up that it is one important part of this noble suicide prevention to make it so difficult for any adult, especially non-American ones, under any circumstances to choose death, let alone in a relatively dignified and peaceful way; so that many people don't have a clue what the hell they are doing and end up worse than before, whereas people who just wanted to "cry for help" end up dead* [emphasis added]. When I'm reading one of these traditional depression support groups and someone is going on about how they bought some razors or have been collecting their anti-depressants, I would really like to say; hey kiddo, you obviously have access to the internet, so why don't do a little bit of research at least if you are really serious, but if you just want to mess up the carpet with vomit and blood and undergo some highly uncomfortable treatments in the ER [emergency room] and then spend some quality time on a mental ward, go ahead. But this would be mean and even forbidden; as "suicide is no solution", and one is only allowed to offer some insincere displays of affection, or some clichés about how hope springs eternal, so I rather shut up.

This quote clarifies at a stroke the nature of the tough body in ASM and how it is related to suicidal consumption. As it can be seen, it is not the body's toughness in the abstract that is the source of the poster's frustration, but rather the purposeful unavailability of a technology dealing with that toughness, i.e. the very nature of suicide as a mode of *consumption* in Certeau's sense. This is witnessed by her use of the expression "choose death". Choice is the privilege of a strategic actor that can put into motion a technology (i.e. an ordered mechanism of ends) from a position of power and based on accumulated knowledge. A suicidal does not have that privilege. A suicidal consumer, whether she indeed wants to kill herself or is simply "crying for help", "does not know what the hell she is doing" and may easily "end up worse than before" or dead whether she wants it or not. The toughness of the body manifests

itself in “naïve” suicidal consumption not as obstacles confronting suicide as a rational, technically-empowered trajectory (such obstacles would then be overcomable by skill), but rather in the very lack of such a technology and in the resulting imprecision of ends and “irrationality” (erratic nature) of the suicidal consumer’s path. Those who “cry for help” are confronted by the painful and extremely traumatic consequences of their technically-inept actions, consequences that cannot be discussed *ex ante* because “suicide is no solution [i.e. no rational technology]” and thus an ordered space of objective possibilities around a suicide attempt cannot be recognized and discussed in the language of effectiveness. On the other hand, those who attempt in earnest to end their lives in full knowledge of such potential consequences are nevertheless confronted (by virtue of the same non-recognition of suicide as a “solution”) by their endlessly regenerating tough bodies that are continuously reinserting them into ever-more nightmarish realities that feature, besides their initial distress, the scars (physiological, psychological and social) often left by survival through “saving”.

In the universe of suicidal consumption ASM plays a proto-strategic role. As a place of practical coordination of the suicidals’ tactics and of systematic accumulation of their knowledge it develops the “art” of suicidal consumption into a proto-technology.

ASHers are concerned with several things that are missed by suicide prevention and the rationalities governing the production of safety. In the event that they find life unbearable, most ASHers would like their self-deliverance to be reliable, relatively peaceful, dignified, and not overly traumatic for other people (especially the people that would find the body). The restriction of suicide to the space of consumption through delegitimization and material suicide prevention

techniques does deter many would-be attempters by making such aims more difficult to achieve. However, it does nothing for the preservation of concrete life whose loss Kafkaesque mourns in Excerpt 1.3 and also renders the suicide attempts that happen despite all these measures more gruesome, traumatic and discordant for both attempters and the people around them. It denies the possibility of if not a “good”, then a better death for suicidal people—with proper goodbyes and preparations. This is not to say that suicide should be completely deregulated, but any relevant policy should be aware of this dark underbelly of suicide prevention that has escaped detection because of the erasure of the kind of speech that is possible on ASHspace or SaSu.

