

**Flat, Frozen and Everlasting: Cosmetic Surgery Abroad and the Production of
Erotic Female Bodies in Neoliberal North America**

by

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Abstract

Cosmetic surgery abroad is a growing trend in North American society, as surgeons are offering increasingly competitive pricing in an international marketplace. This thesis examines the impact that these contemporary cosmetic surgery practices have in shaping a normative, heterosexual female identity that defines an erotic ideal female body in North American culture. An overarching neoliberal strategy that establishes the female body as requiring work through consumption practices is rendered visible through language, and informs women's understanding of everyday life in bodies that will be inevitably transformed by aging or pregnancy. The ideal erotic female body that is linked to ideas of youthfulness and happiness provides a medium for analyzing the moralized, implicit aspects of gender performances that may be localized on the female body and its symbolic meaning within cosmetic surgery practices. A qualitative analysis of online blogs written by North American women regarding their experiences traveling to the Dominican Republic for cosmetic surgery was performed in order to analyze discourse and meaning making within contemporary cosmetic surgery practices.

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Chapter One // Embodied Everyday Lives: Understanding, Language and Neural Pathways

Introduction

This thesis examines contemporary cosmetic surgery practices in North America, and how these practices contribute to the shaping of a woman's identity in neoliberal society. The female body is found everywhere in North American culture; it is found on billboards advertising the latest perfume by COCO Chanel, on the cover of magazines offering the latest dieting tips, or on popular television shows such as Extreme Makeover or Nip/Tuck. Within these sites of popular culture and other media, an ideal female subject is shaped and informed by a neoliberal logic that encourages women to conform to the self-regulating, youthful, desirable and independent, erotic heterosexual female body. For instance, in fashion magazines, bodies are frequently classified as pear, hourglass, plus-sized, tall, boy figure or petite. These sizes are important for women to know in order to purchase the correct clothing to adorn their bodies, as these clothing choices serve to minimize or hide parts of a body deemed unattractive (for instance, a stomach bulge or broad shoulders) and accentuate 'attractive' features, such as a small waist or long legs. By arming women with information that is construed by her as holding some truth, a woman will be diligent in ensuring that the next pair of jeans she purchases conforms to these guidelines, allowing her body to approach a culturally constructed ideal of beauty.

Cosmetic surgery is first and foremost about the pursuit of beauty and "passing" as an erotic body. It participates in a process that defines bodies as attractive or unattractive by way of images such as before and after photographs and by promising women a youthful appearance and a renewed confidence. In other words, cosmetic surgery highlights the transformative capacity of the female body to conform to a beauty ideal that is unavoidable

and omnipresent in a capitalist-consumer culture and steeped in a neoliberal agenda.

Cosmetic surgery is understood as a way a woman can fix a problem that she perceives with her body. Quite often, the part of a woman's body that is deemed problematic is one she considers deeply unattractive, and one that fails to "pass" or reflect an ideal female identity that is defined by cultural standards and the political and economic terrain of everyday life. Due to an expanding international market place of goods and services, an increasing number of surgeons situated in non-Western nations are offering cosmetic surgery procedures to international consumers. Cosmetic surgery abroad is often advertised to consumers as an inexpensive, all-inclusive (entailing cosmetic surgery procedures, accommodations and full-time medical assistance) and readily accessible alternative to cosmetic surgery procedures performed locally. This thesis focuses on women who have participated in cosmetic surgery procedures abroad and the economic, political and cultural terrain that surrounds and makes these practices possible.

This thesis consists of a qualitative analysis of women's online blogs posted to the website *TrueBeauty*. The blogs analyzed were selected because the authors are women who have gone abroad for cosmetic surgery. This thesis is primarily concerned with expanding anthropological literature on cosmetic surgery tourism practices, a field of analysis that has received little scholarly attention from feminist scholars interested in tracing the functions of power in contemporary cosmetic surgery practices. These blogs and the cosmetic surgery encounters that they recount offer insights into a neoliberal industry that is defined by consumer choice, an individual's freedom to be happy and the freedom to pursue beauty on a body that is plastic. These blogs reveal the ways in which everyday experiences of cosmetic surgery are deemed self-creating, self-fulfilling, self-transcending and gratifying, while

performing in and perpetuating an ideal female subject that is defined by patriarchal and oppressive norms (Morgan, 2009).

Through an analysis of the blogs, this thesis examines the way in which beauty ideals inform a woman's experience of everyday life, her 'freedom' as a consumer, and the implication that a neoliberal terrain has in shaping contemporary gender performances. Specifically, this thesis explores the relationship between the cultural constructions of an ideal female body and how cosmetic surgery allows women to "pass" in society as an erotic body (Gilman, 1999). "Passing", a term used by Gilman (1999), describes an individual's sense of belonging in society that is described as 'being invisible'.¹ An individual fails to "pass" when they experience their bodies as different, which may become a source of unhappiness. The notion of "passing" is significant for feminist scholars examining cosmetic surgery and the impact for women's bodies and identities. A woman may fail to "pass" when she is made to feel that her body violates a cultural ideal, which may be the result of bodily changes, such as pregnancy or aging. Gilman (1999) argues that cosmetic surgery offers consumers the ability to transform their bodies, and as such, shapes the conditions of what it means to 'pass'. Gilman (1999) further suggests that there is an important link to be made between the aesthetic goals of cosmetic surgery, cultural beauty ideals, happiness and an erotic female body. Throughout this thesis, I use 'erotic female body' and 'ideal female erotic body' interchangeably to describe the ideal female body and a woman's sense of herself as sexually attractive. I also recognize a relationship between a woman's sense of herself as erotic and her sense of femininity. As such, a woman who feels like her body violates

¹ While Gilman (1999) adopts the notion 'passing' in order to describe the impact of cosmetic surgery on identity construction in Western culture, the term 'passing' is historically used in racial/ethnic studies and the identity politics of 'whiteness'.

cultural ideals may feel unerotic and less feminine. The ideal erotic female body that is described throughout this thesis is a white, North American definition of female beauty.² This ideal body is defined as comprising of a flat, toned abdomen, perky breasts and buttocks, tight skin and a body that exudes youthfulness. A body that reveals its age through sagging skin, sagging breasts or buttocks and excess fat may be perceived as unattractive and deviant (Davis, 1995; Bordo, 1993).

Theoretical Frameworks

This thesis explores the everyday lived experiences of North American women who participate in cosmetic surgery through blog posts in which women share about their experiences. It examines how cosmetic surgery practices impact the lives of women, while elucidating certain aspects of this experience in order to demonstrate how meaning and understanding participate in shaping the lived reality of an individual. Importantly, this thesis also engages with anthropological theories that view understanding as lying within language, and how language reveals meaning-making processes that are involved in the construction of one's sense of self, facilitating an embodied existence.

A theoretical foundation of semiotics and hermeneutics is necessary for this thesis because it recognizes an individual's capacity for language as central for the construction of meaning and an embodied identity in their everyday life. Semiotic and hermeneutic analysis allow for a grounding of theory in language, while also recognizing that language does not only reveal what is immediately discussed, but rather is intimately tied to processes of

² It is important to acknowledge that the conversation surrounding beauty that takes place within this thesis is not a universal argument. Beauty may mean very different things in different ethnic or cultural contexts, and the forms of femininity and sexuality that I explore within this thesis may be located as a conversation focused on a heteronormative, white, North America definition of beauty.

understanding in everyday life. Hermeneutics and semiotics are especially pertinent for the methodological tasks of this thesis, as they give equal weight to different linguistic tasks, such as written text, mental thoughts and verbal speech. Further, these theoretical approaches allow us to view the written language within women's blogs as revealing what is immediately important about their experience with cosmetic surgery, while also allowing us to expand beyond this immediate account in order to theorize the wider constraints of power that are grounded in this language.

Hermeneutics and semiotics are also concerned with individual tasks that, when brought together allow for a cohesive approach to the processes of meaning making and understanding that takes place within individuals in their culture. By ascribing a symbolic quality to language, semiotics allow us to consider the implicit processes of meaning making that occur in language and shape an individual's sense of self. Hermeneutics, via the notion of 'horizon' coined by Gadamer (1960), allows us to consider an embodied subject shaped by history and past experiences, and the role of language in human understanding in everyday life.

Language has the ability to mobilize moments, shape understanding and enable complex social relationships. Language is an important component to approaching the individual as an embodied existence. Our bodies produce language, and language is the way in which we come to know about and make sense of the world (Mertz, 2007). Language provides an important theoretical link in studies on cosmetic surgery when individual voices are viewed as having agency. Agency in cosmetic surgery practices is a well-debated topic in feminist scholarship, and I mirror the sentiments of Davis (2009) where she states that women who participate in cosmetic surgery can have agency, although this agency is always

located in relations of power. This agency is examined through a woman's discussion about her decision to perform cosmetic surgery, while value is placed on her account as revealing a wider cultural context. As such, language plays a central role in connecting women's agency, their everyday embodied experiences with cosmetic surgery and the relations of power it occurs in.

Everyday life, as it is understood in this thesis, is not a one-dimensional experience. Rather, there are invisible aspects of everyday life (for example, timescapes, reigning political ideologies and language) that require consideration, as they impact and shape the meaning and understanding an individual derives through experiences. In this way, understanding that takes place in everyday life is shaped and transformed through processes that occur beyond experience itself (Welsch, 1996). Acknowledging the invisible and implicit processes of experience is important to avoid essentializing the everyday with claims that understanding occurs solely in the present. Experience, and the tangled webs of meaning individuals draw upon to make sense of their everyday lives are knowable through language and reveal the complex way in which beauty and female identities are negotiated in cosmetic surgery practices. Language plays a central role throughout this thesis, as meaning is elicited from the written accounts of women's experiences with cosmetic surgery abroad. Blogs, and the language that women use to convey and describe their experiences with cosmetic surgery abroad shape and reveal meaning making processes that define the parameters of contemporary female identities.

Horizons: Understanding the Everyday

In 1960, Hans-Georg Gadamer, a philosopher of hermeneutics, put forth a theory of understanding in his oft-cited work *Truth and Method*. Although anthropologists have largely

overlooked Gadamer's work, his theory allows for a productive discussion of how meaning making and understanding occurs within an individual (Grondin, 2002). Understanding is important, as it is through understanding that one makes sense of the world around them.

Gadamer (1960) argued that the basis for human understanding in everyday life lies within what he coined a 'horizon'. A horizon, as described by Gadamer, encompasses everything within an individual's vantage point while also including a wider context of meaning beyond the situation an individual is in. A horizon is "something into which we move and that moves with us. Horizons change for a person who is moving. Thus the horizon of the past, out of which all human life lives and which exists in the form of tradition, is always in motion" (Gadamer, 1960: 315). That is, Gadamer's concept of horizons frames understanding as encompassing an individual's current situation while also accounting for an understanding of one's current situation in the context of what exists beyond it, and what came before it. In this way, the notion of a horizon as a way of understanding how an individual understands reality is productive towards anthropological attempts to extract meaning from everyday lived experiences.

Gadamer (1960) describes understanding within horizons as having three primary features. The first feature is a cognitive or 'intellectual grasp' that relates to a traditional perspective in philosophy from which Gadamer's theoretical perspective emerges (Gadamer, 1960; Grondin, 2002). This intellectual grasp describes the cognitive processes that enable an individual's ability to grasp something, or integrate it into a larger frame (Grondin, 2002). The second feature of understanding relates to practical knowledge, where understanding has less to do with an individual's cognitive processes and more with "know how" ability. This form of understanding can be likened to swimming or riding a bike where an individual

learns to do something in order to master it. This second feature relates to the notion of experience, which Gadamer argues can only occur in a novel situation where understanding takes place (Gadamer, 1906; Grondin, 2002). Further, Gadamer argues that it is this form of understanding that allows us to make our way through life, primarily because we are somewhat self-aware. This self-awareness triggers a desire for orientation, which is easily found within our practical skills and abilities (Gadamer, 1960; Grondin, 2002).

The final aspect of understanding outlined by Gadamar is the linguistic feature, where understanding takes place within a dialogue. An individual listens and speaks to others, and understanding takes place when a person becomes attentive towards something that they are interested in comprehending. Individuals are demonstrating their capacity to understand through their ability to engage with others around them (Gadamer, 1960; Grondin, 2002).

The implication for this aspect of understanding is significant because it places an importance on dialogue and language as a means for understanding. Gadamer (1960) writes:

It is in this experience of language, - in our growing up in the midst of this interior conversation with ourselves, which is always simultaneously the anticipation of conversation with others and the introduction of others into the conversation with ourselves – that the world begins to open up and achieve order in all the domains of experience. But this implies that we know of no other way of ordering and orientation than that which, from the data of experience, leads eventually to those terms of orientation, which we name the concept or the universal and for which the concrete is a particular case. (569)

In other words, it is through language that reality is rendered concrete, shaping the illusion of being. In short, language facilitates our experiences of everyday life (Grondin, 2002; Taylor, 2002).

These features of horizons are important for an understanding of knowledge in anthropology. Primarily, they place an importance on communicative acts and language as a basis of understanding within the everyday lived reality of individuals, while also

acknowledging the historical and cultural contexts within which understanding is taking place. However, the cultural contexts that inform future selves are established in ‘real-time’ linguistic experiences, placing a priority on the impact that present situations have in shaping identities. Additionally, because this notion of horizon describes understanding as existing within cognitive capacities, it also takes into account our biological existence. Of greatest import, Gadamer (1960) argues, is the linguistic feature as shaping our everyday life. As such, Gadamer’s notion of horizon recognizes the centrality of language in shaping how individuals think, understand and interact with those around them.

Humans have long relied on language to understand the world, however the root of this reliance has been lost in time, making it historical and unknowable. As such, society’s dependence on language as a means for understanding is widely considered a *de facto* reliance (Grondin, 2002). One aspect that Gadamer argues we can know about our historical reliance on language is that it is embedded in a realization of our own existence. This self-awareness is relevant to anthropological notions of selfhood and agency as it demonstrates that processes of understanding do not occur at the subconscious level, but rather can be agentic and reflective. We can still have a form of understanding that is a ‘sense’ or non-linguistic. However, this always has the capacity to be conveyed linguistically and can therefore only be understood through language (Grondin, 2002).

The notion that human understanding is finite is significant in Gadamer’s work because it allows for a dependence on a cultural history and language that is constantly shifting. In other words, the fact that Gadamer argues our understandings or horizons can never be whole or complete allows us to recognize that changes do occur over time, which subsequently forces “us to rethink our self-understanding of what it means to be a free agent

in the realm of knowing” (Wachterhauser, 2002). That is, being a ‘free agent’ in our own understandings allows us to realize the way in which our understandings are historically constituted in language. Further, because we can only know about and reflect on horizons through language, understanding is enhanced by language (Grondin, 2002; Taylor, 2002).

Gadamer (1960) suggests “[t]exts are enduringly fixed expressions of life” that are to be understood: and that means that one partner in the hermeneutical conversation, the text, speaks only through the other partner, the interpreter” (404). Texts rely on an interpreter, or individual, in order to convey their meaning, and the meaning of a text that is derived by an individual is shaped by their horizon. The meaning of a text is also reliant on an individual’s interest in participating in understanding a text, and the subject matter of a text may bind two individuals in a conversation (Gadamer, 1960). An interpreter’s desire to participate in a conversation, and to participate in the meaning of a subject matter, requires that they use language within a text that an audience can relate to. Therefore, the way an individual desires to be understood regarding a subject matter is impacted by how they believe others will understand their written text. The meaning of a text is therefore not fixed, and acknowledging the interpreter’s point of view is important to understanding the text as a hermeneutic conversation (Gadamer, 1960).

The meaning that individuals derive from a text and how they understand the various arguments put forth by the author of a text is shaped by an interpreter’s horizon. An interpreter’s horizon is inevitably shaped by the meaning conveyed by a text, personalizing its meaning for every individual. Gadamer (1960) describes this as a fusion of horizons, where an individual is able to participate in a conversation regarding a particular subject matter, and where they are able to establish their own meanings in a text, or by agreeing on

this subject matter, perpetuating the way in which certain ideas are understood. In other words, through the fusion of horizons³ ideas that exist within individual stories or blogs of women can be shaped by their horizons, and influence the way in which other women understand cosmetic surgery. In this way, ideas may be allowed to travel, and are sustained by individuals who adopt this meaning into their own horizons and inevitably reiterate this meaning within their own blogs. In this way, horizons allow us to trace the way in which ideas may travel from one individual to another, in addition to understanding the way that ideals are sustained in culture through the continued support of meaning.

To conclude, the three aspects that Gadamer (1960) describes as features of a horizon define the way in which understanding takes place within an individual. They include the recognition of multiple theoretically necessary aspects that allow us to discuss the way in which an individual's reality is shaped, while also considering our biological, cultural and linguistic capacities within one whole. In what follows, I will focus on the role of language, as it provides an important medium for the analysis of meaning-making in women's encounters with, and accounts of, cosmetic surgery and the culturally constructed context in which this takes place. Further, this allows us to consider language as an important dimension to an embodied existence. Language, in particular text, is an important part of perpetuating how a subject matter may be understood. Understanding takes place through the fusion of horizons, where an individual attempts to draw meaning from the position of another and establishes their own unique understanding of a subject matter. In order to expand on this view of language, I will be shifting my gaze to the sister discipline of

³ While I have described here the fusion of horizons through the example of texts, the fusion of horizons may take place in many linguistic acts (such as speech) and may participate in shaping an understanding of a subject matter.

hermeneutics, semiotics. Although Gadamer provides us with an important theoretical backbone for approaching reality and understanding, his work is philosophical in nature and primarily focused on abstract hermeneutical pursuits.

Semiotics

Semiotics is the study of language as a system of meaning that participates in shaping the implicit or intangible aspects of one's reality. Peirce and Saussure are two of the oft-cited theorists within symbolic anthropology who held competing theories regarding the function of language, symbols and meaning-making in everyday life. Saussure put forth the theory that symbols work in a dyadic relation between a signifier (the form a sign takes) and signified (the concept that a sign represents). Peirce, on the other hand, theorized sign systems as a relationship between representament (sign), object (the thing itself) and interpretant (interpretant sign) (Peirce, 1974; Mertz, 2007). As Singer (1985) has famously argued, Saussure's dyadic theorization of the meaning within signs is lackluster, while Peirce's approach is innovative because it forces us to consider the social context in which language takes place. This is primarily because it "opens the door for an analysis that includes but moves beyond language. Rather than focusing on language per se, Peirce asks us to consider the varieties of ways in which meaning can be conveyed through sign" (Mertz, 2007: 338). Theories in symbolic anthropology have had a large impact on the way in which semiotic theory approaches language, as semioticians have paid increasing attention to the importance of recognizing what lies beyond language (Mertz, 2007).

Duranti (2003) argues for a timeline of semiotic perspectives in anthropology that involves three distinct phases. The first phase takes place prior to the 1960's where semiotic anthropology was primarily focused on the form of language (lexicon and grammar) and

examining the ways in which the forms of language differed based on worldviews and language (Mertz, 2007). The second phase, Duranti (2003) argues, can be traced to the beginning of the 1960's and was driven by the conception of a sociolinguistic approach that regarded language as located within speech communities and was no longer focused only on language form. This can be seen as a focus of the linguistic features that is described by Gadamer (1960), that is, a focus on the significance of language and understanding that occurs within communicative acts.

The third and most current phase of semiotic analysis views language as “an interactional achievement filled with indexical values, including ideological ones” (Duranti, 2003: 333). Mertz (2007:342) argues that within this most recent phase:

we see a dramatic broadening of research parameters so that language analysis is now seen as providing one important cornerstone to understanding how identities, institutions, and communities are reproduced and transformed. This occurs across history and through various semiotic media (written texts, speech, the Internet), with fascinating variations and interlinking influences within and between communities and larger units of sociocultural organization.

This most recent phase, Mertz (2007) states, represents a balancing of the domains of symbolic and semiotic anthropology that allows us to consider the form of language while recognizing the sociocultural context in which language use is taking place. In the 1970s, Silverstein (1976) argued that anthropology should pay attention to the pragmatic and indexical aspects of language in culture, hinting at an approach to ethnography that aims to describe the creation of unique cultural realities through language. Through the analysis of varying linguistic accounts and their global, national, local, or other contexts, we are able to examine the way in which language makes visible the politics of identity. This is especially

important for this thesis, as we are examining women's identity in their written accounts of cosmetic surgery.

A theoretical emphasis on indexicality and context has pushed semiotic anthropologists to expand beyond traditional fieldwork sites. As Mertz (2007) argues, “[a] semiotic focus gives us useful analytic tools for examining the world of global interconnections, where texts and other potentially more arm's length forms of communication can become as important as face-to-face linguistic interaction” (345). In fact, Silverstein (1996) establishes unique labels for the analysis of texts based on context where a ‘text artifact’ is the physical object such as a novel, a ‘denotational text’ is a text that refers to a particular chapter in a novel, and ‘interactional text’ describes what the act of reading does in a social context (Mertz, 2007). This theoretical approach to texts allows us to examine the multi-layered way in which individuals may understand a text, while also allowing us to consider how this text is understood, shapes and transforms its context (Mertz, 2007). Moreover, semioticians have pushed for an intertextual analysis, where the focus is on multiple texts and their similarities in context. This is an important methodological approach, as this thesis focuses on women's written accounts of cosmetic surgery in order to seek common threads of understanding within their individual experiences with cosmetic surgery abroad.

