



## *On Skin as Borderlands*

### Using Gloria Anzaldúa's New Mestiza to Understand Self-Injury Among Latinas

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**Abstract:** In this article, I develop a sociological perspective of self-injury. I use Gloria Anzaldúa's concepts of Coatlicue States and the New Mestiza Consciousness to expand our understanding of self-injury among Latina youth. I close with an acknowledgement that Gloria Anzaldúa believed in transformation, the transformation of cultures as well as of the self. I believe that by facilitating access to the new mestiza consciousness we can provide Latinas and Chicanas with alternative coping strategies. In this way helping them, as Anzaldúa said, "Transition from sacrificial goat to officiating priestess at the crossroads" (1999:102). The article advances initial thoughts that will inform future research. Once this framework is developed, I hope to conduct in-depth interviews with Latinas who self-injure in order to expand further the sociological understanding of self-injury.

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*1,950 mile-long open wound  
dividing a pueblo, a culture,  
running down the length of my body,  
staking fence rods in my flesh,  
splits me splits me  
me raja me raja  
This is my home  
this thin edge of  
barbwire.*  
—Gloria Anzaldúa (1999:24-25)

During the 2000-2001 academic year, I worked at an ivy league university as the director of a residence hall that housed 57 students, the vast majority of whom were

students of color. During that time, I became aware of several students who self-injured. I had never been directly exposed to self-injury before, but I knew that the stereotypical self-injurer was white, middle-class, and female. Besides being female, however, these students did not fit the accepted labels: they were all Latinas, from immigrant families. Their parents had worked their way out of the working class and tentatively into the ranks of a tenuous entrepreneurial class or into the middle class. They were also the first generation of college students in their families.

In this article, I develop a sociological

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perspective of self-injury. I use Gloria Anzaldúa's concepts of Coatlicue States and the New Mestiza Consciousness to expand our understanding of self-injury among Latina youth.

### SELF-INJURY DEFINED

The mental health literature contains numerous instances of complicated and overlapping definitions for self-injury. For the purpose of this article, self-injury is defined as any incident where an individual has attempted to deliberately alter or destroy body tissue without suicidal intent in an effort to gain relief from overwhelming affect. This includes, but is not limited to cutting, burning, scratching, hitting, biting, and pinching (Favazza 1989; Pattison and Kahan, 1983; Bennun, 1984).

There are multiple types and manifestations of self-injurious behavior. This article specifically explores episodic, superficial/moderate, self-injurious behavior. This form of self-injury is usually ritualistic, it occurs multiple times over a period of time, and it is premeditated. It is also different from other types of self-injury. The two other major types include major self injury and stereotypic self-injury. Major self-injury includes eye enucleation, castration, and limb amputation and is often accompanied by a psychotic break (Favazza 1998). Stereotypic self-injury consists primarily of head banging, hitting, orifice digging, self-biting and is usually monotonously repetitive and sometimes rhythmic (Favazza 1998).

Finally, given the stigma attached to self-injurious behavior, I want to make explicit the assumption that cutting and other forms of self-injury are valid psychological coping strategies and must be understood as such.

When first confronted with the need to inform myself about self-injury, I turned to the internet. I found an abundance of infor-

mation about the topic, everything from how to best be supportive of someone who self-injures to information for people who self-injure looking for strategies to resist being "helped." Much of the popular, and thereby most accessible, literature on cutting and other forms of self-injury states emphatically that self-injury affects populations regardless of class, gender, and race. However, most of what is known about self-injury documented in mental health literature is based on data from small samples that are overwhelmingly female, middle- and upper-middle class, well-educated, young and white (Shaw 2002; Zila and Kiselica 2001; Suyemoto and MacDonald 1995; Pipher 1994; Strong 1998). In part, it was this significant discrepancy between the popular and academic literature that led me to this project.

The vast majority of the scholarly literature addressing self-injury can be found in psychiatric, psychology, counseling journals, and journals of adolescence (cf. Zila and Kiselica 2001; Gratz 2001; Favazza 1998). This literature primarily addresses the etiology, comorbidity, and pre-disposing risk factors for self-injury. To my knowledge, there is only one sociological study of self-injury (Hodgson 2004). Hodgson's study, however, focuses on the way "cutters," specifically, manage the stigma attached to their self-injurious behavior and the ways they learned to self-injure.

