When I realized this condition of looking at myself as in a movie was permanent, I understood it would eventually destroy the core of my life.

(Patient quoted in Sass & Parnas 2001: 347)

One must not eye oneself while having an experience; else the eye becomes "an evil eye".

(Nietzsche 1976: 517, § 7)

Woman, like man, is her body; but her body is something other than her.

(de Beauvoir 1997: 61)

While working on my dissertation a few years ago I was reading research on distortions of bodily self-experience in the early stages of schizophrenia. As I came across vivid descriptions and testimonies of distancing and dissociation, I continuously found myself reminded of Simone de Beauvoir’s descriptions of bodily alienation in the development of feminine subjectivity. Although I could clearly recognize essential differences between the descriptions of how people suffering from incipient schizophrenia experience their bodies and those of women’s bodily self-objectification, I still had an eerie sense that there were quite obvious parallels to be drawn between these different forms. The pathological distancing and objectifying attitude toward one’s own body that are characteristic of the early stages of schizophrenia seemed to share strik-
ing similarities with the normative self-objectification of women’s bodies. In both cases there seemed to be a pronounced experiential distance between the self and its own body, enforcing a dualistic self-understanding and the experience of the body as an external object alien from the self. The thought was rather chilling: that a heightened tendency to objectify and alienate oneself from one’s body is in one case an early symptom of perhaps the most fierce and gruesome of mental disorders and in another case a normative ideal encouraged and enforced through disciplining practices.

In this essay I will bring to light these two different, but in some respects strikingly similar, forms of bodily alienation and self-objectification. I will not carry out any comprehensive comparison or present any conclusive evidence. My attempt is rather only to put the two different forms of self-objectification on display, let them speak to one another and thereby hopefully trigger questions – without necessarily providing any answers – about the boundaries between the normal and the abnormal and about the relationship between normativity and normality.

**Schizophrenic Distortions of Bodily Self-Experience: Hyperreflexivity and Diminished Self-Affection**

Schizophrenia remains one of the most perplexing and incomprehensible of mental disorders. According to a phenomenological account developed by Louis Sass and Joseph Parnas, schizophrenia is best understood as a two-faceted disturbance of self-experience involving the two interrelated phenomena of *hyperreflexivity* and *diminished self-affection* (Sass & Parnas 2001; Parnas & Sass 2002; Sass 1987; 1994; 2003). Hyperreflexivity refers to an “exaggerated, reflexive awareness of aspects of experience that are normally tacit” (Sass & Parnas 2001: 348). In hyperreflection, phenomena that
are in normal cases inhabited and experienced as part of the self become the focus of objectifying awareness and are available to an introspective gaze (Parnas 2003: 233). Hyperreflection is characterized by a detached attitude toward one’s own body, actions and thoughts. On the one hand, this heightened form of self-monitoring entails the externalization or objectification of parts of one’s own self in outer space; on the other hand, it can bring about the internalization or subjectivization of what is usually external and objective. There is thus a distortion of borders between self and non-self that interferes with the very structure of experience (Sass 1987: 13).¹ According to Sass and Parnas, hyperreflexivity goes hand in hand with another alteration in self-experience, what they term diminished self-affection. This experiential state, characterized by an attitude of indifference and detachment, refers to a weakening of a fundamental sense of existing as a subject of awareness and action, as a first-person perspective and presence for oneself and for the world.

Together, the two interrelated phenomena of hyperreflexivity and diminished self-affection imply a disturbance of ipseity, i.e. of the basic sense of existing as a first-person perspective on the world, as a vital core in control of one’s own experiences and actions. The experience of disturbed ipseity in which the sense of self no longer saturates experience and in which a first-person perspective on the world seems to be slipping away is the most prominent feature of altered presence in the early stages of

¹ The confused boundary between self and world and the externalization of parts of the self in the world are clearly illustrated by the experiences of Renee described in Sechehaye, *Autobiography of a Schizophrenic Girl*. Renee’s loss of subjective self-awareness is accompanied by an increasing localization of her feelings in things. Her therapist writes, “The boundaries separating the inner world of thinking from the outer world of reality shade off, then fade out. Objects are alive, they become threatening, they sneer; they torment her; they are invested with her own aggression harbored against the world” (Sechehaye 1994: 146).
schizophrenia. This experience is described as a diminishing sense of being conscious or fully there. As Parnas puts it, the “patient senses an inner void, a lack of an indefinable inner nucleus, which is normally constitutive of his field of awareness and crucial to its very subsistence”. Patients may describe a feeling of having no consciousness, of their consciousness being fragmented or not “as whole as it should be”, of having a diminished “I-feeling” or a disappearing I (Parnas 2003: 225).

