#self-harm: the symbolic expression of non-suicidal self-injury

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Abstract

Non-suicidal self-injury (NSSI) is a phenomenon of increasing relevance, with high prevalence rates in adolescents and young adults. NSSI is one of the main risk factors for future. The method of virtual ethnography was carried out in a self-injury community on Facebook in order to broaden the understanding of the symbolic aspects related to the practice. In February 2021, 133 publications were collected and divided into three categories of analysis: self-injury, suffering and religion. Self-injury was understood as a compulsive behavior through which practitioners seek an experience of transcendence at the expense of pain. It resembles an addict behavior. The suffering described refers to depressive processes and is characterized by loneliness, difficulty in expressing feelings and the need to maintain a functional persona in everyday life. Therefore, the group emerges as a means of expressing aspects relegated to the shadows in the offline world. ∎
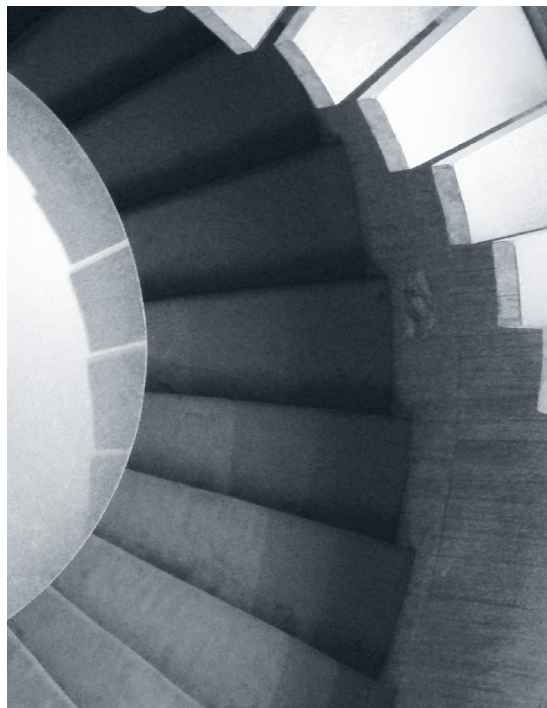
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Introduction

Non-suicidal self-injury (NSSI) can be understood as the intentional destruction of one's own body tissue without suicidal intent and for socially unsanctioned purposes on five or more days over the past year (AMERICAN PSYCHIATRIC ASSOCIATION, 2013). Most frequent methods include cuts on the skin, scratches, bites and burns, as well as hitting body parts against walls and sticking sharp objects in oneself (FONSECA et al., 2018; VICTOR et al.,2018). A greater variety of methods employed is positively associated with greater severity of self-injury (AMMERMAN et al., 2020).

NSSI has higher rates in adolescents and young adults, and it onsets typically at the ages of 14 and 15 (GANDHI et al., 2018). According to a systematic review conducted by Plener et al. (2018), the worldwide prevalence of self-injury in school samples is approximately 17%, while only 5.5% of older adults report episodes of NSSI, which suggests the progressive growth of the phenomenon in recent decades. In 2020, during the first months of the COVID-19 pandemic in Brazil, the numbers are even higher: in a sample of 4797 adults, one in ten reported self-injury episodes (FARO et al., 2021).

Although the phenomenon of self-injury is typically associated with the female sex (FITZGERALD, CURTIS, 2017; FONSECA et al., 2018; PLENER et al., 2018), Klonsky et al. (2014) highlight studies that point to equivalent rates between men and women. Such attribution of self-injury to females may be due to the absence of criteria in most researches for differentiating NSSI and self-injury practiced with suicidal intent, since women have higher rates of suicide attempts than men (BRASIL, 2021). Another possible explanation is the common association between NSSI and cutting – a method of self-injury that consists of inflicting tissue damage through cuts in the skin –, since women cut themselves more often while men are more likely to hit or burn themselves (FITZGERALD, CURTIS, 2017; VICTOR et al., 2018).