While there is much written about self-injury, much of the analyses available examine self-injury among people with other psychological disorders (e.g. Briere and Gil 1998; Linehan 1993; Russ et al. 1994; Simon, et al. 1992), institutionalized persons (e.g. Nijman et al. 1999; Osuch et al. 1999) or incarcerated populations (Ireland 2000). And only a small fraction of the literature addresses the use of self-injury among people who do not fit the stereotypic racial profile of self-injurers (e.g. Goddard et al. 1996 and McGidden et al. 1992; Neeleman et al. 1996; Abrams and Gordon 2003). By far,

most of the literature examining self-injurious behavior in the general population focuses on white women who have experienced some form of sexual or physical abuse and other forms of trauma (Wegscheider Hyman 1999; Muehlenkamp 2005; Zila and Kiselica 2001).<sup>1</sup>

The lack of research and literature is further exacerbated by the fact that there is little consensus as to what constitutes self-injury. Muehlenkamp (2005) found at least 33 definitions of self-injury in the literature.<sup>2</sup> One of the major problems affecting the definition of self-injury rests on its conflation with suicide. Because self-injury has a complicated relationship to suicidal behavior and can be readily misperceived as suicidal behavior, it is often unproblematically confused with both suicide attempts<sup>3</sup> and indirect forms of self-harm such as reckless driving, alcohol and substance abuse, and high risk sexual activity (Muehlenkamp 2005; Favazza 1989; Solomon and Farrand, 1996; Winchel and Stanley, 1991).

Cutting the skin on one's own arms and legs is the most prevalent form of epi-

sodic, superficial/moderate, self-injurious behavior. Self-injury is deliberate: it involves the destruction of body tissue without the intent to kill oneself. Mental health professionals have constructed self-injury as a problem affecting privileged, educated, young, middle class, white women (some authors have gone so far as to add "attractive" to the list of descriptors). Self-injury is also widely understood to be a *symptom* of other disorders as opposed to standing alone. The young, white, privileged self-injurer populating the mental health professional's imagination often manifests self-injurious behavior as a symptom of personality, post-traumatic stress, eating and dissociative disorders. Portrayals of self-injury in the popular media have also served to embed this version of the stereotypical "cutter" in the public psyche.

In order to further challenge the common perception that self-injury is a white, middle class problem occurring primarily in women, it is necessary to take into account the possibility that self-injury among women of color is more prevalent than the literature would have us believe. Indeed, given the high incidences of suicide and suicide attempts among Latina youth, it is not far fetched—albeit difficult to identify with any certainty—to believe that some of those cases of suicide and suicide attempts are actually by-products of self-injurious behaviors that have yet to be identified as such among Latinas and other women of color.

Other factors affecting the perceived prevalence of self-injury among Latinas include lack of reporting to, and treatment from, mental health professionals due to cultural norms that preclude discussing sensitive issues outside the home, misdiagnoses (Abrams and Gordon 2003), referral biases (Goddard et al. 1996), questions of accessibility (Moodley and Perkins 1990), low utilization of services among adolescents of color (Barker and Adelman 1994)

<sup>1</sup> This article deals primarily with self-injury among persons who do not fit the stereotype put forth by the literature. I work from the assumption that not every woman who self-injures has experienced sexual and physical abuse, just as not every woman who has experienced such abuse will engage in self-injury.

<sup>2</sup> Currently there is an emerging consensus that self-injury is defined as any incident where an individual has attempted to deliberately alter or destroy body tissue without suicidal intent (i.e. cutting, burning, scratching, hitting, biting, pinching) in an effort to gain relief from overwhelming affect (Favazza 1989; Pattison and Kahan, 1983; Bennun, 1984).