4.5 The body against itself

Up to this point, I have only analyzed the tough body as an effect of the interplay between ASHers’ suicidal intentions and the material, social and technical landscapes in which they are embedded. Such a description is insufficient, because ASHers’ intentions are themselves embodied. The same body is on both sides of the temporal (“cause-effect”) chain. Therefore, considering the body as a mere effect is structurally incoherent. This is further reinforced by the fact that, while the “cause” contains circumstances that are, to use Merleau-Ponty’s distinction (2012, pp. 93–95) “on the side of the world”, the so-called effect of the tough body would be “on my side”. Merleau-Ponty (2012) has shown that interactions between third-person processes and first-person forms of knowledge cannot be adequately conceived in the form of causes and effects in the world, but rather require a mediating existential structure—being-in-the-world—that brings in the embodied, situated subject as an active principle in her own right (pp. 49, 80–82, 246–248). Cause-effect relationships

are a special limit case of a more general principle of temporal organization that Merleau-Ponty calls “motivation” (p. 49). Causes and effects have to be intended as fully objectified entities, which is clearly not the case for the tough body. Motives and the intentions they motivate considered in general do not have that restriction. Intentions linked through non-causal motivation describe structures of sense that are self-referential and open to proper time rather than closed in a self-repeating temporal loop (for objects consistently defined in a causal model can only generate one sequence of events—or a determinate family of such sequences). By intending other intentions rather than objects or functions, non-causally linked intentions remain in time with the act of the understanding, exhibiting the recursive structure described by Husserl (1927): “every phenomenon has its own total form of intention [intentionale Gesamtform], but at the same time it has a structure, which in intentional analysis leads always again to components which are themselves also intentional.” (I, s. 2). An ethnographic account of embodied experience should have such a structure.

Margaret Lock (1993) is very much aware of this fact. As Maurizio Meloni (2023) puts it at the start of the introduction to his article, with the term “local biologies” Lock (1993)

was not so much highlighting that language, or even different moral systems, shape or construct different experiences of disease. Nor was she merely shifting biology into the symbolic ... Lock, more ambitiously, argued that there are some actual embodied differences in the experiences of aging between Japanese and North American women, possibly in response to the way normative discourses (emotions, interpretations) or local physical factors (diet, stress, pollution) are differently incorporated into their minds, brains, and bodies. (para. 1)

Although Lock (1993) does sometimes refer to the body as “produced” (see for example pp. 373–374), a look at the entire text reveals the more intricate understanding captured by Meloni (2023): rather than limiting herself to a discursive

view of the menopausal/*kōnenki* body, Lock is also interested in how it is experienced. Through the life narratives she collects, Lock brings into scope not only bodily sensations and dispositions, but also how they structure moral judgments (e.g. p. 103) and reflect wider historical and cultural changes as well as react to them:

In the women's narratives *kōnenki* is just one small part of the individual life cycle, which in turn is partly a product of the larger social order. The women who are in their fifties today, those in the cohort between forty-five and fifty-five at the time of my research, not only experience the physiological changes of this portion of the life cycle but also embody a social conflict that is keenly felt in contemporary Japan: the passage from tradition to modernity and postmodernity. (Lock, 1993, p. 78)

Likewise, ASHers' bodies¹²⁰, with their jabbing attempts at self-destruction and their stubborn toughness, are bearers, witnesses and enactors of tensions in the wider material, social, institutional and discursive landscape in which they act.

Psychological (including neurological) research on suicide conducted in the early 2000's had identified aggression and impulsivity as predisposing factors (for a review see Gvion and Apter, 2011). But is this a "simple assemblage of natural invariant facts" (Lock, 1993, p. 374)¹²¹ that partly describes suicidal bodies or is it contingent on what it takes to try to end one's life in a relatively peaceful, dignified and responsible way in a world where suicide can only be a mode of consumption?

It takes some impulsivity to disregard the fact that one cannot say her proper goodbyes, that she will probably be found by someone she cares about or by a stranger that did not ask for this, that one might fail in her attempt with potentially horrifying consequences. It takes the absolute opposite to cold-bloodedly prepare one's "bus ticket" for months through an elaborate scam, as Suzy Gonzales did,

¹²⁰ I will use this expression in order to not needlessly complicate language. However, I follow Merleau-Ponty (2012) in believing that ASHers are their bodies.

