

‘Kinky’ life : A phenomenological study

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Abstract

Kleinplatz (2006) termed the practitioners of bondage and discipline, dominance and submission, sadomasochism (BDSM) the “extraordinary lovers”, who can teach a lot about romance, creativity, sexual connection, and healing, as well as how to keep sex alive and authentic in long-term relationships. Bondage (B), dominance (D), submission (S), and sadomasochism (S) are individual terms used to describe various sexual acts. Fetishism is classified as part of this category of sexual behaviors, and fetishists are considered members of the BDSM community. These acts and desires are often referred to collectively as ‘kinky’. BDSM is mostly practiced by consenting adults, who are fully informed.

Since the late 19th century, kink was stigmatized through medicalization and still it is considered as a taboo around the world by many people. This hinders the kinksters from practicing their kinks without shame, discrimination and stigmatization. The present research attempts to bring out the life of unmarried couples, who practice kink in Kerala so as to unveil the difficulties and stigmatization faced by them. The study is qualitative in nature and phenomenological by design. Data were collected from three couples and thematic analysis was undertaken to analyze the data. The findings of the study

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indicate that the kinksters faced difficulties and stigmatization in one form or another. The findings suggested that sex education could be considered as the greatest measure to normalize kink and how it could be implemented to make changes in the society.

Key words: Kink, BDSM, Fetishes, Sex, Stigma

Introduction

Sex is one of the basic physiological needs according to Maslow's hierarchy of needs. The survival of all species depends on sex. In present scenario, unconventional sex is emerging to be quite common. In the past 70 years, as researchers delved ever deeper into sexuality, they have discovered that the loving, successful, mentally-healthy population actually exhibits tremendous sexual diversity. Our sexuality is as unique as our fingerprints, and therefore, no two people are erotically identical (Castleman, 2018).

The concepts sadism, masochism, sadomasochism, BDSM (bondage-discipline sado-masochism), and kink have controversial interpretations in the present day society. The Miriam Webster, defines 'kink' as 'unconventional sexual tastes or behaviours.' According to scholarly sources, the term "kink" refers to a wide range of sexual behaviors that are deemed "abnormal" (Christina, 2011; Rehor, 2015) and vanilla sex (sometimes referred to as boring traditional sex, typically involving genital penetration) are deemed to be "normal" (Ribner, 2009). The word 'kink' may also refer to the acronym BDSM, which encompasses bondage and discipline, dominance and submission, sadism and masochism, and a variety of behaviours involving the transfer of control, pain, or sensory deprivation (Faccio, Casini, & Cippolletta, 2014; Pillai-Friedman, Pollitt, & Castaldo, 2015).

Therefore, basically, BDSM is an umbrella term encompassing various activities involving the exchange of power, pain, or restraint often, but not exclusively in a sexual context. Slogans such as "safe, sane, and consensual" and "risk-aware consensual kink" are commonly practiced as an overall guide-

line for appropriate behaviours and 'kink' is another umbrella term used for BDSM (Barker, Iantaffi, & Gupta, 2007), (Chen & Meyer, 2019). Vanilla refers to sexual activity that is not BDSM and is in accordance with the American mainstream idea of sex as "monogamous, romantic, heterosexual, and/or pro-creative" (Luminais, 2012) and Polyamory is the practice of engaging in multiple intimate relationships simultaneously (Chen & Meyer, 2019).

Even though BDSM practices are often associated with sexuality, BDSM practitioners have conveyed feelings of fulfillment through emotional and mental interactions (which may or may not be perceived as sexual) rather than requiring genital contact or orgasm (Simula B., 2019a). This means that being kinky does not always imply being sexual or engaging in sexual intercourse. However, the term fetish is most generally interpreted as "an item, body part, or behaviour that causes sexual responsiveness in a person" and is often associated with "atypical" stimuli. As a result, a fetish can be described as a particular sexual desire or cause, whereas kink can refer to non-traditional activities (Gray & Hayfield, 2019).

Many people who engage in "kink" behaviour may not consider it "kink" or practice it on a daily basis. Furthermore, many people have "kinky" feelings that they never share. Though sexual habits are one thing, some evidence suggests that "kinky" fantasies are widespread in society (Joyal, Cossette, & Lapierre, 2015; Joyal&Carpentier, 2017).