Importantly, there is a connection to be made between Gadamer's notion of horizon and the way in which language is treated by Peirce and more contemporary semioticians. Specifically, the idea of a horizon attempts to situate an understanding of reality by considering the implications of an individual's immediate situation while also considering “that which lies beyond the situation itself” (Gadamer 1960). Similarly, in their analysis of

the use of language within everyday life, contemporary semiotic anthropologists attempt to take into consideration a wider scope of meaning that may not be immediately present in language, yet is central to the construction of selfhood, identity and reality. In this way, both pursuits within semiotic anthropology and Gadamer's (1960) notion of horizon make strides to advance theories that are concerned with recognizing aspects of meaning-making that lie beyond the immediate situation an individual is in. It is this common goal of describing implicit processes that I believe makes semiotics and Gadamer compatible partners for theorizing and discussing the importance of grounding an anthropological analysis of cosmetic surgery accounts within everyday life. While giving us the capacity to mobilize everyday life through language, they also allow us to mobilize language within women's blogs and examine the ways in which individuals understand the world around them, which inevitably shapes their identities. Further, through an examination of the indexicality in everyday life, semiotic anthropologists are able to account for the variety of ways a horizon is shaped through the uniqueness of a context. In this way, common threads of understanding may point to a *habitus*, or cultural assumptions that participate in a cultural logic. For instance "linguistic research that might have stopped after parsing local meanings now frequently consider how the linguistic process at work fit into wider institutional structuring" (Mertz, 2007:344). In this way, we are able to examine the ways in which language is being used, and what it means for identity formation in the multiple contexts of everyday life and the power constraints they take place in. More specifically, this theory allows for an examination of the written everyday accounts of women who participate in cosmetic surgery abroad, while also considering the cultural contexts in which they take place, and what this

conveys about the construction of identity in beauty practices in contemporary North American society.

Selfhood

In this section, I will define and discuss the way in which the notion of ‘self’ and identity is understood throughout this thesis. As stressed earlier, anthropologists prioritize contextualizing one’s analysis within the context of everyday life. Human beings are biological bodies that experience, shape and make sense of the world around them. Recognizing this corporeal dimension of the self is important for this thesis, as cosmetic surgery has to do with the body.

This thesis defines the notion of self as it is understood by neurobiologist LeDoux (2002) where “the self is the totality of what an organism is physically, biologically, psychologically, socially, and culturally. Though it is a unit, it is not unitary” (31). This definition allows us to consider the complex implicit and explicit dimensions of the self, opening up the field of anthropology to the analysis of selves as biological, embodied realities (Quinn, 2006). Anthropological studies of the self have traditionally been concerned with the theoretical, implicit pursuits of selfhood in an effort to distance themselves from scientific, objective ideologies. As a result, there has risen a resistance within the field of anthropology to examining our lived realities as physical organisms (Quinn, 2006). However, as neurobiologists publish findings that seemingly prove implicit cognitive capacities are impacted by an individual’s explicit environment, this division between the two disciplines is becoming increasingly problematic. Importantly, although Gadamer’s notion of horizon allows us to account for an implicit process of understanding, the notion of horizon, understanding and its relationship to the body is largely unexplored.

Neuroscientists have long recognized the human capacity for language as revolutionary for brain function. As Quinn (2006) notes, language “supplements nonverbal with verbal knowledge in working memory. Working memory is a mental workspace in which information (a limited amount at one time) that may be of different types and come from different systems, including from long-term memory, can be grasped and interpreted” (366). The primary task of this working memory is to mentally multi-task by judging, predicting and comparing in order to understand (Quinn, 2006). Importantly, language enhances the brain’s ability to multi-task because it focuses the attention on the present (in other words, mobilizing one’s focus), increasing the brain’s ability to compare, contrast and discriminate (LeDoux, 2002). In other words, by enhancing the brain’s ability to focus its attention, language allows us to mobilize reality in order to make sense of it (Quinn, 2006).

As Donald (2001) writes:

Language differentiates experience for us. It refines the thought process and embeds it in increasingly precise culturally imposed algorithms. We know intuitively what words and sentences do for us. They define reality. They focus our attention. They elevate our awareness of whatever they specify...in a word, languages clarify the experienced world. (294)

Gazzinaga (1998) proposes the notion of interpreter to describe an individual’s capacity for more focused and discriminatory linguistic thoughts. Importantly, the interpreter can be found in the brain’s left hemisphere – specifically within the pre-frontal cortex of an individual (Quinn, 2006). While I do not have the space to discuss the various fascinating experiments by Gazzinaga and colleagues ⁴ that have resulted in locating the interpreter within the brain’s left hemisphere, what is demonstrated is that the right side of the brain processes information in an analytic and neutral manner, whereas the left side of the brain,

⁴ See Quinn (2006).

the interpreter, attempts to make sense of reality by searching for logical, recognizable patterns (Quinn, 2006). This brain asymmetry is important for theorizing the self because it locates our capacity to interpret and understand the world within our cognitive capacities, bringing us closer to a theoretical model that can account for the embodiment of an individual (Quinn, 2006).

The interpreter is unique and the way in which the interpreter is expressed neurologically is shaped by experiences. That is, the interpreter is the section of our selves that holds biographical information such as traditions and memories (Quinn, 2006). As such, when the interpreter attempts to make sense of the world, it frequently relies on this bank of biographical information to process information and shape meaning. In this way, the interpreter is shaped neurologically by everyday experiences, by establishing and shaping neural connections, while these experiences and neural pathways help to shape the interpreter's understanding of reality (Quinn, 2006).

The notion of interpreter put forth by Gazzinaga (1998) parallels some of the theoretical highlights of the notion of horizon which Gadamer (1960) describes. Primarily, both recognize the importance of language in shaping the way in which we understand the world. The interpreter and one's horizon are shaped by one's lived experiences equally as much as the implicit aspects shape this understanding of reality. As such, the interpreter's understanding of reality through language can be described as a physiological expression of one's horizon, where the interpreter is shaped by neural pathways (psychological), culture (history) and a biological reality (body). Arguably, this understanding of the self can be described as an embodied self because it views the self as culturally constructed while accounting for the necessary dimension of our bodies (Csordas, 1990).

Importantly, scholars examining the relationship of the body and society have approached the body in two popular threads of thought. Namely, the first perspective views the body as a “text” onto which social meaning is inscribed. As some researchers have noted, “[o]ur bodies transmit a dizzying array of complex information about ourselves, with or without our intention, and we and other members of our culture tend to be expert at reading those culturally specific meanings almost instantaneously” (Reischer & Koo, 2004: 300). This approach to the body is important, as it views body ideals as an instrument of social power and control. One other way in which the body is conceptualized, and which is most relevant to this analysis, is the agentic body. Theoretically, the agentic body takes the symbolic body a step further by bestowing the body with the ability to not only be symbolic, but also to actively take part in the shaping of social meaning which is knowable through language (Reischer & Koo, 2004). In the agentic body, it is argued that the body is an agent that is capable of action:

...[T]he self is ultimately an embodied self, and the symbolic capacity of material bodies can thus be “employed” by this self embodied as one way to act on the world. That is, bodies are not only constitutive of subjectivity, but also mediate that relationship between persons and the world: We meet the world through our bodies...[t]hus, to say that the body is an “agent” or “subject” is not to assert that subjectivity is a feature of the body per se, but rather that bodies, because they are constitutive of subjectivity and also mediate the relationship between person and world, necessarily participate in the agency of a person. (Reischer & Koo, 2004: 307)

In this way, bodies are necessarily participating in the world around them. While the agentic body describes a human dependency on the body, the notion of horizon and interpreter allows us to recognize the implicit linguistic and biological aspects of oneself that is working alongside one’s body in shaping one’s understanding. The embodied self is therefore one that encompasses learned cultural and biographical experiences that reside within neural

pathways; it is a body capable of action and an identity that shapes and is shaped by the everyday cultural conditions in which they exist.

Qualitative Analysis: Searching for Meaning in Language

As Geertz (1973) has famously said “...man is an animal suspended in webs of significance he himself has spun, I take culture to be those webs, and the analysis of it to be therefore not an experimental science in search of law but an interpretive one in search of meaning” (5).

The use of language in the telling and retelling of stories has the capacity to represent an individual’s identity and culture by organizing experiences into meaningful events that reflect cultural forms of reasoning and representation (Berger, 1997). Further, scholars have argued that travel blogs and the meaningful discussions that they enable have the ability to impact individual decisions and transmute an understanding of a location, experience or meaning within an individual’s horizon (Banyai & Glover, 2012; Wenger, 2008; Xiang & Gretzel, 2010). By examining language used in women’s blogs, I am able to explore how women express their culturally unique everyday understanding of what it means to be a woman participating in cosmetic surgery abroad in contemporary North America.

Everyday life occurs in the complex webs of contexts and voices that are present in social interactions (Fraser, 2004). Within social interactions, there may be multiple voices that emerge from different contexts that inform an individual’s understanding of a situation. For instance, in their blogs women frequently copy information posted by other users (such as a to-pack list) and offer it to other users. The information that appears on this list may be borrowed from multiple users, and emerges from varying individual contexts. One way in which semioticians have attempted to describe these contexts and their authority is through the concept of ‘footing’ coined by Goffman (1981). Footing allows us to:

[E]xamine the shifting location of a speaker vis-à-vis layers of social authority...[where] a speaker may be located as simply the *animator* of an utterance whose real *author* is someone else (as, for example, someone delivering a speech written by another person). And even the author may not be the ultimate source of authority, or *principal* – i.e., the person ultimately responsible for the speech in question (say, for example, the board of directors of an organization that hired a speechwriter to write a speech, and also a spokesperson to deliver it). (Mertz, 2007: 343)

In other words, it is by looking at what is being said and the speaker's relationship to what is being said that allows us to explore the context and unique characteristics that this speech act is shaped by. In this way, footing mobilizes an indexical process, and gives us the ability to examine the way broader social issues shape speech actions (Mertz, 2007).

Footing allows us to explore multiple linguistic contexts and ascribe authority over particular voices, which is relevant to discussions of power. Further, this scaled approach to speech actions has impacted research in semiotics and the role of language in performance as it allows us to consider multiple roles of voices, such as that of an audience (Mertz, 2007).

Our ability to integrate information around us in the context of social interaction has a large impact on the way in which we understand reality. That is, language and our interactions with others enhance our ability to integrate knowledge (Mertz, 2007; Quinn, 2006). As such, women who write about their experiences on their blog are opting to participate in a community of like-minded women. In this way, women are contributing their voices (or horizons) to what the reality of cosmetic surgery abroad is like, while also shaping the meaning of what cosmetic surgery means in contemporary North American society.

Tourism & Semiotics

This thesis focuses on women who are traveling abroad in order to participate in cosmetic surgery. The medical context of this form of travel abroad locates cosmetic surgery tourism

as a form of medical tourism. While the implications of medical tourism are discussed later in this thesis, I would like to outline an important connection between tourism as practice and a semiotic understanding of tourism.

Semiotics has a significant impact on the way in which scholars in anthropology approach the topic of tourism. This is primarily a result of the landmark work of MacCannell (1976) who argued for a link between the semiotics and the experience of the tourist (Berger, 2011). MacCannell (1976) recognized a parallel process between the form of understanding derived from language and the form of understanding established by a tourist regarding the locale they are visiting, and attempted to describe this by drawing on Peirce (1974)'s symbolic theory where:

Peirce:	sign	represents	something	to someone
MacCannell:	attraction	marker	sign	tourist. (Berger, 2011)

In other words, while Peirce contends a 'sign represents something to someone', MacCannell argues that tourist attractions 'mean something' to tourists because of their symbolic capacities (Berger, 2011; MacCannell, 1976; Peirce, 1974). As I have suggested earlier, language is an important symbolic process for establishing understanding in everyday life. A significant part of a tourist experience is knowledge derived through language. For instance, tour guides may describe historical events that deepen one's understanding of a location. Further, the tourist experiences a location through the differences that appear, and which differentiate from their habitus, or everyday life. Language is understood as operating in a similar process because it is understood by recognizing common patterns and differences (Berger, 2011; Saussure, 1966). The meaningful signs derived from a location and their understanding can be drawn on by information gathered from tour guides, pamphlets, Wikipedia or from one's physical experience in a location (Berger, 2011). Difference plays

an important role in establishing a tourist experience, as Berger (2011) argues that tourists travel in order to seek out difference, and to experience the exotic or “that which is greatly different from their routines” (111). Barthes (1982) has famously noted that being present in a different geographical and cultural space can be a deeply meaningful and refreshing experience for individuals.

Difference plays a central role for women who go abroad for cosmetic surgery practices. It is important to note that while women who go abroad for cosmetic surgery are labeled as tourists, they are not tourists in a traditional way. Women are traveling to the Dominican Republic in order to experience a different body (and not place), and the location is often selected based on the quote provided by a doctor, ease of travel, perceived quality of care and reputation of a doctor, and rarely by the unique geographical and cultural elements. Cosmetic surgery and a woman’s desire for a different body impacts her understanding of a given location and decision to travel. In their blogs, women frequently discuss their desire to achieve a different body as the main reason for choosing a particular clinic abroad, while they say little, if anything, about the geographical location itself. It is important for feminist scholars to pay attention to cosmetic surgery practices performed abroad as travel is often associated with transformative or regenerative capacities, adding an additional layer of complexity to cosmetic surgery practices that offer women bodily transformations and extended recovery times in a place that is removed from their busy everyday lives in North America.

I often discuss the notion of ‘everyday lived experience’ throughout this thesis. Bell et al. (2011) state that the imagination is an important part of framing an everyday lived reality for tourists, as countries are often advertised to international travelers by permeating

cultural values that are symbolic of the experience a country can offer, and which shape an individual's understandings and expectations of a locale. Cosmetic surgery tourism is often explicitly marketed in these narratives (Connell, 2011), however, in the context of *TrueBeauty* cosmetic surgery abroad is advertised in ways that are less explicit than in traditional advertisements as the knowledge conveyed on *TrueBeauty* can be considered word-of-mouth. Women's online blogs allow readers to imagine a different body, and often encourage women to participate in cosmetic surgery tourism while enabling it to become an economically significant practice. By using the notion of 'everyday lived experience', I wish to highlight the knowledge that is conveyed by women in their blog, which elucidates to an experience of their embodied selves in their everyday life. This is primarily derived through an examination of the written language women use in their blogs, and how it conveys and shapes a woman's understand of herself. In doing so, I wish to demonstrate the way in which language, as used in the everyday, reveals cultural understandings of beauty, the body and cosmetic surgery.

Research Methods

This thesis looks at women's online written accounts of seeking cosmetic surgery abroad. From the beginning of this research, I determined that the most successful way to recruit participants for this research was online. That is primarily because women participating in cosmetic surgery tourism cannot be found in physical communities in North America, rather, these women are most visible, and often interact, online. The Internet has become a fountain of information for individuals seeking answers to questions. As such, the Internet has the capacity to unite individuals in this common quest for knowledge, forming online communities that offer information and support (Boellstorff *et al.*, 2012).

My initial research method for this thesis consisted of an online survey comprised of 17 questions related to women's experiences with cosmetic surgery abroad. I planned to recruit between 10-12 participants for this online survey through multiple means, such as sending requests to members of the website *TrueBeauty*⁵ (a website for consumers and doctors where they meet and discuss beauty treatments), posting public announcements on various online forums that had a thread dedicated to researchers, as well as placing posters in public spaces such as community centres and grocery stores throughout the Ottawa area. After my ethics application was completed and the Carleton Research Ethics Board approved my project, I began seeking research participants in January of 2014. However, as I reached out to the Public Relations contacts that I had established on the website *TrueBeauty* prior to gaining ethics approval, they expressed that they were no longer able to assist me with my project.

An essential component of the website *TrueBeauty* is the blogging capabilities that it gives to consumers of beauty treatments. Within these online blogs, *TrueBeauty* users record their personal experiences with beauty treatments, as well as discuss and advise about these treatments with doctors and fellow users. As I looked through these blogs, I recognized the potential lying in the stories that women were telling about their personal experiences. As I read closer, I noticed that there were discussions taking place within the comments of blog posts. I began to feel like a fly on the wall in a room full of women discussing their opinions, sharing intimate information and creating close friendships with one another. For this reason, I made the decision to change my research methods from an online survey to a content analysis of blogs posted to *TrueBeauty* by women. Notably, although I was unable to contact

⁵ The name of the website used for this thesis has been changed in order to protect the identity of women whose blogs I am analyzing.

the women who were users of the website *TrueBeauty*, the website is considered public domain. This means that any information submitted to the website by a user becomes available to the public for viewing, and is therefore accessible for use in research. An individual does not require an account on *TrueBeauty* in order to read about the experiences of others.

The use of user-produced online content towards anthropological queries has been gaining in popularity, as access to the Internet becomes an increasingly mundane aspect of life in countries across the world. The Internet, and online communities are increasingly recognized as spaces where meaning-making and identity formation is taking place (Banyai & Glover, 2012; Berger, 1997). As such, the use of online content as a research method in anthropology has given birth to a variety of sub-disciplines including cyber ethnography, virtual ethnography or digital anthropology (Wittel, 2000). The burgeoning fields within cyberspace have allowed anthropologists to critically reconsider what is traditionally held as the fieldwork process. For instance, the idea of ‘doing fieldwork’ in the anthropological tradition customarily entails performing research within a bounded geographical, social or cultural space (Wittel, 2000). However, when ethnographic research is performed online, one’s research has the potential to be infinite and ever changing. As such, it is necessary to frame one’s research within established boundaries in order to construct achievable research goals. Importantly, when a researcher establishes these frames and boundaries, it becomes a political practice that fundamentally impacts the preliminary stages, findings and conclusions of a research project (Wittel, 2000). As Murthy (2008) argues, the Internet can project an “air of neutrality”, making it important to recognize that it “remains a fieldwork setting...a

researcher's data selection and analyses are always biased by agendas, personal histories, and social norms" (840).

Although I am ethically permitted to use an individual's blog towards this research project, it is important that this does not disguise the fact that I remain a covert observer. Additionally, although this method allows me to unobtrusively enter the research 'field', I have not received the written consent of an author to use their blog. These aspects of performing research online are imperative to recognize, as my 'lurking' may impact research participants in ways that anthropologists have yet to consider. I am also deriving meaning from the language that women are using in their blogs, and I am not ethically able to contact these women in order to inquire into the true meaning of their blog posts.

As such, in order to ensure the privacy of these users, all of the usernames of individuals and the names of doctors have been changed. Furthermore, the website from which I extract these blogs, which I have called *TrueBeauty*, is a pseudonym. As a part of women's experience documenting their journeys online, many often include photographs. I have excluded photographs from this thesis because they often featured identifying markers such as tattoos and faces.

This research project examines 24 blogs written by women about their experiences with cosmetic surgery abroad. These blogs were selected by incorporating website-based search functions, which were further narrowed by number of posts contained in a blog. Firstly, in order to limit the scope of research to a manageable range, only posts about 'tummy tuck' procedures were considered. The website *TrueBeauty* allows one to look at blog posts based on specific beauty treatments, and this research examined blog entries involving abdominoplasty (colloquially known as a 'tummy tuck'), because it is the category

that is most contributed to by *TrueBeauty* users. In order to appear in this category of ‘tummy tuck’, women had to select this category when beginning their blog.

It is important to point out that many women going abroad for surgery are undergoing more than one treatment, while their blog entries may only be displayed in one category of cosmetic treatment. For instance, many women who plan to have a tummy tuck will also undergo liposuction to extract fat from their bodies that is then reinserted into their buttocks in order to achieve a ‘Brazilian butt lift.’ As such, while this research is focused on women who have had tummy tucks, these women may have also undergone additional procedures. In fact, women are more likely to get multiple procedures done at once when cosmetic surgery is performed abroad rather than locally (Connell, 2011).

As will be explored throughout this thesis, limiting the scope to the category of tummy tucks has had an enormous impact on the findings regarding meaning-making and identity construction associated with cosmetic surgery in contemporary North America. Specifically, tummy tucks aims to address corporeal changes that have taken place on a woman’s body for various reasons, such as weight loss or pregnancy. Age was also included as a research parameter as it was a search function found on *TrueBeauty*. This thesis included a search for women’s blogs who were between the ages of 18-74. A large majority of the women whose blogs I examined were between the childbearing years of 25-34, closely followed by women between 35-54. There were no blogs by women over the age of 54 that fell within all the research parameters of this research project. Consequently, this thesis does not portray the experiences of women over the age of 54 who may participate in cosmetic surgery abroad. Rather, this thesis explores tummy tuck procedures performed abroad by women between the ages of 25-54. For many of these women, cosmetic surgery is about

beauty and its interwoven relationship with femininity, youthfulness, body image and motherhood in contemporary North American society.

After selecting a category such as ‘tummy tucks,’ *TrueBeauty* gives users the option to further refine their search in several ways: by rating (whether or not the cosmetic surgery was ‘worth it’ or ‘not worth it’), age, weight and health condition, while also allowing users to sort blogs by best match, most recent, comments and geographic proximity (150 km). These research parameters were selected for a number of reasons. The other method of sorting through blog posts available to me on *TrueBeauty* was by doing a keyword search. However, this keyword site-wide search was limited to showing the most recent 80 results, which would be constantly changing as one browsed from one page of results to another. This is primarily because as users updated their blogs, the results would refresh and include them at the beginning of these 80 results. As such, I opted to use the advanced (albeit limited) search functions found on *TrueBeauty*, while also ensuring that these did not skew my results. I selected to use the age and proximity functions because they allowed me to take advantage of the search functions, limit the scope of my research to a feasible number of blogs, allowed me to confine my research to a geographic area, and because they were deemed as the most neutral search functions.