¹²¹ In such work, impulsivity and aggression are treated as traits—relatively inflexible behavioral proclivities that are attributed to the neural makeup of the person. They are often designated trait-impulsivity and trait-aggression.

while still weighing the pros and cons until her last weeks. Yet at that final moment, Suzy Gonzales would have to find that dose of impulsivity nevertheless, for due to the nature of the act, achieving a certain outcome would require a surprisingly elaborate controlled environment and some degree of assistance from another person, which she didn't have¹²². Even with the anti-emetics, she might still have vomited. She might still have had, through natural variability a higher threshold of tolerance for the poison. She would still have to leave behind, without proper closure, a disconsolate father and mother whom she loved, not to mention friends. As Excerpt 4.5 makes clear, that very special kind of impulsivity would be lumped together with the one of a person that is truly making an impulsive gesture at a moment of acute distress, or of a person that resorts to a half-hearted suicide attempt because he feels that it is the only way he can make his distress visible to others (most ASHers would refuse to share information on methods with such people and, as a long discussion on ASH has shown, many would even intervene).

ASHers that are firm in their decision spend time training their bodies to overcome the threshold of apprehension at the moment of reckoning and, depending on the method, to acquire the capability of doing harm to themselves (see previous reference to Joiner, 2005, pp. 46–92). They might spend time with the gun many days in a row, getting the barrel closer and closer to the desired position, pressing on the trigger harder and harder, gradually pushing away the moment they are overcome by panic, tremors or heart palpitations. They might go to a high place many times,

¹²² The procedures of organizations that offer physician-assisted suicide to people with low quality of life (Dignitas, Final Exit, The Pegasos Swiss Association, etc.) are witness to that fact. With very few exceptions, people that seek to end their lives because of mental anguish without an underlying “physical” condition are disqualified out of the gate. Many of these organizations also disqualify people with mental conditions, irrespective of whether they have a serious life-impairing physical disorder or not. The publications of these organizations (such as *The Peaceful Pill*) and the devices that they design and market (such as the Sarco Pod designed to self-administer death through asphyxiation) are nevertheless the source of many of the proto-strategies coordinated on ASM.

getting closer to the edge each time. There are similar, more subtle techniques used by those who prefer drugs as a method: they get accustomed to swallowing a great amount of capsules at the same time by practicing with innocuous substances that they encapsulate themselves, they test out the anti-emetic etc. But the most illustrative in this respect are methods that rely on asphyxiation, such as suspension hanging, bags, the use of gases etc. For suspension hanging, it is common to first practice the knot, then the position¹²³, then go through the process of testing the arrangement, letting it put more and more pressure on the neck each day, blunting the reflex to recoil. Other asphyxiation methods can require similarly elaborate processes of habituation.

Last-minute reactions and bodily dispositions preventing the suicidal act such as the ones exemplified above are often used in ethical debates on the issue and clinical lore as evidence that the person does not really want to die, or with some more sophistication, that there is a part of the person that does not want to die. This is a variation of a common therapeutic strategy.

In an interview that I conducted for another project, S., a clinical psychologist that, on a personal level, had a nuanced position on suicide and appreciated the utility of ASH, reflecting on her clinical experience with acutely suicidal people described how she structured the clinical interaction by positing an opposition between the part of the patient that wanted to die and the part that wanted to live. Irrespective of her personal beliefs, S. saw herself fulfilling a function: she needed to support the part that wanted to live and, if needed, contain the one that wanted to die. The split in the patient was described to them in ontological terms: for instance, it was not the patient per se, but “the patient on depression” that wanted to die. In this context, S.