Earlier practice or interests in kinks were widely pathologised, and people who practiced it were discriminated and stigmatized (Kolmes& Weitzman, 2010). BDSM or kinks were first listed as a "sexual deviation or anomaly" (American Psychiatric Association, 1952; 1968) and later as "sexual disorders" (American Psychiatric Association, 1980) in the Diagnostic Statistical Manual (DSM). The APA took a move towards de-medicalizing sadomasochism(SM) in response to lobbying from BDSM groups that pointed to the lack of evidence supporting the pathologisation of sadism and masochism (Moser & Kleinplatz, 2005). The 5th edition of the Diagnostic and Statistic Manual

helps to recognize BDSM as healthy spectrum of sexuality. The new DSM-IV-TR description bases “disorder” classification on the existence of anxiety or non-consensual behaviours (American Psychiatric Association, 2010). De-medicalization eliminates a significant obstacle to outreach, education, anti-stigma programmes, and human services. People who practice kinks find it pleasurable and it helps them to spice up their lives; besides it does not causes any harm to them. It should only be a matter of concern if it substantially affects one’s emotional well being and day to day functioning. (American Psychiatric Association, 2004) (Kolmes& Weitzman, 2010).

In certain parts of the world, there has been a trend toward embracing non-traditional sexual expressions. There is some evidence that kink imagery, as seen in commercials, music videos, and films, has contributed to the normalization of the behaviour (Marin, 1998; Weiss, 2006; Beckmann, 2001). Kink, on the other hand, is misrepresented, with some negative representations portraying it as “abnormal.” Many members of the kink community have chosen to distance themselves from the film *Fifty Shades of Grey*, which depicts the main male protagonist, a kink practitioner, as aggressive and abusive, as it is argued to perpetuate negative perceptions about kink (Musser, 2015). According to Yost (2010), there is a myth that kink practitioners are abusive or are victims of abuse and interests in fetishes are connected to aggression. While BDSM practitioners are no more likely than the general public to have undergone trauma or violence, for those who have, BDSM practices tend to be beneficial.

The stigmatization of kink has serious implications for those who practice it, with many people suffering symptoms of associated anxiety, such as guilt and depression (Bezreh, Weinberg, & Edgar, 2012). Since kink is stigmatized, it is limited in online spaces where practitioners can safely express themselves. People are hesitant to reveal their interest in BDSM even if it is common because it is stigmatized (Renaud & Byers, 1999; Wright, 2006). Individuals that classify as kinky express an interest in sexual acts that are often referred to as “paraphilic” or “atypical” (Lin, 2017).

Participation in the BDSM has been linked to the development of skills in communication and trust, negotiation and risk calculation, as well as self-care and resiliency (Williams, N. Thomas, Prior, Amezcuita, & Hall, 2017; Khan, 2015). The cornerstones of BDSM relationships are communication and negotiation, which in turn foster trust (Ortmann & Sprout, 2013). For enjoyable and successful BDSM experiences and relationships, clear, explicit communication about needs, desires, limits, and safe-words are needed. Participants in BDSM groups are constantly reminded of the importance of thoroughly discussing "safe, sane, and consensual" (SSC) practices before engaging in them. Engagement in the BDSM necessitates excellent coordination and negotiation about future events, as well as respecting personal limits on what may occur, ensuring participants' physical and psychological safety, and fostering an enjoyable, satisfying experience for all participants. Participants in the BDSM are often outstanding communicators of their desires, interests, possibilities, and limits.

People of various cultures and ethnicities, gender roles, religious and moral views, political agendas, and sexual orientations and identities seem to be welcomed in BDSM societies that we are familiar with. Social workers may assist BDSM-identified people in identifying and using their strengths to solve challenges in particular circumstances and situations. For clients who regularly engage in BDSM events, social workers should be sensitive to the fact that BDSM is definitely an essential means of daily recreation, and therefore regarded as a strong source of coping, identity-expression, and self-care.

