

**Operation Beauty: Discourses of Cosmetic
Surgery in Popular Women's Magazines in
Australia, Germany and Japan**

**A thesis submitted in fulfilment of the requirements
for the degree of Doctor of Philosophy**

**Michiko Weinmann
M. A.**

**School of Education
Design and Social Context Portfolio
RMIT University
July 2010**

Declaration

I certify that except where due acknowledgement has been made, the work is that of the author alone; the work has not been submitted previously, in whole or in part, to qualify for any other academic award; the content of the thesis is the result of work which has been carried out since the official commencement date of the approved research program; any editorial work, paid or unpaid, carried out by a third party is acknowledged; and, ethics procedures and guidelines have been followed.

Michiko Weinmann

24 July 2010

Abstract

Operation Beauty: Discourses of Cosmetic Surgery in Popular Women's Magazines in Australia, Germany and Japan

In this thesis I describe my analysis of representations of cosmetic surgery in the syndicated women's magazines *Cosmopolitan* and *marie claire*¹ across three cultural contexts: Australia, Germany and Japan. Using a critical discourse analysis of these texts, my research focused on how representations of cosmetic surgery influence the ways identity is constructed and how the narratives of cosmetic surgery invite or distance the reader to engage in identity construction processes. By exploring magazines in their different cultural contexts, this study also investigates how discourses of cosmetic surgery are shaped by the homogenising influences of globalisation within a 'localising' context of syndicated magazines. In doing so, this study aims to explore the increasing complexities of body modification and identity construction in our 'liquid' society (Bauman 2000, 2005). Using this premise, I argue that the pressure to constantly modify the body, as advocated by *Cosmopolitan*, *marie claire* and other women's magazines, reflects the current 'surgical' or 'makeover' society (Blum, 2003; Elliott, 2008; Jones, 2008b).

The theoretical framework of this study draws upon three fields. The first, Bauman's (2000, 2005) theories of 'liquid' society and 'liquid' life, illustrates the wider social context of an increasingly fluid world, in which cosmetic surgery plays a significant role as a powerful tool of identity construction. In conjunction with Bauman's concepts, I also draw upon both Hall's (1992, 1997a/b) and Said's (2003) theories of 'otherness', which identify the aligning of one cultural identity against another as a significant part of identity construction. Thirdly, in order to research the connections between body, identity and cosmetic surgery, I adopt aspects of feminist embodiment theory. Knitting together three related but diverse fields of understanding enables me to comprehensively analyse the discourses around cosmetic surgery in the literature.

¹ Consistent with the magazine's website and in the editor's response to my letter seeking permission to reproduce articles, the magazine's name is in lower-case in this thesis.

Methodologically, I utilise critical discourse analysis to analyse print texts, as well as visual and narrative elements. Although traditionally critical discourse analysis has largely focused on written texts (Fairclough, 2003a/b; Keller, 2004; Talbot, 1992), I argue that this approach does not adequately represent the multimodality of contemporary texts (Kress & Van Leeuwen, 2006). The inclusion of analysis of visual literacy components has been acknowledged as an indispensable part of critical literacy in a multimodal environment (Kress, 2003). My approach complements a further sociolinguistic research tool, narrative analysis, which enables my research to establish connections between concepts of critical discourse and narrative analysis. This connection is also supported by Gee's (1999) concept of d/Discourse and Bamberg's (2008) concept of 'big' and 'small' stories.

Within the context of a nine year data collection, I analyse in detail six selected articles on cosmetic surgery. My analysis highlights how discourses used in circular arguments and narratives without a conclusive 'resolution' might reflect the fluid identities of our times. Further, this study focuses on the opportunities afforded to readers to construct and negotiate available cosmetic surgery discourses. These discourses, ranging from cosmetic surgery as restricting women's agency, to cosmetic surgery as an empowering enabler of their 'natural' selves, highlight the versatile and often contradictory approaches of identity construction.

Through this thesis, I argue that a deeper understanding of the interconnected relationship between text, context, symbols and argument in culturally and contextually appropriate ways will afford women greater power to read critically. Through critical reading, agency can be exercised in a more informed way in a complex and multicultural world, a world which requires identity negotiation across a plethora of culture and lifestyle choices. Cosmetic surgery is a highly invasive procedure of body modification and magazine representations argue its contingent relationship to identity construction. A deeper understanding of the discourses of cosmetic surgery will contribute to a more reflexive negotiation by magazine readers of the ways in which women are positioned by discourses in popular texts.

Acknowledgements

As my PhD journey comes to a close, I reflect upon my previous learning experiences in secondary school and my early tertiary education days. A person who immediately springs to my mind is my Latin teacher in Year 12, who would always conclude his lessons by reminding us students: “Nulla dies sine linea” – No day [should pass by] without [reading/writing at least] one line.

The motivation to add one new thought to the PhD process every day for the last four years would not have been possible without the generous professional and emotional support of many.

First, I would like to thank my primary supervisor Dr. Julie Faulkner. Being an educator myself, I highly appreciate the extraordinary lengths she went to in sharing her vast knowledge in critical reading practice, cultural theory and methodological approaches relevant to this thesis, and providing me with personal mentoring. I am grateful to my secondary supervisor Dr. Jennifer Elsdon-Clifton, whose insights in feminist theory and suggestions to structural improvements have been invaluable. A special thought goes to Louise Prentice and Jane Santos (School of Education) and to Emily Rose (International Scholarships) at RMIT University, for their efficient and patient support in all administrative matters.

I also would like to express my thanks to Melanie Friedlander and Philippa Sutton for providing professional German and Japanese translations of the foreign language magazine articles used in this thesis, Masaya Asazuki and Rena Okino for assistance with the data collection in Japan, and Yayoi Arima (Shueisha), Lulu Dougherty (Pacific Magazines), Elizabeth Hayes (ACP Magazines) and Ivonne Sachau (Gruner+Jahr) for their support in obtaining permission to reprint the articles selected for analysis. I also wish to thank Dr. Campbell Aitken for his flexibility and exceptional efforts in proofreading my thesis.

A penultimate thank you goes to my friends, who unfailingly encouraged me when I had lost confidence in my abilities: Alejandra Quintero Serrano, Ben Faigen, Carlo

Vlok, Fiona Wahr, Gabrielle Gangitano, Gerhard and Rosmarie Wegmann, Günther and Helga Patzak, Heide Göbbels, Fr. Jo Dirks, Josefina Hennel, Karin and Thomas Wolf, Konstantin Novoselov and Michael Hackethal, Linda Lin, Dr. Markus Forster, Melanie Friedlander and family, the Osterholt family, Paul Davis, Raquel Woods, Rita Kandler, the Roser family, Dr. Ross Walker, Sarah Wiedemann, Sheila Wagemann, Susie Richmond and Sam, Tasha Brown and family and Wiebke Kleine.

A special thank you goes to my swim instructor Judy Krape, who always reminded me that when facing great challenges, sometimes “you just have to swim your way through”. A most heartfelt acknowledgement must go to my friend Maestro Paul Fitzsimon, whose impressive determination inspired me to persevere during a very difficult time. And naturally, thank you to the four ‘Ms’ in my life: Manfred, Masako, Mayumi, and Mike.

I would like to express my final and sincere gratitude to RMIT University, which provided me with a scholarship, without which this research would not have been possible.

Table of Contents

Preface: The Beginning of a Research Journey	11
1 Introduction	15
1.1 Framing and Defining Cosmetic Surgery	15
1.1.1 Defining Cosmetic Surgery.	15
1.1.2 A Brief Historical Overview of Cosmetic Surgery.	18
1.1.3 Cosmetic Surgery Today: Living in a Cosmetic ‘Carnival’.	19
1.2 Research Questions	25
1.3 Overview of the Study	27
2 Literature Review	30
2.1 Introduction: ‘A Simple, Strategic Solution’ – Discourse Schemas in <i>Cosmopolitan</i>	30
2.2 Construction of Identities	32
2.2.1 Identity in ‘liquid modernity’.	32
2.2.2 Global Identities.	36
2.2.3 Construction of Cultural Identities.	37
2.2.3.1 <i>The fragmentation of cultural identity.</i>	38
2.2.3.2 <i>Identity and the cultural ‘other’.</i>	41
2.3 Identity and the Body	44
2.4 Feminist Theorising of the Body	48
2.4.1 Grosz's ‘Corporeal Feminism’.	49
2.4.2 The Corporeal Body and Identity.	52
2.5 Body Modification and Identity	54
2.5.1 The Modified Body and Identity.	54
2.5.2 The Invasion of the Scalpel: Feminist Views of Cosmetic Surgery.	56
2.5.3 Discourses of Victimhood and Vanity.	57
2.5.4 Discourses of Agency.	59
2.5.5 Investment Discourse: Cosmetic Surgery as a Commodity.	61
2.5.6 The All-transforming Power of Cosmetic Surgery: The Cinderella Discourse.	63
2.5.7 Cultural Homogenisation: The Discourse of ‘Ethnically Appropriate’ Cosmetic Surgery.	65
2.6 Summary: (In)conclusive (Re)solutions – Cosmetic Surgery as an Amalgam of Discourses.	67

3	Methodology.	70
3.1	Research Questions and Research Design	71
3.1.1	Overview: Case Study.	72
3.1.2	Overview: Critical Discourse Analysis.	74
3.1.3	Overview: Visual Analysis.	80
3.1.4	Overview: Narrative Analysis.	80
3.2	Critical Discourse Analysis	83
3.2.1	Framing Critical Discourse Analysis: Interpretation and Recontextualisation.	83
3.2.2	Gee's d/Discourse.	88
3.2.3	Multimodal Discourse.	91
3.3	Narrative Analysis	93
3.3.1	Narrative and d/Discourse.	93
3.3.2	d/Discourse in 'Big' and 'Small' Stories.	95
3.3.3	Narratives and Identity Construction.	98
3.4	Visual Analysis	101
3.4.1	A Grammar of Visual Design.	102
3.4.2	Limitations of a Grammar of Visual Design.	105
3.5	Application of the Methods in This Study	107
3.5.1	Application of Critical Discourse Analysis.	108
3.5.1.1	<i>Grammar.</i>	109
3.5.1.2	<i>Metaphor.</i>	111
3.5.1.3	<i>Social events and 'social actors'.</i>	112
3.5.2	Application of Narrative Analysis.	113
3.5.2.1	<i>The 'small story' in the surgical quest of identity.</i>	114
3.5.2.2	<i>The agon, evaluation, ending and closure.</i>	114
3.5.3	Application of Visual Grammar.	116
3.5.3.1	<i>Gaze and positioning of the viewer.</i>	117
3.5.3.2	<i>Modality.</i>	119
3.5.3.3	<i>Composition.</i>	120
3.6	Summary	121
4	Analysis	123
4.1	Introduction: The Data Collection	123
4.1.1	The Magazines.	123
4.1.2	Data Collection Timeframe.	126
4.1.3	Selection of Articles.	127
4.2	Content Overview of the Data Collection	129
4.2.1	Patterns in Genre.	130
4.2.2	Patterns in Content.	133

4.3 Overview of Articles Selected for Analysis	136
5 The Cinderella Factor: The All-transforming Power of Cosmetic Surgery	140
5.1 Situating the Article	140
5.2 Blurring Genre and Discourse Boundaries: The ‘Triptych’ Structure of the Article	143
5.3 Strategically Becoming Surgical: Theme, Language and Images	144
5.3.1 Penelope's Personal Narrative, Part One.	148
5.3.2 Obscuring the Normative Ethics of Cosmetic Surgery: The Report.	154
5.3.3 Conclusion to the Penelope Narrative.	160
5.4 Summary: Towards a Liquid Cinderella	162
6 Westernisation and Cultural Homogenisation: Japanese Double-eyelid Surgery and the Removal of Sweat Glands	164
6.1 Situating the Article	164
6.2 Surgical Hybridity: Theme and Cultural Context of the Article	174
6.2.1 ‘Westernisation’ Through Cosmetic Surgery.	175
6.2.2 Japanese Cosmetic Surgery as a ‘Japan-West Hybrid’.	177
6.3 Embracing the Corporatised Ethnic Hybrid: Structure and ‘Social Actors’ in Language and Visuals	179
6.4 Summary: Towards a ‘Hafu’ Cinderella	192
7 Torture and Transformation: Leg-lengthening in China	194
7.1 Situating the Articles	194
7.2 What Price Beauty?: Theme and Structure of the Articles	209
7.2.1 Setting the Agenda: Heading, Title, Photograph and Captions.	209
7.2.2 Structure of the Articles.	214
7.2.3 Differences in the German Layout.	214
7.2.4 Setting the Scene.	216
7.3 ‘Investors’ vs. ‘Victims’?: Discourse, Narrative and Representation of ‘Social Actors’ in Language and Visuals	220

7.4 Summary: Towards a Suffering Cinderella	229
8 Agency and Political Protest: Nose Jobs in Iran	232
8.1 Situating the Article	232
8.2 Explosive Beauty: Theme and Structure of the Article	244
8.2.1 Layout of the Report.	246
8.2.2 Setting the Scene.	248
8.3 Fighting for a Universalised Femininity: Discourse, Narrative and ‘Social Actors’ in Language and Visuals	253
8.4 Summary: Towards a Political Cinderella	263
8.5 Summary of Analyses	264
9 Conclusion of the Case Studies	270
9.1 A Retrospective View of the Study	270
9.2 Strengths and Limitations of the Study	271
9.3 Conclusions of the Case Studies	276
9.3.1 ‘A Simple, Strategic (and Surgical) Solution?’	276
9.3.2 (In)conclusive (Re)solutions.	278
9.4 Questions for Further Investigation	282
Postscript: From Pandora’s Box to ‘Operation Beauty II’	287
Bibliography	290
Appendices	
Appendix 1: The Data Corpus	308
Appendix 2: Permissions to Reprint Articles	316

Preface

The Beginning of a Research Journey

In February 2002 I arrived at NHK (Nippon Hôshô Kyôkai) – the Japanese Broadcasting Corporation, to work as a television researcher, coordinator, translator and interpreter in Salt Lake City during the Winter Olympics. While former colleagues and I greeted each other with a hug, new colleagues were giving me ‘special’ glances. Although bowing is common in Japan, I was suddenly being greeted with far more frequent and deeper bowing than I was used to. Until then, I had thought that I understood Japanese corporate culture, at least to some extent, but the respect which I, a junior member of staff, was now being afforded remained a mystery to me. Nevertheless, always wishing to blend in, I decided to keep a low profile and returned the deep bowing with even deeper bowing.

The mystery was finally solved when a new colleague introduced herself and ‘dared’ to ask what job I held at NHK. My reply that I was a researcher seemed to startle her. She blurted out: “I thought you were a television presenter! How, with your looks, are you not a presenter?” Now it was my turn to be speechless. In that instant my outspokenness, of which – as a ‘case-hardened’ freelance journalist – I had always been so proud, was totally gone, and I helplessly stuttered something about being only half-Japanese and not having the necessary language skills.

Being half-German and half-Japanese, I fit into the category of *hafu* (Japanese adaptation of the English word ‘half’): people who have one parent from Asian and another parent from Western (mainly Caucasian) descent. Regarding myself as an independent-minded and reflective young person, who was above superficialities such as fashion and appearance, I had always brushed aside the acclamations of how beautiful *hafu* people were. I considered those stereotypes as outdated remnants of my childhood days in the 1980s, when there were not as many foreigners in Japan as today, and a time when a Westerner would inevitably stand out as ‘exotic’; however, my colleague’s reaction suggested that the stereotype of *hafu* as the ‘perfect blend of East and West’ was still very much alive.

My lesson in cultural awareness did not end there. My colleague, who now saw that I had, despite my *hafu* descent, hardly any concept of what ‘being *hafu*’ involved, gave me an insight into facial features typically characterised as *hafu*: *ookii me* – ‘big eyes’, *takai hana* – a ‘high’ nose (a nose with a clearly discernible bridge), *shiroi hada* – ‘white skin’ and *tamagogata no kao* – an ‘egg-shaped’ (oval as opposed to a round) face. “Let’s put it differently”, she said. “You look like a Japanese person who has had cosmetic surgery.” While she meant the remark as a compliment, I was offended. Now I knew that I looked like a Japanese female who had undergone a ‘nose job’, double-eyelid surgery (to create bigger eyes), and possibly had her cheek and chin bones altered. I was probably perceived as someone who had applied copious amounts of whitening cream and light makeup to create a highly Westernised but still Japanese look. Being a reflection of such a stylised image made me feel like a clone, and the whole experience left me confused.

After I returned from Salt Lake City, I quizzed my Japanese friends about the status of cosmetic surgery in Japan and how people responded to it. Many were surprised that I had not noticed that cosmetic surgery had become a ‘normal’ part of everyday life. Magazines, for example, were filled with advertisements for ‘beauty clinics’, and there was even a soap opera on television – *Seikei Bijin* (‘Plastic Surgery Beauty’) – that dealt squarely with the question of cosmetic surgery.

The TV series featured a young woman (played by the popular Japanese actress Yonekura Ryôko) born into a family with a long line of ugly ancestors, who undergoes an ‘extreme makeover’ and starts a new life as a celebrated model. Her beauty attracts the attention of a highly acclaimed *Ikebana* (traditional Japanese flower arrangement) master and inevitably the two fall in love. Then the real drama begins; will he find out that she is just a ‘plastic beauty’?

The series could be brushed aside as low-grade entertainment, but it was not that simple. My research showed that after the series was aired, – attracting an average rating of 15.4% per episode – a *seikei buumu* (‘plastic surgery boom’) occurred. An internet survey conducted at the time the series was broadcast, documented that 95% of the 180 ‘office ladies’ (a Japanese term describing the typical female working in

large companies in a minor administrative role) who were interviewed had no objections at all to potentially undergoing a total makeover like the protagonist in the television series. The survey also revealed that while most men apparently wanted women to worry about their 'beauty inside' first, this aspect was not addressed at all by the female interviewees.

Regardless of how reductive the soap opera and the discussions surrounding it might have been, I was intrigued by its impact and the responses it generated in Japanese media and society. Thanks to *Seikei Bijin* I had found the topic for my Master's thesis: I would analyse advertising for cosmetic surgery in Japanese women's magazines, investigating what procedures were advertised and in what genre, and what metaphors and connotations the images communicated to the reader.

Thus, in July 2002, when I was working in Japan during the Soccer World Cup, I accumulated women's magazines and examined the advertisements. Some were designed as simple product advertisements, others were more arty, but all offered a wide range of procedures: 'boob jobs', 'nose jobs', liposuction, cosmetic dentistry of all kinds, face-lifting, anti-ageing procedures, genital enhancement, leg lengthening, face shaping, laser treatments, hair removal, hair transplants, innumerable ways of fixing eyes and eyelids and the so-called *puchi seikei* – 'small operations' (*puchi*: from the French 'petit' and *seikei*: plastic surgery) – which included mainly eye and nose 'operations' performed using threads or injections and which did not involve the actual cutting of flesh.

It was overwhelming to see how prominent cosmetic surgery had become in Japan. I realised that cosmetic surgery was not just an industry, but an omnipresent facet of not only Japanese women's lives, but the lives of citizens of the Westernised world, shaped by many opinions and representations. My Master's thesis dealt with one aspect of cosmetic surgery: the relationship between cosmetic surgery and its representation through language and images in advertising. Subsequently, the idea of cosmetic surgery not as a commodity but as 'culture' had come to fascinate me. Since 2002, cosmetic surgery has become even more prominent in the media and everyday discussion. On television, shows attracting huge audiences such as *Extreme*

Makeover and soap operas such as *Nip/Tuck* are broadcast regularly, and cosmetic surgery has become a well-established topic in women's magazines.

After my analysis of cosmetic surgery advertising in Japan, I wanted to examine how cosmetic surgery was generally represented in the popular print media, particularly in syndicated women's magazines, across different cultural contexts. Through exploring the many and often contradictory ways of thinking about cosmetic surgery, I aim to explore some of the dominant discourses and narratives used in magazine articles to reinforce popular beliefs about cosmetic surgery.

'Operation Beauty' begins now.²

² The term 'Operation Beauty' is borrowed from German magazines, where it appears to be established as a widely used journalistic term when reporting on cosmetic surgery. Both *Der Spiegel* and *Focus*, two popular weekly news magazines from Germany, reported on cosmetic surgery as a cover story in recent years (*Der Spiegel* in the issue dated 7 October 2002, *Focus* in its 13 August 2007 issue), both using the headline "Operation Schönheit" ['Operation Beauty']. A special supplement of German lifestyle magazine *Prinz* (March 2004) on cosmetic surgery was also headed by the same title.

1. Introduction

1.1 Framing and Defining Cosmetic Surgery

1.1.1 Defining Cosmetic Surgery

Despite the increasing popularity of cosmetic surgery, particularly in popular discussion, there still seems to be confusion about which surgical procedures can be classified as ‘plastic surgery’, ‘aesthetic surgery’ and ‘cosmetic surgery’. Another term which appears in the context of ‘cosmetic’, ‘aesthetic’ and ‘plastic’ surgery is ‘reconstructive surgery’, adding to the complexity of definition and differentiation.

Etymologically, the adjective ‘aesthetic’ refers to anything “concerned with beauty and the appreciation of beauty” (*Oxford English Dictionary and Thesaurus*, 1995, p. 26). ‘Cosmetic’, in relation to “surgery or a prosthetic device”, is defined as “imitating, restoring, or enhancing the normal appearance” (p. 323). The term ‘plastic’, in combination with the term ‘surgery’ stands for “the process of reconstructing or repairing parts of the body by the transfer of tissue, whether in the treatment of injury or for cosmetic reasons” (p. 1163).

Whilst the *Oxford English Dictionary and Thesaurus* (1995) does not clearly distinguish between ‘cosmetic’ and ‘plastic’ surgery and therefore further blurs the boundaries, a distinct differentiation is made in medical terminology. *Dorland’s Illustrated Medical Dictionary* (2003) defines both ‘reconstructive’ and ‘plastic’ surgery as “surgery concerned with the restoration, reconstruction, correction, or improvement in the shape and appearance of body structures that are defective, damaged, or misshapen by injury, disease, or growth and development” (p. 1797). ‘Cosmetic surgery’, however, is “that department of plastic surgery which deals with procedures designed to improve the patient’s appearance by plastic restoration, correction, removal of blemishes, etc.” (p. 1797). ‘Aesthetic’ is, similar to the *Oxford Dictionary and Thesaurus*, defined as “pertaining to beauty, or the improvement of appearance” (p. 644).

Thus, unlike plastic and reconstructive surgery, cosmetic or aesthetic surgery is generally performed without any medical indication, and it has become widely established among researchers and writers to apply the term ‘cosmetic surgery’ to procedures of an exclusively ‘beautifying’ nature.

Kuczynski (2006) clarifies this distinction between cosmetic and reconstructive surgery by saying that:

plastic surgery encompasses the subspecialties of reconstructive plastic surgery – in which, for example, a breast might be reconstructed after a mastectomy or a face put back together after an automobile accident – and what is referred to as cosmetic surgery, elective surgery that is medically unnecessary but produces pleasing aesthetic results (p. 8).

Similarly, Haiken (1997) argues that:

the patients upon whom surgeons perform cosmetic surgery are healthy. The diseases for which these patients seek cures – ageing, ugliness, poor self-esteem – are many, but they share the characteristic of being difficult to diagnose in the precise terms medicine normally employs (p. 6).

This view is shared in similar words by Harkness (2004):

Increasingly, the label ‘cosmetic’ applies to all elective surgery done for aesthetic purposes alone, even though procedures like face-lifts, eyelid reduction or rhinoplasty involve plastic surgery techniques (p. 4).

Nevertheless, from the insights I gathered during data collection, in popular discussion, non-surgical procedures such as Botox, Restylane or collagen injections are also classified as cosmetic surgery, even though (similarly to the Japanese *puchi seikei*) they do not involve the actual ‘cutting of flesh’. Consequently, it seems justifiable to apply the term ‘cosmetic surgery’ to both surgical (for example breast augmentation or liposuction) and non-surgical or “minimally invasive” (Heyes & Jones, 2009, p. 4) procedures (for example, various injections as stated above and

chemical peels). Alternative terms for the distinction between ‘surgical’ and ‘non-surgical’ types of cosmetic surgery are ‘invasive’ and ‘non-invasive’, as used by Atkinson (2008), who applies these terms to different types of male cosmetic surgery procedures in Canada (p. 67). Whilst these terms appear more euphemistic, in that they denote aesthetically modified male bodies not as ‘surgical’, but “as veritable masks of masculinity” (p. 67), Atkinson’s (2008) classification of procedures such as rhinoplasty, liposuction and breast reduction as ‘invasive’, and chemical peels, hair removal Botox and collagen injections as ‘non-invasive’, corresponds with the distinction between ‘surgical’ and ‘non-surgical’ procedures.

Including non-surgical procedures into the definition of cosmetic surgery means there is a grey area as to where to draw the line between clearly surgical procedures and others which, according to popular belief, are less intrusive and fall into the realm of beauticians rather than surgeons. The fact that there is disagreement between medical professionals and professionals in the beauty industry as to whom should be allowed to administer those treatments highlights the far-reaching complexity of this issue.

I consider Jones’ (2009) definition of cosmetic, plastic, reconstructive and aesthetic surgeries as the most concise and practical one for research within a framework of sociological and feminist theory:

‘Plastic’, ‘cosmetic’, ‘reconstructive’ and ‘aesthetic’ are used somewhat interchangeably to describe cosmetic surgery. ‘Plastic surgery’ generally covers the entire field. ‘Reconstructive surgery’ treats deformity due to disease, congenital defect or injury. ‘Cosmetic surgery’ (and the lesser used ‘aesthetic surgery’) refers to elective and anti-ageing procedures [...] [Cosmetic surgery] [...] consists of operations not related to birth defects, burns, disease, injury, or mastectomy; operations conducted on bodies that are generally accepted as undamaged except by time and age; and operations that aim to minimise or eradicate signs of ageing such as drooping, wrinkles, loss of skin lustre and ‘middle age spread’ (p. 3).

Nevertheless, Jones (2008b) also acknowledges that “borders between elective and non-elective surgeries are increasingly blurred” (p. 3), but to define the parameters of

research on cosmetic surgery a line has to be drawn. Jones' (2009) list of cosmetic surgery procedures therefore includes various elective surgical procedures ranging from the more 'conventional' ones such as liposuction and mammoplasty (breast augmentation or reduction) to 'injectables' such as Botox or Restylane (p. 4). Jones (2009) excludes surgical procedures such as female or male circumcision or sex-change operations, which she considers as "deeply complex topics that deserve their own volumes" (p. 3).

In my research I followed Jones' (2009) approach and definition as above, and the term 'cosmetic surgery' as applied in this thesis encompasses all elective procedures of both surgical and non-surgical nature which were featured in the magazine articles of the data corpus. Similar to Jones' (2009) definition of cosmetic surgery, I excluded surgical procedures such as female and male circumcision, sex-change operations, mastectomy (Kubisz, 2003), facial cosmetic surgery for Down's syndrome patients (Davis, 2003), or the use of facial fillers by gay men with HIV to counteract facial wasting (Patton & Liesch, 2009), which raise different issues in contrast to more widely available types of cosmetic surgery for aesthetic purposes. I also excluded technical body modification procedures as used in performance artist Stelarc's work (Godall, 1997, 2000), and cosmetic surgery utilised as a means of non-mainstream self-expression as applied in the 'carnal art' of Orlan (Ayers, 2000; Jones, 2008b; Kubisz, 2003).

1.1.2 A Brief Historical Overview of Cosmetic Surgery

Cosmetic surgery is a medical specialty that has significantly evolved over past decades; however, the origins of cosmetic surgery can be traced back to ancient times. Researchers in medical history agree that a Hindu surgeon, Sushruta Samhita, should be considered the father of cosmetic surgery (Haiken, 1997; Kennedy, 2004). Sushruta is said to have developed a method of reconstructing a nose from a patient's cheek around 600 B.C., and the so-called technique of Indian (or forehead) reconstruction (rhinoplasty) was performed as early as A.D. 1000 (Haiken, 1997). The 16th century Italian Gasparo Tagliacozzi, of Bologna, Italy, is known as the

medieval pioneer of cosmetic surgery and the person who paved the way for modern plastic surgery, introducing the so-called flap graft procedures, in which a flap from the upper arm is transplanted to reconstruct noses missing due to syphilis or other trauma (Gilman, 1999; Haiken, 1997).

Despite these early beginnings, it was not until World War I that plastic surgery became established as a specialist medical profession (Haiken, 1997) when British surgeons' began to perform restorations of the faces of soldiers injured in the First World War. This type of surgery represents the original aim of plastic surgery, that is, to reconstruct features distorted by genetic defects or severe accidents and injuries. Advanced surgical techniques were again used during the Second World War, and in the years to follow, the speciality gained momentum as many surgeons cast about for other areas in which to use their new found skills.

Since then, the demand for the cosmetic side of plastic surgery has increased hugely and has become a wide subspecialty with its own specialists, publications, conferences, professional associations, bodies and training institutions (Harkness, 2004).

1.1.3 Cosmetic Surgery Today: Living in a Cosmetic 'Carnival'.

Once a procedure available only to the wealthy, cosmetic surgery has gradually become a commodity widely available to people from various socio-economic backgrounds. Blum (2003) describes this phenomenon as a characteristic of the 'postsurgical culture' of today's society, in which cosmetic surgery has moved from a sign of vanity to a familiar and often discussed topic in the media and in people's everyday lives:

The bodies of women in a postsurgical culture are all compromised regardless of whether we choose or refuse surgical interventions. When intervention in one's appearance emerges on the cultural scene as a possibility for many instead of just the rich and the celebrated, when it becomes a middle class practice [...], then we are

inevitably in a relationship to surgery regardless of whether we actually become surgical. We cannot be indifferent to the surgery that is everywhere around us, advertising on late-night television, beckoning us from the back pages of women's magazines, from right there in the middle of the newspaper we open during breakfast [...] There is no longer an "outside" of this story (p. 44).

As Blum (2003) points out, in our 'culture of cosmetic surgery' (p. 49), popular print media such as newspapers and magazines in particular mirror the strong presence of cosmetic surgery as a topic of wide public interest. Advertisements for and reports about cosmetic surgery procedures undergone by celebrities or just 'the girl and guy next door', 'horror' or 'mishap' stories of surgeries gone wrong, special features on cosmetic surgery procedures as well as their advantages, risks and cost have become common genres in women's magazines, and increasingly also in broadsheet newspapers. In Australia and New Zealand there is one specialist publication dealing exclusively at surgical and non-surgical procedures of body enhancement as well as health and beauty issues in general: the monthly *Cosmetic Surgery Magazine*. Despite its intention to inform and to provide advice, this publication is to a great extent an advertising forum for surgeons and other medical, health and beauty experts targeting their potential client groups.

Soap operas like the American series *Nip/Tuck*, soap-opera-like makeover shows such as *Extreme Makeover*, and its Australian follow-up series *Body Works* created new genres of entertainment and infotainment for a body-conscious television audience. This obsession with the total overhaul of one's appearance does not end with just a handful of programs, since "there are more makeover-themed television shows than ever: *Queer Eye for the Straight Guy*, [...] *The Swan*, *A Makeover Story*, *Cosmetic Surgery Before and After*" (Kuczynski, 2006, p. 6). A makeover show which took the 'making over' to an extreme level was MTV's *I Want a Famous Face*, in which surgeons remodelled their patients so they looked like their admired celebrity idols (Kuczynski, 2006, p. 111). It can be assumed that the (at the time of writing) most recent Australian makeover television show *10 Years Younger in 10 Days*, in which "poor, beleaguered lab rats, agreeing to participate in this absurd beauty contest farce [...] were primped and prodded, sprayed an alarming shade of

orange, injected with botulinum, waxed, flung in and out of dentist's chairs and dressed in new clothes" (Hardy, 2009), is not the endpoint of the current cosmetic surgery thrill in the media.

Considering that cosmetic surgery is a highly popular topic in broadcasting and the print media, it does not require much imagination to picture what extensive presence cosmetic surgery occupies on the internet, encompassing websites such as www.awfulplasticsurgery.com (Elliott, 2008; Jones, 2008b), which scrutinises celebrity surgery, blogs dedicated to the topic and videos posted on YouTube (Heyes & Jones, 2009). As Jones (2008b) comments, by being exposed to media of such content, we have all become cosmetic surgery recipients (p. 29), whether we actively choose to be or not.

As Jones (2008b) aptly observes, being a 'cosmetic surgery recipient' does not necessarily imply that everyone becomes physically 'surgical', but that people are exposed to the constant pressure to reinvent body and identity. Contemporary society is characterised as living in a 'makeover culture' (p. 11):

Makeover culture is a state where *becoming* is more desirable than *being*. It valorises the process of development rather than the point of completion [...] Makeover culture is not about the creation of finished products – whether houses, psyches, bodies or gardens – rather it is about showing subjects, objects and environments being worked upon and improved [...] In makeover culture success is judged on the display of the never-ending renovation of the self (Jones, 2008b, p. 12).

Another observable phenomenon is the fact that cosmetic surgery is also increasingly on the male agenda. Advertisers in magazines and other print media have discovered men as clients and an opportunity to create a new branch in an industry with high potential for growth. Hair transplants, chemical peelings, micro-dermabrasion, rhinoplasty, breast reduction of 'man boobs' and implant surgery are just a few of the treatments and surgeries catering for the male target group. The fact that then 67-year-old Italian Prime Minister Silvio Berlusconi underwent facial procedures that reduced his wrinkles without much public conjecture (Bruni, 2004), is one significant

example that evidence of ‘vanity’ among men has become widely socially acceptable. As Elliott (2008) illustrates, for men working ‘in the high finance-lane’ and in ‘the world of investment banking’ (p. 111), cosmetic surgery might actually already have become a necessity to stay competitive in a work culture “driven by a new corporate ethos that flexible and ceaseless reinvention is the only adequate response to globalisation” (p. 117).

Increasingly, a popular literary genre mixing features of fiction and non-fiction writing on cosmetic surgery is becoming established, portraying the cosmetic surgery lives and habits of the ‘rich, proud and beautiful’. Recent publications include Kuczynski’s (2006) *Beauty junkies: Inside our \$15 billion obsession with cosmetic surgery* and Lesesne’s (2006) *Confessions of a Park Avenue plastic surgeon*.

Kuczynski (2006), an American society journalist, comments widely on the excesses of today’s cosmetic surgery industry: surgery safaris, botox³ aficionados, gastric bypass surgery for weight loss and its follower, the body lift, “a kind of macro-face-lift for the torso, stomach, back, neck, arms, and thighs”, in which skin hanging from the bodies of patients who lost extreme amounts of weight is removed (p. 35).

Kuczynski’s readers can also find out about encounters with doctors who specialise “in eyebrow hair transplants for women with thinning eyebrows” or “change the shape of the toes to better fit pointy high heels”, and breast fetishists who donate money to women looking for breast augmentation on ‘cyber-begging’ websites (p. 261). Lesesne, an internationally renowned plastic surgeon, whose consultations take place across the globe, takes Blum’s (2003) observation that there is no ‘outside’ to the story of cosmetic surgery anymore, since society has become an integral part of it, even further. There simply is no story anymore; cosmetic surgery is all about strategic decision-making with a certain purpose and outcome in mind:

Here’s another myth: People who have plastic surgery have complicated feelings about it. No, they don’t – not usually. Those who haven’t had plastic surgery hyperanalyse the motivations of those who have. For most of my patients, it’s a

³ Botox – the commercial name for the neurotoxin botulinum toxin A (the same toxin as found in contaminated food) – has become a household term with official definitions in the *Oxford English Dictionary* and *Merriam-Webster’s*.

simple decision. They want to fix something that bothers them. Period. No Freudian analysis, no overthinking (Lesesne, 2006, p. 11).

The public role of celebrity and media surgeons such as Lesesne or ‘Christian’ in *Nip/Tuck* highlights another trend in the popular world of cosmetic surgery, in which cosmetic surgeons “may be the ultimate pin-up boys of a culture in which negotiations and understandings of morality and immorality are undergoing significant change”, and where the examination of “their desires, values, and positions may well provide unique insights about our contemporary worlds” (Jones, 2009, p. 187).

Jones (2008b) comments that notions of cosmetic surgery celebrating the transformative power of cosmetic surgery as illustrated by the examples above create an image of cosmetic surgery which continuously celebrates the ‘carnavalesque moment’ (p. 11). Bakhtin (1984) saw carnival as “a way of breaking down hierarchical barriers and power inequities” (Shields, 2007, p. 97), a way of being empowered and exerting agency. Cosmetic surgery is, particularly in the popular media, widely propagated as carnival, that is, “the right to confuse, to tease, to hyperbolise life; [...] the right to not be taken literally, not ‘to be oneself’” (Shields, 2007, p. 163).