The split within the self that is characteristic of incipient schizophrenia, prior to its full development, is articulated in different ways. There is an emergence of an experiential gap between the self and its contents, in terms both of the experience of thought processes and of the experience of embodiment. These two aspects of self-experience, mental and bodily, are not completely separate from one another and schizophrenic distortions of both serve to illustrate their close interrelation. Hyperreflexive objectification of thought processes in schizotypal disorders and early, pre-psychotic stages of schizophrenia is paralleled by distortions in bodily self-experience that take a number of different forms with different degrees of perplexity and strangeness. What is characteristic throughout the diverse forms, however, is the tendency, mentioned above, to experience one’s own body mainly as an object that is distanced from the self in significant ways. Parnas writes that the most frequently occurring early alteration in bodily self-experience is a feeling of “being detached, disconnected from one’s body, which feels somehow alien or not fitting the sub-
ject” (Parnas 2003: 227). He makes reference to patients saying that “it feels as if my body does not belong to me” or as if it is “too small to be inhabited”. The use of the conditional as if indicates that while there is an experiential distance between the self and her body, there is in equal measure a distance between the self and her altered experience (Parnas 2003: 219, 227).

The sense of detachment and the alienating objectification of one’s own body can also become manifest in experiences of loss of bodily coherence, whereby it is not primarily the body as a whole that is disconnected from the self but, rather, separate body parts that are experienced as isolated from one another. According to Parnas, such experiential loss “may take on an alarming intensity” as the disintegration of bodily unity and feeling of fragmentation are “accompanied by a (pre)psychotic panic of literal dissolution” (Parnas 2003: 227). Sass quotes a patient giving vivid expression to this experience of falling into pieces:

> When I am melting I have no hands, I go into a doorway in order not to be trampled on. Everything is flying away from me. In the doorway I can gather together the pieces of my body. It is as if something is thrown in me, bursts me asunder. Why do I divide myself in different pieces? I feel that I am without poise, that my personality is melting and that my ego disappears and that I do not exist anymore. Everything pulls me apart…. The skin is the only possible means of keeping the different pieces together: There is no connection between the different parts of my body (Sass 1987: 1; cf. 1987: 17).

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2 Sass writes, “One’s arms or legs, one’s face, the feelings in the mouth or throat, the orbital housing of the eyes, even one’s speaking, thinking or feeling can come to seem objectified, alien and apart, perhaps even like the possessions of some foreign being” (Sass 2003: 252).
What is quite striking in this testimony is not only the sense of an increasing disconnection between different body parts, but also the struggle to resist this process of falling apart. The patient attempts to gather together the different parts of the body, and thereby to salvage a sense of self, by finding support in confined spaces with clear limits, such as the doorway and the skin of the body. What also comes to expression here is a wavering and ambiguity concerning what is causing the experiential loss of bodily continuity. On the one hand, there is the experience of being struck by an undefined outside force that bursts the self asunder; on the other hand, there is the sense that this division is in fact caused by the self itself. It might be said that this ambiguity reflects a growing experience of indistinct borders between self and non-self, which in normal cases is an inevitable aspect of experience, but it might also be said that it reflects the experience of still being a self struggling to keep itself together by dividing itself into controllable parts.

Another distortion in bodily self-experience is “a feeling of morphological change” such that “the body or its parts feel heavier/lighter/smaller/larger/longer/shorter” (Parnas 2003: 227). This experiential alteration in weight or size may, as Parnas writes, find its affirmation in optical illusions that provide the visual experience of bodily change. These optical illusions can result in, for instance, difficulty recognizing oneself in photographs. They may also manifest themselves in different forms of the mirror phenomenon, whereby the patient either becomes obsessed with inspecting her face in the mirror because of the feelings of morphological change, or comes to avoid her mirror image as it is experienced as threatening or provoking to the self.