The results yielded by this search were then sorted by number of blog posts, where users had to have at least 2 pre-operation posts and 3 post-operation posts detailing their accounts, to be included in my sample. This was to ensure that the blogs that made up the research material for this thesis contained enough data to provide a rich analysis. The final search parameter limited the results to those where cosmetic surgery was performed abroad (see Table 1). Of these blogs, 24 surgeries took place in Dominican Republic and 2 took

place in Mexico. As such, the blogs that took place in Mexico were discarded. To summarize, this study examines blogs that contain multiple pre- and post-operative accounts, focusing on women who underwent tummy tuck procedures in the Dominican Republic, who were between the ages of 25 and 54 and reside in North America. ⁶

During the next two weeks, I proceeded to create documents of these users that contained their blogs, their comments and the comments posted on their blogs by other users of *TrueBeauty*. Once I had collected and organized all this information into a single document, I had accumulated 444 single-spaced pages of data. In order to trace meaning-making processes in language qualitatively, I compiled the 24 profiles with all of the entries and comments, and had them printed into two spiral bound notebooks. Further, while I read the comments section of each blog, I did not use the comments towards an analysis in this thesis. ⁷

Age	18-24	25-34	35-44	45-54	55-64	65-74	Total
Sorted as 'Nearby'	140	811	771	332	79	8	
Refined by number of posts	3	23	8	4	1	0	
Took place in DR	0	15	6	3	0	0	24

For instance, I would highlight in yellow a section where a woman discussed her body ideals, or underline in red when she discussed parental duties. After this, I compiled all the marked sections into a document that sorted each blog based on themes. In doing so, I

⁶ This research took place on February 11th 2014, where I recorded all the names of users that fell into my research parameters. While these users are the ones that were included in this research, it is quite feasible that an entirely different set of users could have been selected on another day, and this has impacted the results of this thesis.

⁷ Although the comments section of the profiles held insightful and useable material, the sheer amount of analysis would have surpassed the workload expectations of this thesis.

attempted to look for subthemes that might reveal something about the way cosmetic surgery abroad is understood by women, while also demonstrating how women are shaped through this process. For instance, nearly every blog discusses the notion of the ‘flat side’.

Ok divas, I'm at the recovery house with Virginia, I made it to the flat side ☺ (Blueberri73).

HAPPY HEALING LADIES AND PRETTY SOON, LESS THAN TWO WEEKS I WILL BE ON THE FLAT(TER) SIDE...WHOO HOOOOO.

*TOO EXCITED (BubbleBabe4).

I'm so excited to join you ladies on the flat side! (TaurusLove16).

HEY LADIES, im on the flat side...its been a rough ride, to the point I just wanted to get back on the plane and go home! (BeautyBombshell).

Will probably write again once Im on the flat side! Wish me luck and pray for me!(PaintItBlack).

I made it to the flat side! (Rhonda65).

The ‘flat side’ is used by women in a variety of ways, such as tracing a journey to an ideal body or by denoting a self that has gained membership to a select community of women. In this way, the flat side is a term meaningfully used by women to denote an embodied reality. By using my ethnographic capacities to examine language in women’s blogs, I was able to look at themes and subthemes that inform women’s embodied experiences with cosmetic surgery, which then informed the structure of this thesis.

Importantly, what an individual chooses to discuss with the community, the way in which she says it and the voice that is conveyed through a blog is a type of performance of what it means to be a cosmetic surgery patient. As such, it is imperative to briefly discuss the role of language, performance and the social context in which the blog posts I am examining take place. Although there are other social interactions on the website that can be considered, for instance the relationship between users and doctors or the relationship between users and

TrueBeauty website administrators, this thesis will be solely focused on the written blogs of women and the context in which these are written.

Users on the website *TrueBeauty* are aware that they are performers, or the author of words that have an audience, for instance BeautyBombshell56 writes:

OK I guess its time to write about me! IVE BEEN STALKING THIS SITE FOR MONTHS AND MONTHS...THANK GOD FOR ALL YOU BEAUTIFUL LADIES!!!!

In this way, BeautyBombshell56 situates herself as the performer and sole voice of her blog while also acknowledging her audience. This is largely a result of the functions of the website *TrueBeauty*, where those with blogs are individuals at various stages of a journey, and are thus performers that have a story to tell. Users of *TrueBeauty* that do not have a blog comprise an audience, and do not perform on blogs. Importantly, performers (users that have blogs) may also be an audience to the performance of others, for instance Bambi19 says:

I am going to begin my journey on here I am really excited I found this Forum on here I have learned tons of info and thanks to you Ladies for sharing all of your experiences, journeys, travels into this new life I appreciate that I was able to learn so much from you all I will keep you posted and whats going on and who the Doctor will be that I will go with.

As such, Bambi19 discusses that while she will be detailing her story to an audience, the stories of others have informed and shaped her own story. Similarly, QueenofHearts writes:

By posting my weight loss and Surgery Journey Details here. I hope to:

1. Be sure to stick to my Weight loss Goals.
2. Gain encouragement from my TB (*TrueBeauty*) community!
3. Encourage others who feel the same way
4. Provide any knowledge I learn along the way to share with my fellow SX ladies
5. Show My change.....for others to use as a Reference.. (if they share similar body type).

Users define an interactive and supportive relationship between themselves, other performers and audience members. How an individual is navigating the website (for instance, writing a

new blog post, or reading about someone else's account) defines whether or not they are a performer or a member of the audience. Importantly, because this thesis looks only at women's blogs the quotations, excerpts and examples used throughout this thesis occur in the context of a performance.

It is important to recognize that this performance takes place on the website *TrueBeauty*, where users are using the website as consumers seeking information. This is reflected in the structure of the website; there is always an implicit relationship to consumerism. In fact, a blogger has the option to rate their cosmetic procedures as "Not Worth It", "Not Sure" or "Worth It". The intention of the website is to communicate information that will be useful to potential consumers of cosmetic treatments such as costs, to provide support for recovering patients, and to provide individuals with access to doctors. In this way, *TrueBeauty* places power into the hands of a consumer seeking services from a doctor. Importantly, websites similar to *TrueBeauty* make revenue by selling advertising to doctors, and doctors that are highly rated in the community are those that are trusted and profitable (Griffith, 2013). As such, the priorities of *TrueBeauty* influence the contexts of these linguistic actions in the way women discuss their experiences with cosmetic surgery abroad, and what type of information a user opts to share with others.

The research parameter of this thesis captures women who have undergone tummy tuck procedures in the Dominican Republic and therefore do not speak to women's experiences with cosmetic surgery tourism in other countries. Further, this thesis only captures women who are able, comfortable and active on the Internet. As such, this thesis excludes women who are not, are passive watchers or are not active on the Internet but also participate in cosmetic surgery abroad.

Additionally, this thesis examines the beauty practices of women who participate in an economically privileged, middle class society,⁸ and fails to include women on the margins of society. Women often discuss how they are paying for their surgery and their economic statuses:

I'm setting my dates this far out because I don't want to get a loan for my surgery and plan to pay in out right from my part-time job. Yes you heard right I have a second job! LOL Trying to pay bill out right without taking away from the first job. I'm a very busy woman! (SexyLilMomma).

I also just found the house of my dreams!!! I'm hoping to write a contract on it tonight or before I leave for the DR. I would love to have a nice house for the holidays with all the space for my kids to run around. It also has room for me to start my business back up and provide language classes from my home (Hannah39).

Another thing that makes me hesitate at times is my job. I have a very demanding job and most of the vacation times are not allowed due to the magnitude of our responsibilities. So we can take vacations during Oct-Dec, because of the rest of the months is a rush to deliver our work (NickiMango61).

Furthermore, many women describe their decision to perform cosmetic surgery abroad as being largely based on saved costs. For instance:

I started researching and found this website, and that's when I saw Dr. Jimmerson work. I was so amazed at his work, that I even called the office. I was quoted \$15000 before the consult and then I thought the work wasn't worth 15K. Then I found Dr. Gomez and Dr. Jasmin, and I have contacted both and quotes. From both I got a quote of \$4200, which I think is not bad. Dr. Gomez included the recovery house, and does not include lipo of the thighs. Dr. Jasmin includes all the work, but with out the recovery house. I'm looking at it this way, when I have this done I don't want to get cut on again and have down time. I want to get everything I want done," At the same damn time!" As long as it is same for me to do so. So with that being said Dr. Jasmin has won my business (SexyLilMomma).

⁸ Describing these women as largely middle class is an assumption I have made through reading their blogs. Many women describe having to ability to work an extra job to help fund their cosmetic surgery, while others state that their partners have purchased the procedure for them. Further, many women describe being students, professional career women or being a stay-at-home mother, demonstrating a life of relative privilege. It is important that this does not disguise that this is an assumption that I have made throughout this research process.

These accounts infer that the women who are the authors of the blogs examined throughout this thesis are located within favourable economic and social conditions, yet at the same time, specifically seek surgery abroad as a cost-saving measure over domestic services. Further, as cosmetic surgery is gaining popularity in a North American consumer culture, it is often marketed—both domestically and abroad—to middle-class women who have increasing buying power as consumers in a neoliberal marketplace.

This thesis excludes the role of men in cosmetic surgery practices. This is primarily because women have historically been, and continue to be the primary targets of a neoliberal beauty industry. In fact, men tend to unrealistically distort their bodies positively while women tend to unrealistically distort their bodies negatively, pointing to a cultural trend where women are self-loathing (Wolf, 1991). This does not mean to say that men do not participate in cosmetic surgery, rather, there is a noted increase in cosmetic surgery treatments offered to men in recent decades. Male identities are subjected to similar culturally shaping processes that impact women's identity, although this is to different degrees and contexts. Men who do not "pass" as masculine may seek products and services in a capitalist marketplace, such as health supplements that promise to increase muscle capacity, or cosmetic surgery to eliminate protruding breasts that are deemed effeminate (Bordo, 1993; Gilman, 1999; Wegenstein, 2012). However, these male experiences are not represented in the sample of blogs used in this study, because I seek to capture women's distinctive, gendered experience of cosmetic surgeries, which represents a continuing trend of cosmetic surgery being performed largely by women. Further, women's bodies have historically been much more scrutinized and objectified than men's bodies (Wegenstein, 2012).

Summary and Chapter Outline

Women's linguistic capacities have the ability to reflect their horizons, reflecting their capacity for knowledge and understanding that shapes their realities within everyday situations. Language has the ability to show implicit aspects of reality, and not just what is directly related to the communication of the moment. These linguistic actions draw from a reality that is composed of multiple sources of information (such as ideas and assumptions surrounding the role of women as mothers, femininity or beauty) that define and shape a woman's horizon, or embodied identity in North American culture. Furthermore, language allows us access to a neurological process that engages and enhances the brain's capacity for memory and understanding because it requires focus. Namely, language illuminates a section of the left-brain that gathers information over an individual's lifetime (or horizon) that has been allocated through the symbolic capacity of language. Language simultaneously shapes biological, neural connections within the mind, while being the basis upon which humans make sense of the world. Language is a fundamental part of shaping an understanding within everyday life because information is conveyed through language and it is language and its symbolic capacities that shape an individual's understandings in embodied everyday life. As such, this thesis will focus on certain aspects of the realities that are put forth by women in their blogs. The structure of this thesis is based on a noticed pattern in linguistic discussions related to beauty, consumerism, motherhood and the meaning of cosmetic surgery in contemporary North America. These patterns, and the language that makes up these patterns, reflect an understanding of cosmetic surgery that points to a 'cultural logic'. This cultural logic situates cosmetic surgery within cultural histories (such as notions of beauty or motherhood) that are shaped and informed by women's lived experience in a neoliberal society. As such, by examining the mobilized language within women's blogs, we can gain

an understanding of cosmetic surgery and the cosmetic surgery experience and how it is related to establishing a woman's embodied existence.

In what follows, Chapter 2 will discuss the notion of beauty as it is interwoven in body image, gender performance and cosmetic surgery practices, as well as describing a brief history of beauty and cosmetic surgery in North American culture. This chapter will end with a discussion of where to locate cosmetic surgery abroad in scholarly literature on tourism. This chapter provides an overview of the historical context of ideas that are further elaborated upon in this thesis. In Chapter 3, I will be examining the political and economic implications of undergoing cosmetic surgery abroad by focusing on an analysis of neoliberalism and consumerism as an overarching set of assumptions put forth by a neoliberal rhetoric that shape understanding in North American culture. Specifically, I will be linking the way an economic and political climate participates in shaping the identities of women and the relationships found throughout cosmetic surgery practices abroad. In Chapter 4, I will be examining the intersection of cosmetic surgery abroad with the aging female body, motherhood and femininity. In this section, I will be considering the role of language in shaping an ideal body image in the popular media of North America. I will conclude the thesis by providing an overview of the argument thus far, and then expanding on a discussion of agency in contemporary cosmetic surgery practices. Finally, I will return to a discussion on the role of language in establishing an understanding of our embodied existence and speculate on the role of language surrounding beauty as a source of women's agency.

Chapter Two // Beauty, Femininity & the Female Body: Historical Context of Cosmetic Pursuits

In this chapter, I examine a North American cultural history of ideas about gender, femininity and related beauty practices while providing a literature review that outlines the historical context of Western beauty ideals, cosmetic surgery practices, and cosmetic surgery tourism. In doing so, I establish a thematic foundation for a thread of analysis in subsequent chapters that enables an intersectional approach to examining cosmetic surgery, beauty, neoliberalism and how these inform the identities of women who participate in cosmetic surgery abroad.

As I have argued earlier, the body has been traditionally relegated to the field of natural sciences, and regarded as a biologically natural entity. The differences found between the sexes established the assumption an individual's gender was determined by their sex organs (Bordo, 1993). However, feminist scholars have increasingly recognized that the body is always inscribed and shaped by configurations of power such as historical and political processes, allowing scholars to view the body as involved in the construction of cultural meaning and everyday understanding (Bordo, 1993). Recognizing the body's position in the construction of cultural meaning and embedded within power relations has allowed contemporary (namely poststructuralist) scholars to explore the ways in which the body participates in shaping social norms and habitual practices that make up gender identities (Bordo, 1993).

Butler (1990) describes the body's relationship to power and gender in relation to a set of learned behaviours that are situated in the body. Namely, Butler (1988, 1990) suggests that identity is a result of a performance that is learned by a similar process to learning a language, "through imitation and gradual command of public, cultural idioms (for instance, the corporeal gestures of gender)" (Bordo, 1993: 289, Butler, 1990). The body and

individuals' experiences of their embodied selves are therefore the result of culturally learned behaviours that are informed by their sex organs, and prescribed gender. Women in various historical and socio-cultural contexts have a history of having their bodies controlled by patriarchal norms that define their femininity. For instance, Chinese foot-binding practices were a technique used by citizens in Neo-Confucian China in order to manipulate their bodies to conform to male notions of beauty (Blake, 1994: 684). This notion of beauty was embedded within Chinese foot binding practices where it was heavily influenced by the patriarchal structure prevalent in Chinese society between the 10th century and 20th century. Men viewed women that had bound feet as attractive not only due to the shape of their feet, but also the strength in character that it took to go through the foot-binding process (Blake, 1994: 683).

In the history of Western culture, a woman's femininity has often been defined by her ability to conform her body to an ideal of beauty. Beauty has been, and continues to be presented in popular media as the concern of women, making beauty practices a highly gendered concern (Winterich, 2007). In this way, while what beauty constitutes has changed in various historical and socio-cultural contexts, it has played, and continues to play a central function in regulating and defining an ideal female body, and a normative heterosexual definition of femininity (Wegenstein, 2012; Winterich, 2007). Beauty plays a vital role in the construction of heterosexual, female identities in cosmetic surgery practices, and the female body has been subjected to many changes throughout history. The continued popularity and goal of achieving an ideal female body is rendered readily accessible to women through cosmetic surgery practices that reinforces beauty as a central component of identity construction in contemporary society (Edmonds, 2007; 2011; 2012). The culturally

constructed notion of an ideal female body impacts how beauty is understood by the women who participate in cosmetic surgery abroad, while informing and shaping their understanding of the experience of cosmetic surgery. Femininity and female identities are shaped in the context of lived realities where women negotiate their identities as women, mothers, wives or daughters in a neoliberal society. That is to say, when women engage with the world around them, there are multiple implicit processes occurring (such as beauty) that inform women's understandings in everyday life.

A Western History of Beauty

Examining cultural notions of beauty is important because societies have deeply rooted, culturally historical understandings of what beauty is. In the history of Western culture, the concept of 'kalokagathia,' in the medieval time period (400-480 CE) described a non-gendered cultural understanding of beauty that encompasses 'inner' beauty and outward, physical beauty (Durrigl, 2002; Wegenstein, 2012). The root words of the concept kalokagathia represents this holistic understanding, where 'kalos' refers to the body as beautiful, handsome, decent or noble, while agathos' refers to characteristics such as being honest, good, and courageous (Durrigl, 2002). Neoplatonist philosophers later expanded the definition of 'kalokagathia' to include social and moral excellence in order to describe the inner aspects or spiritual beauty of an individual. This extension of the notion kalokagathia was aligned with Christian ideals that shaped and influenced Western cultural ideals during this moment in history (Durrigl, 2002). Later in the Middle Ages (480-1400 CE), a distinction began to develop between the notions of the body and self, because the body was temporal and mortal, while the self was considered immortal and disembodied. However, both the self and the body maintained a close relationship and were not understood as

detached from one another in a Cartesian sense due to the fact that the body was understood as “an image of the mind” (Durrigl, 2002: 209). During the Renaissance period (1400-1500 CE) with the work of Dante, we begin to see the notion of kalokagathia as something purely aesthetic and corporeal (Durrigl, 2002). This focus on corporeal beauty is significant because it foreshadows Descartes, whose theory of mind-body dualism was central to how the self was reconceptualized by 18th century philosophers during the enlightenment period (Porath, 2007). During enlightenment, pervading Christian ideals and the authority of knowledge produced by the church collapsed while scientifically produced knowledge prevailed (Becker, 1932; Porath, 2007).

Eighteenth century philosophers reconceptualized the individual as two distinct domains of existence, where the body was considered an empty vessel for the mind, or self. This division of mind and body established an assumption that the self was relegated to religion and the social, while the body was the object of science (Porath, 2007; Latour, 1992). This belief also impacted the scholarly pursuits of anthropologists and other social science disciplines that have favoured the examination of the self as a centre of interest in their research (Latour, 1992; Wegenstein, 2002). Beauty is a compelling focus of scholarly analysis because it often describes values and shapes cultural assumptions of the mind and body (Edmonds, 2012; 2011). For instance, this can be revealed through the way beauty is expressed in language, which often characterizes various relationships between beauty, the body and the self where physical attractiveness can signify various forms of femininity. In North America, when a woman is described as a ‘knock-out’ it is conveying physical beauty as capable of making one speechless, stunned or rendered unconscious. Further, a beautiful woman can be described as a fox, or foxy, where a woman’s attractiveness is associated with

a mysterious, sly and seductive form of femininity. Beauty is often treated as something that can be observed symbolically on the body, which determines moralized attributes to a distinct abstract realm of self (Durrigl, 2002; Edmonds, 2011). In this way, beauty describes a desirable value that is conveyed through the material and symbolic manifestations of the body (Edmonds, 2011; 2012; Reischer & Koo, 2004).

Physical beauty has a historically significant relationship in characterizing femininity (and masculinity) throughout the history of Western culture. Beauty is a fluid concept, and the shape of the female body has often taken on different symbolic meaning, and described different social values. For instance, prior to the 1880s, thin, fragile women were associated with an elite, upper class, and were understood as polite and beautiful (Mazur, 1986). However, this ideal image of beauty became contested around 1880 and gave way to a more voluptuous, wide-hipped and big-breasted shaped woman that became the new ideal. Women would use various means to achieve this ideal image, that included placing padding underneath their clothing to appear shapelier, and eating larger quantities of food (Mazur, 1986). Voluptuous women were associated with the higher classes because of their ability to nourish themselves; however, this ideal shape was replaced, at the start of the 20th-century, with a thinner waistline. Despite this reduction of the ideal waistline, the ideals of wide hips and wide legs were maintained (Mazur, 1986). By 1920, this ideal shape was further transformed into a thin-framed, shapeless body that was no longer garbed in the corsets that characterized fashion in the 19th century. This lack of shape in the physical form of the body and in fashion shifted the emphasis of beauty from the body to the face (Mazur 288, 1986).

Later, in the 1940's, the ideal shape of women was further redefined where the waist and thighs were now very thin, however with relatively larger breasts (Mazur, 1986). Later in

the 1950's, a woman's ideal shape was defined as bigger breasted and smaller waist sizes (for instance, Marilyn Monroe). In contemporary society, even skinnier waists, smaller hips and large, perky breasts characterize the ideal erotic female body. This ideal female body may be observed in popular media or on the runways of fashion week, exhibiting the latest designer clothes. This ideal female body has been subject to increasing scrutiny, as it has been argued to promote an unhealthy female shape that often encourages the development of an eating disorder, and requires rigorous exercise or cosmetic surgery in order to achieve (Wolf, 1991). Importantly, this is not the sole ideal female body. Women in North America may hold contrasting ideas of what an ideal female body is based on their experiences (Bordo, 1993; Mazur, 1986; Wegenstein, 2012). The material reality established by capitalism in the early 20th century to the present endlessly offers women an array of strategies to achieving an ideal female body by purchasing various products or regimens such as diets, exercise regimes, lotions and compressing or padded undergarments. The ideal body that may be achieved through these methods is characterized as a body that has a toned, flat abdomen, perky breasts, thin waist, perky buttocks and devoid of the visible markers of age such as sagging skin and wrinkles.