Based on studies from the last decade, Klonsky et al. (2014) emphasize that NSSI presents an even stronger correlation with suicide than other factors already established in the literature, such as anxiety, depression, impulsivity, borderline personality disorder and history of attempts – which places this behavior as an especially important risk factor for future suicide. According to Andover et al. (2017), few specific treatments for NSSI that are not linked to the diagnosis of borderline personality disorder have been developed to date and their effectiveness in non-borderline patients is still limited. In this sense, due to the peculiarities of the phenomenon and its severity, the DSM-5 (AMERICAN PSYCHIATRIC ASSOCIATION, 2013) classified NSSI as an independent diagnostic dimension and added it to section III, in the category of disorders that require further research and revision of its diagnostical criteria.

Symbolic expression of self injury

Self-injury can be understood as a psychosomatic phenomenon. According to Ramos (2006), the symptoms that are expressed through the body can be understood as symbols that allow reaching deep organic layers inaccessible to consciousness. The author emphasizes that the "organic symptom may correspond to a split in the representation of a complex/archetype in which the

abstract/psychic part was repressed" (RAMOS, 2006, p. 78). In this way, the awareness of the abstract polarity of the complex results, therefore, in a decrease in organic pathological expressiveness. However, as the conflict remains unconscious, the symptoms may recur compulsively.

Similarly, Rothenberg (2004) argues that the appearance of physical symptoms corresponds to an impulse of the psyche to symbolically express contents that remain unconscious. Thus, what cannot be directly made conscious is manifested in a physiological way and, therefore, the body helps the ego carry the contents that cannot be so easily absorbed. Although wounds are often experienced repulsively due to feelings of shame, disgust or pain, the author emphasizes that the wound also contains something of great value, as it contains an enormous potential for transformation: an indispensable jewel for psychological development.

Physical symptoms, in their most positive and metaphorical sense, are like jewels in the body waiting to be discovered. They create an impetus in the patient to do the inner work and bring with them a focal point for healing. The bodily symptom serves a well-defined purpose at this point, leading the individual to the source of the disease or disorder that created it and, consequently, to the cure (ROTHENBERG, 2004, p. 19).

Likewise, Hollis (1998) understands that symptoms express a desire for healing. Psychological work would not consist, therefore, in strengthening repression or in an attempt to eliminate symptoms, but in the search for meaning and understanding of them. Suffering is a requirement for psychological maturation and it is precisely the darker states that provide the context for stimulation and meaning attainment. Thus, despite Western society's ideals of unrestricted happiness, the author emphasizes the need to splash oneself in the dung from time to time in order to assimilate suffer-

ing. Therefore, the dark states can be understood as individuation calls for the integration of unconscious contents and the resumption of psychological development. If the person is not able to face the task of understanding meaning, he may remain stuck in a state of great suffering.

Sternudd (2010) proposes that the visual aspect is crucial for many self-injury practitioners precisely because it transforms something unspeakable into something concrete. Thus, if the injuries consist of a visible representation of bad feelings, it is understood that the healing process itself can serve as a trigger for the practice of self-injury, since the loss of scars can also lead to a loss of the sense of identity (STERNUDD, 2012).

Specifically writing about cutting, Sternudd (2014) presents other hypotheses. In opposition to the curved forms – linked to the concepts of chaos, eros and femininity – of the cut body regions, the straight lines symbolize principles of order, logos, and masculinity. Thus, the demarcation of parallel cuts on the skin could be interpreted precisely as an attempt to contain chaotic feelings by remodeling the body with a formal expression of order. On the other hand, the formation of keloids resulting from repeated engagement in cutting would literally and symbolically correspond to a "second skin" in order to provide protection to the individual (STERNUDD, 2010).

Based on reports from self-injury practitioners, Sternudd (2014) highlights the importance of the visual impact of blood as a way of externalizing pain in order to make it visible, as revealed by an interviewee: self-injury "makes the pain turn exterior, so I can see it, and know what is hurting me". It was also possible to identify blood as a vehicle that transports such an experience of suffering out of the body, since the sight of the blood dripping made one interviewee feel the stress running out of him through the blood. Based on al-

chemical studies, Jung highlights the symbology of blood as a means of uniting the body with the soul, as a substance capable of restoring life to the "dead" body (JUNG, 1990). In this sense, statements by practitioners who refer to self-injury as the only thing capable of making them feel alive were also frequent, such as the report of an interviewee: "the blood bursts out, and then I know I'm real. Not a doll that moves stiff. Then I'm a living being, with blood in veins [...] We are real, not fake" (STERNUDD, 2014, p. 22).