Distortions of embodied subjectivity in schizotypal disorders
and incipient schizophrenia may also involve significant alterations of motor performance. The body may take on an overwhelmingly strong will of its own that the subject cannot control and that interferes with her own actions. According to Parnas, this interference is initially not experienced as being caused by external forces, but may well develop into full blown delusions involving the experience of being controlled from the outside. Also, patients may experience a so-called *deautomatization* of motor action in which habitual, everyday movements are arrested and require conscious attention. Parnas recounts the case of a library assistant who reported that she was alarmed by a frequently recurring experience of having to think about each movement when performing the everyday habitual task of replacing returned books from a trailer onto the library shelves. She had to reflect and pay attention to how she was to lift her arm, grasp a book with her hand and turn herself to the shelf (Parnas 2003: 228). Another patient describes the experience of a significant distance between himself and his body while at the same time knowing well that this experientially alien body is his own. He has the experience of no longer being in his body and he senses it as being distant from him. When walking, he experiences himself as walking “like a machine”. He says, “it seems to me that it is not me who is walking, talking or writing with this pencil. When I am walking, I look at my legs which are moving forward; I fear to fall by not moving them correctly” (Parnas 2003: 227; cf. Parnas & Sass 2002: 106).

This shift of focal awareness from the aim of habitual movements to the bodily movements themselves, and often in isolation from one another, is a form of hyperreflexivity that clearly shows the disruption of the experience of both self and world. In being experientially disconnected from its own embodiment,
the self also loses its natural connection to the world in which it is embedded. The distraction of a flow of movements and the alienation of self and world involved in shifting focus from the aim of the movements to the movements themselves can easily be recognized as a hindrance in everyday life. Running down a flight of stairs, navigating a bike in cross-country terrain, or flipping a crêpe in a pan are tasks that are equally difficult to carry out if one’s own bodily movements are thematized and objectified in the process. Perhaps this recognition also sheds some light on the suffering involved in the onset of schizophrenia in which this type of self-objectification characterizes the predominant way of being in the world and intensifies throughout the development of the illness.

What is apparent in all these distortions of bodily self-experience is a lack of the very foundation of existing as a self in the world. There is a clear disturbance of presence, which according to Sass and Parnas is foundational for other and more explicit anomalies of selfhood, such as severe bodily dissociations, thought insertion or delusions (Parnas & Sass 2002: 106). The tacit medium of being that is provided by embodiment becomes problematic and disturbed to such an extent that a basic self-presence is significantly diminished or even lost. The loss of a normally unreflected immersion in the world occurs fairly early on in the development of schizophrenia and is made manifest in an experience of not quite being oneself, of slipping away as an experiencing pole in relation to the surrounding world, and of experiencing the world as a hostile environment deprived of the affectivity and fullness of first-person embodied involvement (Parnas & Sass 2002: 116).
Parnas and Sass describe the case of a patient who complained of a distressing and pervasive feeling of disengagement and isolation from the world, accompanied by an exaggerated self-monitoring. He had the sense that his first-personal life had been lost and replaced by a third-person perspective, which made him experience the very process of his own experiencing rather than simply living through it (Parnas & Sass 2002: 105; cf. Parnas 2003: 223).

Hyperreflexivity and diminished self-affection are implicated in one another and are thereby closely interrelated as different aspects of the same phenomenon. Parnas writes that hyperreflexivity may come to have a compensatory function as the loss of natural evidence of the self is accentuated (Parnas 2003: 230; cf. Parnas & Sass 2002: 108). This form of compensation is, however, not likely to restore a sense of immediate self-presence but is rather bound to further increase the gap within the self, causing an even stronger sense of groundlessness and alienation under the pretense of taking control of the self and its functions. As Sass points out, people suffering from schizophrenic symptoms often seem to be caught in the insoluble dilemma of being “driven to search for the self [and] yet liable to destroy the self in the act of searching” (Sass 1987: 23). He recounts a patient who was overwhelmed by an enormous fear of forgetting herself the moment she realized she had not been thinking about herself. The coun-

3 In testimonies of patients experiencing the loss of self-presence there is, however, at the same time a clear and acute presence of self brought to the fore. While, as Sass argues, the experiential gap within the self, which is brought about by the exaggerated self-monitoring of hyperreflexion, seems to destroy the self, there is nevertheless still a self there that experiences and expresses its own splitting and its desperate attempt to find grounding and unity of experience. What is more striking in the testimonies is not immediately the lack of selfhood but, rather, the urgent presence of selfhood.