The ideal female body described above is a body that is “passing”, and women who wish to “pass” aim to conform their bodies to this ideal (Gilman, 1999). “Passing”, as it is used in this context, is a term employed by Gilman (1999) to describe our human desire to make our selves happy by fitting in, which he argues is intimately linked to the development of cosmetic surgery. “Passing” describes the human ability to observe the world around them and make sense of it through common patterns and understandings, which may also be described as ‘judging’ (Gilman, 1999). When an individual judges the world around them,

they are often judging other individuals. An individual who “passes” is someone who does not stand out in society, that is, they do not draw your attention if you cross their path (Gilman, 1999). “Passing”, according to Gilman (1999), is important for an individual’s sense of herself, as an individual who does not “pass” often experiences her body as unattractive, inadequate or abnormal. With advances in medical technologies, such as anesthesia and germ theory in the 20th century, cosmetic surgery has developed in the early 21st century into an increasingly advertised, safe, popular and affordable means for women who wish to not only “pass”, but “pass” as an ideal, erotic female body (Gilman, 1999:206).

Cosmetic Surgery and Beauty in North America

Although there is evidence that societies in 50,000 BCE used needles for the modification of the human body, never has body modification been so invasive as in the late 20th and early 21st century (Coleman *et al.*, 2000). Importantly, the way in which plastic surgery practices are related to the pursuit of beauty determines the way in which the surgery is labeled and viewed. Namely, plastic surgery that is motivated by beauty is labeled as aesthetic or cosmetic surgery, and distinguished from the category of reconstructive surgery, which is seen as restoring the body back to its normal functioning state (Gilman, 1999). However, this distinction between reconstructive surgery and cosmetic surgery did not always exist, as cosmetic surgery is a contemporary idea and practice. In the 1500s, the practice of reconstructive surgery was associated with syphilis, a disease that was highly stigmatized and visibly deformed body parts, such as the ears and nose. In the 1800s plastic surgery also operated solely for reconstructive capacities (Gilman, 1999). Up until 1944, beauty as a concept was rarely associated with cosmetic surgery as it was considered to be an incidental result of the work of a plastic surgeon, which served primarily reconstructive

purposes. While surgeons operated and expanded their skills of skin grafting and local flap repair by operating on soldiers who fought in WWI, it was only after World War II that beauty became a primary goal for plastic surgeons.⁹ During this time period, surgeons who called themselves ‘beauty surgeons’ encountered a lot of resistance from the field of medicine that questioned the legitimacy of their practice (Gilman, 1999). The pursuit of beauty within cosmetic surgery practices was deemed to be beyond human nature, beyond necessity, and frivolous.

The way in which cosmetic surgery is conceptualized today points to a grappling with historical values placed on health and health care. There is a clear tension between the legitimacy placed on biomedical pursuits that aim to address one’s biologically defined health and other medical practices (such as cosmetic surgery) that are concerned with addressing beauty and identity. Interestingly, to utter the colloquial term for cosmetic procedures such as nose-job or face-lift (rhinoplasty or rhytidectomy respectively) within a medical context is deemed to be an impingement on the authority and legitimacy of a cosmetic surgeon (Gilman, 1999).

However, through scientific, political and medical pursuits, cosmetic surgery and the pursuit of beauty have rapidly become a profitable consumer industry that initially targeted mainly women. The popularity of cosmetic surgery has allowed for the expansion of expertise, and now includes a wide variety of procedures such as “facelifts, rhinoplasty (nose contouring), otoplasty, eyelid corrections, lip enlargements, chemical peeling and

⁹ During this time, surgeons were practicing on the bodies of soldiers. As such, plastic surgery was a highly gendered practice. Interestingly, when plastic surgeons began to experiment with the rejuvenating effects of cosmetic surgery, it was often linked with maintaining a male’s fertility and happiness (Gilman, 1999). It is only in the 1990s that cosmetic surgery became a highly female-gendered practice, while men were understood as strange or effeminate for participating in cosmetic surgery (Gilman, 1999).

dermabrasion, breasts correction (mastopexy reduction, augmentation), the stripping of varicose veins, fat removal, body contouring (liposuction or suction lipectomy) and penile enlargement” (Williams 1042, 1997). Importantly, the beauty work that takes place within cosmetic surgery practices is seen as allowing people access to the ephemeral qualities of beauty, and giving people the potential to “short-circuit other networks of power” (Edmonds, 2011:17). Namely, cosmetic surgery is seen as offering an individual access to beauty, and being physically attractive or beautiful is believed to give a woman an upper hand in a society, particularly in a society that is capitalist-consumer oriented. Gangestad and Scheyd (2005) state that:

attractive people [in Western societies] are treated differently from others more generally, leading them to have better jobs, higher incomes, and more friends than others - indeed, achieve more desirable outcomes in most spheres of life people consider important (524).

Further, in a survey performed by the American Association of Retired Persons (2001), more than half of female participants stated that they felt it was important to maintain an attractive physical appearance, and almost a quarter considered it essential. When asked whether inner or outer beauty was more important, almost a third of participants over the age of 18 stated that outer beauty was more important (Huang, 2001). As such, it is important to recognize that beauty holds power and is involved in identity-shaping practices. The power of beauty lies in the way it has been historically construed, as well as the assumptions that are made regarding beauty and femininity.

Cosmetic surgery is about the pursuit of beauty. What beauty means within cosmetic surgery practices is increasingly connected to an ideal gender performance of femininity, establishing the body upon which one communicates one’s value and identity. For instance, in Western culture, “flesh or fat on the body has been framed as a signifier of excessiveness,

being out of control, a devaluation of the feminine, and failed individual morality” (Dworkin & Wachs, 2004). Being preoccupied with keeping one’s body free of fat reinforces a normalized body ideal that brings a woman closer to cultural ideals of femininity and an erotic body (Bordo, 1993; Dworkin & Wachs, 2004). As suggested earlier, the female body is defined by cultural ideals and dominant values that permeate Western culture. These cultural ideals and values present women with a set of performances that define normalized feminine actions, for instance, fiddling with one’s hair or crossing one’s legs. While beauty work is a normalized preoccupation for women in Western society, “passing” in an erotic body is often the primary goal of women who participate in cosmetic surgery (Gilman, 1999). The erotic is a notion that has a significant connection to beauty, selfhood and the human body:

The erotic is a quality that seems to be rooted in the body, but, as the long discussion of the origins of sexual arousal have shown, it is also perceived as a quality of the mind or the psyche. Bodies are what we make them to be, and when we change the rules as to what body parts can be altered and how they should appear, when we alter what orifices of the body should be entered, we change the erotic nature of the bodies themselves. Judith Butler has observed that the very construction of gender relies on a fixed understanding of the body. When [cosmetic] surgery acquired the technical ability to transgress the boundary that arbitrarily defines the body as either erotic or unerotic, it disrupted the notion of the fixed gendering of the body. Yet, ironically, transgressing this dichotomy constantly reestablishes it. (Gilman, 1999: 207)

While some women experience cosmetic surgery as wanting to be “normal” because of experiences of “difference” (Davis, 1995), many women also perform cosmetic surgery so that they may “pass” as an erotic body. The erotic is an important notion in defining women’s identities, as being erotic is an important part of establishing their sense of femininity, or sense of themselves (Gilman, 1999). Gilman (1999) argues for a strong connection between beauty, eroticism and happiness. Being erotic is imagined as the cornerstone of happiness because the erotic body is always one that is associated with a

healthy body and a healthy psych (Gilman, 1999). Importantly, the erotic ideal body can mean different things to different people and an erotic body is not always connotative of positive traits. For instance, the erotic can be associated with disease, such as the body of an individual suffering from AIDS (Gilman, 1999).

The ideal erotic female body that I am describing throughout this thesis is one that is promoted by a capitalist consumer society, which encourages women to view their bodies as defective, and to view a perfect, feminine body as a source of happiness (Gilman, 1999). Women may only “pass” as an erotic body and experience happiness when they have achieved this perfect body. However, because women are encouraged to view their bodies as deficient, achieving a perfect erotic female body is an unachievable goal (Bordo, 1993; Gilman, 1999). The ideal erotic female body is not the same for every woman, as it is an imagined self that is informed by their past experiences, images of women’s bodies in popular media and cultural values that shape a woman’s ideal self. For instance, all of the women agreed in their blogs that a flabby stomach with loose skin was unattractive, and the unattractive or unerotic qualities of these parts of their bodies were a significant source of discomfort. A tummy tuck was opted for as the best solution to this body problem. However, many women included other cosmetic procedures with their tummy tucks, including liposuction (21 women), Brazilian butt lift, or fat injections into the top of butt cheeks that have been repurposed from liposuction (4 women) and breast lifts (2 women). The ideal erotic female body as conveyed by women in their blogs can be described as a body that is free of excessive body fat, with a flat abdomen and perky breasts and rear.

Feminism and Cosmetic Surgery

One of the main discussions within feminist scholarship regarding women's participation in cosmetic surgery in North American culture surrounds the notion of agency. I stipulate that it is important for feminist scholars analyzing women's experiences with cosmetic surgery to consider the impact of wider cultural and media discourses regarding beauty, healthy aging and femininity that inform women's experiences with cosmetic surgery. Further, feminist scholars of cosmetic surgery practices should distance themselves from theoretical frameworks that portray women as "dupes" (Bordo, 1993; Davis, 1995).

Some scholars of cosmetic surgery have adopted a radical feminist perspective where cosmetic surgery is regarded as a beauty practice that is "not only costly and often dangerous, but also oppressive and demeaning of women" (Davis 73, 2003). For instance, Morgan (1991) when discussing the desire of women to achieve the 'perfect body' through cosmetic surgery, argues that:

For virtually all women as women, success is defined in terms of interlocking patterns of compulsion: compulsory attractiveness, compulsory motherhood and compulsory heterosexuality, patterns that determine the legitimate limits of attraction and motherhood. Rather than aspiring to self-determined and woman-centered ideals of health or integrity, women's attractiveness is defined as attractive-to-men; women's eroticism is defined as either nonexistent, pathological, or peripheral when it is not directed to phallic goals; and motherhood is defined in terms of legally sanctioned and constrained reproductive service to particular men and to institutions such as the nation, the race, the owner, and the class - institutions that are, more often than not, male-dominated. (32)

In other words, the pursuit of cosmetic surgery is first and foremost a result of patriarchal power attempting to make women comfortable with surgical interventions, bringing women closer to male ideals of what a woman should look like. In an update on her argument about cosmetic surgery, Morgan (2009) discusses cosmetic surgery that is performed abroad by

linking women's desire for cosmetic surgery within a neoliberal rhetoric of self-making that transforms the attention of individuals inward, rendering invisible "the systemic anti-liberal economic and cultural structures within which the Spa(s)-Techno-Aesthetica economically flourish and continue to market their services primarily to women as an increasingly compulsory way of constructing privileged gender in a heteronormative, racialized world" (71). In this way, a woman's choice to participate in cosmetic surgery is portrayed as giving power to and reinforcing oppressive and conservative beauty regimes that are disguised by a discourse of freedom and self-making.

Davis (2003) perceives radical feminist understandings of cosmetic surgery as viewing women as "duped and manipulated victims of the feminine beauty culture" (79). A common way in which this has been described in contemporary society is the image of the cultural dope. The cultural dope is the idea of a woman who blindly submits herself to oppressive beauty regimes because she, a dope, is too unintelligent to be aware of normalizing forces of femininity and images of beauty that permeate Western culture (Bordo, 1993: 30). Davis (1995, 2003) resists the notion of cultural dope through listening to first-hand accounts of cosmetic surgery patients. Davis (2003) states that "it makes more sense to frame cosmetic surgery as an intervention in identity – that is, a person's sense of her embodied self – than as a beauty practice" (74). In this way, women are viewed as competent actors with an intimate and understated knowledge of society that takes account of cultural discourses and practices of feminine beauty (Davis, 2009).

A significant aspect of Davis' (1995, 2003) understanding of cosmetic surgery and women's identity is the way in which images of beauty are viewed as capable of offering women agency. Importantly, the notion of agency for Davis (2009) is inherently embedded

within power relations, and should not be confused with other notions such as choice and freedom. Images of beauty, although presenting a normative ideal of femininity also have the capacity to offer women a remedy for bodily suffering (instigated by feelings of difference), which they experience as intolerable (Davis, 1995, 2003). In recent years, Davis (2009) has argued that there has been a noticeable shift in the way that cosmetic surgery engages within cultural discourses of ideal beauty and femininity. Namely, there has been a change in the way the notion of difference is engaged with by the media and cultural discourses.

Differences are no longer imbued with notions of “abnormality” but have rather become commodities (Davis, 2009). Davis (2009) suggests that “[d]ifference, rather, ‘presents ‘race’ or ‘sex,’ once markers of inequality, as matters of stylistic choice, to be mixed and matched like putting on different outfits. The body is treated as nothing more than a vehicle for recognizing our individual desires and projects” (44). In this way, Davis (2009) argues that cosmetic surgery renders differences invisible, allowing cosmetic surgery to be used as a tool for the celebration of individuality.

While Morgan (1991) offers a radical feminist interpretation of women’s participation in cosmetic surgery, Davis (1995, 2003) can be perceived as offering a liberal feminist interpretation. Bordo (1993), one of the most cited scholars in feminist cosmetic surgery argues that women who participate in cosmetic surgery should be perceived as women who are participating in their culture while fostering “a healthy skepticism about the pleasures and powers it offers” (Bordo, 1993: 31). Bordo (1993) argues that capitalist society encourages an understanding of the body that is plastic. This plasticity is encouraged by technological advancements, such as those that facilitate cosmetic surgery procedures. Plasticity renders the human body infinitely malleable, capable of change and seemingly presents consumers

with a plethora of choices for transforming and customizing one's body (Bordo, 1993). This capacity to transform the body is reiterated at the level of discourse in the media, where advertisements often encourage individuals to view their bodies as transformable, and suggest that the bodies they desire are within their reach (Bordo, 1993). For instance, Bordo (1993) describes an Evian ad that depicts 3 fit, healthy models (2 male and 1 female) who are holding water bottles, drawing a symbolic connection between the consumption of branded spring water and a specific, fit body shape. In this ad, Evian is stating that individuals have the capacity to achieve any body they desire through the consumption of bottled water (Bordo, 1993). However, Bordo (1993) argues that this seeming rhetoric of choice is contributing to shaping a normalizing image that permeates through Western cultures regarding what a female body does and looks like. This normalizing image that is disguised by a capitalist rhetoric of choice and a new founded plasticity of the body often fails to provide a voice for difference, and often renders differences invisible (Bordo, 1993).

While Davis (2009) argues that difference can be a form of liberation for women, it is important to acknowledge that many women are made to feel that their bodies are defective (Bordo, 1993). For instance, Braun (2009) traces the contemporary practice of vaginal surgery and the surrounding media discourses and surgeon discourses regarding what a woman's normal vagina should look like and not look like. Within these vaginal reconstruction discourses, ambiguous characterisization of what a defective vagina looks like involved terms such as "loose" vagina, "saggy" labia majora or "large" and "thick" labia minora (Braun, 2009: 138). Meanwhile, a "normal" vagina is described as "small", "symmetrical" or "contained" (Braun, 2009: 138). By utilizing ambiguous terms to describe a

woman's vagina, any "labial protuberance potentially becomes constructed as anatomically abnormal" (Braun, 2009: 138).

As such, Davis' (2009) argument of difference and equality ignores the continued existence of discourses that seek to normalize what the female body does and should look like. Denying the impact of a lifestyle of consumption that permeates Western culture fails to address the power that lies within normalizing discourses. "Rising above" these images does not make the individual immune to its forces, rather, it perpetuates the power these images have in shaping experiences of women who participate in cosmetic surgery (Bordo, 1993). Bordo (1993) describes the discourse of beauty and the normalization of the female body through cosmetic surgery as being 'cultural plastic', where the body is increasingly perceived as malleable. Echoing Morgan (1991), albeit in a less radical feminist interpretation, Bordo (1993) views the malleability of the body as a consequence of how technologies are conceptualized and imbued with meaning. Namely, technologies are no longer limited to transforming the body back to a natural or pure functioning state as they are used in biomedicine. Technologies can now allow us to fuel "fantasies of rearranging, transforming, and correcting, an ideology of limitless improvement and change, defying historicity, the morality and indeed, the very materiality of the body" (Bordo 1993: 245). Plasticity represents freedom, change and self-determination, echoing a neoliberal rhetoric that has emerged at various points in this discussion (Bordo, 1993).

The freedom, change and self-determination that is represented by plasticity is reflective of a capitalist-consumer ideology where individuals are free to choose, free to buy and free to remake themselves. This freedom ideology is frequently reiterated by the media, for instance in *Fit* magazine they write, "[c]reate a masterpiece, sculpt your body into a work

of art...[y]ou visualize what you want to look like, and then you create that form” and “[t]he challenges presents itself; to rearrange things” (cited in Bordo, 1993: 246). Consequently, the image of the desirable, ideal body that is found within the media becomes a symbolic image of plasticity as well as everything plasticity encompasses, such as modernity, advanced technology, freedom of choice, morality and the freedom to buy (Bordo, 1993).

The notion of difference has been significant throughout this thesis in the discussion of the semiotic significance of tourism for an individual’s understanding of a location. Specifically, tourism focuses on an experience of differences that lies outside an individual’s experience of everyday life that may be deeply meaningful, and an individual may be compelled to travel in order to experience these differences (Berger, 2011). Cosmetic surgery tourism challenges the tourist experience yet still remains pertinent, as the tourist is primarily concerned with experiencing a different body, and not a different location. And yet, simultaneously, in the context of cosmetic surgery tourism, differences continue to be rendered invisible by a normalizing process that encourages women to view their bodies as inadequate or damaged. Women thus do not travel to achieve any body – rather, they travel to transform a body they perceive as defective into one that “passes” as erotic.

The feminist approach to women’s role in cosmetic surgery that primarily informs this thesis is that of Bordo (1993). Davis’ (1995; 2009) insistence that feminist scholars take women at their words fails to take into account the significance of normalizing images in a capitalist consumer society (Bordo, 2009). While I place significant theoretical value on women’s written experiences of cosmetic surgery abroad, I am also critical of the ways in which women’s experiences of cosmetic surgery abroad have been shaped by normalizing narratives present in Western capitalist media.

Cosmetic Surgery and Tourism

Due to the fact that this thesis deals with women who have undergone cosmetic surgery abroad, it is important that I locate these practices within contemporary scholarship on tourism studies prior to beginning an analysis of capitalist-consumer culture in Chapter 3. Tourism has received much attention from anthropologists with a wide variety of interests, such as sex tourism and pilgrimages (Roberts & Andrews, 2013). Although there are many angles from which to approach the study of tourism, it is medical and health tourism that are the most pertinent to discussions regarding cosmetic surgery tourism. The sub-disciplines of medical and health tourism differ from traditional anthropological approaches to tourism because individuals do not often participate in traditional tourism practices such as sightseeing and guided tours (Hall, 2013). Rather, individuals are often confined to recovery homes where they remain for the duration of their visit. As a subject of analysis, medical tourism and health tourism have been increasingly popular concerns across all academic disciplines. Medical tourism is primarily examined through its political impact, such as its influence on international health policies, state health care programs, and economic policies of governments across the world (Hall, 2013). Medical tourism approaches the individual as first-and-foremost a patient who requires health-improving procedures that may not be available domestically for several reasons, such as long waiting lists or lack of government approval for certain procedures (Hall, 2013). In academic literature on health tourism (synonymous with 'wellness tourism'), there is a focus on non-medical or holistic tourism practices, such as visits to spas or travel for meditation (Hall, 2013). In this way, the concept of health tourism treats the individual as a consumer who invests money into health care practices that claim to maintain rather than improve health, thus assessing health and

healthcare practices as an economic project. Medical and health tourism converge in their mutual approach to health as a form of consumption, however, medical and health tourism are distinct from one another through their understanding of what qualifies as health, health care and how the individual is framed.

Accordingly, cosmetic surgery abroad is classified as a health tourism practice. This is primarily due to the fact that cosmetic surgery tourism is marketed as a way in which already healthy individuals may maintain or rejuvenate their health as consumers partaking in self-improvement practices within an international marketplace. Yet, because cosmetic surgery abroad is labeled as a health tourism practice--a subdivision of medical tourism--it is classified within a system that primarily provides health-improving services and procedures for unhealthy individuals (Hofer, Honegger & Hubeli, 2012). The individual who participates in cosmetic surgery abroad is placed into a seemingly contradictory space that is unique to this form of health tourism because individuals are operating within a medical system (surgery is performed by a medical professional in the space of a medical institution) that traditionally adopts a biomedical view of health, while pursuing something typically viewed as a beauty- rather than health-enhancing practice. In this way, individuals who participate in cosmetic surgery abroad are simultaneously patients and consumers, labels that have predominately been treated independently by scholars examining medical and health tourism.