Pimentel (2019) highlights the importance of the skin as an organ that provides contour to the individual, simultaneously exposing and protecting him, establishing limits between the internal and the external world. Symbolically, the skin acts as a bridge between the body and the psyche. However, due to difficulties in the primal relationship, the author points out that individuals who promote extreme body modifications or practice self-injury remain in a state of indifferentiation between body and psyche. In this sense, any attempt at symbolic elaboration needs to happen through the body and the expression of the conflict is no longer symbolic to become concrete. Consequently, the libido loses its transforming function and becomes trapped in the repetition compulsion.

Another important form of expression of self-injury described in the literature addresses the self-injurious practice as a dependent behavior. From studies in virtual communities, it is clear that testimonies of self-injury practitioners, such as "It is a struggle for me not to do that, but it has already become an addiction" (ARCOVERDE, 2013, p. 48), "There are about three days that I'm holding back, so I don't have a relapse, but it's hard, I just think about it, and I know that eventually I won't resist... it always happens" (ARCOVERDE, 2013, p. 48) and "I'm feeling it all over again, been clean for so long" (SILVA, BOTTI, 2018,

p. 111), indicate that self-injury practice is often expressed as a compulsive behavior. It is noted that the words "addiction", "relapse" and "clean" used by practitioners are expressions that typically refer to the phenomenon of drug addiction. The similarity is specially related to the skin-picking disorder – characterized by the act of pinching the skin repeatedly resulting in lesions (AMERICAN PSYCHIATRIC ASSOCIATION, 2013) – which follows, at least partially, the cycles of previous tension, pleasure, gratification and relief, guilt, self-censorship, escapism, fissure, tolerance (OLIVEIRA, 2018).

Zoja (1992) understands the phenomenon of drug addiction as a result of the absence of initiation rituals in contemporary society. For the author, the absence of rites responsible for conferring meaning and demarcating the passage from the young to the adult world hinders the rebirth of the spirit. Thus, in a culture marked by the absence of institutions capable of promoting initiations and by the sacralization of consumption, drug use emerges as one of the few alternatives of transcendence. However, for those who experience a condition of profound meaninglessness, the need for transcendence acts unconsciously and destructively. Thus, the archetypal image of the negative hero is personified in the dependent as a way of obtaining identity and defined roles in society, even though this condition is negatively evaluated by the culture and results in self-destructive behaviors.

Although it is impossible to standardize all the different types of dependence behaviors and consider them equivalent, Oliveira (2004) points out that there are important similarities between the phenomenon of drug addiction and the so-called behavioral dependencies. For the author, impulsiveness, search for strong sensations, guilt for excesses, depression, disorganization of family life and decrease in work performance are common traits in the various

conditions. In addictions, Oliveira (2004) argues that there is a stagnation of the individuation process, since the repetition of the behavior results from a difficulty of elaboration that keeps the individual undifferentiated, alienated from himself.

While practicing the behavior they are dedicated to, they lose control, identify with the hero archetype, without thinking about the consequences of their actions. The difficulty appears in accepting limits, in sacrificing and choosing. Just like the drug addict, they want everything, here and now. Possessed by these complexes, it seems difficult to accept the human condition of incompleteness and to endure deprivation (p. 119).

Method

A study of the group "self-harm" was carried out on the Facebook social media in order to understand how NSSI is treated in this virtual community. The work was developed through virtual ethnography. This method consists of using online media to broaden the understanding of the ethnographic representation of a phenomenon on the internet through holistic data sets, which encompass culture, context, narratives and insider perspectives combined with the rigorous ethics of traditional ethnography (JENSEN et al., 2022). Facebook was chosen because it is a platform that allows people to gather round into groups that are freely accessible to any user. The group was found through research conducted in the Facebook search bar using the terms "autolesão" (self-injury) and "automutilação" (self-harm) and was selected based on four criteria: (i) a Brazilian and Portuguese-speaking group; (ii) public and visible group; (iii) active group with the largest number of participants and daily posts; (iv) group that proposes the objective of providing a space for reflection and support for self-injury practitioners.

All contents posted on the group in the month of February 2021 were read. Posts without any connection with self-injury, such as job vacancies spams and phishing attempts, were excluded from the analysis. The posts and their respective comments were archived through screenshots. Field notes about communication practices and interactions established in the group were also taken. The observation took place anonymously and no interactions between the participants of the group and the researcher were established.