4 As Sass writes with reference to William James, earlier in the same article, “acute self-consciousness has the effect actually of effacing the self, while simultaneously obscuring its own role in this effacement” (1987: 8, italics in original).
terproductivity of the search for the self is illustrated further by the testimony of another patient who desperately aimed to find the experiential core of her own consciousness but only found, to her puzzlement and confusion, that it escaped being grasped. As a result of this inability to grasp the core of her consciousness, she became unsure about whether or not her thoughts really belonged to her. Here, the desperate attempt to locate the self as something solid and graspable, the inability to simply live through the ambiguity of selfhood, leads to the feeling of having no self (Sass 1987: 24). The disastrous interrelation between hyperreflexivity and diminished self-affection is expressed clearly in the testimony from yet another patient suffering from developing schizophrenia: “When I realized this condition of looking at myself as in a movie was permanent, I understood it would eventually destroy the core of my life” (Sass & Parnas 2001: 347).

Many of these alterations in bodily self-experience stand out clearly in their morbidity and strange abnormality. Experiences of bodily dissolution, interference in bodily actions or delusions of being controlled by external forces testify to different stages and forms of agonizing insanity. But many of the alterations do not seem to necessarily indicate any particular strangeness at all. Rather, they are heightened forms of normal everyday self-objectification. They are exaggerations of self-reflection, which by itself is an essential feature of human selfhood. These cases display how a normal ability to objectify oneself can be blown out of proportion and come to dominate one’s way of being in the world and relating to oneself (Sass 2003: 246). As can be seen with clarity in the accounts and testimonies above, these heightened forms of self-objectification, before the onset of more severe anomalies or of psychosis, have quite serious implications for the sense of
self-presence and agency. They demonstrate the observation Sass makes, with reference to William James: “how loss of self may develop not from a weakening of the observing ego or a lowering of the level of consciousness but, to the contrary, from a hypertrophy of attentive, self-reflexive awareness” (Sass 1987: 10). The close interrelation between a hyperreflexive tendency and a diminished sense of self-presence must motivate us to bring to light cases of heightened self-objectification and self-alienation that take place within the bounds of normality and further ask what the implications of such self-objectification may be.

**Bodily Alienation**

Drawing (explicitly or implicitly) on Simone de Beauvoir’s descriptions of bodily alienation and her analysis of woman as Other in *The Second Sex*, many feminist thinkers have demonstrated different ways in which women live their bodies as objects distanced from and alien to themselves. In her now classic essay “Throwing Like a Girl”, Iris Marion Young, for instance, argues that the feminine body is treated by the woman as an object that exists separate from and often in opposition to the aims of the woman as subject. Young writes, “feminine existence experiences the body as a mere thing – a fragile thing, which must be picked up and coaxed into

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5 Perhaps needless to say, I am not making the claim that all women experience themselves and their surroundings in the same way simply because they are women. However, as Iris Marion Young writes, despite great individual variation in each woman’s experience, there is within a given sociohistorical set of circumstances a unity in women’s situation that can be described and made intelligible (Young 2005: 29). Regardless of its fluidity, contingency and heterogeneity, the category “woman” is a category that no actual woman can entirely escape. Julien Murphy puts it fittingly: “We must claim we are ‘women,’ not because any of us really is a ‘woman,’ but rather because we all are immersed within a historical situation of being seen as ‘women’” (Murphy 1989: 106).
movement, a thing that exists as looked at and acted upon” (2005: 39). In the second book of *The Second Sex*, de Beauvoir shows how girls and women are socialized into a dualistic self-understanding; woman becomes an object for herself and begins to identify her body as herself but external to herself. The “increasing experiential distance between subjectivity and corporeality” characterizing the early stages of schizophrenia (Parnas 2003: 227) is a distance that Simone de Beauvoir describes as normalized and encouraged in the development of feminine subjectivity.

The idea of bodily alienation is closely connected with de Beauvoir’s well-known analysis of woman as Other. As Arp argues, it is the real material presence of the female body that becomes the very articulation of woman’s otherness (1995: 172). Woman’s condition as Other in relation to a masculine norm is captured clearly in the introduction to *The Second Sex*, where de Beauvoir writes,

> She is determined and differentiated with reference to man and not he with reference to her; she is the inessential as opposed to the essential. He is the subject, he is the Absolute; she is the Other (1997: 16).