By defying one’s (old) self and creating one’s new, or bringing out one’s ‘true’, ‘natural’ or ‘real’ self, as argued through some discourses of cosmetic surgery, the carnivalesque aspect of cosmetic surgery on a surface level enables liberation and “tak[ing] one’s life into one’s own hands” (Davis quoted in Bordo, 2009, p. 24). Nevertheless, as Bordo (2009) points out, the flip-side of the image of cosmetic surgery as self-determination presents a strong notion of self-deception:

The cheers of “agency” create a diversionary din that drown out the orchestra that is always playing in the background, the consumer culture we live in and need to take responsibility for. For cosmetic surgery is more than an individual choice; it is a burgeoning industry and an increasingly normative cultural practice. As such, it is a significant contributory cause of women’s suffering by continually upping the ante on what counts as an acceptable face and body (p. 24).

This development of the carnivalesque aspect of cosmetic surgery from an empowering to a disarming means of self expression and identity, and the physical dangers that accompany it, has, on the other hand, also given some impetus towards stronger regulation. In 2008, the German coalition parties used their right to initiate legislation to promulgate stronger restrictions for cosmetic surgery in minors. Similar debate erupted in Australia, where Queenslanders aged under 18 have been banned from cosmetic surgery since 2008 (Medew, 2008). In Victoria, the Medical Practitioners Board drafted new guidelines for before-and-after photographs used in advertising by cosmetic surgeons, responding to claims that they create false expectations of what surgery can achieve (Catalano, 2007; Catalano & Das, 2007; Miller, 2008).

The current cosmetic surgery ‘craze’ adds fuel to calls for stronger legal regulation and holds implications for further critical debate. Surgical tourism, surgery holidays and surgery safaris have come under scrutiny in public debate (Nash, 2009; Peacock 2007). Moreover, cosmetic-plastic surgery was the object of “a satirical dissection” in one of the 2008 Melbourne University student theatre productions. *Botchulism* (written by Fregmonto Stokes), a play which “carves out the body as a site of political invasion and control”⁴, is set inside the waiting room of a plastic surgery clinic. A young activist is detained there by the clinic’s surgeon to ensure his ‘rehabilitation’ through cosmetic surgery into mainstream society. This theme highlights the carnivalesque aspects of contemporary surgical society as emphasised by Blum (2003) and Jones (2008b).

In summary, this introduction does not expose all facets of cosmetic surgery in current society; rather, it aims to indicate its current widespread presence. It also aims to highlight the development of cosmetic surgery from a medical specialist area to its increasing commodification as a consumer product in the context of a makeover lifestyle ‘culture’. Furthermore, by conceding that cosmetic surgery in today’s popular discussion refers to a wide range of surgical and non-surgical procedures, my definition of cosmetic surgery in this thesis attempts to reconcile the previous controversies around the exact procedures encompassed by the term.

⁴ <http://botchulism.blogspot.com>

Cosmetic surgery is a zeitgeist phenomenon, and has been researched and continues to be researched in academic disciplines. Chapter 2 positions cosmetic surgery in a wider theoretical framework of issues of identity construction in an increasingly body-conscious society, theories of sociological and feminist embodiment and identity as well as issues of cultural identity and globalisation in the media.

Before the theoretical foundation of this thesis is addressed in Chapter 2, the following sections conceptualise the research questions and provide an overview of the structure of the study.

1.2 Research Questions

This thesis analyses representations of cosmetic surgery in the syndicated women's magazines *Cosmopolitan* and *marie claire* across three cultural contexts: Australia, Germany and Japan.

Cosmopolitan and *marie claire* were chosen because they are national syndicated magazines, which had a publication record over a significant period of time, allowing the data collection timeframe to comprise a representative period of nine years (1995-2003).

The choice of the three countries and the three cultural contexts they represent was originally based on my personal linguistic and cultural background. Nevertheless, I argue that in a context of syndicated magazines, as Machin and Van Leeuwen (2007) showed in their analysis of *Cosmopolitan* magazine, different cultural contexts are reflected in culture-specific differences in magazine articles.

Based on the findings of Machin and Van Leeuwen's (2003) study on *Global schemas and local discourses in Cosmopolitan*, it can be seen that "global media [...] allow content to be diverse and localised, but homogenise formats and genres to an unprecedented degree" (Van Leeuwen, 2008, p. 4). Taking this aspect into account, any choice and combination of national editions of syndicated magazines can be

expected to produce some differences, but overall major conformity prevails in structure and ideology of the magazine brand, as propagated by the parent publishing house.

I argue therefore that the selection of the specific countries and their respective local contexts is of secondary importance. I believe that some level of cultural diversity was ensured by choosing material from countries representing predominantly ‘European’, ‘Anglo-Saxon’ and ‘Asian’ cultures. Publishing house Hearst (2010a) locates Australia within its Asian market⁵; however, I argue that Australia is geographically part of Asia but also has Anglo-European traditions. Taking Machin and Van Leeuwen’s (2007) argument about global schemas and local discourses into account, the selected national editions of both *Cosmopolitan* and *marie claire* were thought likely to present at least some differences in content and narrative, thus providing interesting points of comparison for the study. The selection of national editions from affluent, Western countries might not generate the greatest diversity possible but it was assumed that generative differences, frictions and incongruencies would emerge.

I regard competent knowledge of the languages and linguistic resources of the selected print texts as crucially important. Fairclough (1992a) argues that

one source of difficulty for textual analysis is the use of translated data [...] To include textual analysis of translated data as part of the analysis of a discursive event [...] strikes me as a procedure which is open to serious objections. What light can analysis of the researcher’s English translation of a Gorbachev speech cast upon the political and discursive analysis of a Soviet, and Russian-language, discursive event? In my opinion, discourse analysis papers should reproduce and analyse textual samples in the original language, despite the added difficulty for readers (p. 196).

Malmkjær (2002) supports Fairclough’s argument above in similar terms:

The critical linguist cannot have any idea of the discursive meaning of a piece of language unless s/he possesses rich and accurate intuitions and understanding of

⁵ http://www.cosmo.asia/r5/cob_page.asp?category_code=cal

context, function and relevant social relations. Then the analysis will be plausible to the extent that this understanding of context is made explicit, and documented (p. 103).

My choice of three countries of whose languages I possess a level of expertise of either native (German) or near-native skills (English, Japanese) affords me the capacity to critically analyse linguistic structures and identify subtle undertones which otherwise might be ‘lost in translation’.

Having clarified the choice of the two syndicated magazines and their three cultural contexts, the further research questions I address are:

- *How are representations of cosmetic surgery discursively constructed in magazine articles in the Australian, German and Japanese editions of Cosmopolitan and marie claire?*
- *How do the discourses within narratives invite or distance the reader to engage in the ever-increasing complexities of the identity construction process in the current ‘liquid’ and ‘surgical’ society?*

By addressing these two research questions, the thesis investigates (through critical discourse analysis) how representations of cosmetic surgery influence ways that identity is constructed, and how the narratives of cosmetic surgery then position the reader to engage in identity construction processes. Furthermore, by exploring magazines in their different cultural contexts, the research also aims to investigate how discourses of cosmetic surgery are shaped by the homogenising influences of globalisation within a ‘localising’ context of syndicated magazines.

1.3 Overview of the Study

So far, I have defined cosmetic surgery and provided a brief overview of its development from its early stages to today. I also introduced the research questions and highlighted the aspects of representations of cosmetic surgery in the formal

context of syndicated magazines and the wider context of a ‘localised’, ‘liquid’ and ‘surgical’ society it aims to investigate.

The following chapters focus on the study’s theoretical background and the methodology, the analysis of selected magazine articles, and the outcomes of the study.

The theoretical framework of this study draws upon three fields. The first section of the literature review retraces the theoretical framework of sociology of the body, drawing from embodiment theory and Bauman’s (2000, 2005) theories of ‘liquid life’ and ‘liquid society’ to analyse the complexity of body modification and identity construction procedures. In conjunction with Bauman’s framework, I also refer to both Hall’s (1992, 1997) and Said’s (2003) theories of ‘otherness’, which identify the aligning of one cultural identity against another as a significant part of identity construction.

In the second section of the literature review, I draw upon aspects of sociological and feminist theory to research connections among body, identity and cosmetic surgery. This section focuses primarily on the contribution of feminist theory to overcome dichotomies such as nature – culture, body – mind, inner – outer body, material body – cultural representation. This section also traces the significant changes in feminist critique of cosmetic surgery over time and links them with the discourses of cosmetic surgery identified and analysed in this process.

In the last section of the literature review I return to Machin and Van Leeuwen’s (2007) study of discourses and narrative patterns in *Cosmopolitan*. This section links the current position of feminist research which considers cosmetic surgery first and foremost as a complex mixture of often contradictory discourses, to the simplifying and contradictory narrative patterns in women’s magazines.

Chapter 3 outlines the methodology applied to the study. Section 3.1 introduces and justifies the case study approach for my analyses and the selection of the three strands of my methodology: critical discourse analysis, visual analysis and narrative

analysis. A summary of the theoretical foundations of the three methods is provided in sections 3.2 to 3.4, which is followed by an illustration of the categories for analysis which I chose within those methods in section 3.5. I selected certain categories for the analysis in order to define clear linguistic and visual foci, affording specific insights into how discourses around cosmetic surgery are shaped.

The analyses are divided into two major parts, namely sections 4.1 to 4.3, which provide an overview of the entire dataset, whereas Chapters 5 to 8 present the findings of the analyses of six selected articles (five reports and one letter to the editor) grouped under four topics. These four analytical chapters first locate the article in its context and second, provide the reader with the original article, and in the case of foreign language articles, with the English translation. Each of these four case studies comments on the general theme and structure of the article and presents its findings in relation to discourse, narrative and social actors in text and visuals. The summary for each analysis highlights the interplay between linguistic and visual structures, linguistic and visual discourses and social context.

The overall findings of the analyses are summarised in section 8.5, with concluding Chapter 9 arguing that a deeper understanding of the interconnected relationship between text, context, visuals, symbols and argument in culturally and contextually appropriate ways will afford greater power to read critically. This is of great importance because the powerful discourses of agency and normalisation of cosmetic surgery obscure the fact that cosmetic surgery is a complex procedure of body modification whose often far-reaching consequences on a patient's psyche and identity are trivialised in popular discussion.

Magazine representations imply that cosmetic surgery has a contingent relationship to identity construction. I argue that critical reading permits a deeper understanding of how cosmetic surgery representations affect ways of negotiating culture and identity; thus, representations of cosmetic surgery provide "unique insights about our contemporary worlds" (Jones, 2009, p. 187). This study is a highly relevant contribution to a more reflexive negotiation of the ways that women (in this case) are discursively positioned by popular texts.

2. Literature Review

2.1 Introduction: Cosmetic Surgery – ‘A Simple, Strategic Solution’?

Chapter 1 argues that contemporary Western society is characterised by a ‘surgical’ or ‘makeover’ culture. Frequently in media discourse, cosmetic surgery is seen as empowering the patient to achieve a ‘quick fix’ to a bodily ‘flaw’ and thus also a swift remedy to related feelings of unhappiness.

This concept of cosmetic surgery is part of the construction of an idealised world against which sit characterisations of body modification procedures and identity construction processes reflecting far less ‘linearity’ and ‘solidity’. In particular Bauman’s (2000, 2005) concept of ‘liquid’ life frames a society which reflects rapid change, instability, constant anxieties around one’s identity and continuous pressure to reinvent oneself. In many instances, the process of ‘making oneself over’ manifests itself through instigating bodily change.

Thus, the issue of the representation of cosmetic surgery in popular texts is also far more complex than the linear solutions suggested overtly and tacitly by women’s magazines. In this chapter, I draw upon the literature and theory that enable me to explore the complexity of representations of cosmetic surgery discourses in greater depth.

Setting out from Bauman’s concept of ‘liquid’ society, this chapter retraces the complexities of (cultural) identity construction processes based on sociological and feminist frameworks which argue an intrinsic relationship of body to identity. Feminist theory in particular has contributed to a more flexible conceptualisation of the body as a ‘fluid’ entity on which continuously changing elements of culture, society and identity are inscribed. This capacity to mould the body is highlighted in modified bodies through modification regimes traditionally covering a wide range such as exercising, dieting and cosmetics, processes on which feminist theory and sociology have commented (Bordo, 1993; Cahill, 2003; Cash & Roy, 1999; Gillespie, 2003; Sassatelli, 2000).

Within modified bodies, because of the invasiveness of many surgical procedures, cosmetic surgery represents the epitome of body modification. Feminist theory has analysed and framed the cosmetic surgery body from cosmetic surgery's early stages, identifying the many and often contradictory discourses surrounding the surgical body and how they affect (mainly) women's sense of identity. The feminist view that cosmetic surgery is a phenomenon characterised by conflicting discourses is of relevance for this study since it is situated in the wider framework of simplifying magazine narratives.

In their analysis of discourses in the *Cosmopolitan* magazine, Machin and Van Leeuwen (2007) argue that syndicated magazines trivialise issues and offer a simple, strategic solution (p. 72). They identify this approach as the main discourse schema offered for problem solving, regardless of what the actual problem is:

The 'problem-solution' schema [...] plays a key role in *Cosmopolitan* magazine, but it is clearly not restricted to that context only. It interprets social practices as goal-oriented and strategic, even in matter of emotions (for example, anger, or love) and it can apply to a wide range of more specific discourses (for example, discourses of work, of personal relationship, anger management, and so on) (Machin & Van Leeuwen, 2007, p. 72).

Such 'simplifying' approaches are not only detectable in the "mirroring process", in which "the magazine reflects back an idealised image of the [...] reader" (Misson, 1994, p. 76), but in the way the overall content of the magazine material "potentially has a very powerful effect in creating its readers as particular kinds of human subjects" (Misson, 1994, p. 73).

Discourses and narratives of cosmetic surgery in popular texts, from the perspectives of patients, medical experts or reporters, are often represented as a strategic solution in order to first overcome a physical 'defect', to then pursue personal happiness and fulfilment, an eligible partner or success at work. Such straightforward approaches are situated in the construction of the idealised world of 'Cosmo-land', in which "women appear to have enhanced agency and power, indexed through visual and

textual discourses which are now globally circulated” (Machin & Thornborrow, 2003, p. 456). Such an illusory view is challenged by literature around body and identity emphasising that these entities are highly malleable and intricate notions.

The following section outlines the wider context of a ‘liquid modernity’ which characterises contemporary society and the social norms which shape this study. It also points out how the ‘fluidity’ of ‘liquid modernity’ influences questions of identity and identity construction. With the body being an inseparable part of identity construction, this section retraces embodiment theories and how the body as a means of identity construction has been affected by the instability of ‘liquid’ modern times.

A conceptualisation of ‘the body’ constitutes the core of this chapter. Following on from a discussion around identity construction and the role the body plays in this, I comment on feminist theory, and, more closely related to the issue of cosmetic surgery, on modified bodies. I then continue to link feminist theorising of the body to discourses around modified and cosmetic surgery bodies. Having illustrated different ways of how dominant discourses represent the cosmetic surgery body, I conclude by further interrogating the simplified representations of cosmetic surgery and surgical bodies in the context of syndicated women’s magazines.

2.2 Construction of Identities

2.2.1 Identity in ‘Liquid Modernity’.

Many terms and concepts exist to capture the essence and zeitgeist of post-industrial modernity, such as ‘high modernity’ (Giddens, 1991, p. 27) or ‘late modern age’ (Giddens, 1991), postmodernism and postmodernity. Bauman (2000) also mentions ‘the end of history’ (reference to Fukuyama, 1992), ‘second modernity’ (reference to Beck, 1992) and ‘surmodernity’ (p. 10). ‘Hypermodernity’ (Charles & Lipovetsky, 2006) is another closely associated concept. The term in this thesis used to characterise current society was coined by Bauman himself, who defines the current era as ‘liquid modernity’ (Bauman, 2000, 2003, 2005).

As Misson (2007) states, Bauman's 'liquid modernity' is conceptualised in opposition to the 'solid modernity' that preceded it:

“Liquid modernity” is basically an alternative term to postmodernity, and the liquid/solid modernity opposition is very much that between modernity and postmodernity, although [...] Bauman is keen to get away from a lot of baggage that the term “postmodernism” carries with it. His use of the term “liquid” has an expressive metaphorical force, and it suggests the kind of fluidity that characterises our current world: there is constant flux and instability and the shape of things change all the time and people change with them, as opposed to the more stable past, where there was a more solid sense of what society was about and how people related to themselves and each other in it (p. 2).

In relation to cosmetic surgery, I argue that the 'metaphorical force' of the term 'liquid' relevantly captures the plasticity of a modified body, which has undergone change and can be further changed at will in order to acquire one's desired shape and appearance. As Misson (2007) points out above, other terms do not communicate the notion of “constant flux and instability”, which appears integral to a cosmetic surgery body, as clearly as does Bauman's term. In preferring Bauman's term, I consciously emphasise the relationship between current 'liquid' society and the highly transformable cosmetic surgery body.

Bauman's (2000) original notion of 'liquid modernity' is based on the idea that “the long effort to accelerate the speed of movements has presently reached its 'natural limit'” (p. 10). Many facets of life are influenced by constant movement and change. Contemporary society promotes a lifestyle in which “the mind-boggling speed of circulation, of recycling, ageing, dumping and replacement [...] brings profit” (Bauman, 2000: p. 13-14). As I stated in the introduction of this chapter, the constant pressure to 'make over' one's life is increasingly played out on the body.

Bauman argues further that the fast pace of change is something that is not predominantly concerned with production and the consumer industry anymore, but has caught up with society as a whole. For instance, in *Liquid Life*, Bauman (2005) transfers the concept of 'liquidity' to people's everyday lives, highlighting the fact

that ‘liquid modernity’ is not simply an abstract concept, but a feature which affects people on a highly personal level:

‘Liquid life’ and ‘liquid modernity’ are intimately connected. ‘Liquid life’ is a kind of life that tends to be lived in a liquid modern society. ‘Liquid modern’ is a society in which the conditions under which its members act change faster than it takes the ways of acting to consolidate into habits and routines. Liquidity of life and that of society feed and reinvigorate each other. Liquid life, just like liquid modern society, cannot keep its shape or stay on course for long (p. 1).

As the previous paragraphs outlined, there are two major factors which Bauman identifies as characteristics for a ‘liquid life’, namely a sense of loss of identity and as a result of this, a continuous (re)creation of identity, and living life in an increasingly consumerist society. These two factors are interconnected and live interdependently of each other. This interplay is particularly apparent in body modification procedures such as cosmetic surgery, which are increasingly commodified lifestyle choices (see 1.1.3). Cosmetic surgery, which appears to provide a ‘quicker fix’ to bodily issues than dieting and exercise regimes, makes it possible to accomplish almost immediate change and satisfaction.

Bauman’s notion of ‘liquid’ citizens constantly reinventing their identity corresponds with Anthony Giddens’s (1991) concept of ‘reflexive beings’, who “are not, what [...] [they] are, but what [...] [they] make of [...] [themselves]” (Bauman, 2000, p. 75) and who “tend to develop multiple selves in which there is no inner core of self-identity” (p. 100). Once more, the current culture of body modification procedures and cosmetic surgery in particular provides far-reaching opportunities to make and remake one’s body and, through bodily changes, one’s identity.

Representing a certain facet of the current ‘liquid’ world, cosmetic surgery is thus part of an unprecedented ‘freedom of choice’, catering for a plethora of consumer desires stretching beyond predominantly materialist needs:

Shopping is not just about food, shoes, cars or furniture items. The avid, never-ending search for new and improved examples and recipes for life is also a variety of

shopping [...] We 'shop' for the skills needed to earn a living and for the means to convince would-be employers that we have them; for the kind of image it would be nice to wear and ways to make others believe that we are what we wear; for making the new friends we want and the ways of getting rid of past friends no longer wanted; for ways of drawing attention and ways to hide from scrutiny [...] there is no end to the shopping list (Bauman, 2000, p. 74).

What Bauman (2000) highlights here is that present-day consumerism is no longer about satisfying needs, but about desire, a much more volatile and evasive entity (p. 74). He points out that "as pleasurable it might be to run after any tactile, olfactory or visual sensation, through craving to satisfy these desires consumers might overlook the underlying fact that they are actually trying to find an escape from the agony of insecurity" (Bauman, 2000, p. 81). The desperate quest to find a solution to one's insecurities is highlighted in the vast and growing well-being and cosmetics industry, including dieting, dietary supplements, personalised exercise regimes, spas, beauticians and anti-ageing treatments, and increasingly, cosmetic surgery procedures.

Bauman (2000) argues further that the "ultimate work of art we want to mould out of the friable stuff of life is called '*identity*' [my italics]; however, as established above, 'identity' has ceased to be a stable entity in current society, and the search for identity is rather an "ongoing struggle to arrest or slow down the flow, to solidify the fluid, to give form to the formless" (Bauman, 2000, p. 82).

Similar to other body modification procedures, cosmetic surgery, in many instances, provides short-term rather than long-term solutions to a bodily 'flaw'. Drawing upon Bauman's (2000) premise above, I explore whether representations of cosmetic surgery reflect elements of current consumerism which reinforce insecurities and desires. Through creating 'freedom of choice' to mould one's identity into an idealised, stable and secure entity, representations of cosmetic surgery articulate with contemporary social consumer dynamics.

2.2.2 Global Identities.

With a change from the conceptualisation of identity during the Enlightenment as a stable entity to an ongoing process in ‘liquid’ times, the continuous search for identity has become a deeply engrained discourse in contemporary times.

As Bauman argues, ultimately there is no way of escaping the tensions surrounding identity construction in a ‘liquid society’; however, he also offers a way to look differently at this condition:

Perhaps instead of talking about identities, inherited or acquired, it would be more in keeping with the realities of the globalising world to speak of *identification*, a never-ending, always incomplete, unfinished and open-ended activity in which we all, be necessity or by choice, are engaged. There is little chance that the tensions, confrontations and conflicts which that activity generates will subside. The frantic search for identity is not a residue of preglobalisation times which are not fully extirpated but bound to come extinct as the globalisation progresses; it is, on the contrary a by-product of the combination of globalising and individualising pressures and the tensions they spawn. The identification wars are neither contrary to nor stand in the way of the globalising tendency: they are a legitimate offspring and natural companion of globalisation and, far from arresting it, lubricate its wheels
(Bauman, 2001, p. 152).

As stated above, identity is a continuous identification *process*, whose complexity is exacerbated by globalising forces, an aspect which will be further discussed in 2.2.3. The notion that identity construction processes reflect an increasing homogenising tendency within local cultural contexts is highly relevant to the analysis of the ways cosmetic surgery is represented in ‘glocal’ magazines, and will be further illustrated in the analyses in Chapters 5 to 8.

2.2.3 Constructions of Cultural Identities.

Similar to discussions around contemporary mass media, as indicated in the introduction of this chapter, the ‘glocal’ character of syndicated magazines and theories of cultural identity are also set in a broader context of globalisation and in particular, global cultural flows. As illustrated in Bauman’s concept of ‘liquid’ modernity, globalising forces are a significant part of the ‘fluid’ condition of current society. They have a significant impact on identification processes on a social, bodily, and cultural level:

The central problem of today’s global interactions is the tension between cultural homogenisation and cultural heterogenisation [...] The new global cultural economy has to be seen as a complex, overlapping, disjunctive order that cannot any longer be understood in terms of existing centre-periphery models (Appadurai, 1996, p. 32).

For Appadurai (1996), these “global flows occur...in and through the growing disjunctures among ethnoscaples, technoscapes, financescapes, mediascapes, and ideoscapes” (p.37). The scope of this study does not allow detailed discussion of these concepts; however, two of the abovementioned terms are of particular importance for this study, namely the concepts of ethnoscapes and mediascapes.

By ‘ethnoscape’, Appadurai (1996) means:

the landscape of persons who constitute the shifting world in which we live: tourists, immigrants, refugees, exiles, guest workers, and other moving groups and individuals constitute an essential feature of the world and appear to affect the politics of (and between) nations to a hitherto unprecedented degree (p. 33).

With the term ‘mediascapes’, Appadurai (1996) refers to:

the distribution of electronic capabilities to produce and disseminate information (newspapers, magazines, television stations, and film-production studios), which are now available to a growing number of private and public interests throughout the world, and to the images of the world created by these media. These images involve

many complicated inflections, depending on their mode (documentary or entertainment), their hardware (electronic or preelectronic), their audiences (local, national, or transnational), and the interests of those who own and control them. *What is most important about these mediascapes is that they provide (especially in their television, film and cassette forms) large and complex repertoires of images, narratives, and ethnoscapes to viewers throughout the world, in which the world of commodities and the world of news and politics are profoundly mixed*

[my italics] (p. 35).

In Appadurai's (1996) definition of various global 'spaces', the concept of the 'mediascape' in which images, narratives and the 'ethnoscape' (that is, representations of other people and cultures) become intertwined, provides a useful framework in which this study is also situated. The 'mediascape' of syndicated magazines, their reports and narratives reflects a world of globalised and commoditized life-styles to readers, and the publishing houses, their writers and editors as well as readers represent an 'ethnoscape' increasingly influenced by both homogenising and heterogenising influences. As part of the identity construction process, cosmetic surgery and discourses around cosmetic surgery are centred right at the interface of the 'mediascape' of syndicated magazines and the 'ethnoscape' of magazine readers and represented cosmetic surgery participants in magazine reports.

The complexity of global (cultural) flows with both homogenising and heterogenising tendencies is highlighted in the difficult process of *cultural* identity construction. Drawing upon concepts of cultural identity and cultural othering, the following section outlines some of the complexities of this process.

2.2.3.1 *The fragmentation of cultural identity.*

Similar to Bauman and other sociologists, Hall (1992) identifies an increasing 'fragmentation' of identity in current society:

The subject, previously experienced as having a unified and stable identity, is becoming fragmented; composed, not of a single, but of several, sometimes

contradictory or unresolved, identities [...] Identity becomes a ‘moveable feast’: formed and transformed continuously in relation to the ways we are represented or addressed in the cultural systems which surround us (pp. 276-277).

Bauman states that a continuous identification process involves the negotiation of not one but multiple identities. Hall (1992) highlights that:

late-modern societies are characterised by ‘difference’; they are cut through by different social divisions and social antagonisms which produce a variety of different ‘subject positions’ – i.e. identities – for individuals (p.279).

Hall (1992) thus argues that identities are contradictory, and that they cross-cut or dislocate each other. These contradictions operate both ‘outside’, in society, cutting across settled constituencies, and ‘inside’ the heads of each individual (p. 280). As feminist concepts of the modified body and discourses around cosmetic surgery (see 2.4) and the analyses of the selected magazine articles will illustrate, contradictory discourses form an integral part of cosmetic surgery narratives, in which a potentially infinitely malleable body is still determined by certain normative limits in the respective cultural context. In addition, these contradictions are also played out on an ‘individual’ level involving the patient’s personal cosmetic surgery ‘story’ and on a ‘societal’ level of what norms are considered as acceptable and unacceptable (see Bamberg’s concept of ‘big’ and ‘small’ stories in 3.3.2 and 3.3.3).

Hall’s (1992) notion that a ‘master identity’ solely based on one criterion such as class or nation has become obsolete (p. 280) is therefore highly relevant to a study analysing a phenomenon such as cosmetic surgery, through which the ‘dissolution’ of traces of a ‘master identity’, for example as evidenced in ‘ethnic’ features, are often actively sought out (see 2.5.7).

Even more significantly for this study, Hall (1992) elaborates further that in this way national identities are being eroded as a result of the growth of cultural homogenisation and the ‘global post-modern’, and that, as a result of that, national identities are declining but new identities of hybridity are taking their place (p. 300).

National identity is closely linked to cultural identity, and as a consequence of the ‘erosion’ of national and ‘master’ identities, cultural identity is also becoming increasingly ‘blurred’ in a ‘liquid’ world offering many life-style choices:

Consumerism has contributed to a ‘cultural supermarket’ effect (cultural homogenisation). Within the discourse of global consumerism, differences and cultural distinctions which hitherto defined identity become reducible to a sort of international lingua franca or global currency into which all specific traditions and distinct identities can be translated (Hall, 1992, p. 303).

In accordance with theories of identity construction and theories around contemporary syndicated media, Hall (1996) emphasises that cultural homogenisation is not a simple process and that:

globalisation must never be read as a simple process of cultural homogenisation; it is always an articulation of the local, of the specific and the global. Therefore, there will always be specificities – of voices, of positioning, of identity, of cultural traditions, of histories, and these are the conditions of enunciation which enable us to speak. We speak with instinctive voices; but we speak within the logic of a *cultural-global* [my italics] (p. 407).

As the last sentence of the quotation above indicates, cultural identity is based on a process in which one’s own cultural identity is defined and reinforced by demarcating oneself from the ‘cultural other’. The concept of a cultural ‘other’ is significant in relation to cosmetic surgery with an aim to ‘assimilate’ or ‘Westernise’ toward a standardised image of an ideal, ‘glocalised’ appearance (see section 2.5.7 and Chapters 6 to 8). Drawing upon Said’s (1978) work, the section below will now outline the implications of a ‘cultural other’ in the identity construction process and in relation to surgical bodies.

2.2.3.2 *Identity and the cultural 'other'*.

Hall (1992) states that “people who are in any way significantly different from the majority – ‘them’ rather than ‘us’ – are frequently exposed to [...] binary forms of representation”, a representation “through sharply opposed, polarised, binary extremes – good/bad, civilized/primitive, ugly/excessively attractive, repelling-because-different/compelling-because-strangely-exotic” (p. 229).

This ‘binary opposition’ implies that:

there is always a relation of power between the poles of a binary opposition from the perspective of the party in power in discourse (Hall, 1992, p. 235).

As feminist theory on the body also points out, bodies as carriers of identity have long been defined in dichotomies such as nature/culture, emotion/reason and sex/gender (see 2.3). Although feminist theory, particularly Grosz’s concept of a corporeal body, has strived to overcome such established binaries, an analysis of the discourses around the cosmetic surgery body suggests that dichotomous views predominate, especially in popular discourses such as magazine texts. The analyses in Chapters 6 to 8 will illustrate that magazine representations of cosmetic surgery predominantly draw upon discourses based on binaries, in particular when an assessment of cosmetic surgery is made from the “perspective of the party in power of the discourse”. This is the case in the articles used for analysis in Chapters 6 to 8, in which an ‘ethnic’ cosmetic surgery procedure is presented to a Western reader, who is distanced from the ‘victimised’ and ‘irrational’ patient from another cultural background.

This discursive construction of a cultural ‘them’, as mentioned above by Hall (1992) is, in his view, comprehensively outlined in Said’s work *Orientalism*:

In his study of how Europe constructed a stereotypical image of ‘the Orient’, Edward Said (1978) argues that, far from simply reflecting what the countries of the Near East were actually like, ‘Orientalism’ was the discourse ‘by which European

culture was able to manage – and even produce – the orient politically, sociologically, militarily, ideologically, scientifically, and imaginatively during the post-Enlightenment period’ (Hall, 1992, p. 259).

Said’s (1978) work explores representations of the ‘Orient’ over the centuries and the latest applications of the term in the times of post-colonialism, post-modernism and globalisation. For this research, and in particular for the construction of cultural identity through cosmetic surgery and how the reader is positioned in relation to this process, two specific aspects of Said’s extensive work are relevant: the construction of an ‘Orient’ and the concept of the ‘other’.

For Said (2003), the concept of the ‘Orient’ is based on the “relationship between the Occident and the Orient [...] [as] a relationship of power, of domination, of varying degrees of a complex hegemony” (p. 5). There is also an underlying idea of “European identity as a superior one in comparison with all the non-European peoples and cultures” (p. 7), which further reinforces the hegemonic beliefs of the West.

Said argues that evidence for this process of imposing Western representations onto the Orient is not only visible in the work of specialist scholars or in literature, but “this evidence is found just as prominently in so-called truthful texts (histories, philological analyses, political treatises) as in the avowedly artistic (i.e., openly imaginative text)” (Said, 2003, p. 21). As for journalistic text types, this process of imposing Western representations is also strongly evident in the magazines articles on which my analyses in Chapters 6 to 8 are based.

Furthermore, consistent with Hall’s statement on binary forms of cultural representation above:

the development and maintenance of every culture require the existence of another different and competing *alter ego*. However, the construction of identity – for identity, whether of Orient or Occident, France or Britain, while obviously a repository of distinct collective experiences, *is* finally a construction – involves establishing opposites and ‘others’ whose actuality is always subject to the

continuous interpretation and re-interpretation of their differences from 'us'. Each age and society re-creates its 'others' (Said, 2003, p. 332).

In this argument, an overlap with both sociological and feminist perspectives (which state that identity formation is influenced by representations of bodies and identities) is strongly identifiable. Nevertheless, the process of incorporating representations of an 'other' into identity formation processes is not only at play when another culture is involved. There is always a representation of an/the 'other' to which people juxtapose identities; however, the power of the representation of 'the other' increases when a culturally different 'other' is involved.

The surgical body is not only a surface on which various discourses of cosmetic surgery and identity issues are inscribed, but also a geographical site where cultural representations come into play. Feminist theory in particular has emphasised that surgical bodies are a site where interplay of power occurs, such as the omniscient surgeon exerting power over the patient, the empowered patient taking agency for her own decisions. These power relationships in surgical contexts are present in magazine articles in which cultural hegemony over 'a cultural other' is subtly or more often than not overtly expressed in a narrative. Referring to the 'simple, strategic solution' pattern typical of popular texts, cultural othering also reinforces "naïve belief in the certain positivity and unchanging historicity of a culture, a self, a national identity" (Said, 2003, p. 332), and ultimately, in the misleading belief that cosmetic surgery can provide straightforward solutions to obtain a physically and culturally flawless body.

While Said's (2003) work explored 'Orientalism' in a political context, it appears not too far-fetched to state that a "coming to terms with the West" (p. 321) in relation to appearance and cosmetic surgery can be observed in representations of cosmetic surgery, adding another discourse to the increasingly complex narratives shaping cosmetic surgery as identity formation.

Having commented on some of the network of (cultural) identity constructions, in the following section I focus on the concepts of body and identity in feminist theory, and

discuss how feminist views on the cosmetic surgery body in particular have changed over time. I then link these views of the cosmetic surgery body to the discourses that shape notions of a surgically modified body and identity.

2.3 Identity and the Body

In regards to the relationship between identity and body, the concept of the body as a carrier of meaning and an intricate part of identity plays a core role. With the development of a 'sociology of the body' from the late 1980s onwards, predominantly based on the theoretical works of Featherstone (1982) and Turner (1984), issues of body, embodiment and identity shifted beyond the traditional focus of sociology of analysing the body in the context of societal structures. This led to an increasing research interest in body modification as well as body and identity management in various disciplines, such as psychology, feminism and cultural studies. In all these fields, concepts of embodiment emphasise a substantial relationship between body and identity, in which the two cannot be considered as separate, but rather reciprocal entities in the identity construction process.

Sociology is a discipline with a broad focus, and concerned with all kinds of body modification practices. This includes movements such as modern primitivism, an area of identity management which challenges rather than conforms to current bodily ideals, and to a certain degree deviates from mainstream popular culture.

In contrast, other disciplines such as feminism, psychology, ethnology or cultural studies, as a result of their more narrowly defined concerns and theoretical foundations, focus exclusively on body modification and management techniques that reinforce current mechanisms of power, gender and standards of mainstream body management in society. These mechanisms include dieting, eating disorders, fitness regimes, and increasingly, cosmetic surgery. Nevertheless, embodiment theories challenge long-established unidimensional and deterministic assumptions of the body, and the abovementioned disciplines have all contributed to

reconceptualising the body as a diverse, complex and manifold element of reality and identity.

With ongoing debate, questioning and contestation of concepts of the body from many different disciplines, it has become increasingly difficult to clearly define what the body is, and which aspects of embodiment are to be foregrounded. Shilling (2007) argues that:

the body was a surface phenomenon which had become a malleable marker of identity and status subject to the vagaries of fashion of theorists of consumer culture. It was a vehicle for the cultivation of particular types of lived experience and a more balanced and sustainable relationship with the external environment for 'body therapists' and ecologists. It was a sexed object used to justify and reproduce women's subjugation for feminists. It was an object rendered passive by changing modes of control for Foucauldian analysts of governmentality. The body was changed into an uncertain and even rapidly disappearing remnant of pre-technological culture for those interested in suturing of meat and machines that occurred with the development of cyborgs. Finally, it became a positive conceptual category for those concerned with addressing theoretical problems in their own discipline (p.9).