Data collection resulted in 133 selected posts. The posts, which include texts, images and/or videos, were identified as Pn, with "n" being the enumeration corresponding to the order of collection. The respective comments were identified as PnCx, with "x" corresponding to the order of the comments in each post.

The selected contents were distributed in categories of analysis according to their characteristics and analyzed from the theoretical framework of analytical psychology. The thematic analysis was performed in three stages: an initial moment of identification of themes or topics that appeared repeatedly in the data, being compared for similarities and differences. Then central categories were established. The categories were reviewed by the research supervisor, and the few differences were discussed together until a convergent perception was reached. Three central categories were listed: self-injury, suffering and religion. The self-injury category refers to posts directly related to NSSI and encompasses both the publication of self-injury images and videos as well as comments and procedural descriptions of self-injury behavior. The suffering category includes posts in which users describe painful feelings and vent, but that are not directly related to the self-injurious practice. Finally, the religion category includes posts and comments that aim to sup-

port group members based on Catholic and Evangelical religious arguments.

Results and discussion

Self injury

The analysis of the posts revealed that the members describe the self-injurious practice as a way of turning emotional suffering into something concrete, as illustrated by the statements: "It still hurts, and it's swollen, but I guarantee it hurts less than the afflicted soul" (P65C50), "The marks on my arms tell my story, reveal my traumas..." (P92) and "I have these (scars) and more internal scars that do not heal" (P65C132). Descriptions of self-injury as an important means of affective regulation could also be observed, as revealed by the comments "When I cut myself, everything I feel is fine" (P12C4) and "I also did this to try to ease the pain. But over time, I realized that it wouldn't do any good. Don't do that, my dear" (P64C26).

Thus, despite the immediate relief provided by the cuts, many members of the community point out the inefficiency of self-injury as a long-term strategy: "[...] I confess, when you are cutting yourself, it is a wonderful feeling, but after you stop, you notice it didn't help at all. I look at each cut and wonder: why did I do that? [...]" (P55C26); "I know very well how it is, we feel relieved, but the worst comes later [sad emoticons]" (P74C6). The feeling of well-being is ephemeral, and the suffering can return even more intensively, which contributes to the deepening of the lesions, as highlighted in the comment: "I think you understand. When you start they are nothing more than scratches, and then, they start to turn into rips without you even noticing it" (P12C14).

It was also possible to verify that several members of the community describe self-injury as a compulsive behavior. Comments like "I

know how it is, it's really hard! And I can't control the urge to do that" (P75C4), "It's been a long time since I cut myself, but I can't take it anymore, the urge to cut myself is more than I can bear" (P75C12) and "I promised to my boyfriend I wasn't going to do that anymore [sad emoticon] but I couldn't resist. The pain of my soul is unbearable and that's the only way to make me feel better" (P75C23) are extremely frequent. Therefore, the group members recognize the challenge of remaining "free" from self-injury and celebrate the achievements of others, as in a post in which the user was congratulated by posting "A week without cutting myself" (P4) or in comments such as "two years without mutilating myself [heart emoticon]" (P66C13) along with a picture of an arm free of injuries. On the other hand, not everyone can sustain this condition: "I managed to stop, but I still have relapses" (P65C20).

Thus, it is perceived in the group that self-injury is characterized as a compulsion. There is a clear feeling of helplessness in the face of self-destructive impulses and the relief and well-being promoted by the act are fleeting and invariably followed by a return to the condition of suffering, capable of causing even deeper cuts. Injury-free periods are celebrated, and the return to self-injurious practice is described as "relapse". Hence, the group characterizes self-injury as a dependent behavior, analogous to drug use.

As Zoja (1992) points out, drug addiction is the result of the absence of initiation rituals in contemporary society. Nowadays, since the moment of the conception, the individual finds himself thrown at random into a certain culture and society that do not inspire him with any sacred respect. Consequently, there is no longer a laborious passage to the culture to be ritualized, responsible for conferring meaning and demarcating the transformations that accompany the development of the individual. When it comes to young people, for the trans-

formation to be truly significant, it is necessary to ritualize the death of the child so that the adult can finally be born. In this sense, the archetypal theme Death-Rebirth is identified in the initiation rites.