Woman may appear in a number of various ways but, according to de Beauvoir, she always “appears as the privileged Other, through whom the subject fulfills himself: one of the measures of man”

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6 This is not to say that the female body represents a feminine essence or feminine nature. Throughout her writings, Simone de Beauvoir quite to the contrary forcefully argues against the very idea that there is such a thing as a feminine nature. de Beauvoir’s writings on bodily alienation have often wrongfully been read to refer only to biological aspects and her harsh descriptions of female biological functions have been brought out to demonstrate her view of the body as unconstructive and even harmful for feminist thinking. However, as has been well established by now, de Beauvoir conceives of the body in terms of its existential situatedness. She describes bodily alienation as a social and cultural phenomenon and understands feminine bodily experience to be constructed in great part through social and cultural means (Arp 1995: 162).
What de Beauvoir’s diagnosis of woman’s otherness displays is how woman is to a great extent culturally and socially deprived of the unquestioned position of being a subject that has been accorded man. In being determined as Other to man, who stands as the norm for the human being, woman has in essential ways been denied being defined fully in terms of her humanity. At the same time, however, as Young points out, woman is undeniably also human and thereby knows herself to also be a subject (Young 2005: 31). Attempting to articulate subjectivity from a condition of being posited as an object, de Beauvoir demonstrates, through that very articulation, that any “pure” object-position of the Other is an ontological impossibility.

Despite the impossibility of any “pure” object-position, it is nevertheless so that woman’s condition as Other to the norm informs women’s dualistic self-understanding and significantly contributes to the self-objectification of the female body. This self-objectification is furthermore often framed in disparaging terms of harsh and unforgiving judgment. To speak with Young, woman “often lives her body as a burden, which must be dragged and prodded along and at the same time protected” (Young 2005: 36). It is well-charted that a great majority of women and girls in the West, encouraged by both the beauty and health industries, have a close to impossible relationship with their bodies. To have a battle with one’s body is almost a defining feature of what it means to be a woman. As Diane Elam puts it,
A woman’s body is never the right shape, and supposedly always needs to be refigured through dieting and surgical interventions. Nine-year-old girls regularly go on diets; cases of anorexia and bulimia amongst women are almost as frequent as the common cold; breast implants, liposuction, and face-lifts are not just exotic operations for those women who can afford them (Elam 1994: 62f).

In the striving to approximate normative ideals of beauty and perfection, women’s bodies are transformed into hostile entities that demand constant surveillance, monitoring and control. Media images forcefully display the imperfections of the female body: it has bad breath and yellow teeth, it leaks once a month, it is hairy in all the wrong places, it is overweight and plagued by cellulite, and it ages and gets wrinkles. Hand in hand with these images are provided solutions, well-meaning advice and useful products to help remedy the problems of the body (not to mention help sustain a multi-billion dollar industry) (Bartky 1990; Bordo 1993; Hirdman 2002). Through disciplined maintenance, the imperfect body can come to approximate an ideal that, regardless of the measures taken to reach it, will nevertheless always remain unreachable. The female body is thus vilified and disempowered all in one stroke (Bartky 1990; Beauvoir 1995; Bordo 1993; Young 1990).

The vilification and disempowerment of women’s bodies made manifest in relation to prevailing beauty ideals can also be seen in relation to the threat of rape and sexual violence present in the constitution of women’s subjectivity. In both cases a dualistic self-understanding is encouraged and women are advised to view, judge and regulate their bodies and themselves as fragile objects constantly at risk and in need of maintenance and protection. The constitution of feminine subjectivity is thus characterized by a
split between on the one hand woman as a controlling subject burdened by responsibility and on the other hand woman as an imperfect, exposed and vulnerable object in need of strict discipline, control and measures for improvement. The dualistic self-perception and self-experience that shape the way women relate to themselves, their bodies and their cultural, social and physical surroundings have to a great extent been normalized. The process of normalization makes it possible for the split within the self to be maintained and advanced through cultural ideals that are brought out in the media and sedimented in our collective consciousness and moral norms.