As Shilling indicates, the body is a 'canvas' on which notions of society and culture, power and control, sex and gender, technology and consumer society can be inscribed, reflecting "status and identity". Cosmetic surgery as a by-product of the advancement of medical technology has particularly contributed to a new malleability of the body. The almost incessant possibilities for constant moulding and reinventing one's body provided by cosmetic surgery reinforce the fundamental importance of the body to identity in a 'liquid' modernity:

This 'tightening relationship' of body and self is associated with a range of phenomena, including the [...] emergence of many new styles of body modification [...] the body [is conceptualised] as a 'project' that is 'worked at and accomplished' as part of the construction of self-identity [...] by the increasing availability of

technology for rationalising the body, our physical being has come to be understood as one of the last arenas that we are able to control (Gimlin, 2006, p. 700).

In contrast, Bauman (2000) argues that the status of all norms, the norm of health and appearance included, has, under the aegis of 'liquid' modernity, in a society of infinite and indefinite possibilities, become severely shaken and fragile. In relation to 'all things bodily' this means that "what was considered normal yesterday might be found worrying and calling for remedy today" (Bauman, 2000, p. 79). The ability to explore the market of body modifications on offer is part of people's:

ability 'to shop around' in their supermarket of identities, the degree of genuine and putative consumer freedom to select one's identity and to hold to it as long as desired, that becomes the royal road to the fulfilment of identity fantasies. Having all the ability, one is free to make and unmake identities at will. Or so it seems" (Bauman, 2000, p. 83).

As Bauman (2000) and Gimlin (2006) illustrate above, the feeling of "control" and "freedom" body modification practices such as cosmetic surgery afford the patients are illusory and ambiguous. As Bauman (2005) emphasises, 'liquid life' is 'consuming life' (p. 9), and as tempting as the infinite freedom of choice might be, the flipside of the coin is that it feeds on the self's dissatisfaction with itself (p. 11). It is the notion of dissatisfaction with the body and the potential of the body as a mouldable carrier of identity which is relevant to the discussion around cosmetic surgery to a great extent:

The concept of the body as a potentiality has taken a novel turn, and it results from the convergence of two apparently contradictory tendencies: we now have the means to exert an unprecedented degree of control over bodies, yet we are also living in an age which has thrown into radical doubt our knowledge of what bodies are and how we should control them (Bauman, 2005, p. 90).

Bauman adopts a critical stance towards the deceptive freedom of choice in relation to body and identity modification. Furthermore, he argues that the underlying paradox to this problem is that:

however free or unfree our individual choice may be, the precept of choosing freely and of defining all actions as outcomes of free choice are most certainly *not* matters of individual choice [...] Although the right and the duty of free choice are tacit or/and acknowledged premises of individuality, they do not suffice to assure that the *right* of free choice can be used, and that therefore the practice of individuality will match the pattern that the *duty* of free choice requires. Many men and women most of the time, and many others on a few or quite numerous occasions, find the practising of free choice beyond their reach (pp. 21-22).

In more general terms, it can be argued that “the life of consumers is an infinite succession of trials and errors. Theirs is a life of continuous experimentation – but of no *experimentum crucis* that may usher them into a reliably mapped and signposted land of security” (Bauman, 2005, p. 84).

So where does this leave the body? As Bauman (2005) argues, “the body is now as ‘socially regulated’ as before, only the agencies presiding over regulation have changed, with far-reaching consequences for the plight of the embodied individuals charged with the management of the bodies they have and the bodies they are” (p. 100). The current stage of body management is primarily concerned with the fact that:

what you put *on* your body is admittedly a more expedient and comfortable way of keeping up with the fast-running times than what you do to your body. Things you put on (and of course take off and throw away soon after) may indeed follow/displace/replace each other at a mind-boggling pace, with a speed and frequency unmatched, to say, breast implants, liposuction, cosmetic surgery or even moving through the hair colour spectrum (Bauman, 2005, p. 85).

For Bauman (2005), “the road to identity is a running battle and interminable struggle between the desire for freedom and the need for security, and for that reason ‘identity wars’ are likely to remain inconclusive, and in all probability, unwinnable” (p. 30). This confusing situation is intensified by globalisation, which opens up increasingly fluid life settings and opportunities to consume and adapt to other cultural or ‘ethnic’ identities.

One of the academic disciplines of importance for this thesis is feminist theory of the body, since it represents the discipline from which the majority of recent analysis of the cosmetic surgery body stems. Although an interface between sociology, feminism and other related disciplines certainly exists, it is feminist theory which has contributed most to overcoming the established views of body-mind dichotomy – an essential step towards analysing, questioning and interpreting the often contradictory discourses of identity construction, and thus, body modification procedures and cosmetic surgery.

Before I provide an overview of the conceptualisation of body and identity in feminist theory, I will briefly comment on the issue of cultural identity construction, which, as pointed out above, is an integral part of identity construction in contemporary ‘liquid’ society.

2.4 Feminist Theorising of the Body

Feminism has reframed the way it interprets the cosmetic surgery body repeatedly, replacing a limited assessment of cosmetic surgery with multifaceted approaches, which reflect the complexity of cosmetic surgery in the current ‘liquid society’ more adequately.

However, as the following section and in particular my analysis of the magazine articles contends, discourses associated with the early feminist evaluations of cosmetic surgery, such as cosmetic surgery as victimhood and enslavement, restricting women’s agency, are still widely used in the representations of cosmetic surgery in women’s magazines. This indicates that these discourses continue to shape and reflect our perceptions of cosmetic surgery, and are often integrated into our individual narratives and arguments.

I first provide an overview of how the body has been conceptualised in feminist theory, and which key theoretical positions have had an influence on feminist theory of the body. The following sections outline the feminist theorising of the body in

more detail, stating why a departure by feminists from the previous theories of the body took place and which inconsistencies they tried to solve by redefining the body. In both sections below I also comment in detail on Grosz's concept of corporeal feminism.

I then cover the procedures of body modification and in particular cosmetic surgery discourses from a feminist perspective in section 2.5.

2.4.1 Grosz's 'Corporeal Feminism'.

Similar to sociology, feminism recognises that bodies matter in social relations and in multiple ways. Feminist body theory has undergone similar shifts as sociology, from the body in its most literal sense as the shell for a subject of 'flesh and blood' to the body as a surface on which certain societal structures are inscribed. The most important aspect for this thesis is the recognition of the body as a carrier of identity, or more precisely, of many different identities.

By challenging the established mind-body dichotomy, significant shifts in the conceptualisation of the body towards a complex entity have defined feminist concepts of the body in recent years. This has resulted into the questioning of other binaries in relation to bodily issues, such as nature/culture, sex/gender, femininity/masculinity, nature/technology and inner/outer body.

In order to separate these issues conceptually, I found Pilcher and Wheelan's categorisation of body theories in feminism is useful. As Pilcher and Wheelan (2004) argue, the range of concepts of the body in feminist study can be grouped into three broad categories: the body as nature, the body as socially constructed, and embodiment (p. 6).

The first perspective of body as nature as framed in the early stages of feminist theory is based on the biological differences between men and women, which in turn are reflected in social inequality. Broadly, this approach contributed to feminist

discussions of how ‘real’ equality between men and women could be achieved, for example through proper social recognition for women’s biologically child nurturing abilities.

Similar to sociological theory, feminists also apply constructionist perspectives, which regard the body as predominantly socially and culturally constructed. This approach has been criticised for neglecting the body as a real and physical entity. With the arrival of the ‘material girl’ (Bordo, 1993) and the rise of body modification and management practices, the concept of a body that is shaped by the social and cultural representations to such an extent that it ‘disappears’ clearly shows its limitations.

For this thesis, embodiment perspectives provided fine-grained insights into the dynamics of a cosmetic surgery body. Embodiment theory merges the concepts of a body as both natural and socially constructed; that is, the body is conceptualised as a physical entity, which is simultaneously defined through social, cultural and discursive practices. Furthermore, embodiment theories regard the body as constantly in flux, framing the body as an ongoing project, which is continuously shaped and reshaped by culture and society as well as time and space. This impact is being reflected in the physical, and in particular, a modified body, which then in turn can only be understood and interpreted through the social and cultural context in which it is situated.

Grosz’s (1994) theories shaping her concept of ‘corporeal feminism’ most comprehensively defines a feminist theory base on the concept of embodiment. Similarly to sociological theory on inner and outer body, ‘corporeal feminism’ aims to bridge the gap between dichotomies that had become established distinct binaries. As Grosz (1994) notes in the introduction to *Volatile Bodies*, the body has always seemed to be defined by the discursive practices of the natural sciences such as medicine and biology. Grosz’s approach reflects a widely shared concern in related disciplines, namely that such a conceptualisation is limiting, because it restricts the body to a purely natural entity. The innovative aspect in Grosz’s (1994) theory of corporeal feminism lies in the approach to rethink the body in such a way it is not

caught between concepts of a “‘real’, material body on one hand and its various cultural and historical representations on the other” (p. x).

This has far-reaching implications for the concept of the body, since the boundaries of how we define our body or bodies will increasingly become blurred. As Grosz (1994) states:

the body is a most peculiar “thing”, for it is never quite reducible to being merely a thing; nor does it quite manage to rise above the status of thing. Thus it is both a thing and a nonthing, an object, but an object which somehow contains and co-exists with an interiority [...] Bodies are not inert; they function interactively and productively. They act and react. They generate what is new, surprising, unpredictable (p. xi).

Grosz’s conceptualisation of a “corporeal body” is a dynamic body, which cannot be contained in a single framework, or frameworks which try to define them. What the body is will always depend on the individual, time and space, and many other factors, which can never be completely controlled or analysed through the existing social and cultural practices.

Grosz argues that if women are to develop a true mode of self-understanding and a strong position from which to challenge well-established (male) paradigms, the difference of the female body must be articulated from a multi-faceted point of view, which cannot remain restricted to purely biological considerations. In Grosz’s (1994) theory of corporeal feminism, it is significant that in order to overcome established dichotomies and male paradigms, it is necessary to stop thinking about the body in singular or, as Grosz phrases it, accept that:

there is nobody as such: there are only *bodies* – male and female, black, brown, white, large or small – and the gradations in between [...] There are always only specific types of body, concrete in their determinations, with a particular sex, race, and physiognomy. [...] bodies are necessarily interlocked with racial, cultural, and class particularities (p. 19).

Furthermore, a feminist theoretical approach to concepts of the body:

must avoid the dichotomous accounts of the person which divide the subject into mutually exclusive categories of mind and body. Although within our intellectual heritage there is no language to describe such concepts, no terminology that does not succumb to versions of this polarization, some kind of understanding of *embodied subjectivity*, of *psychical corporeality*, needs to be developed

(Grosz, 1994, pp. 21-22).

In sum, the body is “a site of social, political, cultural, and geographical inscriptions, production, or constitution” (Grosz, 1994, p. 23). This implies that the potential of the body as a ‘cultural site’ is reinforced on the modified body through deliberate changes. In particular in cosmetic surgery bodies, specific meaning is inscribed on the body in order to communicate a modified, ‘chosen’ identity. The complexities of the interplay between the modified body and its implications for the identity construction process are the subject of the following section.

2.4.2 The Corporeal Body and Identity.

In relation to a cosmetic surgery body, within Grosz’s theories of a corporeal body as outlined above, her concepts of body parts and substances are significant. Building on theories of social extension of the body by Freud and Schilder, Grosz (1994) concludes that “human beings never simply *have* a body”, but that “the body is always necessarily the object and subject of attitudes and judgments. It is psychically invested, never a matter of indifference” (p. 81).

Grosz acknowledges that the way people respond to certain parts of the body with approval or disapproval and thus psychologically, emotionally and – in terms of cosmetic surgery – medically and financially invest in them, represents a significant part of identity construction.

Grosz's (1994) analysis of Alphonso Lingis's interpretation of body tattoos argues that in general, "inscriptions" on someone's body function as channels to communicate

cultural and personal values, norms, commitments according to the morphology and categorization of the body into socially significant groups [...] The body is involuntarily marked, but it is also incised through "voluntary" procedures, life-styles, habits and behaviours (p. 142).

Grosz (1994) emphasises that body modifications are not imposed on the individual, but are sought out (p. 143), which implies that bodily standards are either actively applied or subconsciously manipulated by those concerned. She considers the 'investment' in certain bodily changes as a reflection of the subject's individual environment. Also, because these 'investments' are malleable and continually changing, they are potentially continuously open to new meaning (p. 81), thus reflecting the constant dynamics of 'liquid' society.

Grosz (1994) argues convincingly that the body is in us and that we are in the body, so body and identity are inseparable entities. In relation to issues of cosmetic surgery, Grosz's theory of corporeal feminism dismantles early feminist analysis of cosmetic surgery, which remained caught in dichotomies and simple power structures.

Next I retrace the feminist departure from an established view of the body characterised by binaries towards a more complex concept as evident in the feminist theorisation of modified and cosmetic surgery bodies. The next section also frames some of the dominant discourses around cosmetic surgery and links them to the relevant feminist theories to which they are connected.

2.5 Body Modification and Identity

2.5.1 The Modified Body and Identity.

As I illustrated above, discussions in sociology and particularly feminism, challenging now unsatisfactory theoretical models such as mind-body-dualism, have led to a new approach to bodily matters, and a more varied approach to analysis of body management and body modification practices.

With the wider availability and social acceptance of cosmetic surgery, feminist analysis began to discover this as an area for further scrutiny, thus adding to the more ‘traditional’ analyses of scientific misreadings of female bodies. Other areas in which traditional views were challenged were the placement of female bodies in social and political orders (for example, pregnancy and reproductive rights issues as well as issues of race and class, as in the assimilation processes of non-Caucasian women), the embodiment of cultural ideals and allegories in the female body as well as how these have been etched into the flesh and blood of the very real and concrete female bodies by certain cultural practices (for example, foot-binding in China). Furthermore, certain social practices, such as weight management and weight loss, dieting practices, eating disorders such as anorexia nervosa and bulimia, extreme exercise and the feminine ideal of slenderness overall, were approached from different analytical angles.

With cosmetic surgery permeating all levels of society and culture, body modification was undergoing modification itself. It was gradually moving away from a traditional way of managing one’s body through the hard work of pure will-power, determination and a strict diet or fitness routine to a system which was not determined by a strict regime anymore, but a potentially magical transformation. The figure of “the material girl” (Bordo, 2003, p. 245), who is in a position to alter her body any way she likes with the help of body sculpting practices and, increasingly, cosmetic surgery, personified the notion of nearly unlimited malleability of the female body. This was also informed by the increasingly varied possibilities new

medical technology provided, which enabled the transformation into ‘technobodies’ (Balsamo, 1996).

These realisations represented a major turnaround in feminist analysis of body management, since a new, irreversible and, for some feminists, a corrupted stage of the body as a mouldable machine had been reached:

In a culture in which organ transplants, life-extension machinery, microsurgery, and artificial organs have entered everyday medicine, we seem on the verge of practical realization of the seventeenth-century imagination of body as machine [...] Pursuing this modern, determinist fantasy to its limits, fed by the currents of consumer capitalism, modern ideologies of the self, and their crystallization in the dominance of United States mass culture, Western science and technology have now arrived, paradoxically but predictably (for it was an element, though submerged and illicit, in the mechanist conception all along), at a new, postmodern imagination of human freedom from bodily determination. Gradually and surely, a technology that was first aimed at the replacement of malfunctioning parts has generated an industry and an ideology fuelled by fantasies of rearranging, transforming, and correcting, an ideology of limitless improvement and change, defying the historicity, the mortality, and indeed, the very materiality of the body. In the place of that materiality, we now have what I will call cultural plastic

(Bordo, 2003, pp. 245-246).

As highlighted in Bordo’s statement above, technology, modern medicine and cosmetic surgery have brought about a significant change in how we perceive our bodies and identities. This view supports the argument that we live in “a culture of cosmetic surgery” (Blum, 2003, p. 49), and the cosmetic surgery body has increasingly become a ‘simple and strategic’ carrier of discursive meaning and diverse identities.

The following sections, which incorporate mainly feminist and also some sociological theory on the cosmetic surgery body, illustrate how various and new views and discourses of the cosmetic surgery body have evolved over time. Similar to Fraser’s (2003) approach, I identify discourses in the work of feminist theorists

that represent common views in women's magazines (p. 120). Considering that magazine articles as journalistic genres represent recontextualised discourses, Fraser's tentative claim that there is a degree of intertextual exchange between cosmetic surgery discourses in feminist theory and popular texts (for example the ongoing debate of cosmetic surgery as victimhood or agency) is of significance.

2.5.2 The Invasion of the Scalpel: Feminist Views of Cosmetic Surgery.

Tong and Lindemann (2006) claim that feminist theory of the 1970s and 1980s considered cosmetic surgery and the cosmetic surgery body as a product of the oppressive powers of patriarchy, male dominance and violence (p. 184). They stress that feminists of that era were not opposed to plastic or reconstructive surgery on medical grounds (resulting from trauma or disease) but they displayed a strong objection towards 'beauty surgery', that is, cosmetic surgery for solely aesthetic purposes (p. 184).

Feminist theorists of that time consider the 'plastic surgery boom' as the last and most extreme stage of how women are being manipulated by socially generated and accepted standards of beauty. For them, cosmetic surgery is not about freedom and self-enhancement, but a 'dictatorship' of values and ideals. This pressure is exerted by the beauty industries and the male domination that has an interest to 'enslave' women in relation to their personal happiness and fulfilment, by making them believe that their bodies are 'flawed'.

Another issue which troubled some feminists from the 1970s until the early 1990s was who performs and receives most cosmetic surgery. Most cosmetic surgeons are men, but the majority of cosmetic surgery patients are women (Tong and Lindemann, 2006, p. 185). This gender imbalance in relation to appearance, body management and power is also highlighted in the works by non-scholarly feminist writers of that period such as Faludi (1992) and Wolf (1990). Both argue that this "double-standard" is a by-product of our (Western) societies, which support dominant

discourses in society about the differences between the roles of men as the rational authority and women as the pleasing and beautifying factor.

In her essay *Women and the knife: Cosmetic surgery and the colonisation of women's bodies*, Morgan (1991) summarises the concerns of many feminists who share her highly critical views towards cosmetic surgery:

In Western industrialised societies, women have also become increasingly socialized into an acceptance of technical knives. We know about knives that can heal [...] But we also know about other knives: the knife that cuts off our toes so that our feet will fit into elegant shoes, the knife that cuts out our ribs to fit our bodies into corsets [...] And now we are coming to the knives and needles of cosmetic surgeons – the knives that promise to sculpt our bodies, to restore our youth, to create beauty out of what was ugly and ordinary. What kind of knives are these? Magic knives. Magic knives in a patriarchal context. Magic knives in a Eurocentric context. Magic knives in a white supremacist context (p. 32).

Morgan is highly critical of cosmetic surgery by arguing that all positive associations with cosmetic surgery, such as choice, liberation and voluntariness are in reality self-inflicted conformity, colonisation and technological imperative.

2.5.3 Discourses of Victimhood and Vanity.

The representation of cosmetic surgery recipients as ‘cultural dopes’, ‘scalpel slaves’ or ‘surgery junkies’ and the tendency towards a patriarchal conspiracy theory has been widely criticised by other feminists.

These views have been criticised as limiting since they fail to see women as agents and cosmetic surgery as a set of discourses. This aspect has become more obvious with the latest developments of cosmetic surgery with all its surgical and non-surgical procedures (‘lunch-time lifts’), moving on from an ‘operation’ to a commodity, “a purchase, characterised by the rhetoric of fashion, consumerism and self-presentation” (Jones, 2008b, p. 26).

Nevertheless, in contrast to feminist discourse, in which (as outlined in section 2.4.4) discourses of manipulation and victimhood are losing their impact, “the portrayal of surgery victims as hapless victims of social pressure and advertising also emerges” (Fraser, 2009, p. 108). This notion, as identified by Fraser, permeates all four of the analyses, in particular those relating to the articles in which cosmetic surgery is represented as a means of Westernisation (see Chapters 5, 7 and 8).

Another theme closely linked to strongly critical views of cosmetic surgery is the discourse of vanity, although Fraser (2003) points out that vanity is a rarely utilised repertoire in feminist discourse, stating Young’s (1991) writing as one of the few early feminist texts addressing the concept of vanity and the body. Nevertheless, Fraser (2003) also notes that the negatively connoted view of vanity informs discourses in women’s magazines, where it is still widely attributed (p. 119), in particular in representations of failed or ‘bizarre’ and ‘extreme’ cosmetic surgery (p. 120).

Towards the end of her essay, Morgan (1991) suggests “two performance-oriented forms of revolt” (p. 45). The first form involves valorising ugliness, so women might in fact “bleach [...] hair white and apply wrinkle-inducing ‘wrinkle creams’”, the second “the commodification of cosmetic surgery, a world in which ‘Beautiful Body Boutique’ franchises respond to the particular ‘needs’ of a given community (p. 46). However, as Jones (2008b) notes, “ironically this demystification of cosmetic surgery has actually happened in the years since Morgan wrote her piece” (p. 28). Jones (2008b) argues further that these days “we are all cosmetic surgery recipients, we are all makeover citizens, we need to accept that “cosmetic surgery is now a meaningful part of our world” (p. 29).

This gradual change of the image of cosmetic surgery from a major medical procedure to a ubiquitous consumer product requires a more differentiated examining of cosmetic surgery rather than labelling it simplistically as a beautification tool for brainwashed women.

2.5.4 Discourses of Agency.

Based on the concerns outlined above, a major reassessment of cosmetic surgery was achieved with Davis's (1991) essay *Remaking the she-devil: A critical look at feminist approaches to beauty* and Davis's (1995) *Reshaping the female body: The dilemma of cosmetic surgery*. The latter was a research project on elective cosmetic surgery in the Netherlands, the only country in Europe where cosmetic surgery for solely aesthetic purposes is included in the basic health care package, if the appearance of the patient is "outside the realm of normal" (p. 6).

In her research, Davis (1995) conducted three empirical studies: firstly, an exploratory study to gain insight into the decision-making process (regarding all kinds of cosmetic surgery) from the women's point of view (the women had already had surgery or were planning to undergo one); secondly, a clinical study (focus on breast augmentation as a paradigm case for investigating women's decision to have cosmetic surgery), in which her aim was to get more information regarding the motives of women from various socio-economic backgrounds. Lastly, Davis observed patients during their consultations, when the final decision of whether surgery would be covered by the national health insurance was made. Davis focused on how patients presented their case and how medical representatives decided what conditions were "abnormal".

Davis (1995) linked different issues of identity, agency and morality, arguing that her participants chose to undergo cosmetic surgery for themselves; that is, they could not be exclusively considered and they did not consider themselves to be victims of media and social indoctrination. Davis (1995) found that even if surgery went wrong, women claimed that they did not regret their decision.

The main result of Davis's (1995) study was that women saw cosmetic surgery rather as a means to determine their identity than a way of enhancing their looks. Choosing cosmetic surgery was "not about trying to be beautiful, but rather about becoming 'normal', the women said "they did not seek to stand out as attractive but rather to blend in" (Jones, 2008b, p. 23). Jones (2008b) points out that Davis's (1995) research

might be slightly flawed; some of the statements, despite not being deliberately manipulative, have to be considered in the specific setting that generated them. Jones (2008b) argues that some of the arguments used by the women – claiming to feel deformed or abnormal and wanting surgery to blend in – were at least partly a result of knowing that a certain discursive rhetoric had to be used to be successful in receiving surgery (p. 25).

Davis's (1995) claim that cosmetic surgery is "first and foremost [...] about taking one's life in one's own hands" (quoted in Bordo, 2009, p. 24) has been criticised by other feminist theorists (Bordo, 1997, 2009) as simplifying, and Davis (2009) revised her definition of agency as a sociological concept in analysing cosmetic surgery.

Still, Davis's (1995) conclusion that "cosmetic surgery can be an act of empowerment even while it is a symptom of oppression" (quoted in Jones, 2008b, p. 23) is a significant shift towards a more complex approach to issues related to victimhood and agency repertoires in research related to cosmetic surgery.

In investigating how agency discourses are constructed in women's magazines, Fraser (2009) identified four different agency repertoires, namely the use of cosmetic surgery 'as a very good investment', the exercise of agency by 'doing it for me', an active process of 'weighing the risks against the rewards', and at the end of the agency scale, the 'manipulation and victimhood' repertoires as stated above (pp. 104-108). In my analyses of selected magazine articles, these four repertoires can be found in the same article – even in the representation of the same protagonist. This serves to articulate the many layers of identity construction, especially in a cosmetic surgery body, where both overtly and more subtle contradictory discourses are at play.

Some of these repertoires identified by Fraser (2009) integrate elements of the discourses of cosmetic surgery as agency and commodity. The following section comments on the commodification discourse, which involves various aspects already mentioned such as agency, choice and investing in one's body.

2.5.5 Investment Discourse: Cosmetic Surgery as a Commodity.

The discussion of the increasing commodification of cosmetic surgery is strongly embedded in a wider discussion around body management and body modification as part of modern consumer culture (see 2.2).

As Negrin (2008) asserts, “a new conception of the self has emerged – namely, the self as a performer – which places great emphasis upon appearance, display, and the management of impressions [...] Whereas previously, greater emphasis was placed on other sources of identity formation than that of personal appearance, increasingly, the self is defined primarily in aesthetic terms – that is, in terms of how one looks rather than in terms of what one does” (p. 9).

Giddens (1991) argues similarly by stating that “the project of the self becomes translated into one of the possessions of desired goods and the pursuit of artificially frames styles of life” (p. 198). In Negrin’s (2008) words, “one’s identity is defined in terms of the image one creates through one’s consumption of goods, including the clothes and other body adornments one wears [...] the way we shape and adorn our bodies is now taken to be constitutive of our identity” (p. 14-15). The notion of commodification and ready availability of body modification practices such as cosmetic surgery is also highlighted in the terms ‘surgical culture’ (Blum, 2003) and ‘makeover culture’ (Jones, 2008b) to describe aspects of contemporary consumer society.

The discourse of cosmetic surgery as a lifestyle choice is given an interesting twist in Elliott’s (2008) interpretation of cosmetic surgery as a necessary investment in one’s body in order to stay competitive in the volatile world of the new economy:

Increasingly, cosmetic surgical culture goes all the way down in our society [...] Cosmetic surgery is simply another lifestyle choice, alongside fashion, fitness and therapy [...] My argument is that the new economy spawned by globalization intrudes traumatically in the emotional lives of people – with many scrambling to adjust to today’s routine of corporate redundancies, [including] the dramatic ways in

which corporate lay-offs, downsizings and offshorings are affecting people's sense of identity, life and work. [...] Many have reacted to this sense of social dislocation and economic insecurity [...] by turning to forms of extreme reinvention in general and cosmetic surgery in particular. Many are calculating that a freshly purchased face-lift or suctioning of fat through liposuction is the best route to improved lives, careers and relationships (p. 9).

Elliott (2008) supports his view by stating that the commodification of cosmetic surgery is closely related to mass media and celebrity lifestyles. He argues that celebrity culture and celebrity plastic surgery in particular as represented in the popular mass media constitute a social arena in which 'ordinary' people are increasingly exposed to bodily concerns:

Celebrity-inspired self-transformation is, in broader social terms, condensation of how many individuals now experience and define their lives as fluid, multiple, even liquid (Elliott, 2008, p. 56).

The aspect of self-transformation which Elliott addresses here draws upon a "celebrity-inspired", glamorous makeover of one's self. These, and in fact any surgical body modification, do not only happen on a surface level of appearance, but also on a deeper level of identity transformation which is often accompanied by an intention or hope to 'make over' other aspects of one's life by investing in the modification of a body part that 'bothers' us.

The linear approach to cosmetic surgery, in which a bodily transformation also generates a significant improvement of the patient's private and professional life, forms a powerful discourse in many magazine narratives, and was apparent in all my analyses, in particular in the analyses described in Chapters 5, 7 and 8.

2.5.6 The All-Transforming Power of Cosmetic Surgery: The Cinderella Discourse.

Various analyses of celebrity culture in popular media highlight the power of transformation that is associated with cosmetic surgery, which is increasingly used as a synonym for self-reinvention (Elliott, 2008). Television shows such as *I want a famous face*, *The Swan* and *Extreme Makeover* manage to transfer some of the glamour of the celebrity world into the potential for self-transformation into the life of non-celebrities (Elliott, 2008; Pitts-Taylor, 2007).

As Pitts-Taylor (2007) states, cosmetic surgery television draws upon powerful discourses of transformation. In this discourse, cosmetic surgery becomes a means for ‘revealing the inner self’, re-establishing normalcy, demonstrating self-care and empowerment, and ultimately, creating ‘a new me’ (p. 46):

As in the marketing lingo of the Army that one can “be all you can be”, what is suggested here is that one’s hidden potential can be discovered and affirmed. You can look like your better self. You can embrace your existential possibilities that were stunted by an ugly body or a strained, difficult life (Pitts-Taylor, 2007, p. 46).

Cosmetic surgery as a means of self-transformation is linked to the notion of agency, because the decision to undergo a surgical procedure requires a negotiation process to define what one would like to achieve, how and why. Another discourse closely linked to the ‘Cinderella discourse’ of cosmetic surgery is the discourse of the surgeon as an artist (Fraser, 2003; Jones, 2009). Similar to the prince transforming Cinderella’s life for her, the surgeon is in a position to remould the patient’s looks and through this, contribute to a new identity. As Jones (2009) argues, the surgeon as Pygmalion has many faces, and can step into different roles such as father, creator, lover and artist, reinvoking paternalistic power structures.

In the original version of ‘Cinderella’ by the Grimm brothers, one of the two nasty step-sisters of Cinderella decided to cut off part of her foot to fit into the lost shoe. As tempting as the transformative power of cosmetic surgery is, some sacrifices must be made to gain access to it, which can be financially transferring some agency into the hands of a (male) surgeon or, as Elliot (2008) states, put oneself into a complex decision-making process:

Consumer culture may drive an individual to see the surgical enhancement of the body as a desirable goal or positive outcome; yet in doing so the consumer will need to *make all sorts of complicated reckonings* [my italics], based on reflexive assessment of competing products and procedures, about cosmetic surgery. None of this is necessarily straightforward, and the decision to undergo a surgical procedure or service cannot be taken for granted (p. 93).

It is interesting to note that the straightforward transformative power of cosmetic surgery as expressed in the Cinderella discourse, which complements simplified magazine narratives, is juxtaposed with the reality of a complicated justification process in Elliot’s view. The underlying complications that are part of any identity construction process cannot be completely obscured by powerful narratives such as the Cinderella discourse, even if this might be the case on a surface level. As rational and strategic the investment and Cinderella discourses might appear, a closer look reveals their power of transformation is illusory. Bordo (2009) refers to this notion as the “mystification” (p. 27) of the possibility of various body modification practices, of which cosmetic surgery is the one which has potential to ‘just transform’ to the greatest and most ‘miraculous’ extent.

The complexity of considerations which constitute one’s own process of making sense of the various discourses available, and of creating a narrative which justifies one’s decision for (or against) cosmetic surgery is reinforced when cultural identities are being negotiated. This is another notion of cosmetic surgery which has come under increasing investigation under a feminist lens, as outlined below.

2.5.7 Cultural Homogenisation: The Discourses of ‘Ethnically Appropriate’ Cosmetic Surgery.

The discourse of ‘ethnic’ and ‘ethnically appropriate’ cosmetic surgery in feminist discussion is embedded in the context of interpreting cosmetic surgery in general as a racially motivated step of transformation.

As Heyes (2009) points out, Gilman (1999) “is the best-known proponent of the view that the modern history of cosmetic surgery needs to be understood primarily as an intervention into racial psychology and ethnic belonging, rather than only a form of gender normalization and beautification” (p. 192). Haiken’s (1997) work also comments on the connectivity between race, ethnicity and cosmetic surgery.

Ethnic cosmetic surgery has become a focus of feminist research (Davis, 2003; Jones, 2008b; Pitts-Taylor, 2007), in particular since the publication of Kaw’s (1993) paper on Asian eyelid surgery.

As Heyes (2009) argues, in feminist analysis, the discussion around ethnic cosmetic surgery, and especially around Asian eyelid surgery, has evoked a ‘double-standard’ contrasting the cultural ‘own’ with the cultural ‘other’. Through this, greater moral anxiety about ‘ethnic’ cosmetic surgery appears to prevail in some feminist responses as well as in popular representations of cosmetic surgery (p. 192).

Heyes (2009) adds that:

although it might seem [...] as though there is a substantial feminist debate on contemporary cosmetic surgery, nationality and diaspora, racial norms, and ethnicity, in fact there is surprisingly little published work that directly takes up these issues – although there is plenty of discussion of Western white women’s relation to cosmetic surgery. Thus in some ways, the best-known humanistic writing on cosmetic surgery encourages a theoretical disjunction between race/ethnicity and gender in ways that structure both the ‘discursive spaces’ available to individuals, and the larger ethical and political framing (p. 193).

In relation to ‘discursive spaces’ available to people undergoing ‘ethnic’ cosmetic surgery, Davis (2003) emphasises this ‘double-standard’ by stating that:

cosmetic surgery when undertaken by people of colour or the ethnically marginalised is framed by a political discourse of race rather than beauty. Whether they are positioned in a narrative of racial passing or cultural assimilation, ethnic or ‘racial’ minorities generally have less discursive space than their white counterparts for justifying their decisions to have cosmetic surgery (p. 84).

Ethnic cosmetic surgery is a controversial practice because it touches upon how the construction of race through the body is linked to racist practices of inferiorisation and exclusion. It brings up the uncomfortable fact that in ostensibly democratic societies individuals continue to be defined as ‘Other’ and are, therefore, forced to find ways to disguise their ‘other-ness’ [...] in order to improve their life chances (p. 101).

Nonetheless, as Davis (2003) points out, this juxtaposing of a Western beauty ideal with a cultural, ethnic’ other is obscured in various ways. As Davis (2003) states, there are specific medical textbooks on cosmetic facial surgery for ‘ethnic’ patients, arguing that “in a culture where self-improvements is almost a moral imperative, it is apparently ‘natural’ and ‘normal’ for anyone – particularly if she is a woman – to want to look her best (p. 91).

Davis (2003) also states that some authors and surgeons defend ‘ethnic’ cosmetic surgery as “a newly won ‘right’ for previously excluded groups. Just as people of colour should have access to higher education, well-paid jobs, and homes in suburbia, they should be able to take advantage of cosmetic surgery (p. 92).

The powerful discourse of ‘ethnically appropriate’ cosmetic surgery (Pitts-Taylor, 2007, p. 31), as highlighted in the rhetoric of medical experts, emphasises further that “cosmetic surgery on ‘ethnic features’ is not about eradicating ethnicity. The goal is to create the ideal characteristics of beauty within each ethnic category” (Davis, 2003, p. 92).

However, as Pitts-Taylor (2007) points out, the logic of positioning ethnic cosmetic surgery as a practice of self-definition is flawed:

But although ethnically appropriate cosmetic surgery might answer current bioethical issues about race and cosmetic surgery, it surely generates new ones. For instance, it reifies racial categories, universalizing beauty within ethnic groups and utilising an essentialist logic that emphasises innate rather than social meaning of race. It also demands that individuals see their authentic selves in racially or ethnically specific terms (p. 32).

As Heyes (2009) illustrates, the acceptance of ethnically appropriate cosmetic surgery is reinforced by the media, for example in shows such as *Extreme Makeover* (p. 191), and also in cosmetic surgery promotional material (p. 202).

Ethnically appropriate cosmetic surgery uses a rhetoric of objective, race-transcendent bodily flaws and argues for making ethnic bodies more normative without erasing their distinctive features (Heyes & Jones, 2009, p. 10). It is a complex discourse linking concepts of race, ethnicity, white hegemony and normative beauty standards, and is highly relevant for my analyses of how cosmetic surgery representations in different countries are discursively constructed.

2.6 Summary: (In)conclusive (Re)solutions – Cosmetic Surgery as an Amalgam of Discourses.

As Bordo (2009) observes, “cosmetic surgery is more than an individual choice; it is a burgeoning industry and an increasingly normative cultural practice” (p. 24). She emphasises that the assurance that “we can (and should) ‘just do it’” (p. 27) [undergo cosmetic surgery] is linked to consumerism, advertising and the popular media. These assurances are based on “an ideology of triumphant individualism and mind-over-matter heroism urges us to ‘just do it’ and tries to convince us that we *can* ‘just do it’ whatever our sex, race, or circumstances” (Bordo, 2009, p. 27).