¹²³ There is a particular physical arrangement that allows for a relatively peaceful death.

mentioned last-minute bodily reactions during attempts: people who jumped off a high bridge into the water would often go into a diver's stance, she noted. The part that still wanted to live functioned as justification for S.'s own therapeutic activity and, in S's view, as a tool to help the patient reframe her own situation until, hopefully, suicidality would "fall out of the picture". As the patient became more suicidal, the part that wanted to live would become more and more subtle in its manifestations, at the extreme limit being evidenced only by the fact that the patient had come at all. "And what if the patient didn't come?"—I asked. S. admitted she would be even more worried and would have to take action. The "part wanting to live" eventually followed the patient even out of S's office, with no need for any concrete evidentiary support. Perhaps, at that point, S.'s own functional therapeutic self reached the point of which Wittgenstein wrote in his *Philosophical Investigations*: "If I have exhausted the justifications I have reached bedrock, and my spade is turned. Then I'm inclined to say: 'this is simply what I do'" (1953, para. 217).

My conversation with S. and the body techniques in ASH/ASM discussed above do raise important questions. If we reject a mind/body dualist view, how can we understand the relationship between the intention to die and the last-minute reactions (I have focused on physical reactions, but mental¹²⁴ reactions are also common)? How are we to interpret hesitation and going back and forth? Should we

¹²⁴ I use the common term to avoid complicating the language unnecessarily. I do not assume a mind-body duality. The correct technical term to use would be "spontaneous" following Kant and Merleau-Ponty. Spontaneity is mostly associated with thinking and the operation of reason for Kant and with projection from (i.e. non-habitual act of transcending) one's situation for Merleau-Ponty. The term reflects the relative independence of such acts from sense receptivity. It is much more difficult to force yourself not to see an elephant in front of you than not to think of an elephant when it is not physically there (despite the well-known idiom).

say that a person secretly desires to live because she ducks out of self-preservation when an object is thrown at her? Is there some kind of threshold?

I suggest an understanding based on Merleau-Ponty (2012), in which the body is considered a practical presence in the world—a generalized “I can”—that, though acting under a norm of unity of purpose, modulates and coordinates action at different levels of spontaneity and habituality with varying degrees of success. Even reflexes are acts according to Merleau-Ponty, since they manifest preferences in the world related to the kind of life that one is. Many projects in the world require willful effort to achieve such coordination. Thus, an adult learning to swim would have to learn to suppress the instinct of taking his head out of the water as soon as possible, and of flailing his arms and legs. Should we conclude that he doesn’t “really” want to swim? It is more feasible to say that he is modulating a set of bodily dispositions of breathing and motion, solidified in his history of encounters with the world, to learn a skill. The habitual behavior of one’s body in water is purposefully modulated until the desired new habits emerge. Opposite examples also exist, such as musical improvisation, where the musician allows her structured motricity (on the instrument) and perceptive anticipation of sound, cultivated through years of practice, to take the lead in shaping the performance, while the reflective power of her body is limited to registering the emerging musical patterns and lightly steering these more impersonal dispositions. In fact, considering the matter with a higher degree of precision, we will recognize that these two modalities are present, in different proportion, in any particular bodily act. There is a bidirectional flow between spontaneity and habituality in any bodily practice.

ASHERs’ bodily techniques and the interaction between the different dispositional and spontaneous levels of action that they entail can be understood in a

similar way to the swimmer example. From a structural viewpoint, there is little that separates these techniques from the ones exemplified above. There is a sharper, more dramatic tension between the habitual disposition and the intent, due, in part, to the bodies' pre-personal, evolutionary histories. However, I do not believe that there is anything here that would lend strength to a moral argument. Rather than a contradiction, as the proponents of such moral arguments (and even S.) see, I submit that we see here a turn on itself (a "tropological figure") that, as Butler (1997b, p. 4) has shown is a distinguishing structural characteristic of the subject. After all, the body, understood with Merleau-Ponty (2012) not as a sum of objective processes (or a collection of invariant natural facts as Lock (1993) put it in the quote cited earlier), but as a structured, situated capacity to act in the world that, at each moment, generates time by taking up its habitual self and its worldly situation in an intention, is the opening of that temporal fold that we call the subject into being.