<sup>3</sup> One source of this confusion stems from the secrecy surrounding the use of self-injury as a coping strategy. Often the first time family members and friends find out about a person's self injury is when that person seeks help due to a self-injurious event that went too far. For instance, a cut that is too deep for the person to stem the bleeding alone may force the person to seek medical attention and often, an incident such as this is misperceived in hospitals as a suicide attempt.

and the disproportionate use of emergency services instead of general practitioners among people of color (Kunen et al 2005).

There is also lack of agreement as to whether self-injury is more prevalent among women than among men. Although numerous studies had previously found self-injury to be used more frequently by women (Pattison and Kahan, 1983; Patton et al 1997; Darche 1990; Favazza and Contorio 1989; Ross and Heath 2002; Suyemoto 1998; Suyemoto and MacDonald 1995), recent studies have found self-injury to be equally common among men and women (Nijman et al, 1999; Briere and Gil 1998; Gratz 2001; Martin et al 1995; Muehlenkamp 2005).<sup>4</sup>

Articles that do address class, race and ethnicity are extremely few and limited. Due to the scarcity of research taking race, class and ethnicity into account, each study engaging these issues falls prey to different problems often with the effect of producing differing and contradictory findings. For example, Ross and Heath (2002) conducted a study of self-injury at two schools; one urban and the other suburban. Although the schools' student population differed in their overall ethnic and socioeconomic backgrounds, they found comparable numbers of self-injury reported at the schools. Yet they nevertheless found that white students were more likely to self-injure regardless of the school they attended. In contrast, Abram and Gordon (2003) found that the meaning ascribed to, the expected consequences of, and the actual consequences of self-injury for the white women in their sample differed sharply from those of the young women of color. Needless to say that without more studies, generalizations are difficult at best.

At least one study accounting for race

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<sup>4</sup> One reason cited for the gender differences found in previous studies is that self-injury tends to be present among people with borderline personality disorder which tends to affect women disproportionately.

differences among people who self-injure falls prey to the problem of conflating suicidal behavior and self-injury. Goddard, et al. (1996) primarily examined incidences of self-poisoning that resulted in hospitalization. Unfortunately, this is one of those instances where it is difficult to be sure if the behavior being studied was self-injury or attempted suicide.

Another problem faced by the subset of the literature addressing race and ethnicity prevalent throughout the literature more generally, is reliance on extremely small data sets. For instance, Abram and Gordon's (2003) study entailed interviews with six young women; three white women and three women of color. Their sample of women of color is further compromised by the fact that only one of the three young women engaged in self-injurious behavior that was repetitive and pre-meditated as opposed to a single, spontaneous self-injurious event such as punching a window.

As with the vast majority of medical literature that engages racial categories, race is not defined (Hernandez-Arias 2005). Most studies that identify racial or ethnic differences within their samples fail to discuss the criteria used to make distinctions among groups. Indeed, Goddard, et al. (1996) explicitly state that, "Black' as an ethnic grouping is not always clearly defined" (514). Additionally, whiteness and other groupings are not defined as clearly as they should be either.

In their study of self-injury among women with lesbian and bisexual identities, Alexander and Clare (2004) argue that self-injury arises, "not as a symptom of individual intrapsychic disorder, but as a coping response that arises within a social context" (83). Shaw (2002) suggests that self-injury "reflects girls' and women's experiences of relational and cultural violations, silencing and objectification" (192).

I add that class (and perhaps class mobility) and race intersect to create unique circumstances under which women of color

use self-injury as a way to reconcile disjunctions in their class (and perhaps those of their parents as well) and/or racial identities. I extend arguments that self-injurious behavior is an understandable response to patriarchal and heterosexist cultural norms (Shaw 2002 and Alexander and Clare's 2004) to include racialized and class norms as well. Thus, self-injurious acts undertaken by second generation and working class (or formerly working class) Latinas among whom class and race intersect to create unique—and as yet unexplored—circumstances can be understood in this context as a way to reconcile disjunctions and dissonance among their class and racial identities. This moves the focus of self-injury away from individuals and onto societal structures.