The increasingly dominant rhetoric of ‘just doing it’ as propagated by some popular media and certain industries expresses a disturbing nonchalance about the invasiveness of such procedures. As Morgan (2009) points out, such views are closely associated with “the double-pathologising of the normal and out of the ordinary” (p. 61):

What have previously been described as normal variations of female bodily shapes or described in the relativity of innocuous language of ‘problem areas’, are increasingly being described as ‘deformities’, ‘ugly protrusions’, ‘inadequate breasts’, and ‘unsightly concentrations of fat cells’ – a litany of descriptions designed to intensify feelings of disgust, shame, and relief at the possibility of recourse for these ‘deformities’ [...] the naturally ‘given’, so to speak, will increasingly come to be seen as the technologically ‘primitive’; the ‘ordinary’ will come to be perceived and evaluated as ‘ugly’ (p. 61).

Morgan (2009) argues further that “the technological beauty imperative and the pathological inversion of the normal are coercing more and more women to ‘choose’ cosmetic surgery” (p. 61). In combination with discourses of agency and investment, this ‘inversion of the normal’ creates a situation in which there is not much space to move unless to admit the inescapability of cosmetic surgery and to ‘just do it’ in order to comply with blurred standards of ‘normality’.

Davis (2009) supports the complexity of such cosmetic surgery considerations by adding that “cosmetic surgery is not just popular, it is also controversial” (p. 41):

Recipients struggle with the side effects and dangers of the surgery, welfare bureaucrats and insurance companies worry about the costs, and even surgeons express objections about whether surgery should be performed just ‘for looks’. While these concerns do not necessarily result in a refusal of practice, the hesitations, which participants express and which are embedded in public debated about cosmetic surgery, provide insight into what makes cosmetic surgery not only desirable, but also problematic (p.41).

Popular magazine are a particular medium in which public debates about cosmetic surgery are reflected, in numerous, often contradictory discourses. Morgan (2009) states that feminist interpretation and assessment of cosmetic surgery is now faced with “new forms of agency, empowerment, confusion, resistance, responsibility, docility, subjugation, citizenship, subjectivity, and morality” (p. 71), and these new forms highlight that cosmetic surgery is an “extremely complex challenge” for feminist analysis (p. 71). Moreover, Fraser (2003) argues that “any examination of a particular element of cosmetic surgery (or any related field of enquiry) must be located within the complex network of discourses, individuals, organisation, machines and locations that make it possible” (p.25).

Drawing upon Fraser’s (2003) statement above, discourses are a significant part of investigating the social meanings of cosmetic surgery, and that in any discussion around cosmetic surgery, not only one discourse, but several discourses interplay. As Morgan (2009) has emphasised above, in the analysis of cosmetic surgery, there are also complex and contradictory values and discourses involved. This study aims to contribute to the “extremely complex challenge” of the analysis of cosmetic surgery, and in doing so, focuses on the complexity of discourses which interplay within the discourse schema of a ‘simple, strategic solution’.

The following chapter outlines the methodology chosen to investigate cosmetic surgery discourses and narratives as represented in popular texts in three different cultural contexts. I illustrate how the selected concepts allows deeper insights into the interconnectedness of ‘text’ and cosmetic surgery narratives within the magazine reader’s wider social context of a ‘liquid’ society characterised by increasing anxiety around identity construction.

3. Methodology

This chapter focuses on the methodological frameworks used in order to analyse selected articles from the Australian, German and Japanese editions of the *Cosmopolitan* and *marie claire* magazines.

In 3.1, I briefly revisit the research questions, as stated previously in 1.2, and introduce the overall case study approach and the three methodological approaches which provide the framework for this research: critical discourse analysis (CDA), narrative analysis and visual analysis.

I then provide a more detailed overview of critical discourse analysis, juxtaposing Fairclough's (1989, 2003a) and Gee's (1999) concepts of discourse as socially constructed knowledge. As Fairclough (2001) states, CDA stems from sociolinguistics, the discipline within the wider field of linguistics which deals with "language in its social context" (p. 1). It is considered a "cross-discipline, to which many established disciplines (linguistics, sociology, anthropology, cognitive psychology among others) have contributed" (Fairclough, 2001, p. 9), and is a method for the analysis of discourse, which interprets language as social practice. The CDA approach investigates the ways social ideologies are reproduced by spoken and written texts, and focuses "on trying to explain existing conventions as the outcome of power relations and power struggles" (Fairclough, 2001, p. 1).

Both Fairclough and Gee define discourse as a manifold concept integrating 'text' as an interactive process of production and interpretation set in a situational and cultural context. Fairclough (2001) acknowledges that language is a social process conditioned by non-linguistic parts of society but as a linguist, considers 'text' predominantly as spoken or written. Gee's (1999) concept of discourse, however, is strongly based on an understanding of 'texts' as intrinsically multimodal. The notion of discourse as a multimodal, as well as a language-based, concept is highly relevant for the analysis of magazine articles comprising a significant number of visual elements. This aspect is introduced and briefly addressed in 3.2.3, with a more

detailed illustration of multimodal discourse and visual analysis of discourses following in 3.4.

The focus of 3.3 is on narrative analysis. The section introduces narrative analysis as a sociolinguistic research tool and also establishes relationships between concepts of CDA and narrative analysis relevant to this thesis, such as Gee's (1999) concept of d/Discourse and Bamberg (2008, 2009) and Bamberg and Georgakopoulou's (2008) concept of 'big' and 'small' stories.

As mentioned above, in 3.4 I elaborate the concept of discourse as a multimodal entity. It revisits Kress and Van Leeuwen's (2001) argument for a greater incorporation of the visual in areas that involve multimodal texts, and provides a brief overview of the essential concepts and approaches of their 'grammar of visual design' (1996, 2006).

Finally, in 3.5, I lead from the theoretical background of the methodological frameworks to the application of the respective methods in the analysis, outlining how the methods will help address the research questions in the detailed analysis of magazine articles in Chapters 5 to 8.

3.1 Research Questions and Research Design

As I previously outlined in 1.2, this research analyses representations of cosmetic surgery in syndicated articles in women's magazines across three different cultural contexts. It also investigates how those representations are shaped through various discourses of cosmetic surgery and the linking of those discourses within narrative structures.

The research questions to be addressed are:

- *How are representations of cosmetic surgery discursively constructed in magazine articles in the Australian, German and Japanese editions of Cosmopolitan and Marie Claire?*
- *How do the discourses within narratives invite or distance the reader to engage in the ever-increasing complexities of the identity construction process in the current 'liquid' and 'surgical' society?*

By applying these research questions to the analysis, this thesis aims to explore the complex meaning-making and identity processes for the reader through representations of cosmetic surgery in women's magazines. My study also aims to shed light on the complex interplay of dominant discourses and individual narratives in popular print texts. Critical discourse analysis offers me as the implied reader the most productive methodological support to explore my research questions. In my discussion, I delve into discourses and narratives related to gendered and cultural identity construction in some depth in order to highlight ambiguous ideologies and “‘common sense’ assumptions” (Fairclough, 2001, p. 2) surrounding cosmetic surgery. From the material available, I have selected relevant ideas which pertain to the increasing importance of a multimodal CDA approach. This allows deeper insights into the interconnectedness of print and visual text as well as cosmetic surgery narratives within the magazine reader's wider social context (see 2.2-2.4).

While much of what follows might be seen as descriptive, the work of the chapter is to knit together various theoretical approaches providing me with sharpened devices to expose what first appears as self-evident in cosmetic surgery narratives.

3.1.1 Overview: Case Study.

As I stated in 1.3, the four analytical chapters of this study (Chapter 5 to 8) are designed as in-depth case studies of six magazine articles addressing four different themes. I have chosen case study because it enables me to focus closely on the relationship between text and context. It also provides the opportunity to describe

such a relationship in its complexity and detail, employing multiple approaches to data analysis (Yin, 2003a, p. 14).

Case study can be defined as “an empirical enquiry that investigates a contemporary phenomenon within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident” (Yin, 2003a, p. 13). This is especially relevant to this study considering that magazine discourses inform their readers but readers also actively negotiate their relationship to those discourses (see 3.2).

Traditionally, the three qualitative methods applied most frequently in case study research are interview, observation and document analysis. As Simons (2009) points out, one significant strength of a case study approach lies in its flexibility to choose from a variety of both quantitative and qualitative methods informing the research questions in the most effective way (pp. 33-34). I decided to analyse print magazine texts, and the initial analysis of the data, focussing on numbers and statistics, enabled me to identify broad trends and cultural patterns. The combination of the qualitative methods of multimodal discourse analysis and narrative analysis provides a multifaceted approach to extend an understanding of text-(cultural)context relationships. Furthermore, it aids to deepen critical reading practice of a representation of a rapidly growing phenomenon.

A widespread criticism of case study research is that one cannot generalise from it. My four analyses as case studies do not form a representative sample from which to generalise, especially as my choice of magazines, countries and articles is based on my individual linguistic resources as well as previous research on magazine narratives and cosmetic surgery discourses, which have framed this study in a specific manner. Nonetheless, as Simons (2009) states, “in many contexts where we conduct case study research we have an obligation not necessarily to generalise but to demonstrate how and in what ways our findings may be transferable to other contexts and used by others” (p. 164). Considering the various cultural contexts in which the magazine texts are situated, cross-case generalisation (within the understanding of the usability of findings as defined by Simons above) will help

examine the theme of each analysis and identify “what aspects of the analysis hold true from case to case and what might be different” (Simons, 2009, p. 164).

Simons (2009) also emphasises that no abstractions are independent of place and context (p. 164). This is in agreement with Flyvberg’s (2006) argument that in the study of human affairs, “there appears to exist only context-dependent knowledge” (p. 221). Thus, a strong justification for gaining a general understanding from case study research lies in the insights gained from an in-depth exploration of the particular:

In trying to capture that essence, insight or understanding [...] we should engage with the paradox within the case, the tension between the universal and the particular [...] By holding the paradox open to [...] re-examination, we eventually come to realise both the significance of the unique instance or circumstance and the universal understanding [...] The tension between the study of the *unique* and the need to generalise is necessary to reveal both the *unique* and the *universal* in the *unity* of that understanding (Simons, 2009, p. 167).

Thus, in analysing specific magazine narratives about cosmetic surgery, I intend to gain greater insight into the universality of the complexities of identity construction. The insights I will gain as the implied reader are then in a position to further inform critical reading of identity construction processes in similar contexts.

The following sections (3.1.2 to 3.1.4) provide a brief overview of and justification for the three chosen methods for analysis.

3.1.2 Overview: Critical Discourse Analysis.

The methodological framework for this research is based on two approaches of one major methodological framework, building on concepts and methods associated with the systemic-functional linguistics developed from Halliday linguistics (1985): critical discourse analysis (CDA) and visual analysis. Narrative analysis did not

emerge from systemic-functional linguistics (see 3.1.3), but, as pointed out above, Gee's (1999) concept of d/Discourse and Bamberg (2008, 2009) and Bamberg and Georgakopoulou's (2008) concept of 'big' and 'small' stories provide a link between CDA and narrative analysis which are of particular relevance to this study.

I have chosen CDA as one of the three strands of my methodology because it is a methodology based on critical linguistics, which allows a wide range of applications for the analysis of written and spoken texts. As Mills (2004) emphasises,

in contrast to 'non-critical' linguistics, critical linguistics does not just describe discursive structures, but also shows how discourse is shaped by relation of power and ideologies, and the constructive effects of discourse has upon social identities, social relations and systems of knowledge and belief, neither of which is normally apparent to discourse participants (p. 133).

Fairclough (2003b), moreover, argues that a particular strength of CDA is the fact that it is a method allowing significant versatility for "addressing discursive issues in interdisciplinary research" (p. 27). Further,

CDA does not primarily aim to contribute to a specific discipline, paradigm, school or discourse theory. It is primarily interested and motivated by pressing social issues, which it hopes to better understand through discourse analysis [...] critical discourse analysts (should) take an explicit socio-political stance: they spell out their point of view, perspective, principles and aims, both within their discipline and within society at large. Although not in each stage of theory formation and analysis, their work is admittedly and ultimately political. Their hope, if occasionally illusory, is *change through critical understanding*" [my italics] (Van Dijk, 1993, p. 252).

In relation to studies such as those of Machin and Thornborrow (2003) and Machin and Van Leeuwen (2007) on discourses in the *Cosmopolitan* magazine, and this one, which investigates discourse in two popular magazines, CDA is a versatile method to highlight submerged ideologies. Fairclough (1989) states that:

a not inconsiderable proportion of discourse in contemporary society actually involves participants who are separated in place and time. This is true of written language generally, but the growth area for this sort of discourse has been the mass media – television, radio, film as well as newspapers. Mass-media discourse is interesting because the nature of the power relations enacted in it is often not clear, and there are reasons for seeing it as involving *hidden* relations of power (p. 49).

As Machin and Van Leeuwen (2007) argue in their analysis of discourse schemas in the *Cosmopolitan* magazine (see 2.1), mass media texts offer powerful discourses to the reader, but through the ‘trivialisation’ of such social knowledge, put the reader in a position which allows her to dismiss them as not having serious implications. The ‘discursive issue’, not obviously or necessarily ‘apparent to the discourse participants’, which this study aims to address is the ‘hidden’ ideology of discourse schemas such as the ‘simple, strategic solution’ pattern. Such patterns underplay the complexities involved in decision-making processes, especially in relation to issues related to body and identity. This aspect, however, is consistent with and supportive of the “ideological configuration of women’s magazines [...] ultimately determined by commercial interests” (Gill, 2007, p. 202).

Using both productive and interpretive processes people draw upon what Fairclough (1989) calls ‘member resources’, that is, knowledge of language, representation of natural and social worlds people inhabit, values, beliefs and assumptions (p. 24):

Paradoxical as it might seem, both the production of a text and the interpretation of a text have an interpretative character. The producer of the text constructs the text as an interpretation of the world [...] formal features of the text are *traces* of that interpretation. The traces constitute *cues* for the text interpreter, who draws upon her assumptions and expectations to construct her interpretation of the text. Thus text interpretation is the interpretation of an interpretation (Fairclough, 1989, p. 80).

In relation to mass media texts such as the magazine articles selected for analysis, the text interpretation of the reader is likely to be not just ‘the interpretation (the reader’s) of an interpretation (the writer’s)’. It is rather a mediation process in which an interpretation is interpreted and recontextualised more than just once, first from

the interpretation of a social issue by a (reported) interviewee, to then the interpretive process of the journalist and an editor, and finally, to her own (see 3.2.1 for a more detailed explanation of recontextualisation).

Regardless of how fine-grained the reader's interpretation process may be, she will draw upon the 'member resources' available to her. This knowledge of language, representation and assumptions in relation to the interpretive process of a magazine article is limited in scope and application, depending on the reader's exposure to a variety of texts and willingness to critically engage with the texts.

I argue that despite these possible limitations, the reader of a magazine article will have acquired some member resources to interpret three key elements of a magazine 'story', namely written text, visuals and 'the plot'; that is, the narrative and the 'issue' at the core of the story, although differences will exist in how detailed the interpretive process of each reader is.

As the reader and interpreter of magazine texts, I draw upon my own member resources, but consciously expand them with member resources for critical reading available to me as the analyst, and most powerfully, through critical discourse analysis. As stated above, CDA intends to create change through critical understanding, and an application of CDA to magazine texts can support critical reading practice through a conscious application of member resources which are often deactivated in a recreational reading and interpretation process. By embracing more interpretive cues which normally remain hidden, critical discourse analysis affords the reader the capacity to challenge 'hidden relations of power' and the reproduction of dominant discourses.

Nevertheless, CDA has also been criticised for theoretical, methodological and analytical shortcomings. Mills (2004) states that:

the model of the relation between power and textuality which is generally employed by critical discourse analysis is fairly simplistic (although it has been modified in

more recent work), since it sometimes assumes that powerful participants simply dominate discursively in fairly straightforward ways (p. 140).

She moreover points out that some critical discourse analysts assume linear relations between linguistic form and function, and that variables such as gender, race and class are still considered as having some sort of stability and consistency across contexts. In other words, the two major criticisms are the lack of thorough interrogation of the social concepts critical discourse analysis seeks to challenge and a lack of well-founded theorisation regarding the relation between texts and contexts.

This lack of theorisation of the relationship between texts and their context has recently been raised by feminist theorists especially in relation to the analysis of 'ethnic' cosmetic surgery (Davis, 2003; Kaw, 2003). Another weakness of critical discourse analysis, the practice and difficulty of using translated texts for analysis, was alluded to in 1.2.

Critical discourse analysts are aware of these inconsistencies and the limited impact critical discourse analysis might have on the change of social structures under interrogation:

Critical discourse analysis is far from easy...it requires true multidisciplinary, and an account of intricate relationships between text, talk, social cognition, power, society and culture. Its adequacy criteria are not merely observational, descriptive or even explanatory [...] Ultimately, its success is measured by its effectiveness and relevance, that is, by its contribution to change. In that respect, modesty is mandatory: academic contributions may be marginal in processes of change, in which especially those who are directly involved, and their acts of resistance, are the really effective agents (Van Dijk, 1993, p. 253).

Another limitation of CDA which has been voiced in more recent years is the fact that CDA has to date mainly been applied to written texts (Kress & Van Leeuwen, 2001; Van Leeuwen, 2004):

Visual communication is particularly important for critical discourse analysis (CDA). Nowhere near enough attention has been paid to it in CDA, with most critical discourse analysts analysing transcripts of only the words of political speeches, or newspaper articles taken out of their visual context (Van Leeuwen, 2004, p. 15).

On the other hand, the strengths of CDA for deconstructing discourses and analysing the complex structures of power and ideology certainly lie in the wide range of applications of CDA as a non-sequential sociolinguistic method. The non-sequential approach implies that texts do not have to be read in the given sequence to create meaning, such as in a linguistic-pragmatic analysis of turn-taking. CDA therefore enables the analyst to read for ideological assumptions in the text as a whole rather than dissect a sequence of utterances.

In addition, for a study like this one, which analyses different texts and contexts involving language, images and identity construction, it is significant that:

[critical discourse analysts'] structural understanding presupposes more general insights, and sometimes indirect and long-term analyses of fundamental causes, conditions and consequences [...] critical discourse scholars want to make a more specific contribution, namely to get more insight into the crucial roles of discourse in the reproduction of dominance and inequality (Van Dijk, 1993, p. 253)

Since this study investigates representations of cosmetic surgery discourses and therefore also issues such as gender and power inequalities as well as limitations of agency in the textually and visually represented participants, a purely linguistic approach cannot offer the 'bigger picture' insights that CDA can provide.

Considering my non-linguistics background and the relevance of other frames from a liberal arts perspective for this study, such as feminist and narrative theory, I argue that an eclectic approach to the analysis of magazine content provides me a broader framework for interpretation.

In the following section, I will briefly comment on the links between critical discourse analysis and visual analysis on the basis of systemic-functional linguistics

before commenting on the reasons for and value of integrating narrative analysis in my mixed methodology approach.

3.1.3 Overview: Visual Analysis.

As pointed out above, another methodological component that stems from Halliday's systemic-functional linguistics is visual analysis, considered to be an increasingly valuable research tool for discourse analysis of multimodal texts. In fact, as Van Leeuwen (2004) argues, all "genres of speech and writing are in fact multimodal: speech genres combine language and action in an integrated whole, written genres combine language and graphics in an integrated whole" (p. 10). Even a typed or handwritten text without any images represents a multi-modal text, since "typography and handwriting are no longer just vehicles for linguistic meaning, but semiotic modes in their own right" (Van Leeuwen, 2004, p. 14).

Since magazine articles are evidently multimodal texts with a strong focus on the visual, it is essential to integrate this method into my research. As Van Leeuwen (2004) states, "...multimodal communication is an exciting new area for linguistic research, an area in which many projects are just waiting to be done, and many treasures just waiting to be discovered" (p. 18). In deciding to include visual analysis as an integral part of my critical discourse analysis, I also aim to build on the growing body of research on multimodal discourse.

3.1.4 Overview: Narrative Analysis.

Unlike critical discourse and visual analysis, narrative analysis is not connected to systemic-functional linguistics, but has its foundation in disciplines such as literary theory, which deals with the traditional, Aristotelian concept of narrative as a story, and other fields such as ethnography, social history and social psychology, which study oral narratives in their research (Thornborrow & Coates, 2005). It was women's and civil rights liberation movements of the 1960s and 1970s and feminism

which followed that reinvigorated the analysis of personal narratives (Chase, 2005). Since then, a ‘narrative turn’ has arisen from a growing understanding of the importance of narratives in people’s lives, and narrative has gradually become established as a research focus in many, and diverse, academic fields (Thornborrow & Coates, 2005). It often traverses disciplinary boundaries:

If narrative was at one time the province of literary study, the personal narrative as a communication phenomenon crosses disciplinary boundaries everywhere and every which way. Literary scholars of narrative have now been joined by many other scholars of personal narratives: folklorists and oral historians, philosophers, rhetoricians and semioticians, social scientists in psychology, sociology, anthropology, and speech communication, linguists and sociolinguists, and other scholars and critics of language, performance, and culture [...] Taken together, the ubiquitous nature of the personal narrative and its academic study by several disciplines locates it as a “blurred genre”...or a boundary phenomenon

(Langellier, 1989, p. 243).

In particular, narrative analysis has become an important research focus in sociology:

Within sociology, much attention has been paid to the use of narrative ‘accounts’ [...] – i.e. the efforts to explain questionable behaviour (even if only to oneself) in order to neutralise its negative meanings [...] With a few notable exceptions (e.g. Goffman, 1971), researchers have only recently acknowledged the body’s importance both as the means for account-giving and -receiving, and as the subject of accounts intended to justify bodies that deviate from normative standards

(Gimlin, 2007, p. 41).

Gimlin’s observation that analyses of narratives in relation to body modifications are indeed rare is well-founded. In sociological and feminist studies of cosmetic surgery, narratives often provide the data corpus in the form of interviews conducted with cosmetic surgery experts and/or cosmetic surgery recipients (Atkinson, 2008; Davis, 1995; Gimlin, 2007; Jones, 2008a, b; Pitts-Taylor, 2007). Previous research has largely focussed on analysing the discourses which were used in narrative as the main considerations or justifications for surgical (non)intervention. By analysing

narrative itself, and in particular, narrative patterns in body modification discourses, it is mainly Gimlin's (2007) work that has opened up a new research path in the burgeoning field of a sociology of the body.

As Langellier (1989) argues, the fascination with narrative and its potential for further analysis and investigation lies in its positioning

somewhere between a number of traditional categorical pairs: between literary and social discourse, between written and oral models of communication, between public and private spheres of interaction, between ritual performance and incidental conversation, between fact and fiction (p. 244).

Furthermore, as Weedon (1997) contends, narratives are more than ways of thinking and making meaning. They also bring the body into consciousness:

Narratives as discourse "constitute 'the nature' of the body, unconscious and conscious mind and emotional life of the subjects which they seek to govern. Neither the body nor thoughts and feelings have meaning outside their discursive articulation, but the ways in which discourse constitutes the minds and bodies of individuals are always part of a wider network of power relations, usually with institutional bases (p. 105).

Especially in relation to cosmetic surgery, discourses relating to cosmetic surgery as a body modification procedure and the surgical body itself, and the interweaving of those discourses in personal narratives, are powerful tools of identity construction. As Althusser's (1971) notion of 'interpellation' argues, readers are, by responding to the text they are reading, 'interpellated' by the ideologies within. 'Interpellation' assumes subject positions that are "homogenous, unified and controlled" (Kellner, 1995, p. 239). This aspect supports Misson's (2004) view that objectifying a magazine text and distancing the reader from it can be difficult, because readers consciously select and respond to these texts as the texts reflect the readers' vision of the world (p. 117). This notion is given even more weight considering that the texts used for this research are magazine articles from women's magazines, which "are not generally geared to producing deep intellectual engagement, but rather more often

[...] rely on calling forth more direct and accessible pleasures” (Misson, 2004, p. 118). Moreover, they also rely heavily on prior reader knowledge of and experiences with common narrative patterns for effective meaning-making inherent in such publications. Taking all these aspects into account, this thesis aims to contribute to research on narrative structures integrating cosmetic surgery discourses in popular magazines.

In 3.1.1, I argued that the reader of a magazine article will draw upon her member resources in relation to the discourses represented in text, visual and overall ‘story’ (narrative) in order to make meaning of cosmetic surgery as a body modification and identity construction process, and that the three methodological approaches address these three categories. The following sections will illustrate the three methodological approaches in more detail and indicate which aspects in particular and for what reasons I decided to apply them in my study.

3.2 Critical Discourse Analysis

3.2.1 Framing Critical Discourse Analysis: Interpretation and Recontextualisation.

Critical discourse analysis is based on critical linguistics, a term and linguistic discipline which was first used in its currently accepted sense in 1979, as the title of the concluding chapter of *Language and Control* (1979) by Fowler, Hodge, Kress and Trew, a group of linguists working at University of East Anglia, Norwich, at that time (Malmkjær, 2002, p. 102).

As referred in 3.1, critical linguistics is

a socially directed application of linguistic analysis, using chiefly concepts and methods associated with the ‘systemic-functional’ linguistics developed by M. A. K. Halliday; its basic claims are that all linguistic usage encodes ideological patterns or discursive structures which *mediate* presentations of the world in language; that

different usages [...] encode different ideologies, resulting from their different situations and purposes; and that by these means language works as a social practice – it is not, as traditional linguistics claims, a transparent medium for communication about an objective world, nor is it a reflection of a stable social structure, but it promulgates a set of versions of reality and thereby works as a constantly operative part of social process (Malmkjær, 2002, p. 102).

As Mills (2004) emphasises, because of the difficulties in analysis, critical discourse analysts have developed different forms of analysis based on different definitions of discourse. Nonetheless, what most strands of critical discourse analysis have in common is an integration of discourse analysis within a systematic framework based on a linguistic analysis of the text (p. 131).

Critical discourse analysts acknowledge very strongly the interconnectedness of language, conventional language use, ideologies and power. This aspect is clearly addressed in Fairclough's (2001) approach to critical discourse analysis:

My approach will put particular emphasis upon 'common-sense' assumptions which are implicit in the conventions according to which people interact linguistically, and of which people are generally not consciously aware. An example would be how the conventions for a traditional type of consultation between doctors and patients embody 'common-sense' assumptions which treat authority and hierarchy as natural [...] Such assumptions are *ideologies*. Ideologies are closely linked to power, because the nature of ideological assumptions embedded in particular conventions [...] ideologies are closely linked to language, because using language is the commonest form of social behaviour, and the form of social behaviour where we rely most on 'common-sense' assumptions (p. 2).

The notion that discourses can be manifested in language but also in other modes is applied in the multimodal approach to analysis in this study. Moreover, the critical discourse concept of language and ideologies as closely interconnected entities is highly relevant in a cosmetic surgery context, because the body can be read as a social, cultural and political site on which 'common-sense' assumptions of beauty,

femininity as well as patient–surgeon and male–female power structures can be inscribed.

Since the analysis is based on magazine articles, and therefore textually and visually represented bodies and participants, rather than bodies of ‘flesh and blood’, an understanding of the concept of ‘recontextualisation’ (as briefly mentioned in 3.1.1) is a premise for the interpretation and analysis process.

According to Fairclough (1989), a first step is to distinguish between the roles of text and discourse is that “a text is a product rather than a process – a product of the process of text production” (p. 24). ‘Discourse’, on the other hand, is

the whole process of social interaction of which a text is just a part. This process includes in addition to the text the process of production, of which the text is a product, and the process of interpretation, for which the text is a resource (Fairclough, 1989, p. 24).

This understanding of discourse informs the concept of recontextualisation, which is of importance for this study since it investigates discourses and narratives in popular media texts. In my role as the reader, interpreter and analyst of the texts, I investigate “discourses [which are] social cognitions, socially specific ways of knowing social practices, they can be, and are, used as resources for representing social practices in text. This means that it is possible to reconstruct discourses from texts that draw on them” (Van Leeuwen, 2008, p. 6).

Nevertheless, it is important to be aware that the magazine articles analysed in this study are recontextualised texts:

Recontextualisation not only makes the recontextualised social practices explicit to a greater or lesser degree, it also makes them pass through the filter of the practices in which they are inserted. The way in which this happens is rarely transparent to the participants of the recontextualising practice, and is usually embedded in their common sense, in their habits of relating to each other, and in what they take the purposes of the recontextualising practice to be – all those things which from the

usually tacit know-how of experienced participants of the recontextualising practice. Recontextualisation is also recursive – it can happen over and over again, removing us further and further from the starting point of the chain of recontextualisations (Van Leeuwen, 2008, p. 12-13).

Fairclough (2001) emphasises that recontextualisation is strongly present in mass media texts, of which the magazine articles selected for this study are a part. In the context of this study, discourses are recontextualised in a certain journalistic genre appropriate for the purposes of a specific report and the magazine. A ‘speech act’ of an interviewee can be modified by journalistic genre practices, and in this process, the ‘text’ and its social practices are recontextualised, which creates inconsistencies and opaqueness in relation to the interpretation process:

With media texts [...] there is no way of that the writer can know what actual readers’ intertextual experiences are, so the writer must construct an ‘ideal reader’ with particular intertextual experiences [...] Producers in mass communication thus have rather effective means of manipulating audiences through attributing to their experience things which they want to get them to accept. Because the propositions concerned are not made explicit, it is sometimes difficult for people to identify them and, if they wish to, reject them (Fairclough, 2001, p. 128).

Therefore, the main aim of critical discourse analysis as part of critical language study is to raise people’s awareness “to become conscious of opaque causes and consequences of their own discourse” (Fairclough, 1989, p. 42). For the analyst’s position this implies that “the analysis of discourse processes is necessarily a ‘member’s’ task” (Fairclough, 2001, p. 139) in which “the analyst must draw upon her own ‘member resources’ (interpretative procedures) in order to explain how participants draw upon theirs” (p. 138):

If analysts are drawing upon their own MR to explicate how those of participants operate in discourse, then it is important to be sensitive to what resources they are themselves relying upon to do analysis. At this stage of the procedure, it is only really self-consciousness that distinguishes the analyst from the participants she is analysing. The analyst is doing the same as the participant interpreter, but unlike the

participant interpreter the analyst is concerned to explain *what* she is doing. For the critical analyst, moreover, the aim is to eliminate even that difference: to develop self-consciousness about the rootedness of discourse in common-sense assumption of MR (Fairclough, 2001, p. 139).

In Fairclough's (1989) view, when a discourse type ceases to be seen as arbitrary so that it becomes a natural, common-sense and legitimate social practice, it represents a 'dominant discourse' (pp. 90-91). The discourses identified in feminist research on cosmetic surgery represent dominant discourses, which are recontextualised in the text production process but also used as 'member resources' which readers draw upon to 'make sense' of texts.

Although in this context reader and analyst are applying their 'member resources' to recontextualised written text, texts and language are social practices that are conditioned by other, non-linguistic, parts of society:

The MR [member resources] people draw upon to produce and interpret texts are cognitive in the sense that they are in people's heads, but they are social in the sense that they have social origins – they are socially generated, and their nature is dependent on the social relations and struggles out of which they were generated – as well as being socially transmitted and, in our society, unequally distributed. People internalise what is socially produced and made available to them, and use this internalised MR to engage in their social practice, including discourses (Fairclough, 1989, p. 24).

Considering that cosmetic surgery as social practice is a body modification procedure which is not only discursively represented in 'texts' but exerted and inscribed on 'concrete' bodies, this interconnectedness of language, ideology and social practice needs to be acknowledged in more detail. Gee's (1999) concept of d/Discourse integrates and emphasises this aspect more strongly than Fairclough's concept of text, discourse and social context. Gee's concept also allows me to establish a theoretical link between critical discourse analysis and Bamberg's concept of 'big' and 'small' stories in narratives, which in turn is connected to the notion of dominant discourses.

3.2.2 Gee's d/Discourse.

This section introduces Gee's (1999) concept of 'd/Discourse', through which he presents a distinct and integrated approach to discourse as spoken and written language, used to enact social and cultural activities and identities. Gee (1999) defines the distinction between d/Discourse as follows:

The distinction between "Discourse" with a "big D" and "discourse" with a "little d" [...] is meant to do this: we, as "applied linguists" or "sociolinguists", are interested in how language is used "on site" to enact activities and identities. Such language-in-use, I will call "discourse" with a "little d". *But* activities and identities are rarely ever enacted through language alone [...] When "little d" discourse (language-in-use) is melded integrally with non-language "stuff" to enact specific identities and activities, then, I say that "big D" Discourses are involved. We are all members of many, a great many, different Discourses, Discourses which often influence each other in positive and negative ways, and which sometimes breed with each other to create new hybrids (p. 6-7).

Applying Gee's (1999) concept of d/Discourses is significant for this study since it enables a clear terminological and conceptual distinction between cosmetic surgery as represented in texts (discourse) and cosmetic surgery as social practice (Discourse).

Considering the changes in representation cosmetic surgery has experienced in sociological and feminist theory as well as in popular discussion over the years, cosmetic surgery can also be seen as a 'Conversation' (Gee, 1999, p. 34). Gee defines Discourses as 'conversations' when taking place between individuals or groups of people, but when these Discourses are taken to a more abstract level of (historic) conversations between Discourses, he classifies them as 'big C' conversations. What Gee (1999) means by Conversations is what is more often referred to as 'situated meanings' or 'cultural models' (p. 37). Gee (1999) clarifies the concept of Conversation as follows:

The way in which I have used the term “Conversation” here is a use that is sometimes covered in other work by the term “discourse”. People who use the term “discourse” in this way mean something like this: the range of things that count as “appropriately” “sayable” and “meaning-able”, in terms of (oral or written) words, symbols, images, and things, at a given time and place, or within a given institution, set of institutions, or society, in regard to any given topic or theme [...] Such a use of the term “discourse” or “Conversation” [...] concentrates on themes and topics as they are “appropriately” “discussible” within and across Discourses at a particular time in history, across a particular historical period, within a given institution or set of them, or with a particular society or across several of them (p. 37)

I argue that in the selected articles for analysis d/Discourse and c/Conversations intersect. Cosmetic surgery as a textually and visually represented and ‘discursively and ‘concretely’ expressed social practice is constantly negotiated through normative standards in conversations among individuals, but also in Conversations on a societal level in the context of contemporary, ‘liquid’ society.

Another aspect relevant to this study, the multimodality of Discourse, is also emphasised by Gee (1999):

We continually and actively build and rebuild our worlds not just through language, but through language used in tandem with actions, interactions, non-linguistic symbol systems, objects, tools, technologies, and distinctive ways of thinking, valuing, feeling, and believing. Sometimes what we build is quite similar to what we have built before; sometimes it is not. But language-in-action is always and everywhere an active building process (p. 11).

The notion that Discourse is not only enacted through speech and writing, but also other semiotic systems, is a significant extension to the more traditional, linguistic and language-oriented concept of discourse. This aspect is extended further by Kress and Van Leeuwen (2006) in their ‘grammar of visual design’, integrating other modes of discourse, such as visual modes, into discourse analysis (see 3.2.3 and 3.4).

Gee (1999), like Fairclough, emphasises that language-in-use and language-in-action are never decontextualised, but are situated in a ‘context’ (Gee prefers the term ‘situation’ when referring to ‘context’). Gee (1999) states that “language [...] always simultaneously reflects and constructs the situation or context in which it is used” (p. 82). Furthermore,

situations are never completely novel (indeed, if they were, we wouldn’t understand them). Rather, they are repeated, with more or less variation, over time (that is, distinctive configurations or patterns of semiotic resources, activities, things, and political and sociocultural elements are repeated). Such repetition tends to “ritualise”, “habitualise”, or “freeze” situations to varying degrees, that is, to cause them to be represented with less variation (Gee, 1999, p. 83).

Gee (1999) outlines very clearly the multi-dimensional structure of language-in-action. His theory makes clear that there are many ‘layers’ which language-in-action covers, from its basic language-in-use to the complex interweaving of Discourses into a narrative to build meaningful socially-situated identities.

In relation to the analysis of magazine texts, an apparent situation which is repeated and ritualised is the process of narrating or creating a story. Gee (1999) argues that larger pieces of information, such as a story, follow a pattern of higher-level organisation (p. 110). One of these macrostructures identified by Gee (1999) in story-telling consists of setting, catalyst, crisis, evaluation, resolution and coda (p. 110), which is identical to the ‘classical’ narrative structure conceptualised by various literary theorists, and also sociolinguists and psychologists such as Labov and Bamberg (see 3.3.1).

For Gee (1999), “narratives are important sense-making devices. People often encode into narratives the problems that concern them and their attempts to make sense or resolve these problems” (p. 134). Since many narratives attempt to make deep sense of very real concerns, as a result of this complex process they are often not “logically” consistent: “In deep narratives, people do not focus on logical

consistency, rather, they focus on the theme they are attempting to instantiate and develop” (Gee, 1999, p. 136).

Cosmetic surgery as an identity construction process also relates to complex issues such as contradictory norms, victimisation and agency, which call for evaluation processes and possible resolutions. As the literature review has indicated, feminist theory frames cosmetic surgery as a complex composite of contradictory discourses, which is likely to be as pronounced in popular discussion.