**Threat of Rape and Risk Management**

Albeit perhaps controversial, it has been convincingly claimed and fairly well established that a pervasive threat of becoming a victim of rape or sexual violence contributes significantly to the constitution of the specifically feminine body and to women’s subjectivity (Cahill 2001; Brison 2002; Hall 2004). According to several studies, women of all ages carry a fear of being raped that serves to limit their movements in public space by, for instance, their completely avoiding certain places or not going out by themselves after dark (Lundgren et al. 2001; SCB 2004). The threat of the risk of

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7 It is of course the case that men also can be and are victims of rape and sexual violence. However, I would argue, with Cahill, that men are not subjected to the pervasive threat of rape that faces women in contemporary culture (2001: 145). Rape is often portrayed as inevitably the worst violation that can happen to a woman and as a fate equally or more frightening than death. (Cahill 2001; Gavey 1999; Hall 2004; Warr 1984). The threat of the violation takes on mythical proportions and shapes the way women live their lives in relation to their social, cultural and physical surroundings. There are of course problems with upholding this understanding of rape as the ultimate violation. Even though rape is without a shred of doubt one of the worst ways of violating a human self, it is nevertheless the case that the threat of the violation takes on a life of its own that, prior to being actualized, exerts an oppressive force upon those bodies constituted as potential victims.
rape renders much public space off limits and fosters women into creating a safety zone around their bodies, which, in the words of Ann Cahill, “rarely exceeds the limits of their own limbs and quite often falls far short of that radius” (2001: 161). Even if women would perhaps not always describe themselves in terms of being afraid, they still express how they calculate the constant risk of becoming victims of sexualized violence. Research on the constitution of the female body in relation to its surrounding physical environment demonstrates how a multitude of different risk management strategies inform and determine how women move and comport themselves in public space (Andersson 2001; 2005; Cahill 2001; Hall 2004; Listerborn 2000; 2002; Valentin 1989). The experience of being at risk creates limitations in the daily lives of women and has far-reaching implications for how women experience their safety and sense of belonging from a broader societal perspective.

Drawing on Robert Castel’s analysis of a “new space of risk”, which has come to frame almost all aspects of modern life, Rachel Hall offers a critical analysis of rape prevention discourse and challenges the habitual reinforcement of the idea that fear is a woman’s best line of defense against the threat of rape. Rather than preventing sexual violence, such discourse creates a culture of fear in which women are encouraged to accept their own bodies and sexual anatomy as constituting a major risk factor and as posing a threat to themselves. As a practice of risk assessment, rape prevention, writes Hall, “encourages the metonymic treatment of women as ‘rape space’” (Hall 2004:2). Hall’s analysis demonstrates how the issue of rape and rape prevention is primarily addressed through the bodies of women as potential victims rather than through a focus on potential offenders. As a result, writes Hall,
each ‘fact about sexual violence’ we hear is located at the site of the woman-as-victim’s body after rape; this is true even when we speak of the prevention of future rapes. As we circle around her wounded body to discuss ‘violence against women,’ she becomes the highly visible, prototypical victim and the rapist fades into thin air (Hall 2004: 8).

Allowing the rapist to fade into thin air locates measures of intervention at the site of women as potential victims of rape and sexual assault. The responsibility to eliminate crimes of rape and sexual violence is removed from the offenders and the legal system and seems instead to rest entirely upon individual women. Fear and vigilance are prescribed to women as the model for good citizenship.

Risk management is thus part of how women constitute their identities in relation to their physical, social, and cultural surroundings; to be a woman is to embody the silent knowledge of one’s own body as an exposed object. The female body is socially and culturally constituted as a potential rape victim and as carrying the responsibility and blame for its own exposure. She must carefully follow a wide variety of avoidance strategies informed by fear and by statistics presenting her with more or less credible and contradictory “facts” about the risks to which her body is (by seeming necessity) subjected. With reference to Young and Bartky, Cahill describes the socially produced feminine body as that of a guilty pre-victim. She writes,
If [the feminine body] attempts something beyond its highly limited capacities, if it wanders beyond its safety zone, it can expect to be hurt. [---] In the specific moments and movements of this body are written the defense of the sexual offender: she was somewhere she should not have been, moving her body in ways that she should not have, carrying on in a manner so free and easy as to convey an utter abdication of her responsibilities of self-protection and self-surveillance (Cahill 2001: 157, 160).