Review of literature

Researches on kink started with a purpose to find the cause and cure for it as it was labeled as a sexual disorder by early sexologists Richard von Krafft-Ebing, Sigmund Freud and Havelock Ellis (Khan, 2014) (Simula, 2019b). Kink and BDSM were placed on a spectrum, starting with spanking and fetishes to lust murders by Krafft-Ebing (Richters, Visser, Rissel, Grulich, & Smith, 2008). Later, the creation of Diagnostic Statistics Manual (DSM) put forward

diagnosis and criteria for sexuality that was deviant and cemented some of these views on kinks (Khan, 2014; Hart, 2020). In DSM, kink was first categorized under sexual disorders (Bezreh, Weinberg, & Edgar, 2012). Kink was classified under paraphilias, (American Psychiatric Association, 2013). Thus, kink once regarded as a sexual disorder, now comes under paraphilia only diagnosable if it causes distress in patients (Khan, 2014; Moser & Kleinplatz, 2006; Khan, 2015; Keenam, 2013; Iannotti, 2014) (Hart, 2020).

The Cass Model hints at five phases to Kink Identity Development. The Cass Model of coming out goes through five phases - early encounters, exploration with self, evaluation, finding others and exploration with others.

Many kinksters face discrimination and it is mainly experienced in four distinct ways and they are negative public portrayal, value diminishment, mockery or shunning and discrimination (Brown, 2010) (Hart, 2020). People who identify and practice kinks are mostly stigmatized and it was associated with isolation, depression and even suicidal ideation s (Hughes & Hammack, 2019), (Meyer, 2003). Even the sex education programmes do not consider discuss non-normative sexual practices (Bezreh, Weinberg, & Edgar, 2012; Khan, 2014; Colosi & Lister, 2019).

There are studies that indicate that discrimination is prevalent from their closed ones and besides they encounter difficulty in finding a (Chen & Meyer, 2019).

Benefits

There are indications that BDSM has helped individuals to overcome with their childhood traumas (Lindemann, 2011). BDSM experiences could be healing or therapeutic and it includes managing physical disabilities, helping people to mitigate their feelings of guilt and even countering sex-negative discourses. Kinksters who has experienced trauma finds BDSM as a source of healing (Hughes & Hammack, 2020; Hammers, 2014; Hammers, 2019; Thomas, 2019).

Persons with disability and their partners find BDSM easier or less foreign as they also find non-genital sex and eroticization of body parts other than genitals as key part of satisfying sex with people who engage in BDSM (Kaufman, Silverberg, & Odette, 2007). People on the autism spectrum are able to enjoy kink because it allows intimate sexuality and non-verbal communication to be laid out, scripted, predictable, understandable, and enjoyable. It even helps some kinky people process through depression and other mental illness (Aaron, 2018).

BDSM could be emotionally and mentally arousing even without the involvement of genital contact or sexual intercourse. Thus, kink is not limited to sex. Therefore, even asexual people are able to participate and practice BDSM (Spratt, et al., 2020; Jolene, 2015).

Sex Education

If proper knowledge about kink is imparted to the public by understanding the psychology of kink and its potential benefits, it could aid in reducing the stigma relation to it (Bezreh, Weinberg, & Edgar, 2012; Gemberling, Cramer, & Miller, 2015; Iannotti, 2014; Kleinplatz, 2006; Moser & Kleinplatz, 2006; Hart, 2020).

many studies regarding kink have been undertaken in foreign countries. However, but there are few or no studies related to kink in India even though it is a practice increasingly engaged in by people all around the world including India. This research tries to draw light up on the life of unmarried couples who practices kinks in Kerala so as to put forward suggestions to normalize kinks so people can practice their interests in Kink without stigmatization.

Statement of the problem

Even after all these years, talking about sex is considered as a taboo in India, were "The Kama Sutra" an ancient Indian Sanskrit text on sexuality, eroticism and emotional fulfillment in life was written. India is ranked the 5th most sexually active country in the world, but remains ever so conservative

about sex. For the same reason there are only a few details regarding the data or prevalence of unconventional sex.

Sex is one of the physiological needs of a human being and one has all the rights to explore their pleasure. In such a scenario, when a person tries to hide his or her sexual preferences in kinky sex due to the fear or taboo that surrounds around it, he or she is denied the opportunity to live their life to the fullest. It can lead to long-term mental and psychological issues and problems in one's own life and their relationships. This study helps to bring out the life of unmarried couples in Kerala who practice kinks in their life and tries to bring light on to the topic that it is a common practice and it is not something to be hidden, feared or stigmatized.