Gee’s (1999) interlinking of d/Discourses and narratives is highly relevant to this research because a complex issue like cosmetic surgery requires higher-level organisational structures in order to resolve the ideological conflicts that are part of the identity construction process. Moreover, a specific comment on narrative is rare in traditional critical discourse analysis and provides a valuable link between critical discourse and narrative analysis, thus overcoming disciplinary boundaries in traditional linguistic and literary concepts.

The following sections comment on aspects of multimodal discourse and narrative structures in order to deepen the understanding of discourse and text. Discourses surface through text to create narratives as paths to identity construction. As theory, such ideas enable me to approach representations of cosmetic surgery discourses on both a linguistic and ideological level.

3.2.3 Multimodal Discourse.

In 3.2.1 and 3.2.2 I outlined the linguistic concept of d/Discourse as socially constructed knowledge which can be communicated through language and ‘text’. The concept of discourse as “socially constructed knowledges of (some) aspect of reality” (Kress & Van Leeuwen, 2001, p. 4) communicates clearly that discourse is developed through specific social contexts.

Nevertheless, as Kress and Van Leeuwen (2001) argue, even with an understanding of discourse as socially constructed knowledge, much of the work carried out in discourse analysis does not explicitly move away from two underpinning assumptions:

These are, on the one hand, that discourse ‘relates to language’, or, perhaps paradoxically, that discourses ‘just exist’, irrespective of (any) material realisations. Both assumptions are often held simultaneously, so that what is talked about is the shape of discursive organisation, the characteristics of specific discourses; but this is talked about in terms of the appearance of discourses in the realisation mode of language (p. 24).

Kress and Van Leeuwen (2001) emphasise that “discursive action takes place in, and is articulated in, a multiplicity of practices and a multiplicity of modes” (p. 25), and that therefore a position which considers discourses as separate from their mode of realisation, or understands that discourse appears in the mode of language only, is limited. In relation to this thesis and the analysis of articles in women’s magazines, Kress and Van Leeuwen’s (2001) analysis of discourses contained in interior decoration magazines is significant.

In the course of their analysis they state clearly that “comparison of magazine-texts in this area (as of course everywhere else) leaves us in no doubt that discourses are articulated in modes other than speech or writing” (Kress & Van Leeuwen, 2001, p. 29). It could be argued that this is stating the obvious, but to date, discourse analyses of clearly multimodal texts, such as magazine articles, still focus mainly on the written text.

Building on their first edition of a grammar of visuals (Kress & Van Leeuwen, 1996) and their analysis of design as semiotic practice (Kress & Van Leeuwen, 2001), Kress & Van Leeuwen (2001) argue that looking towards the future, “we seem to be at an odd moment in history, when frames are dissolving everywhere, and formerly clear boundaries are becoming ever more blurred. It is not therefore surprising that the same may be happening with representational resources” (p. 125).

Kress and Van Leeuwen's (2001) argument for considering multiple modes in discourse analysis is strongly supported by the fact that a text such as a magazine article clearly represents a multimodal text. By integrating Kress and Van Leeuwen's concepts of multimodal discourse and visual (discourse) analysis, my analysis aims to contribute to the emerging field of multimodal discourse analysis. How this multimodal discourse analysis is approached is outlined in 3.4 and 3.5.3.

3.3 Narrative analysis

3.3.1 Narrative and d/Discourse.

The previous section commented on the important role which discourses play in representations and social interactions of all kinds. In particular, Gee's (1999) distinction between 'd/Discourse' is important in conceptualising interaction as something that is taking place on micro and macro levels: On one hand, there is the interdiscursive level or the level of micro-analysis of the 'language hanging together', the level of words, phrases and interaction, and on the other hand, our immersion in the 'big way to talk about things', the level of morals and ideologies.

'Discourse' (with a capital 'D') can be considered as a meta-narrative. Since it goes beyond the level of utterance and interaction, it takes 'discourse' to a level of agency. People are surrounded by Discourses, and since they are part of it, they constantly negotiate their membership in Discourses through discourses.

The interconnectedness, as also addressed by Gee (1999) (see 3.2.2), between Discourse and narrative was first identified by Labov and Waletzky, as Chase (2005) states:

A 1967 article by Labov and Waletzky, "Narrative Analysis: Oral Versions of Personal Experience", is often cited as a groundbreaking presentation of the idea that ordinary people's oral narratives of everyday experience (as opposed to full-fledged

life histories, written narratives, folklore, and literary narratives) are worthy of study in themselves. In this article, Labov and Waletzky (1967/1997) argued that *oral narratives are a specific form of discourse characterised by certain structures serving specific social functions* [my italics] (p. 655).

This view corresponds with Gee's (1999) notion of Discourse as meta-narrative, linking similar concepts of critical discourse analysis and narrative analysis. Gee (1999) highlights that narratives are important sense-making devices. This is based on Labov and Waletzky's (1967) argument that the analysis of 'small' oral narratives generates significant insights into how people seek a resolution to an 'everyday experience'. Considering all this, in relation to cosmetic surgery, feeling 'ugly' and unable to fulfil the standards of attractiveness in a 'surgical' society can be considered the significant 'everyday experience' and a driving force towards decision-making and justification processes evident in cosmetic surgery narratives.

Although cosmetic surgery itself is arguably a procedure too invasive to be considered an 'everyday experience', it has, as sociological and feminist theory has argued (Blum, 2003; Davis, 1995; Elliott, 2008; Heyes & Jones, 2009; Jones, 2008b), undergone a transformation from a procedure available to the famous and wealthy to a common and widely available practice. Furthermore, the current, ubiquitous presence of cosmetic surgery in the media and the increasing availability of non-surgical procedures have transformed it to a practice which is strongly represented in people's everyday lives, even if they decide to not actually become 'surgical'. Moreover, the 'trivialisation' of cosmetic surgery discourses in women's magazines (Machin & Van Leeuwen, 2007) also contributes to 'scale down' cosmetic surgery to a practice for 'well-being' rather than an invasive procedure. At least in magazine narratives, cosmetic surgery is represented not necessarily as an 'everyday' practice, but often as a 'trivialised' experience in someone's life.

As established above, "narratives are highly portable discursive units" (Briggs 1996, p. 29), which can be realised in both 'life' and 'everyday' stories. Narrative as realised on micro and macro levels is defined further in Bamberg's concept of 'big' and 'small' stories.

3.3.2 d/Discourses in ‘Big’ and ‘Small’ Stories.

Bamberg, who coined the terms ‘big’ and ‘small’ stories (Bamberg & Georgakopoulou, 2008, p. 381) to further make concrete the distinction between ‘everyday’ and ‘life’ narratives as established by Labov & Waletzky (1967), has a research background in psychology, particularly in the analysis of how narratives are used by adolescents in identity construction.

Bamberg’s (2004b) concepts are highly transferrable to written texts such as magazine articles on cosmetic surgery, which, by commenting on a specific body modification practice, also deal with identity construction. Moreover, Bamberg (2004b) interprets narratives as ‘discourse’ and ‘performance’ (p. 215), which provides a link to Gee’s (1999) concept of d/Discourse. As Bamberg (2009) states, there is an emerging orientation in identity and narrative research, which “views stories as situated in discursive practices, within which speakers accomplish identity displays in which they make relevant how they make sense of themselves as ‘a person’” (p. 2).

More significantly for this study, Bamberg (2004b) also argues that narratives as discursive practices provide opportunities for

‘identity negotiation’ – or even better [...] ‘identity confrontations’, events in which conversationalists encounter interaction-trouble and need to manage and fine-tune their resources in order to come across in alignment with institutional and personal demands (p. 221).

For Bamberg (2004a), identity construction through narrative mainly takes place in what he calls ‘small stories’, “the ones we tell in passing, in your everyday encounters with each other (stories which I would like to consider the ‘*real*’ stories of our *lived* lives)” (p. 356). Defined in more detail, Bamberg and Georgakopoulou (2008) understand ‘small stories’ as

an umbrella term that captures a gamut of underrepresented narrative activities, such as telling of ongoing events, future or hypothetical events, and shared (known) events, but it also captures the allusions to (previous) telling, deferrals of telling, and refusals to tell [...] On a metaphorical level, though, the term locates a level and even an aesthetic for the identification and analysis of narrative: the smallness of talk, where fleeting moments and narrative orientation to the world can be easily missed out on by an analytical lens that only takes fully fledged ('big') stories as the prototype form where the analytic vocabulary is supposed to emerge (p. 381).

It is interesting to note that for Bamberg the distinction between 'big' and 'small' stories takes place on two levels. On one hand, the distinction can be made between the length of a text, or the significance of a genre; on the other hand, the distinction – and this being the more far-reaching one – is seen in the extent to which self and identity are considered as 'essentialised'. To use Bamberg's (2008) words, 'big stories' that are present in genres such as biographies and 'life stories', assume that narrators in fact have a self and an identity. On the other hand, "the analysis of small stories [...] requires a more detailed account of how storytellers appropriate particular discourses in order to position characters [...] and each other [...] so as to display a sense of how they intend to 'come across'" (p. 184). To Bamberg (2008) this indicates that 'small' storytellers are in a process of negotiating their identity:

In short, small story research does not start from, and is not built on, the assumption that people *have* a sense of self as first located in the person and subsequently locatable in their stories, but that, in the process of telling stories, they engage in "identity work" that results in (local and situated) displays of a sense of self (p. 184).

Considering Bauman's (2000, 2005) theory of the contemporary 'liquid' world, 'essentialised' identity is an outdated concept, which is increasingly replaced by a continuous identity construction process. As argued by feminist theorists, this is particularly highlighted in 'identity work' through cosmetic surgery which implies a high level of 'positioning' oneself within the many and contradictory discourses available. This implies that narratives are not "intrinsically oriented towards coherence and authenticity". It is instead the "inconsistencies and equivocations

[which] offer a way into examining how storytellers are bringing off and managing their social identities in contexts” (Bamberg, 2004b, p. 222).

As I argued in Chapter 2, sociological and feminist theory has illustrated that body modification procedures are inseparably tied to identity construction processes. Numerous studies (Atkinson, 2008; Brooks, 2004; Davis, 1995; Elliott, 2008; Fraser, 2003; Gimlin, 2007; Atkinson, 2008) showed that cosmetic surgery patients in particular are put in a position where they feel the pressure to negotiate conflicting cosmetic surgery discourses in their individual ‘small’ cosmetic surgery story.

In relation to this ‘identity negotiation’ work within narratives, Bamberg (2004b) argues that ‘positioning’ is a relevant concept, or rather ‘self-revision’ through self-reflection, self-criticism and agency. Bamberg (2004b) also suggests that we must

distinguish between the ‘being positioned’ orientation, which is attributing a rather deterministic force to master narratives, and a more agentic notion of the subject as ‘positioning itself’, in which the discursive resources or repertoires are not a priori pre-established but rather are interactively accomplished. ‘Being positioned’ and ‘positioning oneself’ are two metaphoric constructs of two very different agent-world relationships: the former with a world-to-agent-direction of fit, the latter with an agent-to-world direction of fit. One way to overcome this rift is to argue that both operate concurrently in a kind of dialectic as subjects engage in narratives-in-interaction and make sense of self and others in their stories (p. 224).

Once more, Bamberg’s understanding of narrative as discursive practice displays parallels with critical linguistics, which argues that production and interpretation of ‘text’/‘narrative’ are strongly linked, and that the producers/interpreters of those are active participants by drawing upon the ‘member resources’ available to them.

The stories, narratives and discourses about cosmetic surgery contained in the articles selected for analysis can be expected to incorporate all those processes stated above, expressing views on Discourses through discourse, and giving insight into identity construction in a surgical culture (‘big’ story) through personal encounters and experiences (‘small’ stories). An understanding of interpretation and

recontextualisation processes of d/Discourse in ‘small’ stories will help to analyse the anticipated complexities and contradictions in the cosmetic surgery narratives of the selected articles.

As argued above by Bamberg, inconsistencies and equivocations are an intrinsic part of narratives in general. The following paragraph outlines in more detail how these contradictions are an important and integral part of negotiating membership to Discourses and the construction of identity.

3.3.3 Narratives and Identity Construction.

As outlined above:

Narratives, irrespective of whether they deal with one’s life or an episode or event in the life of someone else, always *reveal* the speaker’s identity. The narrative point-of-view from where the characters are ordered in the story world gives away – and most often is meant to give away – the point-of-view from where the speaker represents him-/herself. By offering and telling a narrative, the speaker lodges a claim for him-/herself in terms of who he/she is (Bamberg, 2004b, p. 223).

Bamberg’s argument states clearly that identity construction predominantly revolves around positioning oneself in relation to dominant discourses or master narratives (Bamberg & Georgakopoulou, 2008, p. 385). In doing this, speakers either work up a position as complicit with and/or countering dominant discourses or master narratives (Bamberg, 2004b, p. 225).

Bamberg (2004a) explains that dominant or master narratives (also called plot, plotlines, master plots, dominant discourses, story lines or cultural texts) are ‘cultural frames’ according to which courses of events can be easily mapped, because one’s audience is assumed to ‘know’ and accept these courses of events. As highlighted in the feminist analysis of cosmetic surgery, body modification procedures constitute a field in which master narratives or dominant discourses are often strongly evident.

Furthermore, cultural and social assumptions of ‘natural’ power relations between men and women or patient and surgeon are also played out in the various cosmetic surgery discourses.

Nevertheless, very often those so-called culturally accepted frames are fragmented and not at all conclusive. Since master narratives are thus setting up sequences of actions as routines and therefore have a tendency to ‘normalise’ and ‘naturalise’, they constrain the agency of subjects, seemingly reducing the range of their actions (Bamberg, 2004a, p. 360).

One possible strategy to exert agency is “to counter these frames [...] by way of appealing to other frames that are contradictory, and to presenting one’s own experience along those lines” (Bamberg, 2004a, p. 360). Having accepted this as a strategy of self-positioning, the question is not so much whether speakers comply or counter master narratives, but when and why they engage in any narratives. In Bamberg’s (2004a) words, “the question has shifted to *how* [the speakers] create a sense of self and identity that manoeuvres simultaneously in between being complicit and countering established narratives that give guidance to one’s actions but at the same time constrain and delineate one’s agency” (p. 363).

Bamberg (2004a) sees a solution to this dilemma in accepting this tension between a ‘being positioned’ and ‘positioning itself’ orientation. The first, in his view, is attributing a deterministic force to master narratives, whereas the latter takes a more agentive stance, in which discursive resources are rather interactively accomplished. From this point of view “the agentive and interactive subject is the ‘point of departure’ for its own empirical instantiation – as a subject that is constantly seeking to legitimate itself, situated in language practices and juggling several story lines simultaneously” (Bamberg, 2004a, p. 366). Following from this, a dualistic understanding of master narratives as automatically hegemonic and personal narratives as automatically countering is simplistic, considering that speakers are, by positioning a sense of self, exerting complicity on one hand in order to identify segments that can be countered on the other hand. (Bamberg, 2004a).

Bamberg (2004a) argues that this complex “being in two places at the same time” in narrative needs to be investigated further in order to achieve an “innovative and better understanding of how the personal and social intersects with being complicit and countering” (p. 369). One way of achieving this is applied in this study, which, through critical discourse and narrative analysis, aims to critically identify how far the reader of the selected magazine articles is positioned to engage with the dominant discourses presented to her.

In relation to cosmetic surgery, Bamberg’s (2009) observation that the telling of a personal experience involves a balancing act for the narrator between making a self unique, and simultaneously accommodating familiar plots which have been told before, is highly relevant. Narrator and reader, text producer and interpreter, are part of the contemporary surgical culture and its discourses, which undeniably shape the narratives of ‘small stories’. As Bamberg (2009) highlights, contradictions, fissures, ruptures and inconsistencies in a cosmetic surgery narrative are only to be expected and an integral part of creating one’s own unique ‘small’ story situated within a ‘big’ story:

Of course, this balancing act can result in telling different stories about self at different occasions, not only at different times in the course of one’s life, but also maybe at the same point in life when confronted with different challenges by different audiences (p. 11).

This view corresponds strongly with some feminist interpretations of cosmetic surgery, which argue that the only agency a contemporary ‘surgical’ person is left with is the capacity to shape and reshape narrative and argument by drawing upon different dominant discourses. Thus, by linking discursive and narrative analysis, I aim to use the theoretical frameworks offered by Fairclough, Gee and Bamberg as tools to explore the complexities in discourses around representations of cosmetic surgery more deeply.

3.4 Visual Analysis

As I stated in 3.1.2, my research design comprises three methodological approaches, of which the first two, critical discourse analysis and narrative analysis, have been discussed in 3.2 and 3.3 above. The third method, visual analysis of images supporting text, is predominantly based on the most comprehensive work on this matter to date, Kress and Van Leeuwen's (2006) *Reading images: The grammar of visual design*.

This section on visual, or rather multimodal, analysis also builds on Machin's (2007) *Introduction to multimodal analysis*, which, as Machin acknowledges, is strongly based on Kress and Van Leeuwen's work (p. v). Machin (2007) streamlines the process of visual analysis by outlining and illustrating it through detailed examples of how Kress and Van Leeuwen's visual grammar is applied to concrete multimodal texts. Whilst Kress and Van Leeuwen's (2006) work equally focuses on outlining the theoretical framework their visual grammar is based on and the application of their method, Machin's (2007) *Introduction to multimodal analysis* provides a concrete set of application guidelines to multimodal analysis, similar to Fairclough's (2003) categories for and approaches to critical discourse analysis in *Analysing discourse: Textual analysis for social research*.

Both works provide a structured approach and a clearly defined set of tools to apply to and analyse the visual components of my material. By moving beyond mere visual description and common-sense assumption of meaning in visuals, such an approach allows me to systematically identify underlying visual patterns and reveal implied meanings.

Multimodal and visual analysis is a still emerging field and thus some of the applications for reading images call for reservation. Machin (2007) questions whether all patterns and scales identified by Kress and Van Leeuwen fulfil the systematic applicability characteristic of 'grammar'. Machin (2007) investigates this by looking at two technical features, vectors and modality, in particular and considering a number of objections to this (p. xvii). He concludes that some of Kress

and Van Leeuwen's analytical categories such as vectors and modality are "fuzzy" (Machin, 2007, p. 184) and can, as strategic categories, only be applied with reservation.

The following section provides an overview of Kress and Van Leeuwen's (2006) 'grammar of visual design', and also integrates Machin's (2007) criticisms where applicable. It comments on the theoretical background of visual analysis, whereas 3.5.3 provides an overview the concrete categories selected for deeper visual analysis of the selected articles in Chapters 5 to 8. The latter will be done in a condensed format to avoid merely reproducing of Kress and Van Leeuwen's work.

3.4.1 A Grammar of Visual Design.

In the introduction and their first chapter, Kress and Van Leeuwen (2006) define clearly their position in relation to theoretical frameworks and why a grammar of visual design has long been overdue.

Kress and Van Leeuwen (2006) base their work on various theoretical frameworks, such visual representation of the theoretical framework of social semiotics and the Paris School of the 1960s and 1970. Moreover, they also integrate the ideas of Halliday and other related concepts stemming from "Critical Linguistics", developed by a group of researchers working in the 1970s at the University of East Anglia. More recently, their work is influenced by "a development of Hallidayan systemic-functional linguistics by a number of scholars in Australia, in semiotically-oriented studies of literature (Threadgold, Thibault), visual semiotics (O'Toole, ourselves) and music (Van Leeuwen)" (p. 6).

Within this broad theoretical framework, Kress & Van Leeuwen's (2006) overall goal is defined as follows:

Our book is about signs – or, as we would rather put it, about sign-making (p. 6), [and] just as grammars of language describe how words combine in clauses,

sentences and texts, so our visual ‘grammar’ will describe the way in which depicted elements – people, places and things – combine in visual ‘statements’ of greater or lesser complexity and extension (p. 1). We seek to develop a descriptive framework that can be used as a tool for visual analysis (p. 14).

Kress and Van Leeuwen (2006) argue that visual structures, like linguistic structures, ultimately point to particular interpretations of experience of forms of *social interaction* [my italics] (p. 2). They emphasise that meanings and meaning-making belong to culture rather than to specific semiotic modes (p. 2), and that their grammar of visual design is to be understood as “a quite general grammar of contemporary visual design in ‘Western’ cultures, an account of the explicit and implicit knowledge and practices around a resource, consisting of elements and rules underlying a culture-specific form of visual communication” (p. 3).

In other words, “both language and visual communication express meanings belonging to and structured by cultures in the one society; the semiotic processes, though not the semiotic means, are broadly similar; and this results in a considerable congruence between the two.” (Kress & Van Leeuwen, 2006, p. 19). This observation leads Kress and Van Leeuwen (2006) to comment on critical discourse analysis, which investigates how ‘meanings’ are created through culturally and socially accepted and acceptable (dominant) discourses. In their words:

the still growing enterprise of ‘critical discourse analysis’ seeks to show how language is used to convey power and status in contemporary social interaction, and how the apparently neutral, purely informative (linguistic) texts which emerge in newspaper reporting, government publications, social science reports, and so on, realise, articulate and disseminate ‘discourses’ as ideological positions just as much as do texts which more explicitly editorialise or propagandise. To do so, we need to be able to ‘read between the lines’, in order to get a sense of what discursive/ideological position, what ‘interest’ may have given rise to a particular text, and maybe glimpse at least the possibility of an alternative view (p. 14).

Nevertheless, Kress and Van Leeuwen (2006) clearly address one of the current criticisms of critical discourse analysis, namely that it has, so far “mostly been

confined to language, realised as verbal texts, or to verbal parts of texts which also use other semiotic modes to realise meaning” (p. 14). They argue that a broader approach to critical discourse analysis is necessary, since in the age of multimedia, the multimodality of texts, whether in educational contexts, in linguistic theorising or in popular common sense, cannot be ignored or subordinated to solely written texts anymore (Kress & Van Leeuwen, 2006, p. 14).

As Kress and Van Leeuwen (2006) argue, in contemporary Western society we can observe a shift in valuation and uses from ‘old’ to ‘new’ visual literacy. The two kinds of visual literacy they refer to as ‘old’ and ‘new’ are defined as follows:

So far we have distinguished two kinds of visual literacy: one in which visual communication has been made subservient to language and in which images have come to be regarded as unstructured replicas of reality (the ‘old’ visual literacy [...]); and another in which (spoken) language exists side by side with, and independent of, forms of visual representation which are openly structures, rather than viewed as more or less faithful duplicates of reality (the ‘new’) (p. 23).

Kress and Van Leeuwen (2006) also state that images have become more stylised over time, more abstract and generally, more coded (p. 28), and “this shift from ‘uncoded’ naturalistic representations to stylised, conceptual images can be seen, for instance, on the covers of news magazines, which used to be dominated by documentary photographs” (p. 30).

Although ‘old’ visual literacy might be sufficient to ‘understand’ images we are exposed to, Kress and Van Leeuwen (2006) emphasise that visual communication is becoming increasingly crucial in the domains of public communication, and that, as a consequence, “not being ‘visually literate’ will begin to attract social sanctions” (p. 3).

The importance of multimodal literacy because of the changes in visual representations, the culture-specific nature of visual representation and the shortcomings of critical discourse analysis in the integration of visual elements in

their analysis emphasises that Kress and Van Leeuwen's (2006) work is not engaged in "mere description", but is a highly political enterprise reshaping the "semiotic landscape" (p. 44).

3.4.2 Limitations of a Grammar of Visual Design.

Recently, Kress and Van Leeuwen's (2001, 2006) work has been applied extensively in the analysis of pre-service teacher narratives by Johnson, who emphasises that texts must be read as parallel written and visual texts in order to grasp the full 'story' told in a narrative (Johnson 2001, 2002, 2004). Kress and Van Leeuwen's work on the visual has also informed Unsworth's (2001) work on visual literacy and the teaching of multiliteracies as well as Anstey and Bull's (2000) work on written and illustrated children's literature. Moreover, the importance of multimodal literacy as a means to read critically has become widely accepted in the English classroom (Howie, 2004; Stephens, 2004). Obviously, parallel reading of written and visual texts is highly relevant for the discursive interpretation of multimodal magazine texts such as the selected articles on cosmetic surgery.

As stated above, Kress and Van Leeuwen (2006) claim that their 'grammar of visual design' provides "a descriptive framework that can be used as a tool for visual analysis" (p. 14), albeit within the framework of the contemporary visual culture of the west. Moreover, as Machin (2007) argues, some visual patterns and rules described in Kress and Van Leeuwen's (2006) visual grammar do not necessarily fulfil the same functions as linguistic structures:

Kress and Van Leeuwen are suggesting that images are made up of elements, as in language, which we can break down but which have meaning only once they are assembled together. So meaning comes from the arrangement, what they describe as visual syntax. The authors assume that when a viewer makes sense of such an image they will do so in the same way that they would make sense of language. They will have knowledge of the conventions of visual grammar that allow meaning to be realised and read in the meaning not through individual signs, although they will

recognise the meaning potential of each individually, but through their relationship in the composition” (p. 165).

Machin (2007) investigates whether the aspect of visuals made up from single elements is feasible by looking at Kress and Van Leeuwen’s concept of vectors in an image as ‘visual verbs’ (p. 163). Machin’s (2007) argument is that the concept of vectors does not provide evidence for visual ‘grammar’, because vectors highlight the fact that images cannot be naturally divided into individual components (p. 176). Furthermore, “any part of an image can set off a number of semiotic rules all at once or not at all [...] we can verbalise what is going on in an image, but this is an arbitrary process. Images are not, therefore, necessarily grammatical realisations of what they represent” (Machin, 2007, p. 176).

Machin (2007) also analyses Kress and Van Leeuwen’s (2006) concept of modality (the level of how ‘true’ or ‘real’ visual representations should be taken) and their eight modality scales, which help identify how ‘realistically’ an image represents its content. In relation to modality, he considers modality scales as fuzzy categories and states that “modality markers can be used to think about levels of abstraction, but it is not clear why this should be thought of in itself as grammar” (Machin, 2007, p. 184).

Machin (2007) argues that visual codes and conventions operate more through association and physical experience on an abstract level (p. 185). He contests the concept of a ‘visual grammar’, since it does not fulfil two crucial criteria for grammar, namely “a lexicon of elements that can be chosen to create meanings in combinations, that get their meaning through convention rather than through resemblance to general knowledge of the world” and “a finite system of rules for combinations of elements”, that is, grammar in its strictest sense (p. 185). This realisation also has an impact on how ‘visual literacy’ then can be defined. He points out that due to the lack of a ‘visual grammar’, it might be more appropriate to apply the term ‘visual competencies’ (Machin, 2007, p. 188). Moreover, he argues that more empirical work is necessary to establish what kinds of predictable patterns can be found in visual communication (Machin, 2007, p. 186).

For the purposes of this study, my focus rests largely on Kress and van Leeuwen's theoretical framework as laid down in their visual grammar, as well as Machin's (2007) 'toolkit' for visual analysis based on Kress and Van Leeuwen's work. At this stage, it has to be accepted that there are grey areas in theory and limitations in application of this theory to actual visual analysis. Bearing this in mind, I have been selective in what aspects of Kress and Van Leeuwen's concepts of visual grammar I apply to my analysis; however, the categories relevant to my study are applied as outlined in their work. By having acknowledged some limitations of their work in this section, I continue to further integrate visual analysis into multimodal discourse analysis.

3.5 Application of the Methods in This Study

As I argued above, critical discourse analysis, narrative analysis and visual analysis are complex and versatile tools of analysis. I have therefore selected certain aspects of these three strands of my methodology which I aim to investigate further in four detailed analyses of articles as in Chapters 5 to 8.

As illustrated through the research questions, this thesis investigates how representations of cosmetic surgery are discursively constructed in women's magazines and how they invite the reader to participate in such discourses as part of an identity construction process. Some dominant discourses of cosmetic surgery have been identified in previous research (see 2.4-2.6), and this study aims to highlight how they are used to construct narratives that can, because of the nature of the matter, be expected to be contradictory and inconclusive.

Methodologically, in the critical discourse analysis component of my analysis, I focus on the ways dominant discourses are reinforced by grammatical structures and use of metaphor. Cosmetic surgery texts also always involve at least two participants (or 'social actors' in Fairclough's terminology); namely the writer of the article and a person involved in the process of cosmetic surgery. Nevertheless, often other participants, linking to different discourses come into play, such as friends and

family of the patient, other patients, surgeons and medical experts. The ways these participants are represented in turn position the reader. Special attention will therefore be given to the analysis of the representation of participants and their links to particular cosmetic surgery discourses.

The narrative analysis component investigates the ‘small story’ of a personal or individual cosmetic surgery experience or consideration within the wider social context of contemporary surgical society. Taking into account that narrative structures in identity construction revolve around an ‘agon’, that is, a complication that needs to be resolved, my analysis of cosmetic surgery narratives in popular texts investigates which discourses participants draw upon in their narratives and whether the discourses they refer to afford them a ‘resolution’ of the individual conflict they are dealing with.

The visual analysis component analyses how discourses of cosmetic surgery are visually represented and how these correspond or do not correspond with the discourses represented in the written text. Furthermore, it will also pay attention as to how participants are represented in images and how these visual representations of participants relate to the discourses of cosmetic surgery represented both textually and visually. To achieve this, the visual analysis in particular looks at possible meanings of images, especially in relation to agency, gaze and positioning of the viewer, as well as modality of the images.

The selected aspects of each strand supporting the overall analysis of the selected magazine articles are outlined in more detail in the following.

3.5.1 Application of Critical Discourse Analysis.

Critical discourse analysis can be implemented through many different approaches, which, as discussed in 3.1, is one of its limitations, but also one of its strengths. This study follows Fairclough’s (2003) approach as laid down in *Analysing discourse: Textual analysis for social research*. In particular, it utilises

Fairclough's (2003) 'checklist' of guiding questions (pp. 191-194) to investigate how language is an inseparable part of textually represented discourses and participants.

To do this, I have decided to focus on three areas of textual analysis which contribute to a more defined framing of cosmetic surgery as a discursively constructed social phenomenon in the wider spectrum of body modification and identity construction processes. The first two are grammar and metaphor, which are closely linked in both textual and visual analysis. Whilst grammar focuses on systematic processes of sentence and image construction to denote and connote, metaphor falls largely into the visual realm, drawing upon the semantic resources of reader, viewers and interpreters. Since what is represented in clauses includes aspects of the physical, mental and social world, of which cosmetic surgery discourses are an intrinsic part, the third aspect I focus on is the representation of 'social actors' and social events.

3.5.1.1 Grammar.

To analyse meaning relations between sentences and clauses, Fairclough (2003) identifies two aspects for text analysis: semantic relations between sentences and clauses, and grammatical relations between clauses (p. 87). The first aspect allows the analyst to identify whether sentences and clauses are connected by causal, conditional, temporal, additive, elaborative or contrastive links; the second aspect investigates whether sentences and clauses are related paratactically (juxtaposition of clauses, either without or with coordinating conjunctions, thus assigning them the same 'value') or hypotactically (linking of clauses with subordinating conjunctions, thus linking main and subordinate clause in a semantic relation) (Fairclough, 2003, p. 87).

The analysis of these structures can highlight what strategies of legitimisation of discourses are being used. Fairclough (2003) identifies four main strategies of legitimisation. He distinguishes between authorisation (legitimation by reference to the authority of tradition, custom, law, and of persons in whom some kind of institutional authority is vested) and rationalisation (legitimisation by reference to the

utility of institutionalised action, and to the knowledge society has constructed to endow them with cognitive validity). Other modes of legitimation of discourses are moral evaluation (legitimation by reference to value systems) and mythopoesis (legitimation conveyed through narrative) (Fairclough, 2003, p. 98). The different strategies of legitimation will help gain insights into the justification processes of cosmetic surgery decisions and how they are used in the wider construction of narrative.

As Fairclough (2003) argues, different types of legitimation are based on different semantic relations as explicitly marked by the appropriate connectors (p. 98). Therefore, in my analysis of grammar, I will also analyse speech functions and grammatical moods. In relation to speech functions, I distinguish between ‘statements of fact’ (statements about what is, was, has been the case), ‘irrealis statements’ (predictions and hypothetical statements) and ‘evaluations’ (e.g. exclamations) (Fairclough, 2003, p. 109). Statements, as Fairclough (2003) argues, can also be subjectively marked, which is a matter of modality (p. 109), which is another grammatical aspect integrated into my analysis.

Speech functions are related to grammatical moods, of which there are three main types, namely declarative, interrogative and imperative mood (Fairclough, 2003, pp. 115-116). As Fairclough (2003) states, “speech functions are realised in ‘grammatical mood’, though the relationship is a complex one” (p. 119). By investigating speech function and their realisation in certain grammatical moods, I hope to provide insights into how strongly participants identify with the discourses they interweave in their narratives.

Within this methodological framework I do not follow a rigorous grammatical analysis, coming from a non-linguistic background, I am applying an eclectic methodology because a flexible set of tools enables me to establish links in a more versatile manner among feminist theory, cosmetic surgery discourses and their representation in textual and visual modes as well as the integration of various cosmetic surgery discourses in narratives. I aim to ask broad questions in relation to grammatical aspects closely linked to ideological assumptions, such as to what

‘social actors’ commit themselves to in terms of truth (epistemic modalities) or in terms of obligation and necessity (deontic modalities), to what level modalities are categorical (assertion, denial), and to what extent they are modalised (with explicit markers of modality). I follow a similar approach in asking broad questions about the use of metaphor in relation to representations of cosmetic surgery discourses within narratives.

3.5.1.2 *Metaphor.*

As Fairclough (2003) states, “discourses [are] [...] ways of representing aspects of the world [...] [and] particular aspects of the world may be represented differently” (p. 124). Moreover, Fairclough (2003) argues that:

in talking about discourses as different *ways* of representing, we are implying a degree of repetition, commonality in the sense that they are shared by groups of people, and stability over time. In any text we are likely to find many different representations of aspects of the world, but we would not call each separate representation a separate discourse. Discourses transcend such concrete and local representations [...] and also [...] a particular discourse can, so to speak, generate many specific representations (p. 124).

The statement above is closely linked to Gee’s (1999) concept of Discourse as an intrinsically multimodal entity, which can be realised through different texts, images or gestures simultaneously, supporting the same discourse.

The most obvious distinguishing features of a discourse are features of vocabulary – “discourses ‘word’ or ‘lexicalise’ the world in particular ways” (Fairclough, 2003, p. 129):

discourses are also differentiated by metaphor, both in its usual sense of ‘lexical’ metaphor, words which generally represent one part of the world being extended to another, and [...] grammatical metaphor (e.g. processes being represented as ‘things’, entities, through ‘nominalisation’) (Fairclough, 2003, p. 131).

In other words, discourses can be differentiated in terms of semantic relations (synonymy, hyponymy, antonymy), as well as metaphors, collocations and various other grammatical features (Fairclough, 2003, p. 133). Integrating Gee's (1999) and Kress and Van Leeuwen's (2001, 2006) appeal for a further integration of multimodal discourse analysis, it is necessary to emphasise that visually represented discourses also use metaphors, which, through the iconic quality of images, could at times even be more powerful than print metaphors.

In my analysis, I aim to investigate whether there are 'metaphorical' relations between exchanges, speech functions, or types of statement, and also what features characterise the discourses participants drawn upon (semantic relations between words, collocations, metaphors, assumptions, grammatical features). I also analyse whether visual and textual metaphors appear to be of a 'trivialising' nature, reinforcing the simple and strategic approach typical for women's magazines. Semantic relations and metaphor shape discourses, and it is of significant interest to see how they add layers of meaning to the complex discourses and identity construction processes.

3.5.1.3 *Social events and 'social actors'.*

As illustrated above, what can be represented in text includes aspects of the physical world (its processes, objects, relations, spatial and temporary parameters), aspects of the 'mental world' of thoughts, feelings, sensations and so forth, and aspects of the social world (Fairclough, 2003, p. 134). Within a broader view of social events as recontextualisation, I consider the representation of processes and associated participants and circumstances of importance. I analyse in particular the representation of 'social actors', which can be achieved in a variety of ways.

Fairclough's (2003) term of 'social actors' corresponds with 'participant' to a great extent; however 'participant' has wider range of application since the term can also represent physical objects for example, whilst 'social actor' is limited to people (p. 145). Within the context of discourses as means of identity construction, it is mainly

the relationship between ‘social actors’ through which discourses are enacted. In my analysis, I will focus on ‘social actors’, although my visual analysis will also include the analysis of visual ‘participants’.