The threat of rape and sexual violence is thus not located as originating from any external force. Rather, the source of this threat is to be found in the facticity of the lived body of each individual woman. If this body is violated, the blame must therefore fall on the individual woman’s failure to sufficiently limit its movements. This view and production of women’s bodies as hostile and unruly objects that are constantly at risk uphold, as Cahill writes, “a status quo that refuses, in the particular case of sexual assault, to consider the victim innocent until proven guilty” (2001: 161). Instead, the opposite is assumed and women’s bodies are constituted as culpable of making danger possible.

Paradoxically enough, women are encouraged and expected not only to consent to their a priori status as victims but also to

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8 Cahill continues a few pages later: “On a bodily level, a woman will be likely to experience a rape in some important sense as a threat fulfilled. The typical reactions of a rape victim, marked by overwhelming guilt and self-loathing, are the reactions of a person who should have known but temporarily forgot that she was constantly at risk. To have believed for even a moment that she was not in danger, for whatever reason, is felt to be the cause of the attack. Those assumptions which were prevalent in the production of her bodily comportment have been confirmed, and the attack itself may well be considered as a reminder for the need of increased self-surveillance” (2001: 164).
act so as to avoid the inevitable threat constitutive of this status.⁹ As Hall writes, woman is constituted as a re-action hero and her only possibility of agency is through avoidance (2004: 6). What is brought out with clarity in Hall’s analysis is not simply how rape prevention discourse treats women’s bodies as vulnerable and violable objects but also how women are encouraged to assume a dualistic self-understanding. Woman is hailed as a modern subject and is encouraged to objectify herself in order to make herself a tough target. She must have expert awareness of her own vulnerabilities to always be able to stay one step ahead and avoid being violated. To prevent herself from being victimized by someone else (and to prevent that someone from becoming an offender) she must accept her status as an object while at the same time as a subject take every measure necessary to protect herself.

The distance between women’s subjectivity and their bodies is upheld through the constitution of the body as an alien, vile force standing in separation from the wishes of the subject. There is, as Cahill points out, a double self-sustaining movement of alienation and vilification: The body’s alien status reinforces it as a burden and “source of impending danger” that in turn contributes to its “degree of ontological alienation” (2001: 158). Both Cahill and Hall demonstrate how, in the specific case of sexual violence, women’s bodily alienation and dualistic self-experience are framed in terms

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⁹ Hall quotes an advertisement for a sexual assault prevention workshop that makes obvious how women are assigned a pre-victim status and are encouraged to develop strategies to reduce their risk of being raped: “A woman is raped every five minutes in this country. Three out of four American women will be violently, physically, or sexually assaulted in their lifetimes. These statistics speak to the need for women to learn how to lead safer and more secure lives. This informative and participatory workshop will discuss sexual issues as well as include tips on how to be safer at home, in your car, and in public. This workshop is designed for women. This is not a self-defense class” (2004: 6).
of safety and responsibility. Exaggerated self-objectification and self-surveillance occur in response to imperatives of safety and risk prevention rather than as a response to normative standards of beauty. While the former incentive for self-objectification may on the surface seem nobler than the latter, I would argue that it is much more vicious and damaging. Resisting prevailing beauty ideals can be difficult, but it can also be viewed with respect and admiration as a sign of strength and integrity. It is quite different to resist compelling arguments about staying safe and avoiding dangerous risks. Whereas it may be considered foolish – albeit difficult to resist – to objectify oneself in compliance with the beauty and fashion industry, it is considered unwise and dangerous not to engage in heightened self-objectification and self-surveillance to avoid the supposedly inevitable threat of rape and sexual violence.

Concluding Remarks
The objectification and self-objectification of women’s bodies has long been one of the most central topics within feminist theory and politics. In spite of (or perhaps because of) its centrality, discussions regarding women’s bodily objectification are often infected and can appear as both quite controversial and hopelessly outdated. In feminist discussions, as well as in contemporary culture in general, objectification is often considered something of a “dirty word” and an act of degradation. What is frequently overlooked is that objectification is an essential part of what it means to be a self. Rather than being something we can escape or rid ourselves of, objectification is a fact of subjectivity. It is only by virtue of being a visible and tangible object in the world, that is, existing as an embodied being, that I am a subject with the ability to interact with the world and others. And, vice versa, it is only as a subject
with a perspective on the world that I am able to objectify myself (as well as others and the world around me). Although there is certainly a limit to the extent to which a person can be known in an objectifying way from an outside perspective, the fact remains that she can be objectified (and she can objectify herself) without being deprived of her subjectivity. Recognizing sedimented meanings inscribed upon her by culture, society and history is a way of recognizing her as a subject as well. Moreover, in order for a person to be known at all, she must also be known by her objective properties. The crux here is of course to avoid objectification in terms of being reductive and degrading.