### **COATLIQUE STATES, RITUALS, AND A NEW MESTIZA CONSCIOUSNESS**

What struck me about the students I encountered who self-injured and their understandings of their self-injury had to do with the social contexts within which it took place. One of these includes the relationship between the Latinas who self-injure and their families, particularly their (immigrant) parents. Although not always in reference to their self-injury, these students often rehearsed a very specific narrative about themselves and their families. They saw themselves as incredibly fortunate to be at one of the most prestigious universities in the country. During conversations about their feelings the students often expressed gratitude toward their parents for the sacrifices they made as immigrants and for making the type of social mobility they were experiencing possible. They also regularly dismissed their own difficulties which usually consisted of academic and social pressures especially when contrasted with the obstacles their parents had faced to provide educational opportu-

nities for them.

Often, self-injury is presaged by a large silence. This silence shrouds a major trauma that has been left unspoken and undiscussed about for a long time; hence the unproblematic correlation to sexual and physical abuse. This silence is juxtaposed with the spoken traumas of immigration. Thus, a child who is raised in the U.S. by immigrant parents may know intimately the difficulties experienced by her parents. Stories of sacrifices, difficult migrations, painful leavings that include upheaval from one's country and culture of origin, separation from family and friends due to economic crisis or political persecution, difficult border crossings that may include treacherous passings, swimming across rivers, walking across deserts, evading militarized borders and border personnel, experiences of rape, harassment, theft, and bribery, then finding one's self without work in an inhospitable country without knowledge of the language, culture, or the political and physical terrain, these stories abound in immigrant families, especially Latin American immigrant families. These narratives somehow work to silence the child who may not want to draw attention to personal "traumas" that seem trivial when contrasted with those of their parent's. And although I have yet to conduct the interviews that will inform the larger project of which this article forms an initial exploration, it is not unreasonable to imagine that one of the outcomes of growing up amidst true stories as well as the mythologies that inevitably grow around immigration narratives might form a shroud of silence among children of immigrants.

This silence is very much in evidence among many of the Latina students I have worked with—those who self-injure as well as those who do not.

Several of Anzaldúa's ideas about what it means to live in the borderlands as well as what it means to develop a new mestiza consciousness provide examples of new

ways to talk about and relate to self-injury as a coping mechanism. Here, I briefly outline just how well Anzaldúa's ideas overlay with some of what we understand about self-injury and how Anzaldúa's concepts of Coatlicue states and a new mestiza consciousness provide a lens through which we can better understand self-injury among Latinas and women of color more generally as well as a possible venue for facilitating a transition to less dangerous methods of coping.

To my mind, the most obvious analogy is that of the border itself. "The US-Mexican border *es una herida abierta* where the Third World grates against the first and bleeds" (Anzaldúa 1999:25). This analogy of the U.S.-Mexico border as a festering wound is used often in the borderlands literature. In numerous ways it is the foundational metaphor and emblematic image of the borderlands.

As Sonia Saldivar Hull notes in her introduction to the second edition of *Borderlands/La Frontera: The New Mestiza*, Anzaldúa begins by examining the "topography of displacement," symbolized by the U.S.-Mexico border. Anzaldúa argues that the borderlands are everywhere different cultures and classes meet and while she analyzes the contradictions of multiple ethnic identities within the mestiza—the Indian, the Mexican and the white, she does not as explicitly address the multiple class positions embodied by that same mestiza. This is what I refer to as cultural and/or class dissonance that children of immigrant may experience as they climb the ladder of social mobility.

Now, let us examine Anzaldúa's Shadow Beast. The Shadow Beast is the rebel inside that refuses to take orders, refuses to be tamed by both Mexican/Chicano culture as well as Anglo and heteronormative cultures. However, it also refuses orders from her. She argues that the mestiza lives in fear of being unable to suppress this monster, "barely keeping the panic below

the surface of the skin." This is analogous to the overwhelming affect that people who self-injure seek to relieve by cutting, or otherwise hurting themselves. Similarly, narratives of self-injury often express an inability to engage in any behavior other than self-injury when the need to self-injure builds to that degree. Anzaldúa's Shadow Beast serves as an analogy for the compulsive need to self-injure in order to feel alive and/or relieve a dissociative state—both often reasons cited to explain the need to self-injure.