According to Fairclough (2003), ‘social actors’ can be represented following different variables such as inclusion/exclusion, pronoun/noun, grammatical role, ‘activated’/‘passivated’, personal/impersonal, named/classified or specific/generic (p. 145-146), and I will investigate how ‘social actors’ are represented according to these categories. In the broader context of the social events the represented ‘social actors’ are involved in, I also analyse which elements of social events are included or excluded, which elements are most salient, and how abstractly or concretely social events are represented. This will allow insight into a possible relationship of personalisation of ‘social actors’ and the process of inviting and distancing the reader to engage with the represented participants.

3.5.2 Application of Narrative Analysis.

As previously discussed in 3.1 and 3.3,

stories can be told to entertain (jokes, folktales, anecdotes), to justify and explain (accounts, and descriptions of events), to instruct (the ‘cautionary’ tale, fables), and to establish social norms (gossip). *But even more importantly, stories tell us who we are: they are central to our social and cultural identity* [my italics] (Thornborrow & Coates, 2005, p. 7).

Based on the statement above, I aim to investigate the ‘bigger picture’ of how dominant discourses of cosmetic surgery are linked in ‘small stories’, that is, personal narratives of cosmetic surgery.

3.5.2.1 *The ‘small story’ in the surgical quest of identity.*

As I established in 3.3, the cosmetic surgery narratives in the selected magazine articles can be interpreted as ‘small stories’ in a process of identity construction which draw upon cosmetic surgery as a powerful means of transformation into the desired identity. Moreover, ‘small stories’ are likely to produce inconsistencies, contradictions, fissures and ruptures in the narrative. These contradictions are in particular part of identity construction processes, and especially in an invasive procedure such as cosmetic surgery.

3.5.2.2 *The agon, evaluation, ending and closure.*

Every written or told ‘story’ involves ‘entities’, or characters or protagonists driving the story forward (Abbott, 2008, p. 19). Another common pattern of narrative lies in the development of the story. Labov (1977) distinguishes six stages: Abstract (summary of the story at the start), orientation (identification of time, place, persons, activity, or situation) complication, evaluation, resolution and coda (moral to the story) (p. 363-365). For my study, the evaluation stage in a narrative will prove highly relevant, since this stage provides an assessment of the issue at stake, offering views and opinions surrounding the complication.

Labov (1977) considers evaluation as “perhaps the most important element in addition to the basic narrative clause” [because it is] “the means used by the narrator to indicate the point of the narrative, its *raison d’être*: why it was told, and what the narrator is getting at” (p. 366). Labov emphasises that the role evaluation plays in a narrative is important, because “evaluative devices are distributed throughout the narrative”, often suspending the action while elaborate arguments are being developed (p. 366). In other words:

A complete narrative begins with an orientation, proceeds to the complicating action, is suspended at the focus of evaluation before the resolution, and returns the listener... to the present time with the coda. The evaluation of the narrative forms a

secondary structure which is concentrated in the evaluation section but may be found in various forms throughout the narrative (Labov, 1977, p. 369).

In relation to cosmetic surgery narratives, the ways an evaluation is presented throughout, and more importantly, at the end of an article, is likely to provide insight into whether, how and to what extent the contrasting discourses and arguments are resolved.

Furthermore, narrative achieves satisfaction for the audience by building on recurring archetypal characters (for example Cinderella) and recurring themes or ‘master plots’, for example the Cinderella master plot, whose “variants can be found frequently in Europe and American cultures”, and whose “constituent events elaborate a thread of neglect, injustice, rebirth, and reward that responds to deeply held anxieties and desires” (Abbott, 2008, p. 46). More relevantly to this study of cosmetic surgery discourses, it elaborates and invites transformation. ‘Closure’ as opposed to ‘ending’ is achieved when the narrative confirms the master plot (Abbott, 2008, p. 64). Again, this notion is not only significant for literary theory, but for narrative as a general communicative structure in social interactions and ways of reading.

The narrative analysis in this context therefore focuses on three stages which are considered an integral part of narrative structures: the ‘agon’, that is, the issue, for which a resolution is thought in the narrative process, evaluation of the course of action taken and the stages of ending and closure. In particular an analysis of the stages of evaluation, as pointed out above, as well as ending and closure will provide insights into how discourses of cosmetic surgery are linked in the meaning-making and justification process of a cosmetic surgery narrative. Such analysis also enables me to investigate whether these discourses are connected in order to form a ‘conclusive’ resolution for the narrative or whether they can only provide an ‘inconclusive’ ending, in which contradictions still prevail.

I shall draw upon Fairclough’s (2003) guiding questions in relation to narrative and discourse, in investigating whether there are higher-level semantic relations over

larger stretches of text (for example, problem-solution). In relation to discourses, the particular discourses upon which the narratives draw and the ways they are textured together must be identified. Considering the contradictory nature of cosmetic surgery discourse in particular, I also intend to analyse whether there is a significant mixing of discourses. Taking into account that discourses represent an ideological view of the world, the values to which the participants commit themselves and how those values are realised in different forms of statements will enable detailed insights into the coherence of the narrative.

3.5.3 Application of Visual Grammar.

In the visual analysis component of my methodology, I intend to focus on three aspects Kress and Van Leeuwen (2006) consider to be essential elements of visual grammar: gaze and positioning of the viewer, the modality value of images, and the composition of a visual text.

In order to investigate these categories, the basis for these categories is an understanding that:

visual structures do not simply reproduce the structures of ‘reality’. On the contrary, they produce images of reality which are bound up with the interests of the social institutions within these images are produced, circulated and read. They are ideological. Visual structures are never merely formal: they have a deeply important semantic dimension (Kress & Van Leeuwen, 2006, p. 47).

From a semiotic point of view, “some images cannot really be said to communicate a general or abstract idea. They show *particular* events, particular people, places and things. They ‘document’. Or in semiotic terminology, they ‘denote’” (Machin, 2007, p. 23). Nevertheless, ‘denotation’ is not always the primary or only purpose of visuals. They are used to *connote* ideas and concepts; that is, they provide a second layer of meaning, which implies ideas and values associated with the image (Machin, 2007, p. 27).

3.5.3.1 *Gaze and positioning of the viewer.*

Indeed, ‘every picture tells a story’, and for a narrative to be operative in a visual text, participants and actions are required. In both text and images of magazine articles, the reader is dealing with ‘represented participants’, or

participants who constitute the subject matter of the communication; that is, the people, places and things (including abstract ‘things’) represented in and by the speech or writing or image, the participants about whom or which we are speaking or writing or producing images (Kress & Van Leeuwen, 2006, p. 48).

As print text is a two-fold structure of production and interpretation of social knowledge, the same applies to visual communication, which also facilitates interaction between the producer and the viewer of the visual (Kress & Van Leeuwen, 2006, p. 114). Kress & Van Leeuwen distinguish between two situations:

There is [...] a fundamental difference between pictures from which represented participants look directly at the viewer’s eyes, and pictures in which this is not the case. When represented participants look at the viewer, vectors, formed by the participants’ eyelines, connects the participants with the viewer. Contact is established, even if it is only on an imaginary level [...] This visual configuration has two related functions. In the first place, it creates a visual form of direct address [...] In the second place it constitutes an ‘image act’. The producer uses the image to do something to the viewer (pp. 117-118).

Other pictures address us indirectly. Here the viewer is not object, but subject of the look, and the represented participant is the object of the viewer’s dispassionate scrutiny. No contact is made. The viewer’s role is that of an invisible onlooker (p. 119).

The second dimension to the interactive meanings of images is related to the ‘size of frame’, that is, the choice between close-up, medium shot and long shot, and others (Kress & Van Leeuwen, 2006, p. 124). Kress & Van Leeuwen argue that social relations determine the distance kept between people, and that these distances

correspond with different fields of vision and this is ultimately also reflected in the framing of a person in a portrait or a film shot (pp. 124-125). The representation of social distance in relation to human-represented participants is also transferrable to objects (Kress & Van Leeuwen, 2006, p. 127-128).

Furthermore, the angle from which an image is shown reveals much about the position of the producer of the image, and the intention of how the represented image is to be presented to the viewer:

The difference between the oblique and the frontal angle is the difference between detachment and involvement. The horizontal angle encodes whether the image-producer (and hence [...] the viewer) is 'involved' with the represented participants or not. The frontal angle says, as it were, 'What you see here is part of our world, something we are involved with.' The oblique angle says, "What you see here is *not* part of our world; it is *their* world, something *we* are not involved with.'

(Kress & Van Leeuwen, 2006, p. 136).

Kress and Van Leeuwen (2006) also mention that the height of the angle plays an important role in expressing power relations:

[In cinematography] a high angle [...] makes the subject look small and insignificant, a low angle makes it look imposing and awesome [...] But this leaves the viewer out of the picture. We would rather say it in a somewhat different way: if a represented participant is seen from a high angle, then the relation between the interactive participants [...] and the represented participants is depicted as one in which the interactive participant has power over the represented participant – the represented participant is seen from the point of view of power. If the represented participant is seen from a low angle, then the relation between the interactive and the represented participants is depicted as one in which the represented participant has power over the interactive participant. If, finally, the picture is at eye level, then the point of view is one of equality and there is no power difference involved (p. 140).

The argument that angles and height of angles strongly represent relations of power is strongly relevant to the study, since cosmetic surgery involves power structures

such as patient/surgeon and male/female relations, as well as (cultural) othering as an in-built feature of identity construction.

3.5.3.2 Modality.

Another element of the analysis of multimodal texts that Kress and Van Leeuwen (2006) identify is modality. Derived from linguistics and referring to the ‘truth value’ or credibility of linguistically formulated statements about the world, Kress and Van Leeuwen transfer this concept to visual representations, arguing that some images have higher modality, that is, higher reality value, than others.

Modality operates on different levels of graduation of low and high modality, and there are various modality markers at play. Kress and Van Leeuwen (2006) identify eight modality markers. Machin (2007) has pointed out that in Kress and Van Leeuwen’s (2006) visual grammar the way how those modality markers should be applied to images across different coding orientations is not made clear.

Kress and Van Leeuwen (2006) emphasise that visual representation “rests on culturally and historically determined standards of what is real and what is not, and not on the objective correspondence of the visual image to a reality defined in some ways independently of it (p. 163). Furthermore, modality is defined not only by the cultural context, but also by ‘coding orientations’, that is, “sets of abstract principles which inform the way in which texts are coded by specific social groups, or within specific institutional contexts” (Kress & Van Leeuwen, 2006, p. 165).

These coding orientations are classified as three types of modality by Machin (2007), of which naturalistic modality and sensory modality are of importance to this study. While naturalistic modality refers to the “truth of perception”, that is, how much the image resembles the way we would see something in reality, sensory modality refers to the effect of pleasure (or un-pleasure) created by visuals. It is the truth of the feelings an image evokes in the viewer (Machin, 2007, p. 61).

As all of the above argues, narrative, positioning and, in particular, modality are based on the context, situation and the intention of the visual representation. Interpretations of images therefore represent relations between people, objects and places, and the complex relations which can exist between images and viewers. Any image contains a number of such representations and interactive relations in the formation of its composition.

3.5.3.3 *Composition.*

In their chapter on composition, Kress and Van Leeuwen (2006) develop a highly structured system of how visual representation can be spatially composed in order to generate certain information value. They elaborate on the informational value of ‘left and right’, outlining that the left typically represents the given, whereas the right shows the new. Furthermore, the information value of images arranged in a top-to-bottom structure implies that the upper often represents the ideal and the bottom the real or realistic situation (pp. 179-193). Information can also be arranged in the centre or more towards the margins of a page, suggesting that the centre provides the nucleus of information, whereas the margins represent ancillary, dependent elements (Kress & Van Leeuwen, 2006, p. 196).

Furthermore, elements in an image can be represented as separate or as related units, and the degree of flow around a page and certainty of connection between elements can be indicated by framing. “Frames can show boundaries and the absence of them can show natural connections” (Machin, 2007, p. 150). Frames and connectivity can be created by various semiotic resources, for example through segregation, separation or contrast (Machin, 2007, p. 157).

Finally, texts can be arranged in a linear or non-linear way. Certainly, densely printed pages of text support a linear reading approach, and are usually strictly coded. Nonetheless, texts as in magazine articles or websites allow a less linear, and in the case of websites, multiple reading paths, giving the reader to opportunity flick

through a magazine, stop at salient features of the text and read them and return to something that caught their attention at a later stage.

As Machin (2007) illustrates, a crowded layout of the pages allows readers multiple pathways through the information. In relation to cosmetic surgery discourses, I ask in particular which discourses are represented in written text and images or both, and whether they correspond to or complement each other. Reader navigation through a text is strongly influenced by layout choices made by the editor. Taking this into account, I also investigate to what extent a coherent or contradictory layout highlights and supports the processes of identity construction.

3.6 Summary

In this chapter I have outlined that I follow a mixed methodology approach which enables me to analyse discourses of cosmetic surgery on a textual and visual level as well as their integration in identity construction narratives. I have illustrated which theoretical foundations these three selected approaches are based on and in particular pointed to concepts of discourse which are relevant to all three frameworks. The notion that discourse represents social events and therefore can also be seen as an important part of identity construction is especially relevant to this study.

Furthermore, all three approaches acknowledge that discourses and narratives can be realised through various modes. This eclectic methodological approach therefore supports the current appeal (Kress, 2003; Kress & Van Leeuwen, 2006; Van Leeuwen, 2004) to further integrate multimodal analysis as a way to authentically address the multimodal challenges of meaning-making thus extending resources of critical reading.

In the following analysis chapters, the three strands of critical discourse, narrative and visual analysis will be applied in the context of selected magazine articles. The analyses illustrate the interplay of language and images of the cosmetic surgery

representations identified in the respective texts, and how they collude to position readers in a time of 'liquid modernity'.

4. Analysis

4.1 Introduction: The Data Collection

The following section provides a descriptive overview of the data gathered. It gives some background on the magazines from which articles were selected, as well as the time frame and the initial selection process of the articles. This section also aims to provide a broad overview of content, patterns and genres of the articles selected to constitute the data corpus. Guiding the reader along my initial screening process and general observations of the material at hand, I explain as to why selected articles were chosen for more detailed analysis.

4.1.1 The Magazines.

The two monthly magazines from which data were gathered are the *Cosmopolitan* and *marie claire* magazine in their respective Australian, German and Japanese editions. As illustrated in more detail below, both magazines have a syndicated structure which is evidenced in the numerous national editions in which *Cosmopolitan* and *marie claire* are published worldwide.

Of the two national editions (*Cosmopolitan* Australia and *Cosmopolitan* Germany) still in print at the time of this study (for details on the discontinuation of certain national editions see 4.1.2), *Cosmopolitan* Australia had a circulation of 152,028 (July to December 2009), and a readership of 569,000 (April 2009 to March 2010)⁶. *Marie claire* Australia's circulation was 112,682 (December 2009), with readership figures of 504,000 (March 2010)⁷. These numbers are published on the magazines' websites to suggest market endurance, and, more significantly, a high level of popularity among their readers.

⁶ <http://www.acp.com.au/cosmopolitan.htm>

⁷ <http://www.pacificmagazines.com.au/Pages/Magazines/Magazine.aspx?mid=c00aede5-fc25-4ae8-9d7f-5b4689d112ff>

As Misson (1994) points out, popular magazines such as women's magazines are 'popular' because they publish content "for the entertainment, instruction, and delight of readers and to deliver readers up as potential consumers to advertisers with something to say to them" (p. 73). The fact that popular magazines attract their readers by publishing content that provides them with pleasurable reading makes them powerful vehicles for "the ideological imposition of the magazine material" (Misson, p. 73). He also emphasises that such magazines "work with a great deal of involvement from their readers", by inviting the reader to "fill out" the text (Misson, p. 75).

Misson (1994) contends that magazines are a serious reflection of issues in popular culture and popular discourse. The dynamic relationship between magazine and reader is of significant importance to this study, which investigates 'small story' narratives built on dominant discourses of cosmetic surgery. As outlined in Chapter 2, complex issues such as invasive body modification and identity afford magazines a particularly powerful stance as a 'counsellor' to the readers in their identity construction process. This identity construction process becomes even more intricate when different cultural contexts are juxtaposed, and underlying discourses of ethnic homogenisation and Westernisation permeate national magazine editions reporting on cosmetic surgery abroad (see Chapters 6 to 8).

Marie claire was founded in 1934 by French industrialist Jean Prouvost. The original magazine is part of the *marie claire* group based in France, and is now published in 34 national editions. The philosophy of the *marie claire* group is described as "Instant information predominates, our thinking is changing, women are evolving and the role of the feminine press is *to help them make sense of the world's diversity*"⁸ [my italics]. It is interesting to note that Bauman's (2000, 2005) concept of a 'liquid' society, predominantly characterised by constant change and enormous speed (see 2.2.1), is reflected in *marie claire*'s approach. Unlike *Cosmopolitan* (see below), the publishing house constructs *marie claire*'s role as an 'educator' providing swift responses to the challenges posed by an increasingly complex world.

⁸ http://www.groupemarieclaire.com/gmc/57282-about_the_group/

The local editions of the *marie claire* magazine follow a philosophy similar to that of the parent publishing house. *Marie claire* Australia, published by Pacific Magazines, identifies its core target readership as being between 25 and 39 years of age, and its editors “understand that the *marie claire* reader is fascinated by what the world has to offer, and how she presents herself to that world. This is a woman who likes to be challenged and informed at all levels”⁹, or, as the US edition states, the *marie claire* reader is “more than a pretty face”¹⁰.

On a similar note, the website of the publishing house of the Japanese edition of *marie claire* (Hachette Fujingaho) states that:

『マリ・クレール』は、グローバルな視野から、モード) にコスメ、カルチャー、世界情勢 や社会問題までをルポルタージュし、女性の毎日をチアアップする“知的モード誌”です。

[*Marie claire* reports from a global view on fashion and beauty, culture, as well as world issues and social problems, and is an ‘intellectual fashion magazine’ which cheers up a woman’s every day. (my translation)].¹¹

As reported in *The Japan Times*, the Japanese edition suspended publication after its September 2009 issue, citing the economic downturn and the consequential decrease in advertising revenue as the reason.¹² Finding specific information regarding the profile of the German edition’s *marie claire* at the time of undertaking this study proved difficult; it is presumably no longer available, as the German edition ceased publication in 2003.

The original *Cosmopolitan* magazine was established by American publishing house Hearst, and currently “has 58 international editions, is published in 36 languages and

⁹ <http://pacificmagazines.com.au/Pages/Magazines/Magazine.aspx?mid=c00aede5-fc25-4ae8-9d7f-5b4689d112ff>

¹⁰ <http://www.marieclairemk.com/r5/home.asp>

¹¹ <http://www.hfm.co.jp/product/marieclaire>

¹² <http://search.japantimes.co.jp/cgi-bin/nn20090701b1.html>

is distributed in more than 100 countries, making it one of the most dynamic brands on the planet”. In contrast to the ‘intellectual, globally versed’ *marie claire* reader, the *Cosmopolitan* reader is characterised as the “fun, fearless female, who wants to be the best they can be in every area of their lives”¹³.

Helen Gurley-Brown, the founder of *Cosmopolitan*, defined the image of the *Cosmopolitan* reader even more clearly as “the figure of the ‘fun, fearless female’ who has a career, a varied love life and, apparently, plenty of money, but no parents, husband, children, or indeed any other family” (Machin & Van Leeuwen, 2007, p. 34). The magazine is targeted at a younger readership than *marie claire*, with the largest readership in the 18 to 24 age bracket¹⁴.

Magazines such as *Cosmopolitan* and *marie claire* have an ‘agenda’, which, as illustrated above, is clearly defined, with the national editions being closely supervised by the magazines’ head offices. Machin and Van Leeuwen (2007) point out that considering this structure, these magazines are rather “localised than local” (p. 34), since their agenda, format and style are imposed by the headquarters of the publishing house, and it is only the ‘angle’ which is adjusted to suit local preferences, as perceived by the local editorial staff.

4.1.2 Data Collection Timeframe.

Cosmopolitan and *marie claire* were selected because they are, as suggested by the circulation and readership figures provided by the publishing houses, syndicated magazines with a high popularity among their female readership. Moreover, they are published in several countries across the world, merging global and local issues in their respective cultural contexts.

The timeframe for the data corpus is 1995–2003, since both magazines were published in this period in all three countries. *Cosmopolitan* has a publication record

¹³ <http://www.hearst.com/magazines/cosmopolitan.php>

¹⁴ http://www.cosmomediakit.com/r5/cob_page.asp?category_code=read

that goes back a long way in time in all three countries (Australian edition first published in 1973, German and Japanese editions in 1980); *marie claire* has a shorter and less stable history.

Marie claire Japan is the national edition with the longest publication history (first published in 1982), whereas *marie claire* Germany was launched in 1990, and its Australian counterpart in 1995. *Marie claire* Germany was the shortest-lived of the three local editions, since publication ceased with the October issue in 2003. As stated above, publication of the Japanese edition was suspended after the September 2009 issue. *Cosmopolitan* magazine is still being published in Australia and Germany, but ceased publication in Japan in December 2005.

Since the launch date of *marie claire* Australia was the latest of the three national editions, and the October 2003 issue the last German publication, there was a period of simultaneous publication of nearly nine years. Furthermore, it has assisted to keep the amount of data manageable and consistent by not incorporating more data from one of the three localised issues, and thus disproportionately representing the information from one country's edition in comparison to the other two.

4.1.3 Selection of Articles.

Since the objective of this research is to analyse how representations of cosmetic surgery are discursively constructed, the corpus of this analysis consists of articles in a *journalistic* format related to cosmetic surgery. This definition includes articles reporting on both surgical and non-surgical procedures designed for enhancing one's looks (as defined in Chapter 1) published in *Cosmopolitan* and *marie claire* in Australia, Germany and Japan from 1995-2003.

Commercial text types such as advertisements for cosmetic surgery or text types with an overt intention to sell, such as advertorials (articles which follow a journalistic format but content-wise have a clear intention to advertise and market a product) were excluded from the corpus. Nevertheless, even under this premise, the borders

between commercial and non-commercial texts were at times blurred. Some articles mentioned a specialist or clinic by name, sometimes providing full contact details. Since these articles were not explicitly commercially sold advertising space, they were kept as part of the corpus.

After the initial screening of all the articles comprising the corpus, it was apparent that further narrowing down was required. It also became apparent that a common purpose of the majority of articles was to provide factual details about the benefits and cost of various cosmetic surgery procedures, how they are performed and how long their effects last, as well as their risks. These articles frequently used tables to collate this information, or used very short phrases and dot points resembling a table format. Another way of providing factual information in a condensed format was in a Q&A pattern, or a quoted statement which was followed by further explanation, clarification or rectification.

It is interesting to note that the Japanese edition of *marie claire* published such articles in their 'health' section, emphasising the informative and factual character of these reports. In comparison, the German *Cosmopolitan* supports the factuality of articles of this kind by telling their readers that it is important to stay informed: "Weil Schönheitsoperationen immer selbstverständlicher werden, ist eine kritische Haltung besonders wichtig" [Since cosmetic surgery is increasingly becoming a matter of course, a critical attitude is particularly important] (*Cosmopolitan* Germany, 1/1996, p. 122 (C.G1)).

Overall, articles of this kind provided a summary of facts and data, but not a discursive narrative per se, which is the focus of my detailed analyses. In the selection process of the Australian and German magazine articles, such articles were excluded, and only articles which explicitly presented a story or narrative were considered for critical discourse analysis in Chapters 5, 7 and 8. Texts such as letters to the editor, opinion polls or Q&A letters on a specific issue to medical specialists were also included in the corpus, since they still present a narrative, albeit of a more limited range.

The Japanese editions presented a specific case (see 4.2), because the majority of articles on cosmetic surgery represented informative genres, with little narrative. All articles in the Japanese magazines which reported on cosmetic surgery in any format were included in the corpus.

Before presenting the findings of my detailed analyses, I provide an overview of the articles used in the corpus of this work in relation to content and genre. Although no far-reaching claims for generalisation can be made, the following section will offer insight into some of the intricacies of ‘localised’ magazines.

4.2 Content Overview of the Data Collection

As Appendix 1 illustrates, 29 articles were gathered from the Australian edition of *Cosmopolitan*, and 15 and 10 from the German and Japanese editions respectively. Twenty-six eligible articles were identified in the Australian edition, 16 from the German and 14 from the Japanese editions of *marie claire*.

These numbers should not be regarded as statistics from which any definitive conclusions can be drawn. Some of the articles (e.g. C.A1 – C.A4, or MC.J2 – MC.J6; for an explanation of the coding see Appendix 1) were actually part of an extensive special report, but were split into separate articles, because they addressed different procedures or issues within the given framework. A closer look at the genres and the content of the articles provides an insight into what topics and issues were considered of relevance or simply entertaining for *Cosmopolitan* and *marie claire* readers.

While generic claims or broad generalisations cannot be made, I believe it is of interest to note that certain aspects of cosmetic surgery were only represented in one cultural context. This reinforces the ‘localised’ notion of the magazine, whereas other genres and/or stories could be found in at least two of the ‘localised’ editions, suggesting a more ‘global’ interest.

4.2.1 Patterns in Genre.

As stated above, the Australian editions of both *Cosmopolitan* and *marie claire* contained many more articles on cosmetic surgery than the German and Japanese editions. This is an interesting fact, but does not lend itself to any conclusive argument. The following overview aims to provide defined but generative observations of the localised representation of different genres.

The articles from *Cosmopolitan* Australia indicate that the subject of cosmetic surgery is approached through narrative genres. Articles with the main purpose of informing readers about the facts of certain procedures, such as risks and advantages, cost, recovery time among other details, are fewer in number. There are only three articles which fall into this category, *Cosmetic surgery special. The cutting edge* (C.A1), *Do you need a smile makeover?* (A.C27), and *Got breasts? You need to read this!* (C.A24); the first one discusses various surgical procedures, the second article cosmetic dentistry, and the latter is a health report, which discusses issues related to breasts in general, but also dedicates a small section to breast operations (both breast enlargement and reduction).

Both *Cosmopolitan* and *marie claire* Australia have a high number of reader responses in relation to articles on cosmetic surgery relative to the German and Japanese editions. In both cases, these are seven letters to the editor from across the nine years of editions. The remaining articles not falling into the category of letters to the editor present different kinds of stories, although significant differences can also be found here. It is possible to categorise these articles into five groups: confession or personal experience stories about cosmetic surgery (8), celebrity stories (3), stories which presented 'extreme' or 'bizarre' procedures in a deliberately titillating manner (4) and surveys (1). One last group appears specific to genres covering cosmetic surgery: the 'fake-versus-real' pattern, in which interviewees (mainly male) or the reader were asked to identify pictures of 'normal' and surgically-enhanced body parts (in *Cosmopolitan*, exclusively breasts) (3).

The German edition of *Cosmopolitan* offers similar genres. Eight informative articles were found, mainly on laser treatments and cosmetic dentistry. Another sub-category

of informative articles could be defined in the Q&A genre, in which a medical expert answered concerns in relation to cosmetic surgery (2). The rest of the articles presented either personal experience or confession stories (2), celebrity stories (1) and surveys (1). There was only one letter to the editor in response to surgical advice provided to a reader by a surgeon.

Japan's *Cosmopolitan* presented a particular case insofar as the informative articles heavily outweighed other genres. Most articles related to cosmetic surgery presented and discussed different procedures (8); only one article presented the personal stories of patients through failure and success stories (C.J4), and another one presented a comparison with the USA by highlighting the more unusual and bizarre procedures which are available there.

An even clearer-cut distribution across genres can be identified within the articles in the Japanese edition of *marie claire*. In this case, apart from three articles in the corpus, the remaining 11 were informative articles which presented and discussed certain cosmetic procedures. These articles were not entirely factual, and also contained some evaluation, opinion and analysis (for example MC.J7, an article on breast enlargement through hyaluronic acid, discussed the difference in breast size in the USA and Japan and breasts as a sexual symbol). Nevertheless, their main aim was to inform, often with the help of illustrations and photographs (the majority of which were before-and-after pictures). Three articles that provided more of an analysis and opinion piece were MC.J 11-13 – *Do you know about botox parties?* –, a report on botox parties in the USA which dealt with botox as a non-invasive treatment from different angles. *Botox. Content? Not content?* presented the opinions of interviewees on their experiences with botox. The third article, entitled *We ask Japanese and French beauty doctors about the present condition and impression of botox*, reproduced interviews with cosmetic surgeons about botox, but also included the medical experts' views on cosmetic surgery in general.

The German edition of *marie claire* shows the Japanese distribution of genres in reverse, with most of the articles being opinion and analysis pieces. Only four articles of a largely informative genre were found, with one article in fact being an

announcement that the new cosmetic surgery hotline at the magazine had started operating. The other articles showed a spread across personal experience and confession stories (6), one celebrity story and one survey. There were also two reports on specific cosmetic surgery procedures in foreign countries (China and Iran), and two reader responses to the article on Iran.

Similar to *Cosmopolitan* Australia, *marie claire* Australia had printed more articles on cosmetic surgery than the German or Japanese editions. Eight articles were of a mainly informative nature, one article represented the ‘fake-versus-real’ genre, and one article told a celebrity story. As mentioned above, another similarity between the two Australian magazine editions in contrast to the German and Japanese editions is the high number of letters to the editor reproduced in the magazine (7). The rest of the articles can be classified as analysis and opinion pieces with slightly different foci: most of them focused on stories about cosmetic surgery in countries other than Australia (6), and one article focused on men and cosmetic surgery. One article fits into the ‘bizarre surgery’ genre, reporting on an American surgeon who had operated on each member of his family. One article did not fit into any of the genres mentioned above, namely a campaign to motivate readers to write to the Federal Minister of Health of that time to demand stricter regulation of the cosmetic surgery industry.

To summarise, it can be stated that the two Japanese magazines had a very clear tendency towards informative articles which presented and discussed cosmetic surgery procedures in a highly factual manner. *Cosmopolitan* Australia focused mainly on personal and confession stories, but also printed a larger number of ‘entertaining’ genres than the other magazines, with the highest number in the ‘fake vs. real’ genre. The Australian edition of *marie claire* appears to have printed a balanced number of articles in ‘informative and analytical’ and ‘opinion-based’ genres. A similar structure can be observed for *marie claire* Germany, while *Cosmopolitan* Germany had clearly more informative articles printed than other genres and thus, genre-wise, appears to be quite close to the approach of the Japanese magazines.

These observations do not necessarily support any substantive claims in relation to specific patterns which could be based on different journalistic practices.

Nevertheless, this material provides the opportunity for contextualisation of the articles in their respective cultures and emphasis of some differences among the three cultural contexts. In the next section, I delve more closely into the content of the articles, provide more cogent insights into some culture-specific aspects as well as the more recent issues of cosmetic surgery (for example male cosmetic surgery), which to date, remain underrepresented in both popular and academic discourse.

4.2.2 Patterns in Content.

Genre, structuring material for social purposes, and content are, as suggested above, interdependent. In this section, I discuss further which kind of stories falling into the analysis-and-opinion genres were reported in the magazine articles of the data corpus.

As stated in the previous section, not many report-like stories could be located in the Japanese editions of both *Cosmopolitan* and *marie claire*. *Cosmopolitan* Japan had produced one article on cosmetic surgery in the USA, pointing out what a gigantic and commonplace industry it is there. Another article which focused on the situation of the cosmetic surgery industry in the USA was printed in the July 2003 issue of *marie claire*, and reported on botox parties. Drawing upon notions of ‘reverse’ cultural othering, the USA is presented as the country at the forefront of bizarre developments in cosmetic surgery. This is evidenced in articles such as *Only in America. Wacko things women do to their bodies* (C.A22) and *The doctor who rebuilt his family* (MC.A4). This indicates that in all three countries, the perception of the USA as the origin and frontier of an extreme cosmetic surgery culture was unchallenged and used to advantageously contrast the country and culture in which the magazine was published.

Another overlap can be found in reports of celebrity stories. Those stories either represented internationally known celebrities as examples of extreme cosmetic

surgery, such as Michael Jackson (*Chapters in one's life* (C.G3), *Cher* (MC.G3), *Knifestyles of the rich and famous* (C.A3)), or reported on incidents which generated substantial publicity at the time, such as the tragic death of Lolo Ferrari, a sex symbol with surgically enhanced breasts whose size was considered extreme and proved fatal (*Death by plastic surgery* (C.A19), *Ferrari: Death by plastic surgery* (MC.A14)).

A topic that was reported to a surprising extent was the issue of male cosmetic surgery. The stories ranged from stories that were presented in a voyeuristic manner (*Genital makeovers. Boys' toys. Phalloplasty* (C.A12) was printed in the 'sealed section' of the magazine) to stories which attempted to evoke curiosity for the pressures which would motivate men to undergo cosmetic surgery (*Men who have cosmetic surgery: Would you respect him in the morning?* (C.A6), *Pecs appeal: Why men are the new cosmetic surgery junkies* (MC.A2), *A man can't possibly be so handsome*, (MC.G1), *Operation handsome man. Now it's the guys' turn* (MC.G8), *Survey: Would you go under the knife for beauty?* (MC.G 9)).

Shifting from men to women, the number of articles which dealt with breast operations indicated that this represented a major topic. It was presented from different angles, such as personal accounts of women (*The ups & downs of living with big breasts* (C.A7, C.A8, C.A9), *Would you get a boob job for your boyfriend?* (C.A29), *I would like to have bigger breasts* (C.G5, C.G8, C.G9) who either stated their own happiness or the desire to be attractive for their (male) partner as the main motivation, personal accounts of men's experiences with the wife's or the girlfriend's breast surgery (*"I paid for her boob job, then she dumped me"* (C.A15, C.A17, C.A18), ... *the big solution* (MC.G2)).

In terms of stories from overseas, it is *marie claire*, especially the Australian and German editions, which stand out. Some stories covered are cosmetic surgery tourism (*Nip and tuck tourism*, MC.A8), cosmetic surgery in China (*Is this the new face of China?*, MC.A12), botched cosmetic surgery by a charlatan in Mexico (*Doctor of deceit*, MC.A23), leg-lengthening in China (*Growing pains: Going to extreme lengths to be tall* (MC.A21), *The factory of the long legs* (MC.G16)), and

nose jobs in Iran (*The revolution of the small noses*, MC.G13 and 14). All these articles were to some extent highly critical of cosmetic surgery, with the article on nose jobs in Iran being an exception (see Chapter 8).

An interesting view (and the only one of its kind) was presented in an article published in *marie claire* Germany; it featured a female cosmetic surgeon speaking very critically about her medical specialty and some of her colleagues (*Sometimes I feel ashamed of my guild*, MC.G7). Similar perceptions of horror and wrongdoing to the body were addressed in *Goosebumps in the operating theatre* (MC.G11), in which the reporting journalist describes her shock and horror when observing cosmetic surgery.

In summary, the overview indicates that the two Japanese magazines included relatively fewer articles that contained narrative and argument. Following the publishing house's agenda, it can be argued that the intention of the Australian and German editions of *Cosmopolitan* was to entertain and thrill rather than to inform. Nevertheless, also consistent with *marie claire*'s agenda, *marie claire* Germany and Australia published a higher number of articles reporting on cosmetic surgery overseas than *marie claire* Japan and the three national editions of *Cosmopolitan*. Moreover, the Australian and German editions of *marie claire* contained articles which were in varying degrees critical of cosmetic surgery, and through special initiatives such as the *marie claire*'s cosmetic surgery campaign, also took issues of cosmetic surgery to a 'political' level.

The following section provides an introductory overview of the selected articles for detailed analysis, briefly commenting on theme and the nuanced relationship among readers, magazine agenda and contradictory cosmetic surgery discourses. It also outlines the structure and approach of the four deep case studies in general terms.

4.3 Overview of Articles Selected for Analysis

In Chapters 5 to 8, I analyse six selected articles (five reports and one letter to the editor) grouped under four different themes related to cosmetic surgery. I chose four different themes in order to provide a flexible perspective on how a dominant discourse of cosmetic surgery sets the agenda for an article, but also draws upon various other discourses as the articles progress.

The analyses in Chapters 5 and 6 are based on one article each; Chapter 7 addresses two articles about the same topic (leg-lengthening operation in China) which were published six months apart in the Australian and German editions of *marie claire*, providing a cross-cultural comparison within the structure of a syndicated magazine. Chapter 8 is based on a report as well as a letter to the editor in response to the same report.

The four themes also focus on reports about cosmetic surgery set in different countries and cultural contexts, and therefore provide insight not only into the representations of cosmetic surgery, but also how cosmetic surgery and cosmetic surgery recipients are both discursively and culturally constructed. The articles grouped under the four themes represent examples of recontextualisation on various levels. On one hand, the 'texts' gathered from interviews of patients, medical experts and other relevant parties are structurally recontextualised in a journalistic article. On the other hand, especially regarding the analyses in Chapters 7 and 8, the content is also culturally recontextualised through the view of a Western journalist on cosmetic surgery procedures in an Asian and a Middle Eastern context.