> Generally speaking, today's society is almost unable to offer institutional initiations. Such initiations would require both masters and structures formed over a long period of time and within an entire participating culture. Initiation assumes that mere birthplaces man in the world in unsatisfactory conditions, without values or transcendence, or rather in a merely vegetative condition. Access to a higher condition is obtained with a death and a symbolic and ritual regeneration (p. 21).

Western culture, however, not only lacks initiation rituals, but also highly exalts values of positivity, materiality, and consumption while leveling subjective differences. Zoja highlights that such a context favors the emergence of an archetypal need to transcend one's own state at any price, even at the expense of means harmful to physical health. Thus, especially among individuals who suffer from a lacking-in-meaning condition, the figure of the negative hero is personified as an unconscious attempt to achieve defined identities and roles even if negatively evaluated by current values, as would be the case with drug addicts.

The addict, however, cannot transcend his situation and finds himself trapped in a vicious cycle. The development process stagnates in addictions because it deals with a repetition of a behavior in which there is no elaboration, only anesthesia (OLIVEIRA, 2004). If the classic stages of successful initiation rituals consist of a situation to be transcended, death and rebirth, the transformation desired by the addict is doomed to failure, as it subverts the logic: when con-

suming the substance, the individual experiences a contact with the sacred, which provides a brief experience of rebirth. As soon as the effects cease, the individual returns to his profane condition of suffering that, ultimately, may cause his literal death if he does not consume the substance again.

The description of self-injury by the participants resembles a behavioral dependence, such as that described by Oliveira (2018) about skin-picking disorder. Group members describe similar experiences, as: "I cut myself to feel "ALIVE" [emoticons of broken heart and crying]" (P4C1). More than simply euphoria and well-being, self-injury can make practitioners finally feel alive, even if it is just for a brief moment, even at the expense of pain. Following the findings of Pimentel (2019), the original skin and body prove to be insufficient for individuals who injure themselves: there is a clear need to use the body to feel alive and the sacrifice necessary for rebirth cannot take place in the symbolic field, which demands the concrete sacrifice of the body.

Rejected by the culture, the archetypal psychological element of transcendence provided by ancient initiation rituals returns unconsciously and destructively in self-injury cases. Currently, the need to transcend manifests itself mostly through group phenomena in which individuals with similar conflicts gather round in order to create not only a community spirit but also that necessary mystical group atmosphere that exalts and reciprocally reinforces the attempt of each one, as Zoja (1992) points out. In line with Pimentel (2019), injuries to the body seem to emerge as ways of sharing with others what one cannot bear alone: the psychic suffering seems so heavy that the individual needs to share it with the collective to bear it. However, as long as it is not elaborated and integrated, the need to transcend and the experience of wholeness will remain in the shadow and haunt

the individual with symptoms of excess or dependence (OLIVEIRA, 2004).

Suffering

It was possible to identify three important aspects of the suffering shared by the group members: loneliness, depression and trauma. Loneliness is a theme that screams in the community. The feeling of helplessness and of having no one to rely on was widely shared in the group, whether through personal testimonies, poems, or songs about the theme. Often, the pain of loneliness appears directly linked to disappointments in love, as can be seen in the comment "because not a single girl wants me" (P57C5), in which the member explains the reason for his suffering after an episode of self-injury.

However, the difficulty of establishing bonds with peers is also highlighted when it comes to friendships, as seen in "Neither friends, nor love. I'm the person everyone finds cool, but nobody really likes" (P35). Consequently, it was possible to identify that loneliness often awakens the feeling that people are alone because they are undesirable, which contributes to the development of a diminished sense of self-worth, as seen in the post: "I am really rubbish. Everybody always leaves my life. I got tired, the people I loved so much lied to me and destroyed me, I don't feel like living anymore [emoticons of broken heart and crying]" (P18).

Hollis (1998) represents the dreaded loneliness as one of the "swamplands of the soul": dark and threatening states in which the individual finds himself trapped, mired, unable to proceed with his psychological development. According to the author, the recognition that no one is able to save us, protect us from death or even sufficiently distract us becomes inevitable. Thus, sooner or later, we are forced to abandon the fantasy that there is a magical other who will save us from existential isolation.

Loneliness is threatening precisely because it is a hopelessly human condition. Not even the most functional of relationships could fully restore the sense of mystical participation in uterine life, the original broken connection at birth that we seek so much in others. Thus, Hollis argues that the maturation of human beings depends directly on their ability to make choices, to stop blaming others or wait for them to come to their rescue, and to recognize the pain of loneliness, no matter how much they are involved in relationships and social roles.