Anzaldúa's use of the archetype Coatlicue is also fitting to our discussion of self-injury. Coatlicue is the ancient Earth and Mother Goddess adopted by the Aztecs. She represents the balance of male and female, light and dark, life and death. Anzaldúa argues that the goddess "Coatlicue is a rupture in our everyday world" (68). She identifies Coatlicue states as "those activities...which disrupt the smooth flow of life" (68). These are often rooted in the stress of living with cultural ambiguity. However, Anzaldúa warns us that if we do not make meaning out of our own Coatlicue states—our biggest disappointments and painful experiences—we turn instead to addictions:

An Addiction (a repetitious act) is a ritual to help one through a trying time; it's repetition safeguards the passage, it becomes one's talisman, one's touchstone. If it sticks around after having outlived its usefulness, we become "stuck" in it and it takes possession of us. But we need to be arrested. Some past experience or condition has created this need. This stopping is a survival mechanism, but one which must vanish when it's no longer needed if growth is to occur (68).

Although she is speaking here of addictions such as drugs and alcohol, she could

just as easily be referring to cutting and other forms of self-injury that are often used as a ritual that helps the person self-injuring through a trying time. Often it is a time dissociation which could also be understood as a Coatlicue state where only seeing one's blood run can relieve the numbness and remind the person engaging in self-injury that she is in fact still alive.

I draw parallels between Anzaldúa's discussion of the significance of her writing and self-injury. Here, however, I want to highlight the explicitly painful language with which Anzaldúa refers to the intent of her writing and other creative labors. Although usually read as metaphoric expression, I want to push the reader to imagine Anzaldúa's intent as more literal. For example, the epigraph for this article is an excerpt of one of Anzaldúa's poems. The epigraph ends: "This is my home/this thin edge of/barbwire" (25). Were we to imagine living—creating home—on a piece of barbwire we might begin to understand, not only the psychic pain and straightforward physical pain of life lived on the borderlands, but also that pain which is physical in its embodiment yet psychic in its source. Thus, the connection between self-injury and the new mestiza consciousness becomes more clearly evident. Anzaldúa refers to the new mestiza culture she wants to make—in one of her most quoted passages—with her own materials and her "own feminist architecture" (44). She states, "I want the freedom to carve and chisel my own face, to staunch the bleeding with ashes, to fashion my own gods out of my entrails" (44). These are explicit images, she is not molding or otherwise sculpting her face, she is carving and chiseling, she is bleeding, and using her entrails to fashion her gods. While it may be clear that this is metaphor, for some young women who self-injure, staunching the bleeding is as significant a part of the ritual of self-injury as the moment of hurting oneself.

Similarly, Anzaldúa says, "*Escribo con*

*la tinta de mi sangre*. I write in red. Ink. Intimately knowing the smooth touch of article, its speechlessness before I spill myself on the insides of trees" (93). She goes on to compare the need to write and create to a "cactus needle embedded in the flesh. It worries itself deeper and deeper, and I keep aggravating it by poking at it. When it begins to fester I have to do something to put an end to the aggravation and to figure out why I have it. I get deep down into the place where it's rooted in my skin and pluck away at it, playing it like a musical instrument—the fingers pressing, making the pain worse before it can get better. Then out it comes. no more discomfort, no more ambivalence. Until another needle pierces the skin" (95). And later, "This is the sacrifice that the act of creation requires, a blood sacrifice. For only through the body, through the pulling of flesh, can the human soul be transformed" (97).

I want to close with an acknowledgement that Gloria Anzaldúa believed in transformation, the transformation of cultures as well as of the self. I believe that by facilitating access to the new mestiza consciousness we can provide Latinas and Chicanas with alternative coping strategies. In this way helping them, as Gloria said, "Transition from sacrificial goat to officiating priestess at the crossroads" (102).

These are the initial thoughts that will inform future research. Once this framework is developed, I hope to conduct in-depth interviews with Latinas who self-injure in order to expand a sociological understanding of self-injury explored here.

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