On first impression, the four themes appear to group cosmetic surgery under one specific aspect, such as the normative function of cosmetic surgery in the article analysed in Chapter 5 or the assessment of a surgical procedure under the gaze of the cultural 'other', as in the two versions of the article on leg-lengthening in China.

Through critical discourse analysis, it becomes apparent that the articles grouped under the four selected themes support Fraser's (2003) hypothesis that

representations of cosmetic surgery must be read as combinations of various and contradictory discourses. The selected articles therefore allow me to investigate how multiple discourses are used to create inconclusive narratives in varying representations of cosmetic surgery under different foci.

In relation to the role women's magazines create for themselves, Gill (2007) states that they sell themselves as expert consultants in lifestyle issues to their advertisers as well as their readers:

They [women's magazines] tend to address readers as equals and friends and adopt an intimate tone; they are organised around the shared pleasures and labours of femininity; they are invariably constructed in opposition to masculinity [...] and are also structured by implicit exclusions relating to age, 'race', sexuality and class; and they adopt a language of individualism, with an emphasis on personal solutions at the expense of collective social or political struggle (p. 183).

As Gill (2007) emphasises, the notion of femininity is an important feature in women's magazines, and it is increasingly presented as a bodily characteristic which requires constant work and expenditure on beauty products (p. 187). The concept of femininity as a continuous beautification and body modification process has implications for how women are invited into subject positions:

Against the backdrop of a powerful beauty mandate for girls and women, 'fun' does not seem to capture even remotely the complexity of women's relationship to their own bodies. Rather, the discourse is part of the shift from objectification to subjectification [...] in which *more and more of the normative requirements of femininity must be presented as freely chosen and pleasurable, and internally motivated rather than imposed or influenced by wider culture* [my italics] (pp. 188-189).

Gill (2007) also argues that "it is not necessarily the case that all readers will accept the subject positions on offer in women's [...] magazines, and there may be divergent and even subversive readings made of them" (p. 217).

Under the premise that women's magazines invite their readers into subject positions but readers may diverge from such positions, two overarching aspects are addressed in the analyses. First, I investigate how the magazine's choices in presenting a certain story or topic invite or discourage the readers' participation in the complex identity construction process through cosmetic surgery. Second, through critical discourse analysis, visual analysis and narrative analysis, I comment on how linguistic and semiotic devices are used to enact that process.

Each chapter contextualises the article(s) and includes reprint(s), and, in the case of German and Japanese versions, the English translation. All articles are reprinted with permission of the respective publishing houses (see Appendix 2), and professional English translations have been supplied for the German and Japanese articles used in this study. The translations were carried out by accredited translators sourced through NAATI (National Accreditation Authority for Translators and Interpreters).

In addition, each chapter comments on genre, structure and overall theme. Other aspects analysed are the representation of 'social actors' (Fairclough, 2003) and visual participants as well as reader positioning through linguistic and semiotic devices, as mentioned above.

Following the analyses, the summary of all analyses in section 8.5 will establish links among discourses underpinning representations of cosmetic surgery, reader positioning among contradictory views on cosmetic surgery represented in the magazines, and the wider context of identity negotiation.

Before I delve into my first in-depth analysis, I would like to point out that the only article reproduced in colour is the article analysed in Chapter 5, which was obtained as a colour scan of the original article with the assistance of publishing house ACP Magazines. The articles for analysis in Chapters 6 and 8 as well as the German article in Chapter 7 could only be obtained as black-and-white photocopies since the supplying libraries did not offer colour photocopying or scanning at the time of data gathering. The Australian version of the leg-lengthening article in Chapter 7 was also

provided as a colour scan by Pacific Magazines but reproducing this article in black-and-white turned out to provide better resolution, and in addition, a more consistent approach for comparison with the monochrome German leg-lengthening article.

5. The Cinderella Factor:

The All-transforming Power of Cosmetic Surgery

5.1 Situating the Article

The following analysis is based on the article *When plastic surgeons say NO*, from the Australian edition of *Cosmopolitan*, published in the August 2003 issue (see Appendix 1, C.A28), p. 122-124. The author of the article, as stated on p. 124, is Patricia Flokis; the two images (on p. 122 and 124) in this article were obtained from image bank Getty Images.

The day Penelope*, 27, got her big break in television, as a researcher on a pay-TV channel, was one of the happiest of her life. It was also the beginning of her obsession with plastic surgery. "It was my big dream to be a TV reporter," she says, "but I knew I had to do the hard slog behind the scenes first."

However, after two years, Penelope was still desk bound. "My boss kept bypassing me for promotion," she recalls, "and I worked the hardest. I thought, 'It has to be my looks.' I was big around the hips like my mother, and I had inherited my father's bumpy nose. I was convinced the only way I could further my career in television was with plastic surgery."

Penelope spent \$6000 on a nose job, and had liposuction on her stomach and her thighs. Pleased with the results, she consulted a cosmetic surgeon and had collagen to plump up her lips and botox injections in her forehead. "People noticed the difference," she says, "and I felt better about my appearance, but I still wasn't offered a job in front of the camera."

Then, when a former colleague became the new face of a lifestyle show, Penelope was devastated. "I made an appointment to see my plastic surgeon the next day," she says. "I wanted cheek implants and another nose job to

WHAT'S BEHIND THESE BANDAGES? A) SCARRING, B) NO SELF-ESTEEM, C) ALL OF THE ABOVE!



GETTY IMAGES *NAME HAS BEEN CHANGED TO PROTECT IDENTITY

When
plastic
surgeons
say **NO**

There's improving on what nature gave you ... and then there's losing the plot entirely. Are you listening
Melanie Griffith?

122 cosmopolitan.com.au

make it thinner on the sides. He listened to my request, and said, 'I'm sorry, I won't do it. You don't need this surgery.' He suggested that maybe I needed to change my job, not my face, and recommended counselling. He was nice about it, but I felt humiliated. Who's ever heard of a plastic surgeon turning down business?"

That night, Penelope spoke to her best friend. "She was worried about me," Penelope recalls. "She thought the plastic surgeon was right to refuse me. She couldn't understand where my obsession was coming from. Where had my self-esteem gone? When she said that, I burst into tears. I realised that surgery hadn't got me what I truly wanted."

There's no doubt that there are healthy reasons to seek out plastic surgery. For instance, there's no need to live with back pain caused by large breasts, or to be self-conscious about a big nose. These days, however, nips, tucks, implants, mini-lifts, botox injections, liposuction, rhinoplasty and breast augmentations are so common, surgeons are beginning to see a new breed of patients coming through their doors: those who are uninhibited about their pursuit of perfection, and who assume anything is achievable with silicone and a scalpel.

"In Australia, 99 per cent of requests are entirely reasonable," says Sydney plastic surgeon Dr Warwick Nettle. "Like the person who wants to pin back protruding ears or make their small breasts larger, or large breasts smaller. They come in once to fix that specific flaw and that's all the plastic surgery they'll ever need, or want. I think that high percentage reflects the healthier relationship Australian women have with their own bodies, compared to say, American women. However, I turn approximately 30 people away every year – because their particular requests are either surgically impossible, undesirable or unnecessary."

So where do plastic surgeons draw the line? Nettle and Melbourne plastic surgeon, Dr Malcolm Linsell, gave *Cosmo* six good reasons why they say no to potential patients.

No!

"You're seeing invisible imperfections"

Yes, plastic surgeons can enhance a woman's appearance, but some patients perceive problems that don't even exist. Recently, Nettle turned away a 26-year-old actress who wanted a forehead lift. "She had already had her lips made fuller with collagen," he says. "She wanted her forehead lifted, but she had zero lines, so I had to say no to her." And, like many of his

colleagues, Nettle won't operate on a woman if she is normal to begin with.

"Of course, I do breast implants and nose reductions," he says, "but I won't change a patient's natural brow line in order to satisfy some perceived idea of beauty that they have in their head that no one else shares. Other surgeons may be comfortable making slight improvements to give a woman what she wants. Personally, I don't always feel it's worth putting a patient through a major operation, with potential risks, for a minimal return."

No!

"Your request is just too weird"

Without a doubt we live in strange times. "I've had a couple of very wacky requests," says Nettle. "One twenty-something woman wanted to look older, asking me for wrinkles and to have her cheeks flattened. She worked in the finance industry and felt that maturity would increase her job prospects. I said, 'Sorry, that doesn't seem right to me.' Then there was another woman with normal ears who wanted me to make them stick out. When I asked her why she told me she just liked the look of it. I said, 'No way.'"

Nettle says these women aren't crazy, but they do have a specific psychological issue that needs to be dealt with. "I always suggest counselling," he says. "Many are offended and say they're going to find someone else to do the job, but most have heard it all before because I'm not the first surgeon they've seen who's turned them down."

No!

"Your problem is more psychological than physical"

Although rare, surgeons are especially on the lookout for patients with body dysmorphic disorder (BDD), a disease related to obsessive-compulsive disorder in which patients fixate on defects in their appearance. Many psychologists argue that Michael Jackson may be one high-profile victim. "There isn't anything really wrong with their appearance," says Nettle, "but they fixate on a particular feature and feel it's ruining their lives. BDD is notoriously difficult to treat since it's a personality trait, and people don't give them up easily. They don't actually recognise themselves as having a problem. They believe it's everyone else that has the problem."

BDD afflicts about one per cent of the population, about half of whom seek plastic surgery, only to become obsessed with another

body part. "The warning bells in my head will start ringing loudly," says Linsell, "when I see a woman who expresses maximum concern over a minimal deformity. She says, 'Can't you see how bad my nose is?' and I'm thinking, 'What the heck are you talking about?' I have to turn her away because what she's seeking, no surgeon can give her."

No!

"The operation may cause permanent damage"

Some operations are particularly risky, but while some women may be prepared to take the chance in order to get what they want, plastic surgeons aren't. For instance, the demand for a J.Lo bottom has made butt implants popular in the US. They're dangerous, however, as the implants can burst and cause a lumpy, dimpled rear. For this reason, they're unpopular amongst most Australian plastic surgeons.

Linsell does not do butt implants. "I will even refuse women who want chin and cheek implants because the risk of infection and extrusion are too great," he says. "Cheek and chin implants can rub on the overlying skin, gradually wearing it away until the implant

"Once I saw a woman in her early twenties, who wanted me to add the tell-tale signs of ageing to her face. I said no."

Dr Warwick Nettle

pokes right through. If this happens, it can be fixed, but there will always be a scar."

However, some women won't take no for an answer. Neither scars nor an extensive list of possible complications – including becoming an amputee – could stop Sara Vornamen, from travelling across the world to get what she wanted: to be taller. In her mid-twenties, and standing at 154-centimetres, Sara decided to undergo a traumatic and painful leg-lengthening operation. Sara's operation, through to her recovery, took more than seven months and came at a cost of \$31,000. In Australia, ▶



yet effective

Simple pure skincare for sensitive skin.
No perfumes. No colours. No hype.

simpleskincare.com.au

◀ however, leg lengthening is not currently available for cosmetic reasons. It is performed only on children or adults with congenital problems such as dwarfism; to correct uneven legs; or to repair legs that may have been disfigured by accidents.

Undeterred, Sara spent four months in a Russian clinic where her legs were broken below the knees, then encased in metal frames and slowly stretched. She was in so much agony that some nights she could only sleep for 15 minutes, but she is now eight centimetres taller. "I knew there would be pain, but I really wanted to be taller," she told a national magazine afterwards. "They say it's unethical, but I don't care. I'm not hurting anybody or interfering with anyone else's life." And despite the months of terrible pain, Sara hasn't ruled out having more lengthening done on her legs. "I'd definitely consider having more done in a couple of years," she said.

No!

"Your surgery won't age gracefully"

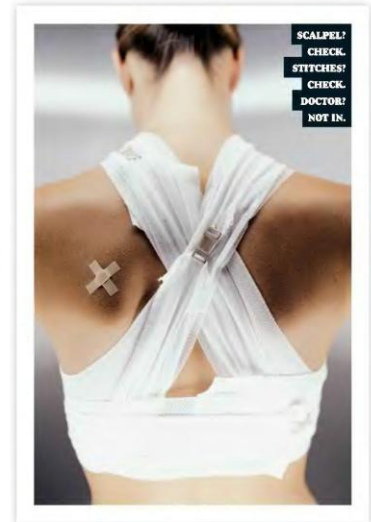
We've all heard the myth about supermodels getting ribs removed in order to reduce their waistline, but some women yearning for cheekbones like Kate Moss have asked Nettle to have their buccal fat pads (the tissue lying between the cheekbone and the jaw line) removed. Nettle used to perform the procedure on women who wanted that gaunt look, popular in the early '90s, but has since changed his mind about doing it on women who have normal cheeks.

"It's actually a fairly simple procedure," says Nettle. "I perform it about ten times a year, but it's on specific patients; those who look like they have marbles in their mouths. I take out their buccal fat to make them look normal, not so they can look like supermodels. This procedure ages you prematurely and some women don't look good down the track."

No!

"You're not doing this for yourself"

Surgeons often say no when it's obvious a patient is having surgery *only* to please someone else. "Some women believe bigger breasts will help salvage a relationship," says Nettle. "But it never does. Sometimes a partner will ask a woman to have the surgery, but usually it's nothing he's specifically said, the woman just believes having bigger breasts will make her more attractive to him, or keep him from cheating on her. I always try to work out what my patient's true motivation is, but I



have been duped on occasion. These women are quite savvy. They know if they admit they are doing it to please a guy, I'll refuse them."

While breast augmentation makes up a large proportion of his work, Nettle passes on patients who want to turn their B-cups into triple Es. Linsell, however, will consider it – for the right reasons. "Most women who want enormous breasts are professional dancers who want to further their career prospects," he says. "I have no problems with that."

Linsell recently operated on a thirty-something-year-old woman who longed for enormous breasts. "Although I had concerns about her motives initially," he says. "I decided to carry out the operation because she convinced me she'd wanted them for years. I made her walk around for weeks with large fake breasts to make sure she was comfortable with the size and how she looked."

What happened to Penelope in the TV industry? Six months later, her boss resigned. "My new boss was wonderful," she says. "She listened to my doubts and to what I wanted, and she convinced me that I hadn't been overlooked as such, but that management thought I had enough talent to be a great producer; having a good eye for newsworthy stories. She gave me the option to try my hand at reporting, but I've since been promoted to producer and I'm loving the job. I've stopped having collagen and botox (they were costing me an absolute fortune), but I don't regret the liposuction or having my nose done. My only regret is that I didn't believe more in my natural self from the beginning." **Patricia Flokis** **OSMO**

5.2 Blurring Genre and Discourse Boundaries: The ‘Triptych’ Structure of the Article

The structure of the article *When plastic surgeons say NO* is in two parts, with a personal account of a cosmetic surgery recipient (C.A28, pp. 122-123 (first paragraph on left-hand side column), and p. 124 (last paragraph on right-hand side column) framing a report discussing six reasons why cosmetic surgeons would turn patients away. The report (classified as a “Cosmopolitan special investigation” on p. 123), addresses through narrative the general theme of the article on normative standards of cosmetic surgery, as introduced by the heading and subheading. This section constitutes the major part of the article in regards to length of text, encompassing nearly 2 full pages of the article (pp. 123-124). In regards to a variety of discourses and their appeal to invite the reader, I argue that the personal narrative functions to ‘set the scene’ by introducing the reader to the protagonist’s individual cosmetic surgery ‘journey’. By concluding the article with a personal evaluation and ‘coda’, this ending invites the reader more strongly into the discussion around normative practices in relation to cosmetic surgery.

The personal account is a popular genre in articles on cosmetic surgery in women’s magazines, which I classify as ‘personal confession stories’. These are articles in which a protagonist (in most cases a woman) reflects upon her personal experiences with cosmetic surgery, the reasons for and against the surgery as well as her hopes, regrets and associated successes. In most cases, this is done from a first person perspective, although a third person perspective, often supplemented by direct quotations from the person concerned, is also common. Both create a highly personalised version of story-telling, and invite the reader to, if not exactly identify, at least empathise with the protagonist’s cosmetic surgery ‘journey’ very closely.

In relation to formatting, Kress and Van Leeuwen (2006) apply the term ‘triptych’ to a formation in which information is arranged in three main parts (pp. 198-201). In my view, printed text, sharing the space on a magazine page with visual elements such as images, can also be regarded as a visual representation of letters and words on a page. I argue that this concept of a ‘triptych’ can be applied to the way the two

genres are arranged here, with the personal story providing the first and the third part, into which the report is embedded.

Kress and van Leeuwen (2006) identify a logical advancement of argument in a triptych of visuals. In their understanding of a triptych, the middle always takes the part of the ‘mediator’, which links either the left or the right in a horizontal, or, in a vertical triptych, the top and bottom. In a horizontal triptych, the left represents the given and the right the new, whereas in a vertical structure the top signifies the ideal and the bottom the real (p. 201). The claim that the arrangement of text in a triptych follows a clearly defined purpose is useful in terms of reading the visual as argument.

In applying Kress and Van Leeuwen’s (2006) concept of triptych to this text, I argue that there is more expressed in the threefold structural arrangement of this article than a simple introduction – body – conclusion structure. Since the triptych uses different genres for the introduction, the body and the conclusion, this blurs boundaries between the genres and, more significantly, among the discourses and narratives of cosmetic surgery presented within those two genres.

5.3 Strategically Becoming Surgical: Theme, Language and Images

As indicated by the title *When plastic surgeons say NO*, the agenda of this article is to provide answers to what type of cosmetic surgery can be considered as acceptable and ‘normal’ in contrast to ‘extreme’ or ‘bizarre’ cosmetic surgery. The discussion around where to draw the line is a frequently addressed aspect of cosmetic surgery, evidenced in the fascination in the coverage of cosmetic surgery addicts or “cosmetic surgery junkies” (Pitts-Taylor, 2007, p. 5), in the media as well as in public discourse.

Pitts-Taylor (2007) states that

the social construction of extreme cosmetic surgery, cosmetic surgery junkies, and surgery addiction, along with some of the recent manifestations of good and normal

cosmetic surgery in our society [...] represent our attempts to socially manage the virtual explosion of cosmetic surgery in our society [...] We are deciding what kinds of surgeries, and which kinds of patients, we will socially accept and promote. What are good and bad surgeries? What are the acceptable and unacceptable reasons for cosmetic surgery? Who are acceptable and unacceptable patients? (p. 5).

This aspect of a normative function of cosmetic surgery is taken up by the subheading: “There’s improving on what nature gave you ... and then there’s losing the plot entirely. Are you listening, Melanie Griffith?” (C.A28, p. 122). By addressing the celebrity, who has undergone substantial cosmetic surgery, she and the reader become part of the implied audience.

This first sentence has a paratactic structure, through which two parts of the sentence are linked by the coordinating conjunction ‘and’, indicating that both parts of the statement are of equal value. Thus only two sentences into the article, a binary opposition is strongly apparent through the linguistic strategies of the writer. It is a lack of distinction and judgement between ‘healthy’, and therefore ‘justified’, cosmetic surgery, that is, surgery within the realms of the ‘normal’, and ‘unhealthy’ or ‘extreme’ and ‘bizarre’ cosmetic surgery, which makes ‘people’ (in this case a celebrity well-known for her surgical endeavours) take the obsession with appearance a step too far. It is in these two short sentences, through the juxtaposition of those two contradictory concepts of cosmetic surgery, where implicit or assumed values (Fairclough, 2003, p. 173) of cosmetic surgery are strongly expressed. Value assumptions refer to what is good/desirable and what is bad/undesirable (Fairclough, 2003, p. 55, 213), and in these two sentences, “improving” one’s appearance within natural boundaries is represented as desirable, whereas ignoring these boundaries is clearly undesirable.

In relation to the speech function of both sentences, the process is one of ‘knowledge exchange’, expressing ‘epistemic’ modality (Fairclough, 2003, p. 167). This is expressed in the first sentence through a declarative, ‘realis’ statement, in which the writer expresses a ‘commitment to truth’, by commenting on about what is, was or has been the case (Fairclough, 2003, p. 109, 167). The opposition of ‘good’ and ‘bad’

cosmetic surgery is stated as an objective fact, on which the second sentence, a rhetorical question to a celebrity representing 'bad' cosmetic surgery, is based, and thus gains critical power.

According to Fairclough (2003), the rhetorical question in the second sentence is another way of expressing 'epistemic' modality. By asking a direct question which is characterised by its non-modalised, positive manner, the author is strongly eliciting the reader's commitment to truth (p. 167), and thus invite the reader to take a critical stance towards people who are, as referred to on the first page, "losing the plot" (C.A28, p. 122).

The subheading also implies that cosmetic surgery obsession is something that is strongly associated with the celebrity media world. Using Melanie Griffith as an example, the subheading draws upon the prevalence of cosmetic surgery-obsessed stars (C.A3, C.A14) such as Michael Jackson (Jones, 2008b), Cher (MC.G3), 'cat woman' Jocelyn Wildenstein, Lolo Ferrari (C.A19; MC.A14; Jones, 2008a), and Dannii Minogue (C.A14).

At first glance, the way in which the article is introduced suggests an approach that is critical of cosmetic surgery and intends to set clear normative standards; however, as the literature around body modification and identity construction highlights, clearly defined views are rare in bodily and identity matters. As the article progresses, this complexity becomes increasingly obvious in the article.

The visual on the first page of the article (C.A28, p. 122) takes up almost all of the space on the right-hand side of the page, while the text is placed on the left-hand side of the page, with the main heading and the sub-heading placed at the bottom of the page. Together with the main heading, the image draws the reader's initial attention towards it.

The picture shows the head and the neck of a woman, covered in gauze. The face is covered with heavy eye make-up and lipstick. The gauze covers nearly the whole face, only the eyes and the lips are not covered. On both sides of the neck, the gauze

is secured with a safety pin. The image shows very low naturalistic modality in representing a cosmetic surgery patient. It is obvious that the person in the photograph has not undergone actual surgery; the reference to surgery is expressed by the easily recognised surgical gauze. Cosmetic surgery in this image is represented as a “carnavalesque moment” (Jones, 2008, p. 11).

The caption outlines the key conflicts which are addressed in the article: “Where do we decide to draw the lines of acceptability?” (Pitts-Taylor, 2008, p. 103). The caption in the left-hand side corner of the photograph asks:

What's behind these bandages: A) scarring; B) no self-esteem; C) all of the above?

By using another popular genre in women’s magazines, a multiple choice test in this case, based on a rhetorical question and answers, the complex relationship between cosmetic surgery and identity negotiation is reduced to posing and answering simple, straightforward questions. An illusion is created for the reader, namely that they have the power to decide where to draw the line by choosing the answer that appears ‘right’ to them.

With the variety of discourses and the increasingly contradictory progression of the narrative in the article, the boundaries between ‘right’ and ‘wrong’ cosmetic surgery are blurred and differ widely. While Penelope’s friend argues from a feminist point of view, expressing concern about her cosmetic surgery ‘obsession’, the consultant surgeons base their assessment on different premises. The definition of which cosmetic surgery is ‘right’ and ‘wrong’ is further obscured by that fact that the surgeons, although medical experts in the same specialist field, do not always agree on all issues. Offering simple problem solution structures like a multiple choice test suggests the magazine’s intent to draw reader attention away from the underlying complexities of normativity in cosmetic surgery. The complications and ‘dark side’ of cosmetic surgery which the article claims to address, as stated in its headings, are obscured further by choosing an image like the one on p. 122 of the article, through which cosmetic surgery is metaphorically implied but not realistically represented.

The colours chosen for the heading as well as some other textual elements throughout the article, such as the six *No!* boxes highlighting reasons against cosmetic surgery, are pastel colours (pink, lilac and yellow). As Machin (2007) states, colour affords meaning-making through a colour's cultural associations (p. 69). Pastel colours (as used in this article) which are subdued in relation to brightness and saturation evoke associations of spring, girlishness, baby clothes, fairy dresses – in general, things that are often seen as twee, pleasant and harmless. Although a semiotics of colour is more sophisticated, the colour selection in this article suggests a 'girly' or softer approach.

A critical reading of the headings and the image on the first pages of the article highlights early the murkiness around the article's intention to set clear normative boundaries for 'right' and 'wrong' cosmetic surgery.

5.3.1 Penelope's Personal Narrative, Part One.

As mentioned above, the article starts with the personal account of a cosmetic surgery recipient, identified as 'Penelope', a 27-year-old researcher in the television industry. By providing a concrete profile, the writer represents her as a 'real' character of the story. The effectiveness of the magazine story, however, is not only created by the manipulation of dominant discourses of cosmetic surgery into a satisfying narrative, but also through 'social actors' who, by 'personalising' those discourses, contribute to the authenticity of the story.

In this section of the article, the reader is first introduced to what Fairclough (2003) calls a 'named social actor' (pp. 145-146). This indicates that the 'social actor' is highly specific, since Penelope is 'named', and is the narrator of her personal account, 'included' in the representation of the events and referred to by name and the personal pronoun 'she'. Furthermore, she is represented personally, not only as part of a generic group (for example, television researchers or women with cosmetic surgery) (Fairclough, 2003, pp. 145-146). The personal specification of Penelope is

reinforced by stating her age and providing details, albeit generic, about her position and her workplace (“a researcher on a pay-TV channel”).

The most significant feature of Penelope’s construction as an ‘authentic’ person is the fact that most of her narrative is directly reported (defined as a “quotation, purportedly the actual words used, in quotation marks, with a reporting clause”) (Fairclough, 2003, p. 49). In the four different ways of reporting which Fairclough (2003) identifies – direct, indirect, free indirect reporting and narrative report of speech act – it is, as in the case of Penelope’s narrative, direct reporting which most claims fidelity to what was originally said or written (p. 49, 61).

The social event represented in Penelope’s narrative is not a generic story about a cosmetic surgery ‘journey’; it is her individual ‘small story’ (Bamberg & Georgakopoulou, 2008) in the search of identity and meaning-making that is presented to the reader. As a narrative, it follows the structure of Labov’s (1977) narrative model. There is a section that provides the reader with a ‘lead-in’, stating that a happy event, namely Penelope securing a position in television that she always wanted, was also “the beginning of her obsession with plastic surgery”, thus, the ‘complication’ (C.A28, p. 123). The aim of this abstract is to provide a summary of the story at the start, and in this particular case, the reader is introduced to something that poses a major complication in Penelope’s life.

The two paragraphs following the abstract constitute the establishment stage of the narrative. In relation to Penelope’s professional life, the reader learns that the protagonist did not get the promotion she was hoping for. The reader is also informed about the protagonist’s action as a response to the situation: Penelope was convinced that the problem had to be her looks, and decides to invest in a makeover including a nose job, liposuction on her stomach and her thighs as well as non-surgical procedures such as collagen and botox injections. The complication is exacerbated when she is “still not offered a job in front of the camera” and even more so “when a former colleague became the new face of a lifestyle show”. The complication on a professional level leads to another issue in relation to her “obsession with plastic surgery”, because a surgeon rejects her requests for further surgery. The conflict

accumulates once again, this time on a personal level, when Penelope's best friend cannot understand her actions anymore and questions Penelope's self-esteem and agency.

Penelope is represented as caught in between the two worlds of 'normal life' and 'the glamour world of the TV screen', whereas her unnamed friend is clearly opposed to Penelope's 'obsession' with cosmetic surgery. The archetypal loyal best friend, who supports her friend but is willing to play devil's advocate when required, and who is set up as her counterpart, highlights another voice in the orchestrated arguments for and against normative practices in cosmetic surgery.

This becomes increasingly apparent as this part of the article draws upon several, and contradictory, discourses of cosmetic surgery. Cosmetic surgery is here constructed as an 'investment', which might endow the patient with the opportunity to not only change her appearance, but her professional and personal life. Another discourse which can be identified in this section is the transformative power of cosmetic surgery if one lacks 'good looks', cosmetic surgery can serve as a means to obtain them. The discourse of the transformative power of cosmetic surgery serves a master plot, in this case the 'Cinderella' plot, in which magic transforms one's existence on many levels while the protagonist reaps rewards.

This Cinderella discourse is partly supported by the agency discourse, since Penelope utilises cosmetic surgery in order to overcome her position as a 'victim of nature' which endowed her with unfortunate genetic material such as "big hips" and a "bumpy nose". This agency discourse is contrasted to notions of victimisation and manipulation, through which Penelope is represented as a person on the brink of becoming a 'surgery victim'. The integration of discourses drawing upon vanity and victimisation concurs with Fraser's (2003) observation that although these discourses are considered simplifying in feminist theory, they are still widely used for boundary setting in popular discussions of 'extreme' cosmetic surgery.

Part one of 'Penelope's' narrative concludes with an initial evaluation, when she realises that "surgery hadn't got me what I truly wanted" (C.A28, p. 123),

highlighting the complexity of the discourses of cosmetic surgery at play in the first section of her narrative.

Penelope's surgeon's negative response toward her wish to have more cosmetic surgery raises the issue of acceptable and unacceptable cosmetic surgery for the first time in the actual article. Through 'Penelope's' narrative, it becomes clear that she considers her wish for more surgery reasonable, but the cosmetic surgeon argues that the cosmetic surgery is excessive and unhealthy.

The position of the surgeon, which is strongly opposed to Penelope's, is highlighted by indirect reporting within Penelope's narrative and the fact that the surgeon's view is delivered in short, declarative statements ("I'm sorry, I won't do it. You don't need this surgery."). The lack of hypotactic structures (a main clause supported by one or more subordinated clauses) and therefore of semantic relations between sentences and clauses, stating possible reasons or intentions of the surgeon, reinforce the accuracy and finality of his (and the article's) assessment of Penelope as a possible 'surgery junkie'. Penelope's retort to the surgeon's reaction "Who's ever heard of a plastic surgeon turning down business?" serves to position her as even further removed from reason (as represented through her best friend's and the surgeon's appeals).

The investment discourse of cosmetic surgery is the most emphasised one in this section of the article, by providing details on the costs of Penelope's procedures. Penelope's 'investment' involves, very *Cosmopolitan* style, a simple solution to the problem in the form of \$6000 worth of cosmetic surgery. Nevertheless, the simple, strategic success still eludes her: "I felt better about my appearance, but I still wasn't offered a job in front of the camera" (C.A28, p. 122).

It is interesting to note how the surgeon is represented as the responsible member of the interaction, fulfilling the professional role expected of a medical expert by being objective and focussing on the patient's wellbeing. The surgeon is also the protagonist who subverts the agency discourse in this case, in that cosmetic procedures are undertaken not for appearance but 'for oneself'.

As Bordo (2009) states, this “I’m doing it for me”-‘mantra’ (p. 23) is highly misleading:

“For me” [rarely means] “in order to feel better about myself in this culture that has made me feel inadequate as I am.” [...] Most often [...] the “for me” answer is produced in defiant refutation of some cultural “argument” (talk-show style, of course) on topics such as “Are Our Beauty Ideals Racist?” or “Are We Obsessed with Youth?” (Bordo, 2009, p. 23).

Bordo (2009) argues further that this construction of ‘me’ as “a pure and precious inner space, an “authentic” and personal reference point untouched by external values and demands” (p. 23) is an illusion which does not reflect the reality of the constantly changing influences of a ‘liquid world’. The self-delusional and contradictory side of the agency discourse is emphasised in Penelope’s surgeon’s suggestion that if the underlying issue is of a psychological nature, ‘fixing the outside’ is ultimately not going to be a step towards the successful solution of that problem, let alone ‘being oneself’.

Penelope, the patient, is represented in a more complex light in relation to her reasons and thoughts. Through her concerns and arguments which are mainly expressed in direct quotes, the reader can identify with her narrative yet is also invited to read her critically through plain ‘truths’ delivered by the surgeon and her friend, as well as the writer’s commentary. Labelling Penelope’s concerns about her appearance as an obsession with cosmetic surgery, the writer also categorises her as the ‘Melanie Griffith next door’ to the reader, evoking empathy with her situation. Penelope’s friend’s comment concludes the first part of Penelope’s narrative, taking up a more feminist stance by challenging cosmetic surgery as a form of restrictive beauty practice which undermines female self-confidence.

In relation to the grammatical and metalinguistic structures of Penelope’s narrative, the predominant grammatical mode is declarative, and short statements with paratactic sentence structures (clauses of equal grammatical status, either subordinate or supraordinate to each other; they are juxtaposed by commas or linked by

coordinating conjunctions) prevail in this first part of the personal narrative. The statements follow the aim of knowledge exchange, that is, the intention to inform the reader about the protagonist's situation, actions, emotions and reasons behind her actions. These attributions are carried out by the writer of the article in the process of recontextualisation, and therefore need to be read as part of a purposefully constructed argument supporting the alleged normative agenda of the article to highlight 'wrong' cosmetic surgery and 'wrong' reasons or considerations for cosmetic surgery.

The statements in the article cover three different types. There are statements of fact; "The day Penelope, 27, got her big break in television [...] was one of the happiest of her life", intersected by speculation "I thought, 'It has to be my looks.'" and evaluations "I realised that surgery hadn't got me what I truly wanted." (C.A28, pp. 122-123). The semantic relations between sentences and clauses in those statements are in most cases not clearly identified. The paratactic structure links clauses by commas or the coordinating conjunction 'and', leaving the interpretation of the semantic link between them up to the reader. Nevertheless, a few instances of semantic relations of time ("Then, when a former colleague, became the new face of a lifestyle show") and contrastive/concessive relations ("It was my big dream to be a TV reporter [...] but I knew I had to do the hard slog first", "However, after two years, Penelope was still desk-bound", "I felt better about my appearance, but I still wasn't offered a job in front of the camera") are clearly stated.

I argue that the explicitly or overtly expressed concessive relations appear to be the most significant relation between sentences and phrases in this context. In Penelope's narrative, hopes and expectations of various kinds are continuously shattered: I worked hard, *but* was not promoted; I improved my looks, *but* was still not promoted; I went back to the surgeon, *but* he turned me away, I turned to a friend for support, *but* she did not understand me. Initially, *Cosmopolitan's* strategy of 'simple, strategic solution' appears not to be successful, since the actions undertaken to counter a disadvantageous situation end in failure.

The language used in the concessive relations stated above clearly invites the reader to identify with Penelope's situation. A familiarity with and a sense of common understanding of dissatisfaction with a job and the workplace between represented 'social actor' Penelope and the reader is on one hand created by the colloquial language used in this context. Expressions such as "slog", "being desk-bound", "a job in front of the camera" are vernacular expressions. Moreover, the language used is emotive and personal, as evidenced in expressions such as "do the hard slog first" and "it was my big dream" and the repetition of the adverb "still". The slightly exaggerated character of such language is also characteristic of everyday conversations between friends and acquaintances, inviting the reader to be a close participant of Penelope's 'small story'.

Suggestions of 'simple, strategic solutions' are therefore posed to Penelope as well as the reader. Since the reader at this stage of the narrative is left with an evaluation that one 'simple, strategic solution' (investing a first \$6000 in cosmetic surgery) pursued did not return the required results, she is already positioned to seek alternatives during the course of her further reading of the article. A resolution is, as I outline below, presented at the end of the article by proposing that (you) just 'accept who you are'. In Penelope's final evaluation, Penelope and the reader become unified as the generically addressed 'you', an identification which is possible through the construction of Penelope as an 'alter ego' of the reader in the early stages of the article.

5.3.2 Obscuring the Normative Ethics of Cosmetic Surgery: The Report.

At the point where the report takes over in the article, it interrupts Penelope's 'small story' and takes the personal account to the level of a 'big story' – the 'story' of the ethics of cosmetic surgery.

The first part of the report, (paragraphs 2-4 of the left text column on p. 123), dedicated to discussing the concept of 'justified' cosmetic surgery, is followed by a formulation of "six good reasons" for not undergoing cosmetic surgery. These

positions offered by two new, and the only male, 'social actors' in this article, surgeons 'Nettle' and 'Linsell', who are assigned the role of the expert interviewees in this article.

When arguing that there are patients who see "invisible imperfections", we hear in Nettle's narrative that a 26-year-old actress was one who fitted into this category. A patient whose "request was just too weird", was one "twenty-something woman". Two people supporting the claim of having a problem which is "more psychological than physical" were Michael Jackson and a woman who expresses maximum concern over a minimal deformity (C.A28, p. 123).

It is obvious that the article uses standardised roles which are common in popular discourses about cosmetic surgery. The surgeons or medical experts are nearly always male, the patient nearly always female. Celebrities, on one hand, function as examples of cosmetic surgery which went a bit too far, but who, because of their celebrity status, have not much to do with the 'fun, fearless *Cosmopolitan* woman next door'. On the other hand, supermodels such as Kate Moss, who is explicitly mentioned in the article (C.A28, p. 124), represent an unattainable ideal of beauty for girls and women next door, and for whom cosmetic surgery could then provide the ultimate means to success. On the negative side, supermodels and media stars can also serve as a deterrent to cosmetic surgery, pressured into undergoing extreme procedures because of the tough requirements of their celebrity profession.