The author points out that even overwhelming loneliness contains something of enormous value: the development of our unique qualities. It is by being alone, with only our own resources, that we discover who we are and which direction we will take. Alone, we have the opportunity to disentangle ourselves from others, to differentiate ourselves, to advance towards our own path. If the impossibility of a full union with the other brings suffering, when we reject the call that solitude summons, we suffer doubly because we also abdicate our most personal journey, individuation.

If entering alone the dense forest through the path that no one has ever traveled before can be really terrifying, at least it enables us to leave behind the swamplands of loneliness, where the more we struggle, the more we are swallowed by quicksand and the deeper we sink. Thus, the "antidote to loneliness is to embrace it. As in homeopathy, the wound is healed by swallowing some of the toxin" (HOLLIS, 1998, p. 87). If we can embrace loneliness, we will discover solitude, and we will realize that there is always an inner presence to talk to. Then we can cross the swamplands of loneliness.

Content shared by users related to feelings of deep sadness and lethargy also surfaced in the group, as indicated by the posts "today I am not sad, today I am very sad [heartbroken emoticon]" (P26) and "The sadness is so huge that it makes you so sleepy... but you can't sleep [crying emoticons]" (P27). Another concern is the incessant nature of suffering and the difficulty of leaving this condition, as

suggested by the posts "Please don't make me pretend that this is just a phase! Because it's not..." (P113) and "25 years old and my life is stationary. I am trying to climb the great hill of hope for a destiny: insomnia and existential crisis sums me up now" (P58). Thus, it becomes clear that such feelings do not correspond to a natural fluctuation of mood, but to long-lasting depressive states.

Suffering, however, is often disguised and experienced in secret, hidden from the individual's other relationships in everyday life, as seen in the post that generated the highest number of reactions in the category: "I play tough, you know? But inside it hurts so much" (P96). In the second most reacted post, the author shared a photo of herself with the caption "I learned to smile even though I was in pain" (P29). it is possible to identify both in the picture: a smile on her face and scars on her arms.

The same dynamics can be observed in several other reports, such as "I learned to cry without tears, to smile without happiness, to live without desire" (P69), "[...] Until when do I have to show a smile on my face when I'm feeling so bad in the inside. Until when do I have to display a person I am not" (P1) and so many others. It is clear, therefore, that the difficulty in expressing emotions combined with the feeling of inauthenticity resulting from the large contrast between the aspects demonstrated by the persona and the pain felt internally are important components of the conflict experienced by many members of the group. Then, the virtual community emerges as a means of expressing aspects relegated to the shadow in the offline world.

Hollis (1998) points out that, as the word depression itself literally says, there is something being pressed down: our vital energy. Hence, the feelings of sadness, fatigue, apathy, anhedonia and pain that surround us during our stay in the swamplands of depression. Even in the case of the so-called "smiling depressions", in which we manage to comply well enough with the demands of the outside world, the soul becomes heavy and prevents us from enjoying the journey. If the roles we are called to play are not harmonizing with our inner image, we may become depressed. Depression is precisely the way in which the psyche expresses that there is something profoundly wrong with the way life is being conducted; it is a "protest of the soul that autonomously removes energy from us because it does not approve the way the ego is spending it" (HOLLIS, 1998, p. 103). Depression drains our energy, and we won't move until we recover it.

> If we have left behind a vital part of ourselves, metaphorically speaking, it is essential to go back to find it, bring it to the surface, integrate it, live it. Just as shamans enter the spirit world to retrieve the part of the soul that has been split, and bring it back to reintegrate it, we are also therapeutically obligated to find what was left behind and bring it back to the surface (HOLLIS, 1998, p. 98).

As we desperately try to climb the walls of the dark pit we find ourselves in, we are, sooner or later, frustrated with another fall. On the other hand, as we dive into the darkness that inhabits us, we will discover that the well is not bottomless. We will, yes, be forced to face what we fear the most, but in compensation we will be able to rescue our forgotten self and recover our energy to finally return to the surface. Even though we despise this lugubrious swampland, Hollis argues that there is great therapeutic value in depression. Instead of trying to eliminate it, if we know how to respect it, confront it and, like Orpheus with his magic lyre, maybe even enchant it, we will be able to find the greatest treasure of our soul: our authentic Self.