CHAPTER 5

CONCLUSION

Each man's death diminishes me,
For I am involved in mankind.
Therefore, send not to know
For whom the bell tolls,
It tolls for thee.

—*For Whom the Bell Tolls, John Donne*

In this work, I have used textual and ethnographic material from ASH, the first online meeting space of suicidal people without “expert” supervision (where people discussed suicide “openly in an atmosphere which is not condemnatory of suicide”¹²⁵), to describe overlooked logics of social action directed at suicide and degraded living.

My argument has been that such logics of action have been overlooked because they are only discernable from a perspective that would accept the lived experience of the people involved as a principle of intelligibility that is valid in a general sense, and not only on the condition of it being reshaped through the lens of what Marsh (2010, pp. 66, 71) has called a “compulsory ontology of [internal] pathology”.

As argued by Marsh (2010) and Marsh and Manzano (2021) and confirmed by ASHers in their discussions, the aforementioned compulsory ontology, as well as an abstract conception of life that can be traced to a form of governance that Foucault has described as biopolitical power, make the very articulation of such alternative first-person perspectives challenging. The peculiarities of the Usenet medium made possible such an articulation in ASH due to the barriers that it raised to processes that

¹²⁵ This is a citation from a now defunct website (curated by an ASHer) that archived selected material from ASH and was intended “as a record of what the alt.suicide.holiday newsgroup was like”.

would normally foreclose, redirect or interrupt through physical intervention communal expressions of the type that are shared on ASH.

In Chapters 1 and 2, I have shown how such articulations, besides their worth as forms of knowledge, are valuable to ASHers in that they allow them to make sense narratively of what they perceive as an impoverished existence—a dying while one's body carries out movements and functions that others recognize as signs of life, but that are, from the perspective of the ASHers, decentered, uninhabited and thus devoid of concrete life. Ironically, the proper articulation and recognition of this decentering in a community of people going through similar experiences, can serve as a narrative recentering that helps ASHers reinhabit their own lived experience, albeit only in an imperfect and abstract way by merely gathering their situation and placing it in front of them. ASHers' stories recenter by *articulating the decentering itself*. Through that narrative act, ASHers' decentered existence becomes less inchoate, more intelligible and thus amenable to subsequent action, however that articulation also solidifies what decentering signifies—a failure to (inhabit one's own) experience. While it is generative of experience in the new forms of reflection, reckoning and memory that are possible due to the stories shared within, the narrative space of ASH can only do so by constantly referencing a failure to experience in the larger context of ASHers' lives. Moreover, the effectiveness of the experience generated in the group in structuring ASHers' existence is curtailed by the limited kind of conviviality that an online discussion board permits—that of fellow travelers biding their time at Death's Bus Stop—itself a space of transitory, interrupted and insubstantial presence. Computer mediation both makes the kind of experience narratively constituted in the group possible and sets limits to its organizing power in ASHers' lives. The value that ASHers have nevertheless placed

on that tenuous narratively constituted experience serves to show the costs of limiting the spontaneous unsupervised communion of people with suicidal tendencies on the ground of a compulsory ontology of pathology.

In Chapter 3, I have leaned on ASHers' accounts to describe the logic of subjection as it applies to the kind of subjects that ASHers are considered to be: fragile subjects who need help because of an inner deficiency in their capacity for autonomy. I have attempted to encompass the entire schema of subjection, considering both the central imaginary relationship with categories of discourse through which the subject inserts itself into the order of things and the spaces of excess and abjection inherent to that relationship as revealed by considering the matter through the lens of fantasy. My analysis of subjection has also been conducted from the perspective of how it is lived in ASHers' experience. This rather polemical choice has allowed me to reveal logics of practice and excesses of the help relationship that would otherwise be difficult to make out, especially abandonment, intimate violence and disdainful dismissal (see Chamberlin (1977) for a much more detailed account of the latter of the three). ASHers' status as fragile subjects and their compulsory exile to the space of subjects to be helped has emerged as the primary justification of the legal and medical challenge to their right of spontaneous communion. The insidious separation of the space of helped subjects from that of autonomously performing subjects was shown to involve ASHers through secondary subjection in the performance of separate identities (the good patient, the worthy recipient, the person not a danger to herself) that stood in a tense and often contradictory relationship with ASHers' way of making sense of their lives. The possibility of articulating both this tension and the excesses of the help relationship in ASH was shown to allow group members to negate fragile subjectivity's totalizing