Methodology

This study intended to explore the personal experiences of unmarried couples living the kink life in Kerala, has been rooted in the philosophical orientation of the Interpretivism and executed through the methods of hermeneutic phenomenology. Qualitative approach is adopted for the study and hermeneutic phenomenological study design was used to collect data for the purpose of the study. These respondent couples were of different age groups, religions, economic status, etc. The respondents were selected from social media platform where a flyer regarding the study was posted and participants willing to share their experience were asked to respond. Primary data were collected from the couples over face to face interaction and social media platform. The interview scheduled was prepared to find out the socio-demographic profile of couples who practices kinks. Rest of the data was collected through phenomenological interview with an unforced flow of questions as it helps in evoking both a colourful description of the phenomenon as well as empathetic understanding of ways in which individuals experience phenomena.

The researcher had a page in social media platform for educative purpose regarding kinks. Thus the participants were contacted over the page for data

collection and the study. The researcher collected data from three male and three female participants, a total of three couples who consensually engaged in kink. The researcher met two couples in person and interviewed the other two couples over social media due to geographical reasons. The researcher reviewed the purpose of the study, procedures and confidentiality and informed consent was gained verbally. Some questions were asked as a guide for key themes. All the interviews audios were recorded with the participants consent and participants were asked to contact if they need to ask any questions or clarify. Thematic analysis is used as the approach to qualitative data analysis.

With regard to ethical consideration, explicit permission and informed consent was obtained from the participant couples with the assurance of their names being kept confidential. Participants were also informed on their right to withdraw from the research anytime. The limitation of the study is that it cannot be generalized to other couples who practice kinks as their personal experiences and situations may vary.

Discussion

The major themes identified are were –self-identification and their journey into Kink, stigma, absence of awareness, perks and risks, and relevance of sex education and their hope for the future.

The first theme that emerged is the identification and their journey into kinks explores how the participants identified their self-interest in kink. Two sub themes emerged - a. development stages completed, the phases the participants went through all to engage in kink and the realization of their instinct for kink through 'Self Identification' b. The second sub-theme is other-induced realisation, in which participants have not under gone through the usually expected stages of development of kink; they had identified kink driven by their partner and not -self identification.

The second theme that emerged is Stigma and the apparent lack of awareness. It deals with the unawareness of people in society and with that all stigma

and hardships they encountered on their journey into kink. Two sub-themes are generated are, challenges in finding people of similar interest and to practice kink. Here the prospective kinks had to depend on the social media platforms to find others of similar interest. This enable them to engage in kink over virtual platforms. One couple, who was financially stable could engage in it in person; the other couples did not get much opportunity to practice kink in real life except over virtual sessions. The other sub-theme was the perceived feelings on engaging in kink. Almost all participants had gone through some emotions as they experienced some sort of confusions over their interests in kinks. Some had even encountered negative responses from their closed ones when they 'came out'.

The third theme that emerged were perks and risks. It mainly deals with the perceived benefits the participants receive and the risks in practicing kink. It revealed the therapeutic aspects of kinks that participants identified in their life subsequently and the relevance of safe words and after care. Two sub themes emerging was the therapeutic aspect of kink in which kink in that it provided relaxation to the respondents; it helped two respondents to overcome trauma caused by sexual abuse. The second sub-theme happened to be risks and protocols. All respondents are aware about the risks or danger that could arise in kink, thus all of them follow some kinds of measures and certain protocols to avoid the same. They made use of safe words and after care, even when kink was practiced over virtual platforms.

The last theme considered was Sex Education and their hope for the future. All the respondents were emphatic about the importance of sex education regarding kink and were clear on all changes participants expected see regarding kinks in the near future. All the respondents put forward the idea of universalising kink through sex education; this would encourage people to look up authenticated sources to learn about kinks. It can help in spreading awareness among public on kink and thus reducing shame, stigma and discrimination that prevails around kink and to explore the possible therapeutic value of kink beyond being seen a sexual practice.