Scholars have attempted to address the limitations of using a biomedical definition of health and health care by aligning cosmetic surgery abroad with 'alternative' health care practices such as spa tourism and meditation retreats. However, both categories of health and medical tourism present tensions when attempting to locate cosmetic surgery within existing literature. Namely, cosmetic surgery abroad deals with a medical system that is already

established to provide services to the unhealthy, from which emerges a moralizing discourse regarding the legitimacy of utilizing health care services and networks that could otherwise be used for individuals who are ‘actually sick’ (Davis, 1995). Meanwhile, the impact of cosmetic surgery on psychological, mental or social health is highly contested and difficult to demonstrate, despite the way in which it is discussed in the media as having potential psychological, mental or social benefits for one’s health (Von Soest et al., 2009).

The various definitions of health and medical tourism that have been put forth within academic literature attempt to create a definition that is applicable to all disciplines, as health and medical tourism are not topics exclusive to anthropology. Additionally, cosmetic surgery is not the sole activity that is available on the international marketplace and it is therefore necessary that these definitions reflect the multiplicity of services available on the rosters of international businesses. Some definitions that have been put forth within the literature include Goeldner’s (1989) overarching typologies of five different tourism-related types of travel:

- 1) sun and fun activities (leisure tourism)
- 2) engaging in healthy activities, but health is not the central motive (outdoor recreation, adventure tourism, sports tourism, wellness tourism)
- 3) principle motive for travel is health (e.g., a sea cruise or travel to a different climate) (health tourism, wellness tourism)
- 4) travel for sauna, massage and other health activities (spa tourism, wellness tourism)
- 5) medical treatment (medical tourism, dental tourism) (Cited in Hall, 2013: 7).

These forms of typologies are useful for outlining the degree of health-related activities that the traveler engages in, while also acknowledging the array of ways health can be understood outside of a normative, biomedical definition. However, this mode of defining health tourism activities is incompatible with cosmetic surgery, as cosmetic surgery abroad is a medical

treatment yet it is not a ‘medical tourism’ activity in the traditional sense because the primary motivation is not to address the problems of an unhealthy individual. Further, defining medical and health tourism through these forms of typologies ignores the processes that are occurring outside of the event of medical or health tourism. In this way, the total experience and understanding of the individual participating cannot be known as they are shaped by events prior to an individual’s participation in medical and health tourism, and continue to impact their lives after it (McNeil & Ragins, 2005).

Many other definitions have been put forth in the literature; for instance, Hall (2003) defines health tourism as “a commercial phenomena[sic] of industrial society which involves a person traveling overnight away from the normal home environment for the express benefit of maintaining or improving health, and the supply and promotion of facilities and destinations which seek to provide such benefits (Hall, 2013: 9). However, such a definition presents the role of a consumer of health as something that is novel to a neoliberal, ‘modern’ society. Traveling for a medical or health purpose is not a novel invention of modern society. For instance, individuals in the 1600’s would travel to thermal spas, and Western individuals today similarly travel for “heliotherapy (sun treatment), climatotherapy (therapeutic use of a climate) or thalassotherapy (medicinal use of seawater)” (Cook, 2010: 136). Although there are only a few definitions discussed here, there are a wide variety of other attempts at defining medical and health tourism into neat categories (Connell, 2011; Hall, 2013). Importantly, Hall’s (2003) definition demonstrates that an individual may be considered a health tourist if they are traveling domestically, “away from the normal home environment” (Hall, 2003). In this way, the label of health tourist is not restricted to an individual who travels internationally.

The medical or health tourist has traditionally been approached as an individual who is traveling from non-Western to Western countries to receive health care services. However, in the previous two decades a ‘reverse globalization’¹⁰ has emerged where there is an increased global flow of individuals traveling from Western to non-Western nations to receive medical services for the improvement or maintenance of health (Connell, 2011; 2012). This increase of individuals traveling from Western areas of the globe to non-Western locales has occurred for several reasons. Firstly, an increasing number of non-Western countries have been adopting neoliberal economic policies as part of their strategies for economic development. Consequently, many of these countries have begun to market themselves as locations where one can receive high quality and innovative health care (Connell, 2012). Secondly, individuals residing in Western nations are faced with long waiting lists to receive health care or inflating costs for health care, and are therefore more likely to seek out health care abroad (Ackerman, 2010). Further, individuals traveling from Western to non-Western nations to access health care services are entering a system that is largely unregulated, therefore medical services that are experimental and/or banned (such as certain stem cell therapies or euthanasia ‘death tourism’), unavailable or unattainable locally are increasingly likely to be available to these individuals in the international market (Connell, 2013; Higginbotham, 2011; Inhorn, 2011).

There are many countries that offer services to the international traveler, and many countries are recognized for their various surgical specialties. For instance, Costa Rica is a

¹⁰ This term is used by the Connell (2012) to describe the patterns of contemporary medical tourism, however, I find it problematic and ethnocentric as it attributes globalization as unidirectional where Western countries expand to influence non-Western nations. I understand globalization as comprising multidirectional flows of ideas and influences, all of which have equal importance.

popular locale for dental surgery, while India and South Korea have been popular locales for cosmetic surgery procedures (Bell et al., 2011; Connell, 2011). However, other nations such as Brazil are becoming increasingly popular locales for cosmetic surgery as the Brazilian plastic surgeon Dr. Ivo Pitanguay is recognized for developing new scar-reducing techniques (Edmonds, 2011; Gilman, 1999). Precise information regarding the number of international tourists traveling specifically to undergo cosmetic surgery procedures abroad is difficult to determine, however, what is knowable is that cosmetic surgery tourism is an economically significant activity (Bell et al., 2011). The cosmetic surgery tourism industry is largely unregulated, and travelers do not often mention they are traveling to perform cosmetic surgery (Bell et al., 2011; Connell, 2011). Cosmetic surgery tourism is a relatively novel phenomenon that can be located at beginning in the 1990s (Gilman, 1999). However, cosmetic surgery tourism has only garnered scholarly and media attention in recent years as information is more readily available to consumers. Furthermore, doctors providing services to an international consumer will often establish their businesses in locations that travelers may already be familiar and have been successful in making patients feel more comfortable about traveling overseas for surgical procedures (Bell et al., 2011; Connell, 2011).

The cosmetic surgery practices that provide the research material for this thesis demonstrate this trend of individuals traveling from the West to non-Western nations for surgery. Many surgeons are increasingly offering their services on an international market place where competitive pricing makes cosmetic surgery abroad an appealing alternative to middle-class women in North American society. Women often come to know about this international marketplace through Internet searches and online communities such as

TrueBeauty, making the Internet an important medium of information for an international market place of medical services.

Summary

The female body and beauty ideals have a culturally significant role in shaping women's identities in North American culture. This chapter has introduced the historical context of the role of a moralized female body in shaping beauty ideals and femininity. Cosmetic surgery was introduced as a historically significant strategy for transforming the female body in order to conform to beauty ideals, while foreshadowing the impact that cosmetic surgery practices currently have in the construction of contemporary female subjecthood in North American culture. The increasing role of cosmetic surgery as a means to conform to beauty ideals has led to an emergent international market in cosmetic surgery, where cosmetic surgery 'tourists' travel abroad to undergo cosmetic procedures—a practice that sits uneasily at the intersection of the definitions of 'medical tourism' (medical treatment of health problems) and 'health tourism' (health and wellness-enhancing, or non-biomedical activities). The next chapter will elaborate on the contemporary understanding of beauty ideals and femininity in a global, neoliberal context, and how cosmetic surgery practices in a consumer marketplace have enabled an ideal, female body and shaped doctor-patient relationships.

Chapter Three // Youthful Bodies for Sale: Identity Politics of Self-Help, Body Image and Beauty.

This chapter outlines the neoliberal conditions in which a woman's experience with cosmetic surgery abroad takes place. These conditions facilitate cosmetic surgery tourism and promote it as a way for women to achieve bodies that they desire. The cosmetically enhanced body that women aim to achieve and the assumptions of what this body can accomplish for women reflect a neoliberal rhetoric that claims individual consumers have a right to pursue individual happiness that may be purchased in the economic conditions of a 'free' market. In this context, cosmetic surgery is constructed as a practice of individual self-enhancement while travel for its purpose is understood as part of a consumer's choice in an international market of goods and services.

This chapter investigates two sites of women's experience with cosmetic surgery that are implicitly infused with a neoliberal framework and establish a common-sense approach to the consumption of cosmetic surgery. Namely, I trace the way in which body image and identity is constructed as a neoliberal project by the language that women use to describe their motivations and experiences with cosmetic surgery. Additionally, I analyze the relationship between doctor and patient by examining Western cultural assumptions about the role of a doctor and patient and how these permeate, and are challenged by, the neoliberal context in which cosmetic surgery abroad takes place.

Neoliberalism

The neoliberal rhetoric that pervades Western societies is frequently pinpointed as emerging from an era of politics in the US and UK during the early 1980s, where the leaders of the epicenter of the Western world, President Reagan and Prime Minister Thatcher began implementing government strategies that aimed to redefine the relationship between citizen

and state (Chen, 2013; Dines, 2012). Neoliberalism has also been propelled by an economic model of 'free markets' that aid in perpetuating historical relationships of colonialism. This is due to the fact that 'free markets' allow large, Western corporations to establish their manufacturing facilities in nations that provide cheap labour in unsafe and unregulated working conditions (Dines, 2012). Capitalism is frequently understood as associated with neoliberal pursuits, and describes the material reality that provides the terrain in which individuals are shaped into financially independent, self-monitoring, consuming 'free' subjects (Dines, 2012). In these economic conditions, "contemporary society relies on a model of the subject that does more than privilege individual decision-making, action, and reward, it demands it" (Fraser, 2009: 103). As such, neoliberalism eliminates a 'welfare state' model of dependency, which moves the responsibility of care onto the individual who controls her own success and failure (Dines, 2012; Fraser, 2009). The subject that neoliberalism produces is shaped by an 'enterprising' self that is "the improvable, transformable object of psy practices of 'self-help'" (Fraser, 2009: 103; Rose, 1996). Further, in a neoliberal consumer culture, the body is intertwined with one's selfhood and is the "visible carrier of the self" (Featherstone, 1991: 172; Franco, 2008).

The body that is produced in a neoliberal context is one that reiterates a historically linked idea regarding individual happiness that has permeated the history of Western culture since the Enlightenment era (Gilman, 1999). That is, individual happiness offered by a capitalist society is achievable for women through self-help practices that allow women to 'work' on their bodies in order to make them appear youthful and erotic (Gilman, 1999). As previously suggested, an erotic body is a historically significant symbol in Western culture, as it is understood as a sign of a healthy sense of self. Further, the erotic body has played an

important role in the construction of a woman's sensuality and sense of herself as erotic or feminine (Gilman, 1999). Cosmetic surgery is often understood in contemporary society as offering women the ability to "pass" as an erotic body, which is often framed in a neoliberal framework. That is, an individual can be understood as pursuing individual happiness through body work which enables her to grasp the various technologies offered by a capitalist consumer society in order to reshape her body in ways that she deems fit (Bordo, 1993). Cosmetic surgery in capitalist society often encourages women to view their bodies as imperfect, and requiring personal investment and work. Furthermore, cosmetic surgery encourages a perspective of the body that is plastic, where physical changes of the body are infinite while remaining symbolic of an erotic ideal female body whose promise of happiness is always just out of grasp (Bordo, 1993; Gilman, 1999).

Body Image, Self-Help and Neoliberalism

The normalized female body that pervades North American culture is informed by a neoliberal rhetoric that manifests a connection between an improved self, beauty and moral assumptions that allow one to "pass" as an erotic body. The moralized assumptions that are drawn from a body shape are informed by a cultural understanding of what beauty is. Women are compelled to participate in cosmetic surgery abroad in order to align their bodies with a definition of beauty that is deeply personal while simultaneously informed by pervasive cultural ideals. For instance, the Western cultural norm of a slender and fit female body is an image that permeates Western media (Bordo, 1993). This cultural ideal is shaped by women's experiences in Western culture, which can range from her first experience shopping for a bra and learning the different categories for women's breasts or being praised by her friends for having long, slim legs. Women's experience with their bodies in Western culture

is largely experienced as one that requires constant work in order to maintain themselves as beautiful and erotic. Furthermore, women are informed by cultural ideals that determine what an erotic and unerotic female body is (Gilman, 1999). If a woman identifies with an image of a woman's body that is framed in popular media as unerotic, this may disrupt a woman's happiness and sense of herself as a sensual person. By defining what "passes" as an erotic body, and by presenting cosmetic surgery as a consumer means to achieve an erotic body, capitalist society encourages the assumption that cosmetic surgery, and an erotic body is accessible to all (Bordo, 1993). While cosmetic surgery is an increasingly accessible practice and is no longer relegated to the practice of celebrities and the elite, it is still a significant economic cost and requires many weeks of recovery time, which may not be available to all individuals.

Orbach (2009) argues that contemporary industries (such as the beauty industry) generate profits by disrupting an individual's understanding of their body and its presence in everyday life. In this way, industries facilitate a transformation of the way the body is understood and its role in North American culture (Orbach, 2009). In this newfangled relationship, the bodies of North Americans are no longer regarded as making things. Rather, it is robots, engines, pre-packaged foods or drones that make things.¹¹ The symbolic body of labour and production, the cornerstone of the industrial ages, is now represented by a body that no longer works for an industry, but rather works for herself (Orbach, 2009). This is reflected in contemporary society where the female body is often depicted as requiring

¹¹ It is important to note that not all bodies are conceived as being removed from the labour process. Many bodies are still associated with labour and production; for instance, the bodies of "illegal aliens" are meaningful to the experience of labour (see Gomberg-Munoz, 2011).

regularly scheduled body work in a beauty industry that values a youthful, productive female body.

Body work frequently appears as a self-help narrative that guides women through achievable goals that will allow them to reach their ideal body. For instance, the self-help narrative is prevalent in Western media, and positively impacts the profits of the global cosmetic industry. In the early 2000s, television shows about cosmetic surgery such as *Extreme Makeover*, *Nip/Tuck* and *The Swan* were debuted. Interestingly, in 2003, 8.3 million cosmetic procedures were performed in the United States and by 2007 that number had increased to 11.7 million. Wegenstein (2012) argues that these numbers reflect the idea that “U.S. culture has incorporated the standards of makeover television into its cultural imaginary and practice” (126). Reality television shows such as *Extreme Makeover* and *The Swan* offer contestants a cosmetic surgery experience that is framed as a transformation to a new and improved erotic self. The women who are selected are described as hard-working, deserving women who are dissatisfied with their bodies. In order to accomplish their goal of an ideal erotic body, women have to undergo difficult and strenuous tasks that are emblematic of the self-help culture. For instance, women must change their eating habits through dieting, they exercise, change their hair and clothing while also undergoing psychological therapy. These self-help practices are claimed to aid women along their journey to becoming beautiful, which is revealed to the viewer at the end of the television show in a ‘grand reveal’ (Wegenstein, 2012).

While a neoliberal self-help narrative attempts to persuade women to view their bodies as a project of improvement, it also assumes that women’s bodies are damaged and in constant need of repair and maintenance (Jones, 2009; Wegenstein, 2002). Wegenstein

(2002) describes this process as the *cosmetic gaze*, where neoliberal subjects view and “experience their own and others’ bodies as incomplete projects that await the intervention of technologies of enhancement, which will help them better approximate their true self [how they desire their body to be] or natural potential” (109). Many women mirror this neoliberal rhetoric in their blogs by describing cosmetic surgery and the pursuit of an ideal body as a laborious endeavour, or characterize the body as requiring work:

Total weight loss to date....31 lbs. I hope to lose additional 10 lbs before surgery in September. Whoever said plastic surgery was the "easy" way out has no clue! I am sure my TB sistas will agree! This takes hard work and dedication.....And that's just in preparing for surgery. LOL! (Hannah39).

I have 3 kids with my first I went up to 130 pounds with second went to 178 and with my third born in Nov 2011 I went up to 219. I am currently 187 and I am 5'1 I want to fix my body because I have a lot of loose skin and I am not going to have anymore kids (LauraLotus).

Further, other women described being closer to “passing” as an erotic self as one that is new, happy and more comfortable in their bodies.

Christmas with my family...New Years and then me....Let me say it again ME! My boyfriend said you have to start doing more to make you happy. My response was I am spending thousands of dollars on myself.....I’m good for now. The Foot Pedi can wait until I’m about to leave. Nobody thinks of the struggle of changing your body. Everyone does it at a different pace. My Journey started in 2005. I still feel like I have a long way to go but its so much fun learning new things about yourself (TravellingBeauty01).

I have to say, if it NOT for this site, I would be a complete train wreck, completely unprepared, and lost in the sauce... But instead I'm confident with my decision and at peace with it and ready to start my new life with a whole better ME! Not because IM not a good person, but because I FEEL more confident.... Smooches my ladies xoxo (Blueberri73).

Importantly, Blueberri73 describes that although she was a good person to begin with, cosmetic surgery has allowed her to feel happier because her body no longer violates an ideal body shape. Within women’s horizons, the body is understood as a self-making project that involves hard work, dedication and sacrifice, cosmetic surgery is “removed from vanity and

narcissism and becomes something that requires motivation, something that tough and hardy people with a strong work ethic of self-improvement consider: it becomes an act of courage, bravery and self-determination” (Jones, 2008: 54).

Women on *TrueBeauty* are not only establishing a community, but also highlighting a need for a space where they are not judged. Women often describes their sense of being judged whenever they leave their homes, which can be described as their failure to “pass”. Cosmetic surgery allows women to have the opportunity to not only “pass”, but to “pass” as an erotic body. This desired erotic body is often described by women as being a future source of happiness and is often imagined as a new self that is improved and “sexy”.

Neoliberalism encourages women to view their bodies as requiring work, and it frames body work as being time-consuming and requiring dedication. However, “passing” as an ideal female erotic body is also about vanity, which is often held in juxtaposition to the associations of hard work associated with beauty treatments. Many women expressed fear in their blogs that cosmetic surgery was seen as an “easy” way out, while some women expressed feeling like they were “cheating”. The reward of the hard work associated with particular fitness regimes such as exercising and dieting is often the resulting body that an individual wishes to achieve. Importantly, neoliberalism emphasizes unique selfhood, and seemingly obscures vanity behind a veil of individuality (Jones, 2009). Changing oneself through cosmetic surgery is not just about finding an old self, but it is also perceived as making that self even better. Women shape this experience of vanity as a deeply personal, self-making project that is defined by what an ideal female erotic body looks like.

In the journey to achieve an ideal body, Bordo (2007) argues women are reciting a neoliberal “for-me mantra” which she maintains shapes an imagined “me” that is a “pure and precious inner space, an ‘authentic’ and personal reference point untouched by external values and demands” (Wegenstein, 2012: 130). In this way, the “for-me” mantra creates the assumption that cosmetic surgery is about the individual. However, if the “for-me” mantra stems from, and participates in neoliberal assumptions of body ideals, beauty and selfhood, it is

difficult to determine whether an individual chose cosmetic surgery, or if cosmetic surgery chose them by way of “larger patriarchal structures that makes cosmetic surgery seem like the only option for psychological survival in a world hostile to women’s bodies” (Heyes & Jones, 2009: 6, Wegenstein, 2012).

Cosmetic surgery, and cosmetic surgery abroad is often depicted in popular media as a self-help practice that allows women to achieve an ideal self. For instance, on October 6th, 2004 Oprah Winfrey aired a series on television entitled *Around the World with Oprah* (Lee, 2008). Within the show, Oprah examines the beauty practices of South Korean women, who frequently undergo cosmetic surgery in the form of double-eyelid surgery, and contrasts this with Western women who go abroad for surgery. Throughout the show, plastic surgery becomes framed as a prominent practice in a capitalist-consumer society. Through this, plastic surgery is normalized and “rationalized as an investment in the self towards a more normal, if not better, future” (Lee, 2008: 26).

The way in which Oprah depicts cosmetic surgery tourism for Western women in *Around the World with Oprah* reflects cosmetic surgery as a self-help practice that arises in a capitalist-consumer context. Meanwhile, cosmetic surgery performed by Korean women is primarily described as oppressive by attempting to shed Asian features and appear more Western (Kaw, 1993; Lee, 2008). When Oprah is speaking with her expert on cosmetic surgery in Korea, Ms. Ling, something interesting occurs when the conversation shifts from talking about Korean women undergoing double-eyelid surgery to Westerners going to Brazil for surgery (Lee, 2008). Ms. Ling and Oprah praise Western women for their freedom of choices that make them more efficient and competitive in an economic recession, but have a completely different take on double eye-lid surgeries in Korea where women were seen as absurd, duped and oppressed (Heyes, 2009; Lee, 2008). Lee (2008) argues that cosmetic

surgery tourism performed by Westerners is framed as a “therapeutic biography” that Oprah offers her viewers (28). Within the therapeutic biography, Oprah offers a message to her female viewers that promises their own “potentiality to achieve and self-manage despite gender, race, class or psychological adversity” (Lee, 2008: 28). Within this media narrative, cosmetic surgery performed on the racialized bodies of women is assumed to be oppressive. Meanwhile, cosmetic surgery that is performed on non-racialized female bodies illustrates women as independent and savvy consumers. The discourse underlying *Around the World with Oprah*, states that female Western subjects are capable of making choices in ways that non-Western subjects cannot because they are free individuals in a capitalist-consumer society. In addition, they state that by choosing to undergo cosmetic surgery in Brazil, North American women are choosing it for better reasons because they are “smart enough to do it for cheap, and in a tropical location at this” (Lee, 2008: 30). The way in which cosmetic surgery abroad is spoken about in popular media presents cosmetic surgery abroad as a normalized and meaningful aspect of a neoliberal lifestyle. By presenting such racialized distinction, popular media normalizes certain forms of cosmetic surgery (but not others) and establishes it as a self-help strategy for achieving beauty.¹²

Women describe participating in cosmetic surgery because they are seeking a solution to a problem that they perceive with their bodies. Women experience problems with their bodies when they fail to conform to cultural norms, and feel they require help to achieve this cultural norm. This is especially clear in BeautyBombshell’s blog where she recalls an

¹² The racialized component attributed to certain cosmetic surgery procedures, such as double eyelid surgeries, is problematic as scholars assume that women who undergo them do so because of internalized racism. However, all cosmetic surgery, including those performed on the body of a white, middle class woman has to do with race and conforming to an ideal (see: Heyes, 2009).

experience shopping for clothing and being displeased with how her body looked:

I know having this surgery will change me for the better and stop me from hiding in my house bcuz i wont buy clothes. Shopping for clothes ends up with me crying in the fitting room. Im disgusted with what i see. IM so ready for this, i don't wanna wait. That means i would have to travel by myself! that makes me very nervous.