claim on their personhood, making it possible to go through the motions embodying the fragile subject yet not affirm (whether directly or through inversion) the imaginary relationship at its heart but rather, pushing it off center, signify the irreducible excess of their person over their subject—the silent possibility of different ways to exist as the persons they are and perhaps even of different ways to help and be helped.

In Chapter 4, I have focused on ASHers' experiences of their body. I have shown that emergency medicine, consumer protection, suicide prevention and other strategic organizations of action around the rationality of preserving abstract life make a reasoned, informed and deliberate suicide attempt impossible, rendering suicide a mode of consumption in Certeau's (1984) terms. As ASHers act counter to these strategic lines of force, the effectivity of the latter becomes embodied. The result is the experience of a tough body refusing to die. That body materializes and lives out the strain of the schism between two regimes of help rationalities—the one directed at the preservation of abstract life¹²⁶ that acts with great urgency and mobilizes wide and vigorous engagement, and the much more fractured, subdued, restricted and conditional mechanisms that assist those struggling to nourish concrete life. Stories on ASH witness the suffering that is not registered by the rationality of suicide prevention, bent as the latter is on abstract life. Finally, ASH controversially serves as a proto-strategic space where knowledge of means and techniques for a more successful, less painful and less distressing suicide is accumulated and shared.

This thesis has not been structured around the elaboration and defense of a single theoretical statement or argument. Many claims have emerged over the course of this investigation, as summarized above, but the final pattern that they establish

¹²⁶ Malkki (2015) in reference to a similar understanding of life arising in the context of humanitarian initiatives describes it as “‘basic humanity’, more biological than political” (p. 7)

resembles a painting more than it does an argumentative essay. I have to admit that this has been accomplished only partly through conscious purpose, my material often acting as a character in its own right and forcing my hand, refusing to surrender what at times seemed to be its own logic and designs when faced with the comb of scholarly rectitude. While acknowledging the deficiencies in execution, I do believe that, in keeping with what is common in ethnographic practice, the material has guided me rightly in suggesting a more spread-out and descriptive structure given the current abstract state of scholarly debate around degraded living and suicide.

It is my belief that the current stage of the debate requires as the next step not an analytical tightening, but attention to qualitative multiplicity informed by an attendance to the lived experience of the people whose living and dying are immediately affected by these debates. Most traction can be gained from a perspective that does not follow uncritically the kind of objectification of psychic traits mandated by a critical ontology of internal pathology (Marsh, 2010), but questions it when it would foreclose the consideration of other people as full ethical beings.

A healthy analytical and ethical denouement is not a task that can be accomplished or even attempted in good faith by a single master's student and even, I daresay, by any single person at the current stage. It will only become possible in time as a fuller understanding of how people like ASHers make sense of their lives loosen the monolithic normativity (Marsh, 2010, p. 66) defining the very terms of the debate and the structure of social action directed at suicide and degraded living.

I do believe that this work has provided copious evidence for the value that spontaneous communities of people struggling to hold on to life (outside the purview of psychiatric ideology) can hold in their lives. I hope my very far from perfect

ethnographic sensitivity has been sufficient to highlight some valuable new qualitative means of understanding (rather than explaining) degraded living that might hold potential to inform a healthier ethical relationship with people such as the denizens of ASH.



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