Findings

The respondents identified their inclination for kink mostly by themselves. Theoretically, kinks would go through all the stages of their development of kinks which include early encounter, exploration with self, evaluation, finding others and exploration with others. All the respondents attained different phases at different ages based on the opportunities and exposures they had with kink. Some among the respondents were introduced to kink by their partners and hence did not go through the text-book case of all the stages of development. Others were drawn into kink through movies, and yet others identified their kink through the fetish they had had instinctually

The respondents found it difficult to locate willing partners with similar interests. Social media became the prominent source to find others of similar interest. Others attended closed meetings for kinksters, while the rest relied on social media as the only option to search of other kink partners. The latter could only locate even if they had access to social media, they came across foreigners who are kinksters and not locally

Another challenge the respondents experienced was with the practicing of kink. Two couples whose partners are students found it difficult to practice kink in Kerala due to the restrictions and limitations - social and financial. One couple in which one partner was financially independent could engage in it for real. This was complicated by social stigma coming with the release of 'Fifty Shades' which painted kink as fake and dangerous

Engaging in kink for real or over virtual platforms, was limited by lack of availability of needed props for plays. Majority of the respondents did not have any idea on what kink was during their initial stages and three of the respondents remained confused and harboured mixed emotions (self-doubt) about their engagement in kink. One respondent even believed that he was having some defect. This more particularly visible among respondents, who identified their kinks alone because they could not find anyone to confide in, clarify or discuss the same. On the other hand, one lady respondent in partic-

ular with an open mind from the exposure of the world was excited and happy to realise her 'kinky side'.

Given their general experience of discriminations and judgments from non-kinksters when they tried to open up, the respondents preferred to open up about their interests in kinks only to other kinksters. The decision among the respondents varied - some did not wish to 'open up' about kink to anyone other than the partner who introduced her to kinks; another couple still tries to open up about kinks to non-kinksters even in the face of judgments and discrimination as a means to spread awareness. None of the participants were willing to open up to their biological families. For the reasons of pre-judgment and discrimination respondents refrained from using their kink or their fetish (example: Scarf) in public places even when they desperately wanted to. One participant identifies kink as a means to overcome the restriction her parents impose on her due to religious cultural beliefs. Patriarchal society expects a man to be dominant and expects him to be in charge of responsibilities, and through kink one respondent was able to keep aside the role, which is enforced on him by the society. While practicing kink he can be submissive who obeys his dominant without the weight of taking over the responsibility.

The respondents expressed that they were able to experience the therapeutic aspects of kinks; the respondents resorted to kink as a relaxation technique over the other options available. In one instance kink helped to get over the trauma people had faced in their past. The kink couples practiced with care in making kink safe. They took care to have proper communication and ensure feedbacks from their partner before and after the kink sessions to ensure understanding about the play or session is, how it was done, etc. The respondents also made use of safe words - sounds, gestures or body languages - to stop the session if ever any of the partners crossed the 'threshold'. All the participants engaged in 'after care', even if the sessions were practiced over virtual platforms to ensure that there are back feeling normal and good.

The respondents yearned to universalise kink through sex education so,

that people who are interested in kink can learn about the same from authentic sources for reasons of recreation and safety. This will eventually reduce stigma and discrimination as awareness spreads among the public.

Suggestions

7.1) for government

(a) Creating governmental initiatives to provide sex education which includes kink

(b) Spreading awareness on government level – medical fraternity, law and order, judiciary

(c) Lifting ban on toys and materials for kink sessions

7.2) for Non-Governmental Organizations

(a) Create community for kinksters

(b) Spread awareness about kink through social media

7.3) for social workers

(a) Add kink in the social work syllabus

(b) Training sessions, seminars and conference regarding kink

(c) Certification

(d) Social work researches

Conclusion

Kink is a healthy, therapeutic sexual engagement, and not necessarily a pathological deviation. One thing that seems to unite people who are drawn to kink is a preoccupation with power relations and a desire to experiment with different power roles. Even interests that are not directly related to power, such as a passion for latex, leather, or feet, frequently include some form of power exchange. This phenomenological study explores the life of

non-married couples in Kerala, engaging in kink. Given that there are very few researches based on kink in India, the findings on this research will help the readers to create awareness on kink and understand the stigmatization of kinksters. Some kinksters identified their kinks themselves by the help of movies and internet, and others were introduced to kink by their partners. In general, kinkster face some kind of discrimination due to the unawareness and stigma that prevails among people regarding kink. Kinksters share with their lovers, and sometimes with friends; none revealed to their parents. If people were having awareness on kink, and if it could have been normalized, it would have been easier for them to be themselves and explore themselves without feeling ashamed, and there's less stress because they don't have to keep it a secret. The respondents practicing kink wished kink was included as part of sex education so people refer authenticated sources to learn and clarify.

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