While the ability to reflect upon and objectify oneself is indeed a necessary feature of selfhood, self-objectification is likely to have an alienating and stifling effect when it becomes the dominant way of relating to oneself, as it often does in cases of incipient schizophrenia. Having focal or objectifying awareness of one’s own body, writes Sass, “disrupts the experience of both self and world” (Sass 2003, 247). There is an important qualitative shift of experience when tacit dimensions of existence become explicitly thematized and made into objects for reflection. Such a tacit dimension of existence is the fact of embodiment. A qualitative shift occurs when the lived body that forms the ground and condition of all experience becomes an object body; when the lived body is no longer allowed to efface itself and disappear into the background in the act of experience but rather becomes the very object of that experience. Processes of self-reflection and self-monitoring are, as Sass reminds us, “likely to have the effect of alienating or dividing the self” (2003: 251). To direct explicit focal attention on that which is normally tacit in experience implies a distancing from that phenomenon and, with that distancing, an objectification and
alienation. The paradoxical movement involved in objectification is that the focal awareness bringing one closer to the thematized object is also a distal awareness detaching oneself and taking oneself further away from the object. The moment something is taken as an object for reflection it can no longer be fully inhabited by the reflecting self.

I want to suggest that the intimate interdependence between a detached hyperreflexive attitude toward oneself and one’s body and the sometimes rather drastic alterations in the very sense of being a self that can be seen already in the very early stages of schizophrenia before the onset of psychotic stages should motivate us to consider and carefully examine different ways in which self-objectification occurs and is encouraged within the spectrum of normality. Here I have only pointed to one manifestation of how heightened self-objectification and a distanced attitude toward one’s own body is normalized, namely the normative self-objectification of women’s bodies and particularly as this occurs in light of a pervasive threat of the risk of being raped. The ways patients in the initial stages of schizophrenia describe their experience of their own embodiment in terms of dissociation and alienation come very close to the ways women are socialized into approaching their bodies. What women are encouraged to do in relation both to normative ideals of beauty and femininity and to imperatives of safety and risk prevention is precisely to engage in exaggerated self-objectification and self-monitoring. Women are encouraged to live and relate to their bodies as objects dissociated from themselves and in need of being both constantly controlled and perfected.

We may of course ask whether there really is any comparison between these two different forms of bodily alienation and self-
objectification to be made here. Perhaps the qualitative differences between them are simply too great to compare. The experiences of schizophrenic self-disturbances may after all, as Sass points out, be impossible for the normal person to even imagine in so far as they contradict our deep-rooted conception of a person as a unified and unifying whole with a unique perspective on the world (Sass 1987: 1). By placing these two forms of self-objectification next to one another I am not suggesting that there are no differences between them. My attempt is not in any way to downplay the radical strangeness and morbidity of schizophrenic alterations in self-experience or to diminish the horrifying agony these alterations bring about. Further, I am obviously not suggesting that all women will develop full-blown schizophrenia because of the way they are socialized to objectify and alienate their bodies. Such a suggestion would be both preposterous and quite disrespectful.

However, even though there are undeniably quite significant qualitative differences between the hyperreflexive tendency that constitutes an integral part of the pathology in schizotypal disorders and incipient schizophrenia and the tendency to bodily alienation and heightened self-monitoring that characterizes women’s subjectivity in Western culture (and elsewhere), there are nevertheless also striking similarities. The sense of one’s own body as not quite fitting oneself and as distant or alien from oneself and the need to consciously attend to and monitor everyday movements are alterations in bodily self-experience that frequently occur to varying degrees of strangeness in the early stages of schizophrenia but that we can also recognize as falling within the bounds of normality. I would like to suggest that the insights of the phenomenologically oriented model of hyperreflection and diminished self-affection used to understand schizophrenic self-disturbances can
function as something of a beacon, casting light on the normative self-objectification of women’s bodies and compelling us to consider this from a new perspective. Rather than letting established categories of normality and abnormality guide how we understand and classify these different forms of self-objectification and bodily alienation, we may be forced to re-evaluate how the very categories of understanding are constituted and how the distinction between them is drawn.

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