Arguably, part of BeautyBombshell's distress stems from her inability to find clothing that suits her body type. In this way, BeautyBombshells experiences her body as excluded or incompatible with a normalized body type that is thin and which is represented in consumer products such as clothing sizes. Being unable to find clothing suitable for her body has caused BeautyBombshell to be ashamed and disgusted with her body. Often, women who participate in cosmetic surgery abroad are doing so to shape their bodies to conform to a body image that is informed by a normalized ideal female body that is omnipresent in North American society.

Neoliberalism, TrueBeauty & Consumption

As suggested earlier, the website *TrueBeauty* participates in shaping and presenting cosmetic surgery practices as a consumer product. *TrueBeauty* makes cosmetic surgery accessible to consumers and facilitates a perspective of beauty treatments as a project of the female body through procedures that are considered invasive. *TrueBeauty* is motivated by and sustains a capitalist-consumer approach to cosmetic surgery, which has become an increasingly profitable industry in the US and abroad since the early 21st century (Edmonds, 2011; 2012; Wegenstein, 2012). *TrueBeauty* participates in perpetuating a neoliberal rhetoric where cosmetic surgery becomes entangled in discourses that center on the individual. For instance, *TrueBeauty* positions itself within a capitalist marketplace and reflects a neoliberal ideology by placing the consumer in a space where their decisions and choices are the focal point, as

users are asked to review their doctor or practitioner. Further, *TrueBeauty* prompts users to rate their doctor on a 5-star scale for aspects of their experience such as ‘Payment process’, ‘Wait times’, ‘Bedside manner’, ‘Phone or email responsiveness’ and ‘Staff professionalism and courtesy’.” Additionally, *TrueBeauty* guides information that is published to their website by suggesting topics for women to discuss in their reviews. For instance, in the text field that a user would use to submit their review, *TrueBeauty* suggests, “Describe your motivation, the pros and cons, the outcome, etc”. Providing guidelines for users to contextualize their experiences, blog websites provide a space for ‘word-of-mouth’ advertising where users post their choices regarding use of a variety of surgical products such as vitamins, fajas [post-op compression garments], or scar cream. The consumer and consumption practices are inextricably linked to a woman’s experience with cosmetic surgery abroad. *TrueBeauty* participates in perpetuating an approach to cosmetic surgery that emphasizes the consumer as an independent expert on beauty treatments.

The emphasis on consumer expertise that *TrueBeauty* promotes facilitates more women to embark on cosmetic journeys. Namely, *TrueBeauty* plays a central role in providing a consumer with choices in order to make a decision on which doctor will perform surgery on them. For instance, many women describe the stories (or blogs) of other women as playing a central role in their decision-making process:

I'm so excited to join you ladies on the flat side! I will keep all of you updated. It has been awesome with all the ladies that have kept up with their progress it has helped me in my decision making (TaurusLove16).

Please understand, I have finally made the decision to have the surgery which is a big deal...then I decide to go out of the Country which is now a bigger deal. I am going out on a limb and trusting that all of the journeys I have been reading

were real people and not hired people soliciting patients for Dra. Gomez (TheRealEllie).¹³

Further, many women describe being able to see photographs of real women who have already undergone the procedures they are contemplating as having a large impact on their decision-making:

I am drawn to Dr Jasmin's bodies. , even though some of the bodies look photoshopped I believe the real results of past patients in *TrueBeauty*. She does the best waist and contouring that I have ever seen. I have been researching forever and I am thankful that I found her. I received my quote and I am amazed by it. She is willing to do the full mommy makeover that I want (PheonixRising72).

Blog posts on *TrueBeauty* perpetuate the view of a consumer of cosmetic surgery as a free-choosing subject that independently researches and becomes an expert consultant on cosmetic surgery practices. However, the decision to perform cosmetic surgery abroad is understood by women as being reached through their participation in the online community of *TrueBeauty*, where they are able to browse the experiences of other women with cosmetic surgery abroad, discuss and connect with like-minded women, and add to the array of online journals by blogging their own experiences.¹⁴ While neoliberalism is a central component of establishing the foundation for conditions that allow for the consumption of cosmetic surgery, women do not explicitly articulate the wider economic and cultural conditions that shape the substance and language of their blogs.

¹³ There is something to be said here about the relationship between user-submitted reviews, authority and credibility in consumer-producer and consumer-consumer relationships. Due to the scope of this thesis, I am unable to expand beyond recognizing this potential avenue of future research. Especially, *TrueBeauty* requires members to check a box to authenticate their identity as a consumer: “I certify this review is my experience. I have no personal or business relationship with this provider or practice. I have also no received any offer or incentive from them to write this review. Once I click submit, I understand this content will appear publicly and cannot be removed.”

¹⁴ As noted earlier, *TrueBeauty* is host to doctors, administrative members and users that are active on the site. However, the focus of this thesis is specifically examining these relationships from the perspective of the user via their blogs.

As *TrueBeauty* emphasizes the voice of the consumer, it encourages a view of this voice as agentic in several ways. For instance, it reflects a service-industry mantra that stipulates the “customer is always right,” and it allows consumers to more readily hold plastic surgeons accountable for their actions, by giving a poor review or rating and dissuading other consumers from purchasing their services, among other things. The blog also gives consumers access to a wider repertoire of service providers, including surgeons offering packaged procedures overseas. In fact, some women noted that it was the shape of the body created by the surgeons that lead them abroad. This body shape was deemed markedly different from a North American surgeon’s style:

I decided to go with Dra. Jasmin because I really love her work and her results. She has being blessed with great attributes to help each one of us accomplish our goals of feeling better about ourselves and bringing back confidence to Jasmindolls and Jasmindoll2bs (NickiMango61).

suck it up...yup...suck it up ladies, or stay here in the States and come out looking like a box (Blueberri73).

As such, *TrueBeauty* gives women the option of achieving a body shape that may not be available locally. Interestingly, in the 24 blogs analyzed, women used a total of 5 different doctors located in the Dominican Republic. All 5 of these doctors were female. In the United States, the occupation of plastic surgeons remains a highly gendered practice with 9 male plastic surgeons to 1 female plastic surgeon (Jones, 2009). By giving women access to a wide range of surgeons, *TrueBeauty* is also allowing women to connect with more female plastic surgeons. In this way, women can seek out a female surgeon that will allow them to achieve a beauty ideal that is defined by women. However, this does not disguise the fact that this relationship still takes place in conditions of power – namely, a patriarchally defined society that over-sexualizes, objectifies and subverts the female body.

While *TrueBeauty* allows a space for women to learn about beauty practices such as cosmetic surgery abroad, and have influence over the Western economic market by having a wide audience (36 million website views in 2013), *TrueBeauty* participates in perpetuating a culturally constructed notion of an ideal female body that is slender and erotic. *TrueBeauty* encourages its users to post images of their bodies before and after surgery, giving users a wide source of signifiers of what defines an unerotic body and what defines an attractive, erotic body. Further, while cosmetic surgery is about beauty, it is also about an ideal female body defined by pervasive neoliberal values, such as work. *TrueBeauty* allows for the perpetuation of neoliberal values because it views individual happiness as achievable through consumer goods and services, and puts forth the mantra that consumers should have access to these services in order to discover their ‘true selves’ through beauty treatments.

Information that is posted to *TrueBeauty* by users communicates information about what cosmetic surgery is like or should be like, what it can accomplish for an individual and the various cosmetic choices that a woman can make. Importantly, *TrueBeauty* plays a central role in allowing a woman to imagine cosmetic surgery as something that is possible for her too, and that she has the choice to change a body she is unhappy with. For instance,

A few months ago I saw my coworker looking on some pics of girls in her country (Santo Domingo) that has plastic surgery. Some how it caught my attention and I decided to ask her about it. After we talk and she told me I can go on the internet and look it up which I did. I ended up founding TrueBeauty.com. As the day passes I became a stalker, fascinated by the pics and reading those stories. I start to ask myself if I needed to do a Tummy tuck. I have a huge ass with wide hips. But had had some flanks to my sides an that pregnancy fats that gym couldn't get rid of. The more I research I'm convince I need a Tummy tuck (Suzyquartz).

Suzyquartz exemplifies the fusion of horizons by discussing how she has come to understand cosmetic surgery through the stories of others. The photographs and the meaning of the stories told by women in their blogs on *TrueBeauty* instill a need within Suzyquartz for

cosmetic surgery, shaping how she understand cosmetic surgery and what it may accomplish for her, impacting her horizon. *TrueBeauty* facilitates, shapes and perpetuates an understanding of cosmetic surgery that acquaints women with a technological strategy that sucks, trims, stretches, pokes, stitches or cuts the body in a capitalist context (Morgan, 2009). Further, Suzyquartz illustrates that women may feel that their bodies do not conform to ideal body by browsing Internet websites about cosmetic surgery and cosmetic surgery abroad. This demonstrates a growing recognition of the role of the content of the Internet in shaping cultural ideals and values, where an endless array of information is presented to neoliberal subjects interested in self-help strategies.

Neoliberalism & Trust in the Doctor-Patient/Consumer Relationship

As cosmetic surgery is a surgical procedure, it engages with medical establishments and facilities and as such, also engages ideals of health and healthcare that are necessarily entangled into discussions of cosmetic surgery. In the following section, I explore the neoliberal context involved in the relationship between a doctor and patient when this relationship takes place in a capitalist context. Scholars in various disciplines have observed the impact that privatized health care has in creating new contexts in traditional doctor-patient relationships, as the patient is transformed into a client, while the doctor becomes a salesman (Oh, 2012). Within this scheme, the patient comes to yield more authority than the doctor, which demonstrates a dramatic change in a historically and culturally meaningful social hierarchy between a doctor and her patient. In medical tourism, this relationship is impacted in particular by a consumer's ability to "shop around" for the best price.

Furthermore, consumers will often meet their doctor for the first time when they arrive at the location. Doctors must pay close attention to the initial relationship that they establish with a

consumer, as the way they engage the consumer through initial e-mail communication is perceived as symbolic of their general demeanor. The relationship between the doctor and patient is also transformed in the context of medical tourism because it makes after-care and follow-up appointments difficult. If complications arise, the liability of the doctor is rendered questionable (Connell, 2011).

Traditionally, the practice of medicine was considered a moral enterprise, where the patient and the practitioner were involved in a healing relationship that was bound by a “definite set of beliefs about what is right and wrong medical behaviour” (Pellegrino, 1987). This moral dimension of medicine is found within the Hippocratic Oath, an oath that doctors must take which binds them to a strict moral and ethical guideline for practicing health care (Jotterand, 2005). Significantly, the moral emphasis placed on reciting the Hippocratic Oath highly influenced how individuals understood health and the relationships within health care. For instance, a central tenant of the Hippocratic oath determines that doctors are expected to be concerned with the lives of their patients, and to do everything in their power to preserve a patient’s life.

The Hippocratic Oath took on new meaning in the mid 1960s as the United States implemented a universal health care system that was dependant on the state and socially-funded under the Medicare-Medicaid Act (1965-1966). The practice of medicine was connected to government-funded social concerns, which transformed the context of the Hippocratic Oath to include altruistic motives (Jotterand, 2005). This reliance of medicine on the government established doctors and patients along a particular hierarchy, where doctors were seen as practicing medicine for the greater good. Although doctors are not often perceived in such a light in contemporary society as healthcare is becoming increasingly

privatized, some national healthcare programs still remain the responsibility of governments. An example of this is the Canadian healthcare system, where universal health care was first introduced in the 1960s, culminating in 1984 with the Canada Health Act which declared a government funded health care system that sought “to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers” (Government of Canada, 1985). Canadian healthcare defines a relationship between the state and a capitalist market that establishes the financial burden of healthcare and responsibility for health on the government.

The American health care system differs from the Canadian health care system as it is primarily privately owned, while some hospitals are state-run. The public health care system in Canada is increasingly threatened with privatization, and this relationship is in danger of being redefined. Despite access to local healthcare, many Canadians and Americans have begun to travel abroad because of long waiting lists and unavailability of local treatments (Connell, 2011; Hall, 2013). However, despite this privatized nature of a doctor’s role, their financial gain is often rendered invisible by their philanthropic endeavors. The image of a doctor as a moralized individual who holds truth, social prestige and power is frequently reiterated at the level of discourse within our media (Oh, 2012). For instance, television series such as *A Gifted Man*, *E.R.*, and *Nip/Tuck*, all perpetuate a narrative that an ideal doctor is one who is heroic, self-sacrificing and whose priority should lie in their patient’s health and healthcare regardless of their economic circumstances.

The way in which the doctor-patient relationship is discussed within the media reveals a particular discourse regarding some of the assumptions North American culture makes of this relationship. Cultural beliefs about the role of doctors, the state, health care and

the way these relationships are depicted within the media, establishes an understanding of a moralized relationship between the doctor and the patient that is elevated to mythical status, and is reflected in women's blogs. The moralized relationship between a doctor and patient is also an intimate relationship as both doctor and patient share "the surgical and consulting space and – to a degree – [...] unique phenomenologies and temporalities of metamorphosis that they [consumers] undergo" (Jones, 2009:171).

While doctors have traditionally held authority over the health care of their patients, expanding technologies and services in the health care sector are challenging these assumptions as new forms of health care are becoming available in a capitalist market. An assumption pervades in North American culture that treats the domains of intimacy and money as separate spheres of everyday life, and any intermingling and prioritizing of one sphere may cause corruption for the other (Zelizer, 2006). Namely, when intimacy is introduced in spheres of money (for instance, one's occupation) this space is viewed as corrupted. The common North American saying, "You don't shit where you eat" is often used to warn an individual not to engage in romantic relationships in the workplace and is illustrative of the capacity intimacy holds to render one's work a toxic and contaminated environment. Further, when money is introduced in an intimate relationship, it is also seen as corrupting the authenticity of the relationship (Zelizer, 2006). The assumption that a relationship may become corrupt when money is the primary motive in the founding of a relationship impacts how cosmetic surgeons are perceived by their patients and other doctors. Namely, medical doctors construe cosmetic surgeons that use the title 'doctor' as illegitimate, viewing these plastic surgeons as 'sell-outs' that unnecessarily risk the life of an otherwise

healthy patient for cosmetic procedures determined unnecessary (Gilman, 1999; Davis, 1995).¹⁵

On the website *TrueBeauty*, doctors are a form of medical care that is purchased by a consumer, rather than allocated on the basis of need. The traditional view of the doctor as altruistic makes us wary of doctors that offer services to consumers primarily for money as being morally corrupted. As suggested earlier, this is due to a permeating, historically defined assumption found in the Hippocratic Oath that the patient's health, and not the profits, should be the focus of a surgeon's attention. One blogger, LotusPenner, reveals this tension when she writes in her blog:

If you are like me I was stalking lots of womens stories on here. And to tell you the truth Dra. Gomez is amazing. She's not at the least bit money hungry (LotusPenner).

As a result of the financially and morally redefined relationship inherent in cosmetic surgery, the paying client becomes the centre of attention, which “decenters other actors: the surgeons, the psychiatrists, the technologies, the media, the ideologies, the structure of medicine” (Pitts-Taylor, 2007: 184). The role of the doctor becomes that of a service provider, where the patient has the opportunity to ‘shop around’ and decide which surgeon is best suited for them. Furthermore, the role of the patient is replaced by that of a consumer, which destabilizes the authority of a doctor by removing the legitimizing gaze of the doctor (Gimlin, 2010; Pitts-Taylor, 2009). Instead, the patient is a consumer that defines and takes responsibility for her own health and health care.

¹⁵ Some plastic surgeons may be viewed as legitimate because they practice reconstructive surgery, which aims to return individuals to a ‘normal’ appearance. For example, these individuals may be victims of an accident or severe burns.

The moralized relationship between a doctor and patient and the tension that this poses in a neoliberal context permeates cosmetic surgery experiences abroad. For instance, consumers have choice and often choose their surgeons based on their ability to demonstrate their trustworthiness, communication, and openness of information:

Don't get me wrong Duran does good work, and she almost had been my doctor, but I don't like having to keep calling, writing, and I'm not going to beg for a quote like I have seen some of the girls do, and besides if you are slow with responding to people, than what about after my surgery? This is how I chose my doctor, and who was going to be best for my health and for me (SexyLilMomma).

SexyLilMomma describes a relationship with a doctor as one that must be readily available to the consumer, and a doctor's inability to communicate with a potential patient in an inefficient manner is understood as undermining the value surgeons place on their patients' well being. Surgeons that are understood as placing a high value on the lives of their consumers are those that are described as having an intimate relationship with their patients:

TEAM GOMEZ!! I GOT MY QUOTE YESTERDAY! I FEEL CONFIDENT IN MY DECISION. Laura is absolutely amazing! I could just kiss that women..lol The communication is awesome. I email or text and within an hr she responds (BeautyBombshell).

I have 4 days to fly and Im excited just received a email for Dr. Gomez which I thought was cool for the office to even email me to let me know a few things that needed to be done before I get there I really feel comfortable with her and I think I made the right choice (Bambi19).

While (fast) communication plays an important role in establishing trust in doctor-patient/consumer relationship, bedside manner and the level of care that is offered after surgery is performed plays an important role in demonstrating value:

I made the decision to choose Dra Wilkiris Gomez for the following reasons: 1)The number of great reviews by previous patients. 2)The beautiful work that she does. I was able to see by photos that other members posted. I was impressed by her tummy tuck incisions, the locations of them, the healing and particularly the belly bottoms. She seems to take a lot of pride in her work and does not just do a basic procedure. Her work is more like art and she appears to be a perfectionist. And that is someone who I would want to do my procedure.

3)The amount of recovery time included in Dr. Gomez all inclusive package. When speaking to doctors in the US, they seem to want to send you home fairly quickly. Some doctor said they'd have you home in hours. I did find one doctor who kept his patients for 24 hours before releasing them to go home and for that reason he was my first choice in my area of Virginia in the US. But when I found out that Dr. Gomez keeps you there in a Recovery House for 10 days I really liked that idea. I was far more comfortable knowing that someone would be there who is familiar with the recovery process and would know if anything was not normal or out of the ordinary. I would rather be with someone who knows then to be at home guessing, wondering or worrying about what's normal or not (PolkaPatty).

PolkaPatty describes a unique aspect of care offered by surgeons in the Dominican Republic, and other non-Western nations offering surgical treatments in an international market.

Women often travel on their own¹⁶ and are often incapacitated and unable to care for themselves after surgery. The impression that a doctor conveys during consultations and after-care appointments demonstrates the value that they place on their patients' lives:

I'll tell you right now, this doctor CARES and you will meet her and know instantly. She threatened to search my bag for smokes and told me to hand them over lol, I DON'T HAVE ANY! Lol she's great... (Blueberri73).

This is a great surgeon who puts your health above all else. She is so nice and takes pride in her work. I felt very comfortable with her. (I have never had a Dr help me pick out my clothes for discharge from the hospital!) This is a very busy lady, but she makes you feel like you're her only patient. Her assistants Laura and Raquel are so sweet and helpful as well (PheonixRising72).

Women consumers in an economic market choose their surgeon based on the surgeon's ability to convey trust and place value on the lives of the patients they treat. When communication between a consumer and doctor fails to be efficient, open and willing, this is understood as a reflection of the lack of value a doctor places on the lives of their patients.

Although the relationship between a patient/consumer and doctor takes place within the material reality of a consumer market, the economic transaction is largely ignored or

¹⁶ Although women often travel alone, many women have met and become friends with other women traveling to the Dominican Republic for cosmetic surgery on *TrueBeauty*. Of the 24 blogs, one woman traveled with a Spanish-speaking co-worker, two women traveled with their husbands and 3 traveled with female relative (daughter-in-law, mother or sister).

minimized when making a decision on a surgeon. In other words, a surgeon is chosen because they fulfill the obligations of a trusting relationship, one that convinces a consumer they value their life and are able to uphold their Hippocratic duties. While the neoliberal context negotiates the historically moralized relationship between a doctor and their patient, this places a burden of proof on the doctor to demonstrate that they have their consumer's best interest in mind. The relationship between a patient and doctor is redefined by a neoliberal context while also being informed by historical assumptions of a doctor-patient relationship.