Suffering resulting from painful experiences is another aspect frequently highlighted

in the community. In the post "Have you ever been bullied? For what?" (P83), it was possible to identify that group members suffered mostly due to physical appearance, such as "for being short and chubby" (P83C8), "for being thin and tall and my pimples" (P83C35). However, it was also possible to identify issues related to ethnicity: "A lot, because of my color, because of my hair" (P83C31) and "[...] he said that I look like the monkey from Passatempo... I laughed, but I felt it" (P83C32); to sexual orientation: "for being bi and my way of being" (P83C5); and mental health: "for being thin and having depression [sadness and broken heart emoticons]" (P83C3). In the post "I challenge you to write the most painful words that have ever been spoken to you" (P13), it was possible to verify a series of traumatic experiences related to the experience with parents, such as "I tried to abort you, but not even the devil wanted you" (P13C28) and "You are useless, you wild animal, that's why I left you when you were born" (P13C2).

Therefore, it is possible to identify the patriarchal culture as an important determinant of the suffering revealed by the group members. Racist, sexist, and misogynist manifestations inhibit "otherness" and relegate emotional expressiveness, the demonstration of weakness and, ultimately, the feminine to the shadow. Allied to capitalism's ideals of productivity, consumption and unrestricted happiness, depression can be considered itself a manifestation of the shadow of our culture (HOLLIS, 1998). Sadness, anhedonia, lethargy, and low self-esteem would emerge as the necessary compensation.

For individuals who suffered so much violence in childhood, it is not uncommon for them to internalize such circumstances in a diminished sense of Self. In this sense, Hollis points out that the task implicit in this particular swampland is to discern the difference between what happened to us in the past and who we are in the present. Becoming

able to say "I am not what happened to me; I am what I chose to be" is a necessary condition for psychological development (HOLLIS, 1998, p. 95).

Religion

The role of religious organizations in the community is highlighted with a series of posts directing users to participate in Church projects. Due to hardships shared by many group members, messages that seek to offer comfort through attachment to the Church or the belief that everything will be solved by faith in God are frequent: "Don't think about it, my dear. Jesus Loves YOU. Your soul is very precious to God. Have faith, it's just a phase... everything will pass" (P111C16); "Go to church and accept Jesus, I'm sure he will solve your problems" (P111C20). It should be noted that the last comment generated three reactions of laughter.

Specifically in relation to suicidal ideation, religious comments acquire even more relevance. In response to the post "Is there a way to commit suicide without pain?" (P100), it was possible to identify comments such as "yes yes... You go to church and get baptized, then you die to the world and are reborn to Christ [...]" (P100C36). In the post "Which medicines taken together cause suicide?" (P111), the same pattern could be observed through the comment "The medicine is called the Eucharist. You die to the world and you are born to God!" (P111C14).

Therefore, the means of overcoming a condition of great suffering described in the reports of several users point to the same archetypal pattern of death-rebirth that underlies the dependence on the self-injurious practice. If the process of dependence consists of a failed attempt at spiritual rebirth and if the suicidal ideation comes from a desperate desire for immediate transformation, the comments P100C36 and P111C14 suggest that religion is a possible way to successfully achieve transformation and transcendence.

However, the predominance of messages that point the way to salvation through reli-

gion makes several users suspicious. As an example, it is possible to highlight the question "If you're free, why are you still in the group? Are you cured? Don't you take pills anymore?" (P111C45), in which the skepticism of the members is evident in the face of reports of suffering overcoming through faith. Even users who believe in God show discomfort with the excess of messages of this nature, as evidenced by the comments: "I believe in God, but my I've reached my limit" (P111C38), "How many times in my room I begged for help, I asked Him to at least let me sleep, I prayed and prayed with all my strength" (P111C39), "And I had no results" (P111C40).