Consumption, Expertise & the Artist Surgeon

As noted above, the authority of a cosmetic surgeon is challenged when the consumer becomes an expert in her own health care practices. In the early 1990s, cosmetic surgeons were frequently women's first source of information regarding information about cosmetic surgery. However, the Internet has drastically transformed women's access to information about cosmetic surgery that allows women to educate themselves. The surgeon's opinion, while formerly being the first stop on a woman's journey to a new body, has now become the last stop on their journey (Jones, 2009). Cosmetic surgeons are aware of their changing function in a consumer's experience with cosmetic surgery. Namely, plastic surgeons "mourn the loss of autonomy and status but acknowledge that stronger patient knowledge and wider dissemination of information about cosmetic surgery equals more business and larger profits" (Jones, 2009: 185). One strategy that Jones (2009) argues plastic surgeons engage in to maintain their authority, is to emphasize their artistic abilities, which relates to an innate ability to determine what is beautiful or extraordinary.

Interestingly, women frequently used this surgeon-as-artist metaphor in their blogs, like in this excerpt already cited:

I was impressed by her tummy tuck incisions, the locations of them, the healing and particularly the belly bottoms. She seems to take a lot of pride in her work and does not just do a basic procedure. Her work is more like art and she appears to be a perfectionist. And that is someone who I would want to do my procedure (PolkaPatty).

Similarly, this is expressed in this post:

It is a lot but Jasmin is skilled in her art and I know I will have a new body. Look at the stomach area, that is a major problem for me, it hangs like a smiley face, I am the perfect candidate for a tummy tuck . I'm ready to be shaped by Jasmin's talented hands. So ladies I am crying as I write this post I am so embarrassed that I let myself go like this... It complete humiliation to post these pictures. Hopefully I will become an example of what Jasmin really can do! (PheonixRising72).

In this relationship, women perceive the surgeon as an artist while her body provides the canvas or clay for the artist's masterpiece. In the metaphorical view of surgeons as artists, consumers illustrate contemporary power dynamics where cosmetic surgery practices are a collaborative effort between the consumer and surgeon, while the surgeon maintains authority due to their aesthetic abilities. Jones (2009) argues that this aesthetic ability is a way in which cosmetic surgeons establish authority over defining and shaping an ideal erotic female body in a capitalist market. Namely, surgeons often market themselves as artists who have been trained to work with various mediums that range from acrylic paints on canvas to sculpting human flesh (Jones, 2009). However, this training is a learned, culturally constructed gaze that surgeons are advertising in order to establish authority over an ideal body (Jones, 2009).

Summary

Women's identities in North American society are increasingly impacted by a neoliberal logic and developing technologies that establish new, expanded limits to the modification of the human body. Bodies are increasingly malleable, and contemporary cosmetic surgery practices participate in shaping the body as flexible for the pursuit of beauty. North American women's identities are impacted by a pervading ideal erotic female body that links

femininity, youthfulness and happiness to economic consumption practices that perpetuate an increasingly profitable beauty industry. Furthermore, neoliberalism shapes the context of the doctor-patient relationship where the doctor is imagined as a salesman. The relationship between a doctor-patient/consumer has evolved from the historically relevant foundations of trust within a doctor-patient relationship that is redefined in a neoliberal context. In the following chapter, I will be elaborating on the way in which cosmetic surgery re-inscribes neoliberal assumptions onto the aging female body, which shapes contemporary female identities such as motherhood.

Chapter Four // Frozen Beauties: “Passing” and the Aging, Changing Bodies of Women

This chapter focuses on the impact that cultural constructions and performances of gender have in shaping women’s understandings of cosmetic surgery practices. As suggested in Chapter 2, gender performances are the result of culturally learned behaviours that enable an embodied understanding of one’s body as feminine. We also saw that beauty itself is gendered, and has a historically resonant relationship with the bodies of women. In Chapter 3, I developed the idea of feminine beauty as a project, and discussed how women seek out an ideal body shape in a way that is informed by neoliberal rhetoric. This rhetoric encourages subjects to view their body as requiring constant improvement. In this chapter, I examine the specific gender performance of motherhood and how it is intertwined within cosmetic surgery practices, beauty, aging, femininity and a neoliberal subjecthood.

Neoliberalism, the Ideal Body and ‘Middle-Aged’ Femininity

In Chapter 2, I discussed the notion of gender and femininity and the role of beauty in shaping cosmetic surgery experiences. Femininity is an integral component to shaping a normative, heterosexual female identity in North American culture (Winterich, 2007). The body plays a central role in these cultural understandings, as a woman’s body shape must conform to an erotic ideal in order to be considered sensual. In Chapter 3, I argued that a neoliberal rhetoric pervades Western culture that views the female body as requiring constant self-maintenance in order to achieve an ideal body. In order to achieve this ideal erotic female body, a woman must participate in the self-help practices and strategies that consumer goods and products offer. Through the consumption of these goods, women are promised the erasure of visible markers of their age, pregnancy, or imperfections, allowing them access to an ideal, youthful appearing body (Bordo, 1993).

The cultural focus on a youthful female body as erotic and available to all women through cosmetic surgery is a relatively recent phenomenon that has been made possible by technological advancements in medical fields that make cosmetic surgery readily accessible and

appear void of risks (Bordo, 1993; Smirnova, 2012; Smith & Clurman 2007; Winterich, 2007). Furthermore, because cosmetic surgery appears void of risks, cosmetic surgery is often understood as a quicker, more efficient and effective alternative to competing beauty treatments such as creams and injections. The aging female body is highly symbolic in Western culture, since “[a]ging bodies are never simply organic structures subjected to decline over time; they are continually inscribed with cultural meanings, they reflect societal influences and attitudes” (Jones, 2008:85). In Western culture, the aging female body is often linked to a loss of production, loss of sexuality and loss of youth (Smirnova, 2012). As such, the visible signs of aging, such as wrinkles and sagging skin are often moralized. For instance, the aged woman is often determined to be unerotic, or nonsexual and unproductive (Gilman, 1999). Prior to technological interventions, the aging female body appeared as a “mature figure” and wore “mature fashions”, however, youthfulness and sexuality that define contemporary forms of femininity are now more readily available to women of all ages.

The aged female body is often perceived as unerotic in popular cultural representations (Dinnerstein & Weitz, 1994). For instance, the increasingly long list of aging Hollywood actresses such as Cher, Madonna and Demi Moore participating in cosmetic procedures to erase physical markers of their age demonstrate that aging is not perceived as beautiful in Western culture (Bordo, 1993). Rather, what is perceived as beautiful is a woman who is youthful and frozen in time (Jones, 2009; Wegenstein, 2012). Women who live in the material reality of capitalism are led to believe they can stop the signs of aging on the surface of their skins through consumer goods and services, while the rest of their body continues to age (Bordo, 1993). This is described by Jones (2008) as a ‘stretched middle age’ where a middle-aged woman’s understanding of beauty is through preserving her youthfulness for as long as possible. In other words, the ‘stretched middle age’ is the period of time when a woman’s body avoids a loss of sexuality that is assumed of an aging body (Jones, 2008).

With technological advancements in medical and beauty treatments, such as cosmetic

surgery, women's bodies and their sexualities are no longer doomed by the hands of time (Smirnova, 2012; Smith & Clurman, 2007). For instance, many women describe wanting to achieve a body ideal that they held in their youth:

I will be having this tummy of mine snatched tomorrow 1/24! I been wanting this surgery for years. A little about myself..40 years young and need my body to reflect my youthful appearance:-) (Franny07).

I have butt already, my nick name in high school use to be Too Much, after the song "Too Much Booty in the Pants!" LOL It seems over the years it's not as good looking as it use to be. Almost like I have pot holes to be filled! LOL I just want my butt to just be touched up a little (SexyLilMomma).

Women perceive a problem with their bodies when they begin to demonstrate the signs of aging, and deviating from an imagined ageless and erotic sense of self. That is, a woman who is 'aging well' is one who does not look her age (Jones, 2008). In this way, feminine bodies are deemed beautiful by their ability to "age well" and an aging female body may be sexualized if she does not look her age (Dinnerstein & Weitz, 1994; Jones, 2008). Importantly, aging men's bodies do not experience the same assumptions of degradation and loss of sexuality in Western popular culture. Rather, men's bodies are often portrayed in the media as more handsome as they age, and may be understood as more masculine (Winterich, 2007; Wolf, 1991).

Cosmetic surgery allows women to manage their aging process, stretching their middle age, and allowing them to have 'control' of their aging bodies (Smirnova, 2012). Beauty products often reflect this notion in their advertising. For instance, Elizabeth Arden describes their anti-aging products as "the most advanced treatment system of the century". This prescriptive language is also found on websites marketing cosmetic surgery vacations abroad to aged women, marketing cosmetic surgery as a means "to revive body and soul and shine once again" (www.gorgeousgetaways.com/about-gorgeous-getaways/about-gorgeous-getaways.html#UIXobyT_o7A). Many women discuss in their blogs the idea of using cosmetic surgery in order to regain a younger, more attractive version of their bodies:

I have been wanting to get my early 20's body back for a while now
(SexyLilMomma).

Growing up most of my life I was around 125 pounds then with age and kids
gained and would lose then gain again. UGH!!!! Wishing for my dream body
again!!!! (TaurusLove16).

An ideal erotic body for some women is partly informed by a sense of self they experienced in their youth, one that is confident and that has erased the corporeal markers of time. Often, women wish for their old bodies, but also for an enhanced or improved version of this body. Bordo (1993) argues that while a 'dream of immortality' is not novel in human society, the idea of eternal life has changed its meaning in contemporary times. While immortality has historically been understood as an infinite existence with gods, in the material reality of consumer society it is the devices and technologies that drive a dream of immortality and that promise to keep us alive (and young) indefinitely (Bordo, 1993). By recognizing that a youthful and feminine self is accessible through cosmetic surgery, women simultaneously reinforce a cultural understanding of beauty as something that an individual works to maintain and can be achieved through the consumption of goods and services.

Ideas about aging and the ideal erotic female body encourage women to shape themselves into a subject that is not impacted by time. In order to maintain their bodies, women have access to a plethora of 'choices' on the consumer market that offer prescriptions for their various aging related ailments ranging from crows feet and wrinkles to sagging skin (Bordo, 1993). While the idea of a 'stretched middle age' promotes youthfulness in an aging body, a woman's embodied reality is also impacted by her unique biological ability to reproduce.

Motherhood, Beauty and the Neoliberal Identity

The inclusion of motherhood in this thesis is impacted by a methodological decision reached at the beginning of my data collection process. That is, I selected to narrow my focus to examine a

single cosmetic surgery procedure, tummy tucks, because these were the most popular procedures reviewed on *TrueBeauty*. Tummy tucks are often performed by women whose bodies have been transformed by pregnancy, although some women also underwent a tummy tuck to remove excess skin from extreme weight loss or hysterectomy¹⁷. All of the women whose blogs were examined in this thesis were mothers, and their identities as mothers were often discussed in relation to how they felt about their bodies and their sense of femininity.

Feminist scholars have noted that pregnancy and motherhood are often oppressive experiences for women in North American society (Davies et al., 2010). Pervading patriarchal assumptions determine that women are the primary caretakers of children, and the burden of care and responsibility often falls on the women (Bordo, 1993). Motherhood is a uniquely female experience, and impacts the construction of femininity. Women often describe their experiences of pregnancy as a moment of being unattractive and unfeminine, as their bodies violate a cultural ideal female shape (Hofmeyr, Marcus & Butchart, 1990; Simons, 1984).¹⁸ Women who have had children and bear markers of pregnancy on their bodies (such as sagging, stretched skin on their stomachs) are seen as violating an ideal female body that displays a stomach that is tight, youthful and characteristic of a pre-pregnancy body. In other words, women in their ‘stretched middle age’ should also have bodies that have been erased of all signs of pregnancy.

The erasure of corporeal markers of pregnancies has been an increasingly popular topic of discussion in tabloids and popular media. Hallstein (2011) argues that pregnant celebrities

¹⁷ Two women identified as being patients of a hysterectomy after childbearing, a procedure that can also cause skin sagging.

¹⁸ The pregnant body is interesting because it is a time when women’s bodies are socially accepted to increase in size. As women’s bodies increase in capacity they are afforded “more physical space than is normally allowed under patriarchal conditions of womanhood” (Simons, 1984: 349; Bailey, 2001; Heywood, 1998). In this way, pregnancy can be a transgressive experience for women (Simons, 1984).

are increasingly depicted after having given birth as “bikini-ready”. In other words, when celebrities make their ‘debut’ after they have given birth, their bodies are erased of any signs of pregnancy. Hallstein (2011) argues that “the bikini-ready body suggests a very specific kind of sexiness for mothers: sexy moms are sexy because their bodies have not be wrecked by pregnancy. In fact, these are sexy mothers because they have even better, postpartum, slender bodies that have completely erased the one visual marker of “slender” pregnancy: the stomach” (125). Many women on *TrueBeauty* identify pregnancy as the moment when they began to view their bodies as damaged and unerotic:

I have considered doing this for at least 7 years every since I had my son and had a C-section. My Stomach never seemed to bounce back right I am so excited and can't wait until I get my sexy back (SexyLilMomma).

I've been suffering from a saggy lose skinned stomach sense my first born. He weighed in at 11lbs and being only 115 at the time you can imagine what my body went through (Luvbug).

The female body that is imagined as damaged through pregnancy is defined as a body that has excess fat and excess skin, and is considered shameful, disgusting and a source of deep insecurity. For instance, women would frequently post photos of their ‘before’ bodies as a part of their journey. When posting these, women frequently provided a warning to other users:

I will be uploading pictures today. Im sorry if anyone loses eye site after seeing my pics. lol they are horrible. This body needs some major TLC!!” (BeautyBombshell).

I FINALLY gathered up the courage to go into the bathroom at work and show you EXACTLY what I have to look at every day :(I'm so disgusted but I have 6 babies that I carried in this body and I'm thankful to God that he allowed that (Blueberri73).

The body that is perceived as damaged by the visible signs of pregnancy is unerotic, and hinders a woman’s sense of herself by causing her to feel that her body is unfeminine.

Women also make their horizons present within their blogs, as the text conveys their understanding of cosmetic surgery, beauty and femininity. By describing their bodies in particular ways, women participate in perpetuating an understanding of what an unerotic body is, and what an erotic body is. By reading the stories of other women on the website *TrueBeauty*, women's horizons may be impacted by the horizons of other women through the subject matter of their blogs. Further, while blogs may appear as individual stories written by individual women, they actively participate in shaping how women understand cosmetic surgery. By 'fusing horizons', these texts may shape the way in which a collective group of women understand cosmetic surgery, and what cosmetic surgery can accomplish for women.

The female body that is transformed through cosmetic surgery is one that can now "pass" as an erotic body that has a flat stomach, perky breasts and a youthful appearance. To illustrate, many women describe their desire to feel sexy again, and often highlight their regained sensuality during recovery:

Sooo from this point forward I am going to focus on losing those extra pounds to bring my sexy back with Jasmin's help (NickiMango61).

I am looking to get my sexy back. My motivation is that I want to start back feeling a lot sexy instead of a little sexy. I have considered doing this for at least 7 years every since I had my son and had a C-section. My Stomach never seemed to bounce back right (SexyLilMomma).

Im feeling like a new WOMAN! ☺ I never thought I would ever look the way I look now and my husband cant keep his hands off me ;) (BestFootForward).

The 'New Momism'

A woman's body and sense of self is often undermined by her role as a mother, which Douglas and Michaels (2005) have described as the 'new momism'. The 'new momism' describes a set of behavioural practices that emerged in the 1980s and defined the actions of contemporary mothers. In other words, the 'new momism' describes a prevalent ideology of

“good mothering” which rested “on three core beliefs and values: the insistence that no woman is complete until she has children; that women are the best caregivers of children; and that “good” mothers must devote their entire physical, emotional, and psychological beings to their children all day, every day” (O’Brien Hallstein, 2011: 112). This new momism is often found in the media, for instance, in 2012 Proctor & Gamble ran a marketing campaign entitled “Thank You Mom” or “Proud Sponsor of Mom” where they aired a series of television advertisements that depict mothers around the world raising future Olympians. In these commercials, mothers are seen as the primary caregivers in a child’s development, icing bruises from injuries and providing emotional support from a failed double axle. The commercial ends with these children, now as young adults competing successfully and winning medals at the Olympics, while their mothers watch proudly and teary-eyed from the stands (P&G, 2012).

In this commercial, a mother is imagined as someone who will always be around to help, while also assuming that a mother is a child’s primary caregiver. This adds to an imagery of motherhood in which women are understood as largely defined by their children, and where women must therefore be self-sacrificing and put herself after her children and family. P&G (2012) successfully entangles the new momism with commercial products, and participates in perpetuating an idea of motherhood that defines mothers as “good” or “bad” by the products that they use. Women often identify with this new momism in their blogs, where they describe themselves as self-sacrificing women who are defined by their children. For instance:

During all these years, I have been hiding myself from the world. Dedicated only to my little girl (now 7)- (I have a 25 daughter - married with 2 kids and a son 24 with a daughter), work and school. After she was born I decided to go back to school and finish my degree (trying to hide even more) and now I am doing my Masters(continuing hiding). All my activites go around my 7 year old. No social life, whatsoever.... (NickiMango61).

Im not rich ! Im just a person that will give my last. I finally take a stand to do things for me an my kids and husband. Throughtout birthdays, Christmas, and other occasion I never do nothing for me not even a cake (Suzyquartz).

O'Brien Hallstein (2011) argues that this new momism is taking on new meaning in contemporary society, as it has incorporated a second wave feminist rhetoric of choice, which is informed by neoliberal ideologies that understand contemporary women as independent and free subjects who can now have the choice to "do it all" (O'Brien Hallstein, 2012: 114). "Doing it all" entails the freedom to live in a world where gender inequality is eliminated and where women can experience equality as a student, professional or mother (O'Brien Hallstein, 2012). However, this rhetoric of choice ignores a mother's continued responsibility, often as the sole caretaker of children and ignores the persistence of gender inequality in Western cultural child rearing practices (O'Brien Hallstein, 2012).

Motherhood, Body Work & Neoliberalism

In a culture that renders women ashamed of their bodies if they deviate from an ideal shape, cosmetic surgery can offer reprieve from suffering (Davis, 1995). Women often experience their pregnancies as moments when their bodies become problematic because permeating cultural ideas render women to feel that their bodies are 'damaged'. Consequently, motherhood is often experienced as a moment when women's identities are no longer the priority of their existence, and when their bodies are experienced as no longer "passing". Regaining one's body, eroticism and sense of self is often understood as achieved by beauty work. For instance, O'Brien Hallstein (2012) argues that women's pregnant and post-pregnant bodies are increasingly discussed in a neoliberal discourse within popular celebrity magazines. In this way, the media participates in perpetuating an assumption that a woman who "has it all" is a woman who is expected to be a professional and a mother while also performing beauty work and managing her body (Jette, 2006; O'Brien Hallstein, 2012).

O'Brien Hallstein (2012) argues that this creates a 'third shift in body work' that assumes a woman's role in society now encompasses her assumed position in motherhood and financial independence, while also making her responsible for managing her own body and health. The rhetoric of choice offered by neoliberalism allows women to reassert their bodies as feminine and regain a sense of self that is defined by beauty and the physical appearance of the body. For instance, women who are stressed out about balancing their home and work lives are frequently offered the tip to "Make time for yourself", which usually entails a suggestion of beauty work, such as going to the gym (9 Tips for Juggling Work and Motherhood, 2014: <http://www.parents.com/parenting/work/life-balance/9-tips-for-juggling-work-and-motherhood/?page=4>). In other words, the ideal female body is one that women should be managing, which entails an emphasis on beauty work, especially after pregnancy.

The neoliberal individualistic idea of 'taking time for oneself' is often used in North American culture as being associated with various forms of beauty work. As previously described in Chapter 3, the "for-me" mantra that is found in popular media participates in establishing an understanding that cosmetic surgery and other forms of beauty work are about the individual. Women frequently expressed this "for-me" mantra in their blogs:

baby #1,2 and 3 were very generous to my body (thanks guys!) baby 4 caused a lil "dent" baby 5 started the battle and baby 6 started the war!! this wonderful adventure started at 130 lbs, which at 5'8" was great and now I am at a horrific 215! my ex husband argues that God made me this way and I argue back that Oreos, ice cream...and oh...6 KIDS made me this way!!! lol so it's time for a change and a little well earned present to little ole me (and I used that term lightly (Blueberri73).

I also lost 11 pounds :) I'm learning that this surgery isn't about losing weight or inches or even belly, its about being proud of yourself and accomplishing something that you never thought you could accomplish, its about taking charge of your life and not accepting what you can change because others think change is wrong its about being brave and going for what YOU want instead of always trying to please everyone else, I learned a lot about my strength and determination and I'm finally loving myself ,not because I have a smaller waist (although that does help lol) but because I'm happier now and I also see things I never noticed before,like I have a great smile and pretty cute toes hahaha, point is, a door will open for you, or rather a window, and you will see things about yourself that you never seen before, so those of you who are preparing to make this leap, whether a full makeover or just a simple lipo, make sure you are doing it for YOU and don't let anybody stop you ☺ xoxo Queens!! (Blueberri73).

The 'for-me' mantra points to what cosmetic surgery can accomplish for women; it describes women's journeys to a body that is erased of the corporeal markers of pregnancy (such as extra fat and flesh) and becomes an ideal body that enhances their sense of self.