It is clear that discussions about beliefs are frequent and polarize opinions in the group. It is noticed that the members themselves recognize the lack of other forms of support and types of intervention. Thus, if, on the one hand, Christian religions can provide legitimate experiences of transcendence to certain individuals, on the other hand, it cannot be said that the path of Christian faith is configured as a possibility of psychological development for all. About the initiation promoted by Christianity, Zoja (1992) says:

> Undoubtedly, it cannot be said that Christianity lacks revelation, a model that serves as a guide for man. Nor that Christianity lacks the intention of overcoming the natural man and, after his death, reborn the consecrated man. But this consecration is essentialized, absolutized, open to all and equal for all. There are no different paths: they are as many as there are men and at the same time one, the one that was opened by God. The many rites of passage are practically replaced by baptism. There are no several truths to be revealed, but the Word. Simplified to the maximum, the passage, the initiation, is open to everyone and to no one (p. 118).

In a society that lacks rituals in which young people suffer from the absence of meaning and defined roles, Christianity hegemonically assumes the task of initiating individuals in each new stage of life. However, religion itself can gain mass contours, as the concern with the apprehension of symbols is often neglected by the theatricalization of sermons in order to assemble more followers. Thus, instead of fostering psychological development in the spiritual realm, the mechanical and thoughtless repetition of doctrine can both lead those who reject it towards the development of a dependent negative identity, as well as exempt the most fervent believers from the responsibility of looking after their own life as it is in God's hands.

Conclusion

Based on analytical psychology, this research aimed to understand how the phenomenon of NSSI is expressed in a virtual community. It was possible to identify that self-injury is described as a compulsive behavior with characteristics of dependence through which practitioners seek an experience of transcendence even at the expense of pain and suffering.

It was also possible to identify that the suffering described by the members refers to long-lasting depressive processes and is characterized by great loneliness, experiences of traumatic events, difficulty in expressing feelings and the need to maintain a functional persona in everyday life. Thus, the group can be understood as a means of expressing aspects relegated to the shadows in the offline world, with depression as a compensatory dark aspect of a society that strives for productivity and unrestricted happiness.

Finally, it is noticed that there is a predominance of religious organizations offering support to members, which generates controversy in the community. The suffering shared by community members is quite significant and, although necessary, banning pages with harm-

ful content, by itself, is insufficient to foster recovery processes. Thus, given that self-injury practitioners rarely seek health professionals, it is necessary to develop new intervention strategies and mental health care in order to access the online environment and promote greater approximation between users and health services.

Resumo

#automutilação: a expressão simbólica da autolesão não suicida

A autolesão não suicida (ALNS) é um fenômeno de relevância crescente com altas taxas de prevalência em adolescentes e jovens adultos. Como método, foi realizada etnografia virtual em comunidade de autolesão no Facebook de modo a ampliar a compreensão dos aspectos simbólicos relacionados à prática. Em fevereiro de 2021, 133 publicações foram coletadas e divididas em três categorias de análise: autolesão, sofrimento e religião. A autolesão é compreendida como similar a comportamento compulsivo por meio do qual praticantes buscam uma experiência de transcendência ainda que às custas de dor. Assemelha-se a uma dependência comportamental. O sofrimento descrito aponta processos depressivos e se caracteriza por solidão, dificuldade de expressão de sentimentos e necessidade de manutenção de uma persona funcional no cotidiano. Assim, a comunidade emerge como meio de expressão dos aspectos relegados à sombra no mundo offline. ■

Palavras-chave: autolesão, automutilação, ALNS, redes sociais, psicologia analítica

Resumen

#automutilación: la expresión simbólica de la autolesión no suicida

La autolesión no suicida (ALNS) es un fenómeno de creciente relevancia con altas tasas de prevalencia en adolescentes y adultos jóvenes. Como método, se realizó una etnografía virtual en una comunidad de autolesiones en Facebook con el fin de ampliar la comprensión de los aspectos simbólicos relacionados con la práctica. En febrero de 2021 se recopilaron 133 publicaciones y se dividieron en tres categorías de análisis: autolesiones, sufrimiento y religión. Se entiende que la autolesión es similar al comportamiento compulsivo por el cual los practicantes buscan una experiencia de trascendencia incluso a expensas del dolor. Se asemeja a una adicción conductual. El sufrimiento descrito apunta a procesos depresivos y se caracteriza por la soledad, la dificultad para expresar los sentimientos y la necesidad de mantener una personalidad funcional en la vida cotidiana. Así, la comunidad surge como medio de expresión de aspectos relegados a la sombra en el mundo offline. ■

Palabras clave: autolesión, automutilación, ALNS, redes sociales, psicología analítica

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