For instance, the extra skin that women had on their stomachs from their pregnancies has eliminated signs of their belly buttons, while the pervading ideal is a flat toned stomach with an intact belly button:

I have a follow up appt tomorrow and I'll try to get some with out the bandages. But I have a belly button!!!!!! (193). Hannah39

I changed my rating above today from "Not Sure" to "Worth it", because I am so pleased with my results. Dr. Gomez does amazing work and I am extremely pleased. I love, love, love it. So glad I did it and so glad I chose Dr. Gomez. My incision is so neat, thin, precise and very low. And my belly button is as cute as a button. (313). PolkaPatty

The belly button is described as being an important marker of a feminine body because it represents a toned, flat stomach. Women often describe having a flatter, toned, ideal body as being on the 'flat side'. Women arrive on the 'flat side' the moment they wake up from surgery:

Ok divas, I'm at the recovery house with Virginia, I made it to the flat side ☺ (Blueberri73)

HEY LADIES, im on the flat side...its been a rough ride, to the point I just wanted to get back on the plane and go home! (BeautyBombshell).

I made it to the flat side! (Rhonda65).

By describing cosmetic surgery abroad as a journey to the 'flat side', women are locating themselves along a chronological passage to a new body that mirrors a symbolic task of rites of passage outlined by Turner (1987). The 'flat side' represents the beginning of a liminal stage for a woman, where she has removed herself from her everyday life by performing surgery in Dominican Republic, and where she will spend a minimum of 10 subsequent days

recovering. By establishing the notion of a 'flat side', women are actively defining cosmetic surgery and the meaning of cosmetic surgery as a journey to a new and improved body that is closer to her sense of self. The notion of the 'flat side' represents the meaning that cosmetic surgery abroad takes on for an individual within their horizon, and represents what an individual feels they may accomplish with cosmetic surgery. The notion of 'flat side' within women's blogs may impact and shape the way in which cosmetic surgery abroad is understood in the horizon of an individual who reads these blogs, perpetuating a meaning of cosmetic surgery abroad as a way for women to "pass" as an ideal, erotic female body that is defined by a flat, trim and youthful body. The adoption of the notion of the 'flat side' demonstrates how horizons may 'fuse' and shape the meaning of cosmetic surgery for an individual.

The 'for-me' mantra and the 'flat side' establish cosmetic surgery as being performed for women themselves. Often, cosmetic surgery is depicted as being done by women who are 'duped' by beauty ideals and want to appear more feminine for male attention. However, women often describe their partners' beliefs that they are attractive despite surgical interventions:

I spoke with my husband about it at first he did not support it, according to him I'm sexy already. I ask my coworker what she think about me doing a Tummy tuck to my surprise she wanted to do it too we talk about doing it together, then we start to plan. I went home n show my husband a few pics of how flat my tummy will look and it will compliment my huge ass. I try convince him awhile before he agree (Suzyquartz).

As such, cosmetic surgery allows a woman to achieve an ideal body that she has lost to aging and pregnancy, and not one that is defined by a male gaze. However, it is important that this does not disguise the fact that neoliberal narratives that construct the cosmetic surgery experience for women often results in the economic success of a beauty industry that is large owned by male-

run corporations. Furthermore, while women may undergo cosmetic surgery for themselves, it is permeating patriarchal values and assumptions that have caused her to feel that her body is inadequate to begin with (Bordo, 1993; Morgan, 2009; Wolf, 1991).

Agency within Cosmetic Surgery Practices

The individual choice offered by a capitalist marketplace encourages an understanding of cosmetic surgery practices that offer women the ability to transform their bodies in an infinite number of ways. Namely, cosmetic surgery gives women the opportunity to undo the desexualizing corporeal markers of pregnancy. In this way, cosmetic surgery can be understood as agentic as it allows women to distance their identity of mother in order to feel more like ‘themselves’. For instance, women often frame cosmetic surgery as allowing them to do something for themselves that emphasizes their identity as women and rewards them for their hard work and role as mothers:

I feel I am more than deserving to have this surgery because I became a mom at a young age; 19. And it's been all about them every since. (Once you become a mother, you are not longer the picture, you become the frame) (BubbleBabe4).

I have my ups and downs with my decision. I feel excited and then I feel selfish. I feel like I am very vain, but then I think, we spent \$35,000 on my hubby's truck, that will be in a junk yard in 10yrs, why not spend a little on my body that is with me day in and day out and will be with me for the rest of my life? And then I feel like I am just justifying my decision. I feel guilty at times and then at times I feel like I have worked hard and deserve it (TheRealEllie).

In this way, cosmetic surgery abroad is framed as a reward that women deserve for endlessly placing the welfare of their children before themselves. Cosmetic surgery is understood by women as liberating them from the demands of motherhood that defines a woman’s identity through her children. However, it is important to note that when women return to their homes their role as primarily caretaker may be unchanged, and often women are unable to care for their children because of recovery (such as picking up her child). While women may frame cosmetic surgery abroad as a reprieve from the duties of motherhood, the inequalities that

women encounter as the primary caregivers of their children still remain unchanged when she returns from cosmetic surgery abroad. However, while women are reshaping their bodies through cosmetic surgery in order to resist an identity imposed by the corporeal markers of pregnancy and cultural assumptions of motherhood, women are still conforming to an ideal of beauty that aims to shape their bodies in order to appear as if they have never been pregnant. Cosmetic surgery practices take place within conditions of power and offer women the opportunity to resist some forms of power while simultaneously reinforcing and shaping others. The neoliberal conditions of cosmetic surgery experiences abroad described throughout this thesis promotes a rhetoric that women should be more focused on themselves as independent women, a narrative that can be productive towards minimizing and resisting the centrality of assigned gender roles and responsibilities, and give women the opportunity to construct their identities outside of these norms. However, in doing so, women are ultimately conforming to another ideal that defines femininity and an ideal body.

A Beautiful Body Project

In a counter narrative to a North American ideal female body as youthful and flawless, *A Beautiful Body Project* attempts to photograph the bodies of women that are not represented in the media. For instance, Figure 1 and Figure 2 show examples of Baell's (2014) photographs of a post-pregnant and an aged body, respectively. The goal of *A Beautiful Body Project* is to establish a "movement of women coming together to tell their stories and celebrate their ever-changing bodies so that future generations of women can live free from self-suffering" (How This Movement Began, 2014: http://www.abeautifulbodyproject.com/history_of_the_movement). The first task of *A Beautiful Body Project* involves compiling over 100 black and white photographs of

mothers' bodies while also including an individual story narrated by each woman that tells "her own personal journey with what beauty and feeling beautiful in a culture that alters over 90% of all media means to her" (How This Movement Began, 2014: http://www.abeautifulbodyproject.com/history_of_the_movement).



Figure 1: I Dream Of A day When...

Retrieved from: <http://www.abeautifulbodyproject.com>



Figure 2: We Were Taught That Growing Older Is Ugly And It's Time To Relearn The Truth: Growing Wise Is Beautiful

Retrieved from: <http://www.abeautifulbodyproject.com>

Baell (2014) argues that the photographs she takes participate in celebrating body diversity. While she highlights the suffering that women's bodies are subjected to in a capitalist-consumer society, she also proposes that altered images should not be done away with because they still contain images of the bodies of real women, albeit modified. The end result is an arrangement of differently shaped bodies, some of which have been altered by the media, that are all given equal weight and therefore should all be embraced (Baell, 2014). However, I argue that promoting female empowerment as embracing *all* images of bodies as

equal in value is dangerous, as it erases a history of power and control that women's bodies have been subjected to. For instance, while *The Beautiful Body* promotes an understanding of the aging and post-pregnant female body as beautiful, it also argues that images of female bodies that have been modified through Photoshop, and which may represent an oppressive patriarchally defined female body should be equally treated and equally represented alongside images of women's bodies that have been unmodified. By giving these images equal weight to unmodified images women's bodies, *The Beautiful Body* ignores the normalizing neoliberal rhetoric that views an ideal erotic female body as requiring constant work and improvement.

Hidden Processes of Cosmetic Surgery

The notion of the 'flat side' described earlier reinforces the idea that cosmetic surgery is a 'quick fix' by framing cosmetic surgery as an immediate solution to a woman's problem with her body. That is, because the 'flat side' refers to the moment where women wake up after surgery with a flatter stomach, it is assuming that all of her corporeal problems have been fixed. It fails to account for the emotionally intense recovery process that comes after a woman's arrival to the 'flat side'. By adopting this language and incorporating it into their cosmetic surgery accounts, women participate in shaping political and social meanings of cosmetic surgery (Pitts-Taylor, 2009). Furthermore, women are participating in defining an ideal female body through the language they use to describe their cosmetic surgery journeys. Namely, in the case of women getting a tummy tuck, an ideal female body is one that has a tight, toned and smooth midriff.

Although all of the women anticipated the changes that their bodies would undergo during cosmetic surgery, a lot of the women mention that recovery is often a depressing arduous emotional task, and one that they did not anticipate occurring:

So today has been tough. I never realized how mentally taxing pain is. I am trying to keep my patience but today is so frustrating. Everything hurts and walking is such a chore. On the bright side my body is looking better and my back drain is fixed (LotusPenner).

Ladies expect to be emotional and moody throughout this process. I watched two of my roommates go through it as the house while I tried to be strong and not get emotional but I eventually lost it too. LOL! It's very hard. You are sore, uncomfortable, away from loved ones. You become depressed tired and ready to go home. Just warn your family in advance (PolkaPatty).

Believe me almost 2 months ago after surgery I was so depressed, swell and could not take care of my self. Not to mention a good shower. I am most grateful for this journey recovery. I feel like I'm 100 but inside still in healing process. TB sister for those of you who are schedule for surgery, I can say after 2 months are a month you will feel much better, my self esteem has gone up, I feel more sexy, feeling much better especially if your trying to eat healthy and take off some weight (Hannah39).

Part of this emotional recovery is a woman's realization that she cannot perform her everyday tasks involved in being a mother/wife, going to work or going to the gym. This can be an especially vulnerable time for a woman as she is in recovery for an indeterminate amount of time. The body that she is performing beauty work on has also rendered her other capacities of motherhood and professional life awash. Typically, a woman describes feeling 'more like herself' around 3 months post-surgery, while being fully recovered at 1 year.

In fact, a woman begins to feel more 'normal' or like herself, but better, once she begins to "pass" as an erotic body, and begins to participate in her regular behaviours:

I am loving my results more as time goes by. The first few weeks was depression stage. Swelling, drains, can't sleep, move freely etc. I am doing good now 6 weeks walking straight, less swelling, start back with sex. I am feeling stronger (Suzyquartz).

While a neoliberal logic often portrays cosmetic surgery as a liberating and efficient means to achieving an ideal body, it disguises and renders invisible the deep emotional impact of cosmetic surgery.

Summary

Women's experiences with cosmetic surgery are inextricably interwoven in her sense of self as a woman in a neoliberal society as it outlines the parameters of what a female body looks like and what it does. This ideal female body impacts the way in which women understand themselves as aging bodies and as mothers whose bodies have been transformed through pregnancy. The bodies that violate an ideal female shape are viewed as damaged and lacking femininity, distancing women from their sexual identities and sense of self (Winterich, 2007). Cosmetic surgery offers women who are made to feel that their bodies are unattractive because of pregnancy an opportunity to "pass" as an erotic body and regain a sense of who they are. However, while cosmetic surgery can be understood by women as offering them reprieve from a body that they experience as damaged by pregnancy, it is important to recognize that women are shaping their bodies into a normative, heterosexual ideal female body that is responsible for making them feeling inadequate to begin with.

Conclusion //

Femininity is defined in North American culture by a set of gendered, culturally learned actions that shape the meaning associated with an erotic body. Culturally constructed beauty ideals often define the parameters of an erotic body, while beauty practices allow women to approximate this moralized and idealized identity. This has been demonstrated throughout this thesis in the context of cosmetic surgery, which encourages the assumption that women's bodies are infinitely plastic, and capable of endless transformation. Capitalist society and popular media have established an ideal erotic female body as one that requires constant work and frames the pursuit of beauty as a highly individual project. As such, cosmetic surgery is often experienced as a personal journey to a better and improved body and newfound sensuality. However, because the ideal female body requires constant work, and bodies often experience changes over time (such as sagging skin and wrinkles), an ideal female body that "passes" as an erotic body is ultimately unachievable.

An erotic, youthful body is a prevalent ideological goal within neoliberalism, which often promises consumers individual happiness and fulfillment through the consumption of consumer goods and the appearance of a healthy body, and therefore, healthy sense of self. In consumer culture, femininity is often linked with a youthful, sexualized body. Youthfulness is imagined as available to all individuals who have the means to participate and exist in the material reality put forth through the consumption of cosmetic surgery.

Historical beauty ideals and popular media representations of beauty in North American society have played a central role in informing gender performances and beauty ideals of the female body. As I have shown, erstwhile cosmetic surgery practices were developed as reconstructive surgeries during the 18th and 19th century, while the inclusion of

aesthetics is a relatively recent phenomenon. In the present, the objectives of cosmetic surgery practices and the cosmetic surgeons who perform them have expanded and changed meaning in a neoliberal marketplace that highlights the inadequacies of women's bodies and the symbolic capacities of these bodies. The focus of contemporary cosmetic surgery practices requires women to feel that their happiness and sense of fulfillment lies in conforming their bodies to an ideal erotic female body. This ideal female body is unachievable, however, as woman's bodies are always framed as requiring work.

The beauty industry, which includes cosmetic surgery, is often cited as an example of an industry that is largely founded on consumer demands. Without a consumer's readiness and willingness to participate in cosmetic surgery treatments the industry would fail to be profitable. Neoliberalism identifies an individual as an exclusive, unique actor on a global stage of opportunities that is defined by the constructed material reality of consumer capitalism. Neoliberalism plays a central role in shaping cosmetic surgery practices as a means of achieving beauty that is largely focused on defining an ideal female body, and delineating the actions and characteristics that define an erotic body and femininity. The beauty industry reflects a neoliberal agenda, where individualism is embedded within the marketing strategies of various beauty treatments. For instance, the industry promotes beauty as achievable through self-help strategies, emphasizing the role an individual plays in decisions regarding self-care in a capitalist-consumer society.

The messages contained within the media impact and shape popular cultural understandings of beauty, and shape a woman's understanding and goal to "pass" as an erotic body. Cosmetic surgery is frequently presented by the beauty industry within the media as enabling women to transform their bodies, facilitating an understanding of the human body

as one where the body is treated as malleable, transformable and customizable. Bordo (1993) and Orbach (2009) consider this plasticity as enabling an assumption that the female body requires body work in order to be beautiful, and the extent to which the female body is transformable is seemingly endless. The culmination of beauty ideals and beauty practices that attempt to mobilize women's youthfulness on their body has been described as an 'extended middle age'. The 'extended middle age' describes a period in middle-aged women's lives when their bodies become ageless, and defines a beauty standard that is intertwined with notions of youthfulness achieved through body work. Importantly, body work is not relegated to women in their 'middle age' rather, women of all ages may participate in an 'extended middle age' in the common goal of preserving their beauty for as long as possible. In other words, the notion of 'stretched middle age' describes a culturally ideal female erotic body that all contemporary women should aim to achieve in order to "pass". As previously described, "passing" as an erotic body is an important condition in defining contemporary female identities, and impacts the way in which a woman understands her sensuality, her femininity as a woman, and her sense of self.

As this thesis has shown, cosmetic surgery is involved in the construction of an ideal female body that is erased of the signs of aging; it is also viewed as a solution for women who have been made to feel that a postpartum body is unerotic. Motherhood is experienced as a moment of great loss for some women in their blogs because their bodies are transformed, which is often experienced by women as feelings of unattractiveness and embarrassment with their bodies.¹⁹ Most women confided in their blogs that they worked

¹⁹ Importantly, pregnancy is not experienced by all women as negatively impacting their sense of self. Rather, pregnancy can be experienced as a deeply empowering, feminizing experience.

hard to achieve and maintain an attractive body prior to becoming pregnant. The female body that is pregnant is often depicted as out of control and unerotic and when these feelings linger after a woman has had her children, women often feel like their “former selves” have been lost. Cosmetic surgery promotes the assumption that bodies that violate ideals should and can be transformed, and this often means erasing the signs of what one’s body has been through.

Understanding & Horizons

The body is a necessary component to consider when discussing the embodied experience of everyday life. Experiences are impacted by society around us, and these social interactions aid in shaping a set of shared cultural assumptions that establish understandings of reality. This has been described earlier through the concept of horizon put forth by Gadamer (1960). A horizon describes an individual’s understanding of reality that is informed by historical and learned behaviours and assumptions. The horizon of an individual is equally shaped by an everyday experience and the understandings derived from it, in addition to the intangible aspects of their everyday experience (such as historical contexts or political conditions). Importantly, the horizon is equally shaped by the individual as the individual is shaped by their horizon.

How women understand themselves is shaped by how they identify as normative, heterosexual women in contemporary North American society. Women’s identities are composed of gender performances that are meaningful and significant to shaping their horizons, and affect how their horizons shape understandings everyday. The everyday implications of cosmetic surgery that have been described throughout this thesis, which include cultural assumptions of femininity and ideals about the body represent the composition of a woman’s horizon. That is, a woman’s horizon, and how she understands

herself can be described as an all-encompassing system, within which other processes are taking place. This parallels the way in which an embodied understanding of everyday life was described earlier, where identity is established by considering the multiple dimensions that shape everyday life, such as a biological existence, psychological processes or political assumptions.

Return to Language

An important part of how understanding is shaped is through language. Understanding is enhanced by our capacity for language and communication by mobilizing thought and reflecting upon culturally constructed ideals, such as beauty ideals. By considering ideals, and drawing connections between different experiences in everyday life, normative ideas are shaped and reinforced. Language offers the foundation for neural connections within the brain, and enhancing understanding of everyday life. Human beings can only know about the world through language, and without language the human capacity for memory, society and understanding would be greatly diminished. Neoliberalism intertwines women's understandings of femininity and an ideal body shape through language that informs how women understand their identities in everyday life. Reality, and all of the sense being made from it is dependant on language. We can only know about the world because of how we talk about it, and describe our experiences in words. Words and language reciprocally shape us, by establishing neural pathways and thought patterns.

Internet and Contemporary Communities

Language provides the medium for communication in the blogging world. In this context, language gives women the ability to convey ideas, and it is through these experiences that an understanding about cosmetic surgery abroad takes place. By communicating ideals, such as

reaching “the flat side”, women establish cosmetic surgery as a normative goal for other post-pregnant women. This experience is informed through beauty ideals, where women imagine themselves as undertaking a task or journey towards a newer, improved self.

During this journey, women communicate ideas surrounding the meaning of cosmetic surgery, and often draw upon other experiences to frame an understanding of their experience. For instance, women often used a pregnancy metaphor in order to convey their experience of cosmetic surgery:

Imagine your last month in pregnancy. Everything hurts and sleeping is a pain. That’s about the equivalent. But I still don’t regret a thing (LotusPenner).

The pain ? The pain is like having contractions like having a baby when I take deep breaths I feel the tightness in my abdomen I just woke up with a lil pain so i asked for medicine and they came right in and put in my IV (Bambi19).

now I understand when the ladies say they feel prego when the get swollen ☺ (RangerHeat).

By using pregnancy as a metaphor, women relate their experience of cosmetic surgery to past experiences. Further, women often assume the audience of their blog can relate, which may reinforce cosmetic surgery as a normative goal for post-pregnant women. In this way, women’s horizons are shaped by and simultaneously shape understanding in everyday life through language and what it means for other aging women, and women whose bodies have been transformed through pregnancy.

The communicative actions that take place on blogs also have the ability to shape relationships, and establish common goals and ideas. The cosmetic surgery industry has largely been declared a ‘consumer’ driven market place while Internet websites – such as *TrueBeauty* – place authority on the voice of the consumer. The cosmetic surgery industry abroad is not regulated, and lacks an overarching administrative authority to ensure the health

and safety of patients. Information regarding cosmetic surgery is often only available on the Internet, and the language within blogs makes information available to women. Often, consumer voices are the resounding authorities on the Internet and can have an enormous impact on the financial success of a surgeon, and the decision-making process of women contemplating cosmetic surgery. In this way, language and the Internet allows women to make more informed decisions regarding cosmetic surgery.

Language & Agency

A woman's power and agency is limited by the neoliberal conditions within which cosmetic surgery takes place. Being made aware of these limitations and recognizing these resistances is important. For instance, while women often perceive themselves as regaining their sexuality and distancing their identities as mothers through cosmetic surgery, they are simultaneously reinforcing a beauty ideal that views the female body as deficient. As I have argued, the way in which women understand their bodies is through language that enables the construction of an ideal erotic body that often corresponds to a moralized, female body. As language is the foundation of understanding and identity construction, I believe language can offer women a glimpse into defining femininity in their own terms by reversing the narrative. This has been demonstrated in many historically relevant accounts of marginalized women, for instance, in the 1960's black power movement, the slogan "black is beautiful" was utilized as a rallying call that was less about the physical attractiveness of the body but was more about black consciousness and pride. In this instance, the body becomes a symbolic field for the redefinition of dominant values and concepts, and is also a site of resistance to the transformation of these systems of meaning. The body is a medium for conveying these transformative symbols and is therefore agentic (Reischer & Koo, 2004).

Only once we are critical of the language used to describe women's bodies and the role of language in shaping understandings of femininity can we begin working towards establishing an erotic body that is defined by women themselves, through their own voices. Platforms like the Internet can be powerful modes of communication, as they offer consumers the ability to dictate and define the parameters of an ideal, female erotic body. However, it is important that this does not render invisible that fact that these processes still take place within a neoliberal, economic market that presents consumers with a material reality. Allowing women to redefine the content and messages that shape contemporary forms of femininity, however, can be source of agentic action for women, even while these messages perpetuate a capitalist-defined material reality – one that constructs the female body as imperfect, in need of endless improvement.

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