The doctors and experts, deciding whether the request for cosmetic surgery is 'right or wrong', 'normal or weird', and therefore executing the final decision-making for the patients, are the ones in power. They are in a position to reduce the female patients' agency to a process of either following the doctor's advice or refusing it. Furthermore, the main topic of the report section – the argument about what constitutes 'good' or 'bad' cosmetic surgery – confuses issues on various levels. This becomes obvious in the writer's argument that the wide range of cosmetic surgery treatments available blurs the potential patient's vision for what is 'necessary' and 'normal', and what is not. Among the many procedures to which patients "who are uninhibited about their pursuit of perfection" resort, implants, mini-lifts, botox injections and rhinoplasty are mentioned. Including rhinoplasty as one of them is

inconsistent, since the same procedure which was used as an example for ‘justified’ cosmetic surgery just a few lines above (“there’s no need [...] to feel self-conscious about a big nose” (C.A28, p. 123)) is now also placed into the category of ‘wrong’ surgery. Also, the categorisation of a non-surgical procedure such as botox, which is certainly less invasive than a nose job, as ‘wrong’ surgery does not make for a clear-cut argument.

The inconsistency described above is reflected in the direct quotation of a medical expert, who reiterates what the writer of the article has claimed before: “In Australia, 99 percent of requests are entirely reasonable”, says Sydney plastic surgeon Dr Warwick Nettle. “Like the person who wants to pin back protruding ears or make the small breasts larger, or large breasts smaller” (C.A28, p. 13). The use of the adjective “reasonable” in this statement assumes that one normative standard to decide when cosmetic surgery is ‘acceptable and when it is ‘wrong’ is ‘healthy common sense’. Nevertheless, as ‘Penelope’s’ narrative has indicated, her logic does not fall into the realm of the ‘reasonable’. Covertly, this statement is drawing upon established binary relations feminist theory in particular objects to a great extent, such as associating male with mind and reason, and female with body and emotion. As above, the ‘voice of reason’ is assigned to the male medical experts who ultimately decide which procedures are justifiable and which ones are not.

If nearly all requests made for cosmetic surgery in Australia are ‘reasonable’, the female patients’ reasoning cannot be as irrational as represented in Penelope’s case. Furthermore, the critical reader is left wondering whether a discussion around ‘wrong reasons’ for cosmetic surgery needs to take place at all when 99 percent of requests are ‘normal’. A percentage of 1% appears insignificant, nearly negligible.

The report moves on to comment on “six good reasons” (C.A28, p. 123) why cosmetic surgeons say no to patients, which are introduced by statements used as subheadings:

1. *“You’re seeing invisible imperfections”*
2. *“Your request is just too weird”*
3. *“Your problem is more psychological than physical”*

4. “*The operation may cause permanent damage*”
5. “*Your surgery won’t age gracefully*”
6. “*You’re not doing this for yourself*”

This form of address resembles the direct form of address doctors use with their patients, with the reader (“you”) being the implied audience in this case. The six declarative sentences are short, and tone, grammar and vocabulary reflect the style of an informal conversation using contractions and words used more in a conversational context, expressing personal judgement (“weird”).

It is important to note that those six scenarios the text singles out and criticises compromise – according to *Cosmopolitan* and Dr Nettle – the 1% of requests for procedures which are not based on “healthy reasons” (C.A28, p. 123). The examples and arguments presented to support them are unusual ones which are – deliberately or not – contrasted with the reasons of the Penelopes of this world to undergo cosmetic surgery. Consistent with the agenda of the text, a patient who requests a forehead lift although “she had zero lines” (C.A28, p. 123) or another patient who wanted to look older are turned down by the surgeon, stating the patients suffer from mental health issues.

This argument is backed by Linsell, who agrees with Nettle that some patients are suffering from body dysmorphic disorder, an obsessive-compulsive disorder in which patients are fixated on defects in their appearance, the most prominent example being Michael Jackson (C.A28, p. 123). Through such examples, the reader is positioned in a way that her ‘normal’ desires for improving her looks would seem very acceptable.

The list of operations which may cause permanent damage includes procedures which appear ‘extreme’ and ‘carnavalesque’ (see 1.1.3) in the way they subvert what ‘nature has given’ the patients. Nevertheless, the ‘fun, fearless’ *Cosmopolitan* reader learns that Australian surgeons and patients are contrasted positively to the stereotypical American patients who do not know any limits: “For instance, the

demand for a J.Lo [sic]¹⁵ bottom has made butt implants popular in the US. They're dangerous, however, as the implants can burst and cause a lumpy, dimpled rear. For this reason, they are unpopular amongst most Australian plastic surgeons." (C.A28, p. 123). The 'unlegitimised' (Fairclough, 2003, p. 98) claim that "a J.Lo bottom" was in increasing demand supports Gill's (2007) argument that many desires are very constructed, and that women's magazines play a significant role by offering their role as an expert advisor on lifestyle issues to the reader.

The complexities of 'extreme' cosmetic surgery, examples of which are given by the surgeons in the report section of the article, were analysed by Pitts-Taylor (2007) in the accounts of American participants in the television show *Extreme Makeover*. Pitts-Taylor observes that "extreme cosmetic surgery is coded as a practice of self-care that brings wellness [...] Most notable, the physical pain and trauma of surgery are, to varying degrees, minimised on this show" (Pitts-Taylor, 2007, p. 54-55).

However, the pain and suffering which is only mentioned marginally in television shows and many magazines articles involving cosmetic surgery are all worthwhile when the moment of the 'big reveal' arrives, the moment when the made-over persons reunite with friends and family (Pitts-Taylor, 2007, p. 57). As Pitts-Taylor (2007) observes, "the importance with which [...] [the] Reveal is touted almost overtakes the rest of the narrative, as if the moment of showing herself transformed becomes the whole point of the makeover" (p. 58). Penelope is denied this crucial moment when her first cosmetic surgery is not acknowledged as a sufficiently significant transformation for a promotion.

'Sara', a patient named in the report who decides to undergo highly invasive cosmetic leg-lengthening surgery, is very similarly represented as a candidate on *Extreme Makeover*, as "a suffering self, one who passively and gratefully accepts the help of cosmetic medicine, while paradoxically also pursuing empowerment" (Pitts-Taylor, 2007, p. 58). The reader of the *Cosmopolitan* article is left with the decision

¹⁵ On Jennifer Lopez's official website, her acronym is stated as 'J-Lo' (<http://www.jenniferlopez.com/>).

of how to weigh up those contradictions and which stance to take: would she see Sara – and Penelope – as victims, as empowered fun, fearless females, or both?

At this point it is also interesting to note that the only ‘social actors’ who are provided with a more personal characterisation – Penelope, the TV woman, and Sara above (mid-twenties, 154 centimetres tall), who undergoes a “traumatic and painful” (C.A28, p. 123) leg-lengthening operation, are likely to draw the reader’s attention and identification with those personalities more than the anonymous other women who are refused surgery. It is likely that the reader’s self-positioning is based upon the personalised stories of these two women rather than the many examples of ‘negative’ cosmetic surgery, whose representatives the writer of the article chooses to keep ‘impersonally and generically’ represented (Fairclough, 2003, p. 222). The closer the article gets to its end, the more unconvincing the representation of extreme cosmetic surgery becomes. The last argument for refusing patients – that they are not doing the surgery for themselves – shows a disagreement between cosmetic surgeons Nettle and Linsell. Whereas Nettle refuses to operate on patients who want to turn their B-cups into triple Es, Linsell would consider it, however, the argument assigned to Linsell to support his view is rather limited and takes into account only very special cases: “Most women who want enormous breasts are professional dancers who want to further their career prospects” (C.A28, p. 124). The reason to undergo cosmetic surgery for professional reasons is strongly legitimised by ‘authorisation’ in the argument of one medical expert. Furthermore, through effective positioning, at this stage of the narrative the reader is likely to have identified to some extent with Penelope’s quest to also use cosmetic surgery for career improvement.

Such a line of argument, strongly supported by expert authorisation and personal identification with the ‘protagonist’ of the story, evokes a belief in the reader that cosmetic surgery, and even the more extreme forms of it, can be justified if there is a ‘good’ reason for them. This eliminates the “good reasons to say no”, as the article’s author so ironically intended to list. This summary is put into Linsell’s mouth by the journalist as follows:

Although I had concerns about her motives initially, [...] I decided to carry out the operation because she convinced me she'd wanted them for years. I made her walk around for weeks with large fake breasts to make sure she was comfortable with the size and how she looked (C.A28, p. 124).

Towards the end of the article, the agenda and the roles of doctor and patient have nearly reversed, since a patient manages to convince the once critical surgeon of her 'good' reasons for surgery. As paradoxical as it might appear, varied 'levels' of cosmetic surgery, ranging from 'extreme' to 'normal' cosmetic surgery as well as the tendency in contemporary society towards a cosmetic surgery 'craze', are now declared acceptable and justifiable through the narrative lacking consistent normative boundary setting. In the end, it is not the doctors who make the final decision, but the patients who are convinced they are doing the right thing even when the specialist is sceptical. The reader finds herself positioned among a confusing maze of contradictory discourses. From 'investing' in oneself to giving in to social pressures, the reader is left to 'choose' her own position, depending on her willingness to negotiate her position in an agentic manner as well as the 'member resources' available to her to read the text.

5.3.3 Conclusion to the Penelope Narrative.

To conclude the narrative part of the article, there is, *Cosmopolitan* states, only one question to answer: "What happened to Penelope in the TV industry?" (C.A28, p. 124). In the latter part of the personal narrative, Penelope finds professional and personal satisfaction and also reconciles her own contradictory views on her surgery. Thus the narrative finally presents the reader with a fairytale end with a critical twist typical of extreme makeover or cosmetic surgery stories.

As Penelope admitted earlier, she realised that she was a victim of the surgery hype to some extent, because she decided to have her operations, then realised that the operations did not provide her with the 'simple solution' she expected. Nevertheless, she is also an empowered agent, since she decided to stop her collagen and botox

injections. The final message, expressed also by Davis's (1995) interviewees, is that cosmetic surgery helped Penelope to accept her 'true' self.

Penelope's 'small' story of her cosmetic surgery 'journey' in this context is effectively linked to the 'big' story of an archetypal personal journey narrative about delusion and ultimate awareness. It falls into a predictable structural pattern of the protagonist following her ambitions, taking the 'wrong' path, failing to heed advice, then discovering the 'truth' supported by the loyal friends and 'wiser', paternalistic figures. This is a genre familiar to readers and one which allows them to predict and possibly even actively seek out this structure during the reading process for a satisfying reading experience.

The second visual, placed in the right-hand side upper corner of the last page (p. 124), taking up about a sixth of the page, also shows an impersonally and generically represented person. The photograph shows the upper body of a woman, with two bandaids forming the shape of a cross stuck on her left shoulder blade. The rest of the upper body is wrapped in gauze, crossed over the back and then wound around the middle – if it was not for the gauze and a pin keeping the gauze in place where it crosses over, the arrangement would resemble the broader straps of an evening gown. Again, a small caption accompanies the image:

Scalpel? Check. Stitches? Check. Doctor? Not in.

Similar to the image on the first page of the article, the photograph shows low naturalistic modality in relation to the reality of cosmetic surgery. Surgery is represented in the photograph only metaphorically, by adding a bandage to a body. The image and text reinforce the notion of cosmetic surgery being a prop or accessory to one's body and identity, and intensifies the opaqueness of who takes responsibility for the decision-making process in relation to cosmetic surgery.

5.4 Summary: Towards a Liquid Cinderella

The objective of the article is to define norms around a socially acceptable level of desire for beautification and improve appearance. In particular the sub-heading, which passes negative judgement on people who consider extreme procedures by accusing them of “losing the plot”, suggests that the article takes a critical approach towards cosmetic surgery.

In fact, it is obvious that the coda, and moral of the story, sits in strong contrast to the agenda of the article. The protagonist of the narrative, Penelope, does not express any regret about having had cosmetic surgery. It can be assumed that doing so would undermine her claim for agency, but ultimately she has no reason to have any regrets because by overcoming the hurdles of rejection, the simple strategic solution and a linear narrative have become reality: Not only has the cosmetic surgery been a success, insofar that having too much cosmetic surgery ‘got’ her realisation of her self-worth, but also the narrative of continual rejection has turned into a satisfying conclusion (self-acceptance).

The article also fails in its claim to establish clear boundaries of what is socially acceptable and unacceptable cosmetic surgery. Throughout the article, the criteria for defining these boundaries – body parts, cost of procedure, invasiveness of the procedure and frequency – are touched upon in passing, but not specified in greater detail. As outlined in the sections above, the mostly anonymous representation of ‘bad’ cosmetic surgery patients distances the reader, whereas the highly individualised persona of Penelope invites the reader to become involved in her cosmetic surgery ‘journey’, although she is also represented partly as a ‘bad’ patient.

The article highlights the fact that “our personal and social lives are full of tensions between stable and unstable conceptions of ourselves, our identities, and our bodies” (Pitts-Taylor, 2008, p. 7), especially when it comes to cosmetic surgery. This is because discourses about cosmetic surgery in public culture “work variously to bolster its reputation, exploit its patients as spectacles, submit its patients to the psychiatric gaze, and challenge its politics” (Pitts-Taylor, 2008, p. 7).

What many feminist researchers have pointed out is demonstrated in this article: that cosmetic surgery is not a bifurcated issue in which ‘right’ and ‘wrong’ norms can be easily and clearly established. It is a complex issue of many facets, and “if pathology is visible in cosmetic surgery, so is normalcy” (Pitts-Taylor, 2008, p. 25).

Even the ‘fun, fearless female’ of the *Cosmopolitan* readership is positioned among contradictory arguments and positions, from which a conclusive resolution can only be deduced with difficulty. This reflects the pressure to create a narrative justifying a personal cosmetic surgery decision, providing individualised positions for or against cosmetic surgery and possible reasons for a certain viewpoint. Furthermore, the pattern of an inconclusive resolution to cosmetic surgery matters also highlights that the continuous revision of one’s own personal ‘set’ of cosmetic surgery discourses depends on the individual’s situation in the ever-changing circumstances shaping today’s ‘liquid’ lives.

6. Westernisation and Cultural Homogenisation: Japanese Double-Eyelid Surgery and the Removal of Sweat Glands

6.1 Situating the Article

The second analysis is based on a 16–page cosmetic surgery special published in the February 1998 issue of the Japanese edition of *Cosmopolitan* (p. 101-116). The special was published under the main title *Shiritai!! Biyouseikei no subete*. [I want to know!! All about cosmetic surgery.], and features four articles focusing on different aspects of cosmetic surgery. In relation to layout, the pertinent use of (double) exclamation marks in most of the section headings of this feature manifests a sense of excited, and almost childish, urgency about cosmetic surgery issues.

The first article is titled *Biyouseikei ni tsuite hontou no koto o oshiete!* [Tell me the truth about cosmetic surgery!] and provides an introduction to the general theme of cosmetic surgery (C.J2, p. 102-103). This article states the outcomes of a survey of Japanese *Cosmopolitan* readers concerning their views about cosmetic surgery, and it also answers some common questions about cosmetic surgery such as how safe procedures are and whether expectations of surgical outcomes are realistic.

The second article *Biyouseikei shujutsu ukeru mae ni shikkari chekku shite! Koko ga seikou to shippai no wakaremichi*. [Before you undergo cosmetic surgery, check carefully! Here are the crossroads between success and failure.] (C.J3, p. 104-105) outlines the potential successes and failures of cosmetic surgery procedures.

The third part of the cosmetic surgery special has the title *Eyes, nose, breasts ... How can you change the parts of the body that bother you? How actual procedures are performed on different areas of your body* (C.J4, p. 106-113 and describes a plethora of surgical procedures, including widely known ones such as breast augmentation and liposuction, and culturally specific procedures such as double-eyelid surgery.

The cosmetic surgery special is completed with an insight into the personal experiences of cosmetic surgery patients, in an article titled *Biyouseikei shujutsu no*

taikensha ga honne de kataru seikou & shippai ki. Biyouseikei shujutsu de watashi wa kou kawatta! [People who know cosmetic surgery operations from their own experience truthfully tell the successes and failures. A report. With cosmetic surgery operations, this is how I've changed!] (C.J 5, p. 114-115). The last page of the cosmetic surgery special (p. 116) provides names, profiles and photographs of the (male) surgeons who were consulted for the articles, and also states addresses and contact numbers of their clinics as well as the approximate costs for the various procedures they offer.

This analysis focuses on three pages from the third section of the cosmetic surgery special, *Eyes, nose, breasts ... How can you change the parts of the body that bother you? How actual procedures are performed on different areas of your body* (C.J4, p. 106-113). The first two of these three pages are the opening pages of the article (p. 106-107) and deal with eyelid surgery; the third page (p. 113) discusses the surgical removal of sweat glands in order to combat 'osmidrosis' (body odour).

The researcher and writer of this cosmetic surgery special is identified on the cover page of the article (p. 101) as Ishimura Kumiko (female). The supporting images for the special are supplied from different sources, including image banks, individual photographers and cosmetic surgery clinics consulted for this special.

The three pages of the article are reproduced in full below, with the English translation by Philippa Sutton, and are followed by my analysis.

どんな二重まぶたができるか、 読者がカウンセリング体験



診察では、どんな二重にしたいか具体的な希望を伝えると、医師が本人の目の形から医学的に可能なかどうか考えアドバイスしてくれる。細い睫毛のような器具をまぶたに当て、何パターンかの二重をつくり、幅を決めていく。

Before



5mm幅の二重



7mm幅の二重



10mm幅の二重



二重まぶたにする

日本の美容外科で、最もポピュラーな手術は、一重まぶたを二重まぶたにする手術。美容的な意味だけでなく、機能的にも有効。と平賀形成外科の平賀義雄先生。

「二重にすることで、一重のときには目の前に下がっていた皮膚が持ち上がるため、目が大きく開き、視野が広がります」

診察では、自分の希望を医師とじっくり相談しながら目の形に合った自然な二重を決めていく。一般的には、日本人の目は目の周囲が平面的なので、西洋人のような幅の広い切れ込みの深い二重まぶたは似合わない。「上の、10mm幅の二重の写真を見てわかるように、極端に二重の幅が広いと、かえって目が小さく見えてしまう。また、万が一再手術になったとき、幅が広い二重を狭くするのは難しいことを考えても、二重の幅はやや狭めが無難。また、まぶたが極端に窪んでいるケースなど、二重をつくれぬこともあります」(平賀義雄先生)

手術法は大きく分けて左ページで紹介の2種類。まぶたの状態と本人の希望とによって手術法が決める。



目、鼻、胸……気になる部分はどうか変わる？

部位別／実際の手術は こう行われる

© PICTOR INTERNATIONAL
/ Impetal Press

目 eye

情報が氾濫している、美容整形の手術方法。

そこで、日本美容医療協会認定医の信頼できる人の先生方に、

マイナス点を省き、実際の手術法について詳しく聞いてみました。

痛みやいろんなリスクを引き受ける覚悟をしようえで、

手術を受けるか受けないかは、あなた自身の意思で決めること。

いったん行えば元には戻らない不可逆なものであることを踏まえて、

あくまで最終的な手段として、十分に考えたうえで決断をしてください。

Eyes, nose, breasts . . . How can you change the parts of your body that bother you?

How actual procedures are performed on different areas of your body

There's a wealth of information about how cosmetic surgery is performed. We asked five reputable doctors certified by the Japan Association of Aesthetic Medical Inc. (JAAM) for details of how the actual procedures are performed, including their negative aspects.

Having resolved to accept the associated pain and various risks, it is vital that the person who is to undergo the procedure be the one who decides whether or not to go ahead. Given that such a step is irreversible, the doctors stressed that it should always be undertaken as a last resort, and should thus be thoroughly considered before a decision is made.

Eyes

[first set of captions]

A reader undergoes a consultation to see what kind of double lids are achievable.

At the consultation, a prospective patient tells the doctor exactly how she would like her eyelids to look, and the doctor advises whether or not the look is medically possible based on the shape of her eyes. He holds a fine needle-like implement up to her eyelid to show her a range of different crease positions to determine the width of the new lid.

Before [photo of patient's face and close-up of eyes]

5mm lid [photo of patient's face and close-up of eyes]

7mm lid [photo of patient's face and close-up of eyes]

10mm lid [photo of patient's face and close-up of eyes]

Creating a double eyelid

Creating a double eyelid from a single eyelid is the single most popular surgical procedure in Japanese cosmetic surgery. According to Dr. Yoshio Hiraga of the Hiraga Plastic Surgery Clinic, it is effective not only for aesthetic but also for functional reasons.

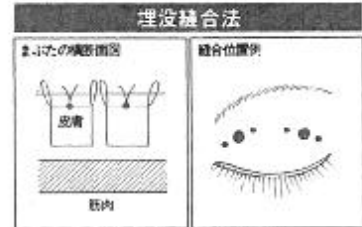
“When you create double lids, you lift skin that sags down in front of the eye with a single lid, opening up the eyes to make them larger and expanding the field of vision.”

At the consultation, the client explains to the doctor exactly she wants, and a double eyelid width is decided upon that suits the eye shape. In general, Japanese people’s faces are flat around the eye area, so that a deep double lid with a width similar to that with a Caucasian face is inappropriate.

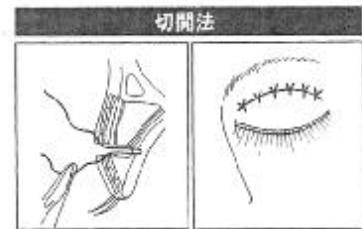
Dr. Hiraga says, “As you can see from looking at the photo above with the 10mm lid, when a double lid is extremely wide, it has the reverse effect of making the eye look small. In addition, in the unlikely case that further surgery is undergone, it’s safer to make the double lid quite narrow in view of the difficulty of reducing the width of a wider double lid. And in some cases, such as where the lid is extremely recessed, a double lid cannot be created.”

Surgery can be roughly divided into two types as shown on the page at left. The surgical method is determined according to the state of the eyelid and the client’s wishes.

*Costs vary considerably. Those given here are valid for the clinics surveyed for this article.



埋没縫合法は二重のクセがつかや
すい人向き。縫合方法は、医師に
よって異なる。上は予備先行の埋
没縫合法で、まぶたの中を口の字
形に縫う。糸の結び目は皮膚の中



切開法は、二重のクセがつかにく
い人向き。上左は、まぶたの切開
部分の断面図。皮膚を切開し、目
を開ける筋肉と皮膚を固定する。
切開部分は傷として残る。



埋没縫合法と切開法の施術例。埋没縫合法：(右上)術後、(左下)術後。目頭の下に入らぬように二重ならこの方法でも大
丈夫。切開法：(左上)術前、(右下)術後。つくりにくい人や、
目頭のひだより上に出る広い幅を希望の場合は切開法が確実

①埋没縫合法 — まぶたを引き上げる筋肉と皮膚を、二重にしたいラインに沿って鉗子で縫って、あとで抜糸する方法(縫合法)もあるが、あまり行われていない。現在は、糸をまぶたの中に完全に埋め込む埋没縫合法が一般的で、抜糸の必要はなし。切開しないので傷あともほとんど残さない。一重に戻る力の強い人は、組織が伸びて戻ることもあるが、糸が切れたりすることはまれ。手術時間の正味は15分くらい。麻酔は局所麻酔、入院は不要。
②切開法 — 二重にしたいラインに沿ってまぶたを切開し、余分な脂肪や筋肉を少し取り除きながら、まぶたを開ける筋肉と皮膚を縫合。狭い幅から広いものまで、いろいろな位置で手術できる方法。一重に戻ることはまずないが、まぶたに細かい傷が残る。手術時間は、30-40分程度。麻酔は局所麻酔、入院は不要。

抜糸は手術から3-1日後、腫れの状態がほとんど目立たなくなるのは、埋没縫合法では1週間程度、切開法の場合だと1週間ほどかかる。「手術後は腫れているので、希望していた幅よりもより広く見えますが、次第に落ち着いてくるので心配ありません」(平賀義城先生)
*どちらの手術も当日はサングラスを携帯すること。

●費用 埋没縫合法：11万円～ 切開法：28万円～

PHOTOGRAPH BY MICHAEL WILLIAMS 取材協力/平賀義城先生

Buried suture method

[captions]

Cross-section of eyelid

Skin

Muscle

Sample suture placement

The buried suture method is suitable for people in whom it is easy to create a double eyelid. The incisional method used varies according to the physician. Above is shown Dr. Hiraga's buried suture method, in which square-shaped sutures are sewn within the lid. The knots in the suture thread are inside the skin.

Incision method

The incision method is suitable for eyelids in which it is not easy to create a crease. The diagram at above left shows a cross-section of the incised part of the eyelid. An incision is made in the skin, and the muscles and skin that open the eye are stabilised. The incision remains as a scar.

[captions]

Incision method

Buried suture method

Examples of the buried suture and the incision methods

Above right: Buried suture method prior to surgery. Below right: Post-surgery. This method can also be used for a gentle double-lidded look starting from the inner corner of the eye.

Above left: Incision method prior to surgery. Below right: Post-surgery. The incision method is the surest approach for people in whom a double eyelid is difficult to create or who want a wide lid area extending to above the inner corner of the eye.

(1) Buried suture method:

One technique not often used involves sewing sutures in the muscle and skin at several places along the line of the desired crease, pulling up the eyelid. The sutures are later removed. The method generally used in recent times is the buried suture method, in which the sutures are completely buried inside the eyelid without the need for later removal. No incision is made, and so very little scarring remains. In people whose eyelids have a strong tendency to revert to single lids, the tissue may stretch, causing the crease to be lost, and on rare occasions, the thread may break. The actual surgery takes around 15 minutes, is performed under local anaesthetic, and does not require hospitalisation.

(2) Incision method:

An incision is made along the eyelid where the crease is required. A small amount of excess fat and muscle is removed, and muscle and fat that open the lid are stitched together. This technique allows for the crease to be placed in a range of positions, from low to high. Reversion to a single lid is extremely uncommon, but a fine scar is left on the eyelid. The procedure takes around 30-40 minutes under local anaesthetic and does not require hospitalisation.

Sutures are removed 3-5 days after surgery. With the buried suture method the swelling is barely visible after around one week, while the swelling takes around two weeks to settle with the incision method. “Due to the swelling, the lid will look wider than the desired width after surgery, but the swelling does gradually settle down without need for concern,” says Hiraga.

*Patients undergoing either procedure need to bring sunglasses along with them on the day.

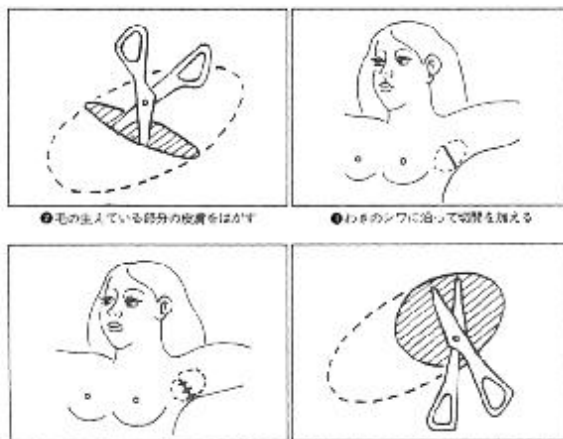
• Cost

Buried suture method: From ¥130,000 [approx. AUS\$ 1,500]

Incision method: From ¥280,000 [approx. AUS\$ 3,400]



P-HOTOGRAPH BY MICHAEL WILLIAMS



●毛の生えている部分の皮膚をはがす

●わきのシフに沿って切痕を加える

●切開症を縫合。手術後は、ほとんど毛が生えなくなる

●皮膚をひっくり返し、皮膚の裏側のアポクリン腺をハサミで切り取る

写真提供：西山美容・形成外科

「ワキガじゃないのに、人にそう言われたとか、自分の思い込みで、ワキガと勘違いしている人もけっこう多いんですよ」と西山美容・形成外科の西山真一郎先生。汗を分泌する腋にはエクリン腺とアポクリン腺があるが、ワキガは、アポクリン腺から分泌された汗の成分が、細菌などによって分解されて独特においを発するもの。アポクリン腺は、わきの下、乳輪、陰部、耳など、隠れたところに集中的に分布していて、人種差があり白人に多く日本人には少ないとされる。外科的な治療法として確実性が高く最もよく行われているのは、わきの下を横に切開し、わき毛の生えている部分の皮下のアポクリン腺を切り取る方法。手術時間は1時間半～2時間。術所麻酔で入院の必要はなし。抜糸は5日～1週間後。傷は5～6cm残り最初は白立つが、次第にわきのシフに隠れて目立たなくなる。●費用/28万円～
「わきの下以外にもアポクリン腺はあるので、100%におわなくなるとはいえないけれど、においの程度はグンと低くなるはず。ワキガ治療としては、永久脱毛もかなり効果的です。」(西山真一郎先生)

ワキガ osmidrosis

Osmidrosis

According to Dr. Shinichiro Nishiyama of Nishiyama Cosmetic Surgery Clinic, “There are quite a lot of people who mistakenly believe they suffer from osmidrosis (body odour) either because someone has told them so or because they’ve just decided so on their own.” There are two types of glands that secrete sweat, the eccrine glands and the apocrine glands, but it is a component of the sweat produced by apocrine glands that produces a particular odour when it breaks down, due partly to micro-organisms. Apocrine glands are concentrated in particular areas such as the armpits, around the nipples, the genital area and the ears. Racial differences mean that Caucasians have a large number of these glands, while Japanese people have few. The most frequently performed surgical procedure, which is highly effective in treating body odour, involves making a horizontal incision in the armpit and removing the apocrine glands from under the skin in the area where armpit hair grows. This procedure takes one and a half to two hours, is performed under local anaesthetic and does not require hospitalisation. Sutures are removed 5-7 days after surgery. The resulting 5-6 cm scar is initially quite visible, but over time becomes less prominent as it becomes concealed within the wrinkles under the armpit.

- Cost: From ¥280,000 [approx. AUS\$ 3,400]

According to Dr. Shinichiro Nishiyama, “Apocrine glands exist in areas other than under the arms, and so while it cannot be guaranteed that body odour will disappear completely, it should certainly be dramatically diminished. Permanent hair removal is also quite an effective treatment for body odour.”

- (1) An incision is made along the wrinkle lines under the arm.
- (2) The section of skin from which hair is growing is peeled back.
- (3) After the skin is peeled back, the apocrine glands are removed with scissors from the underside of the skin.
- (4) The incision is stitched. There is very little hair growth after surgery.

Written with the cooperation of Nishiyama Cosmetic Surgery Clinic

6.2 Surgical Hybridity: Theme and Cultural Context of the Article

The article analysed in Chapter 5 presents a combination of two different genres, namely a personal narrative and a report. Although the title of the article, *When plastic surgeons say NO*, suggested that narrative and argument would take a critical view of cosmetic surgery, a closer analysis shows that the writer's 'messages' to the magazine reader are blurred, which supports the view that identity construction, especially through multiple episodes of cosmetic surgery, is a complex and often contradictory process.

The article from which the three pages for this analysis are chosen presents a different genre and intention. The article is an informative one, and, as indicated in its headings, with the principal aim of providing facts about cosmetic surgery procedures. It became apparent in the data collection process (see 4.2) that in the Japanese editions of both *Marie Claire* and *Cosmopolitan*, informative articles were more strongly represented than articles of a narrative format.

The decision to analyse parts of an article of an informative genre instead of analysing one of the few containing personal narratives was influenced by the fact that this genre of an informative report prevails in the Japanese magazine editions, and therefore represents the dominant genre from which the Japanese *Cosmopolitan* readers would draw their knowledge of cosmetic surgery procedures.

Without making definitive statements about Japanese magazine writing genre preferences, the nine years of data analysed for this thesis suggest that the Japanese editions focus more strongly on advice-giving than the Australian and German editions. As Gill (2007) argues:

magazine publishers sell the friendly and intimate relationship they have established with their readers [...] publishers [...] are able to report that the magazine's readers [...] *turn to it for advice* [my italics] on what hair and beauty and fashion products to buy (p. 182).

As the analyses in this thesis illustrate, today's magazine readers do not read magazines just for advice about minor decisions such as which products to buy. The establishment of a friendly but authoritative and expert tone and the selling of a relationship from the magazine to its readers become even more significant when the readers are facing more far-reaching decisions about body modification and identity negotiation. It appears that the Japanese magazine editions favour an informative genre for facts and advice, not only on general beauty and consumer issues, but also in relation to cosmetic surgery.

As outlined in 6.1, the article *Eyes, nose, breasts ... How can you change the parts of the body that bother you? How actual procedures are performed on different areas of your body* (C.J4, p. 106-113) provides the reader with information in relation to the performance, risks and cost of several surgical procedures. These include rhinoplasty, sculpting of the chin, breast augmentation, liposuction, laser treatments, treatment of wrinkles with chemical peels and collagen injections, hair removal, and the procedures chosen for further analysis in this section: double-eyelid surgery and removal of sweat glands.

6.2.1 'Westernisation' Through Cosmetic Surgery.

All of the abovementioned procedures discussed in this article aim for a homogenising, standardising and generally 'Western' appearance. The rhinoplastic surgery featured in the article concentrates on procedures to 'heighten' the ridge and tip of the ('flatter', 'Japanese') nose, the procedures for sculpting the chin focus on the reduction of the so-called 'era' ('gills'), that is, a broad or square jaw (which reinforces a round-faced, 'Japanese' appearance) and the eyelid surgery focuses solely on the creation of a double-eyelid from the 'Japanese' single-eyelid. However, not all procedures aim for a Westernising appearance; procedures such as liposuction and wrinkle treatment are designed to help achieve the widely propagated 'ideal' of a slim and youthful appearance as is ubiquitous in international mass media.

Procedures to combat signs of ageing are common in ‘Western’ societies, as well as societies aligning themselves closely with ‘Western’ consumer lifestyles such as Japan. Nevertheless, the rhinoplastic, chin and eye surgeries presented in this article stand out as homogenising since they aim to ameliorate or even eradicate ethnic features which are considered unattractive or outside the norm.

Haiken (1997), referring to male cosmetic surgery celebrity icon Michael Jackson states that:

Jackson is not the only one among hundreds of thousands of Americans who have attempted, through plastic surgery, to minimise or eradicate physical signs of race or ethnicity that they believe mark them as “other” [...] Race- and ethnicity-based surgery has always focused on the most identifiable, and most caricatured, features: for Jews, noses; for Asians, eyes; for African Americans, noses and lips. Most of the operations [...] were performed on white Americans and European immigrants. Jews, Italians, and others of Mediterranean or eastern European heritage made the “nose job” a household word early in the century. Asians, in the years after World War II, began to pursue larger noses and folded eyelids (p. 175-176).

Admittedly, eyelid surgery is not an exclusively Japanese phenomenon; procedures such as double eyelid surgery are part of oculoplastic surgery, “a subspecialty field of ophthalmology that is concerned with both cosmetic and functional aspects of the eyes and surrounding facial structures” (Woodward, 2006, p. 169). Other oculoplastic procedures are upper and lower eyelid blepharoplasty (eyelid lifts), eyebrow lifts and botox injections for treating wrinkles (Woodward, 2006: p. 170-171). Nevertheless, the type of eyelid surgery presented in this article is specifically designed to create a double-eyelid (*ni-jû mabuta*), a frequently featured and advertised procedure in Japanese women’s magazines in order to create ‘bigger’, that is, more ‘Western’ eyes.

The second procedure selected for analysis is the surgical removal of sweat glands in order to combat ‘osmidrosis’ (body odour) (C.J4, p. 113), a procedure I have only ever come across in Japanese magazines. Western magazines might advertise, or, in special cosmetic surgery features, present laser treatment as a means to combat

extreme sweating, but never advocate the removal of sweat glands through surgery (at the time of the data collection, no mention of this procedure was found in either the German or Australian magazines).

To culturally contextualise this article, it is relevant to note that sweating is considered highly unattractive in Japanese society. In summer, commuters can be observed wiping their faces with handkerchiefs or miniature towels. Amélie Nothomb's (2004) novel *Fear and Trembling* describes how confronting Japanese business people find the practice of Westerners to unashamedly take their jackets off in business meetings on hot days, and thus expose sweat marks on their shirts under the armpits or on the back (pp. 77-80).

Double-eyelid surgery, which constitutes a procedure aiming to westernise 'Japanese' features, and the removal of sweat glands as a measure to counteract a bodily response considered physically unattractive, are highly culturally contextualised cosmetic procedures.

6.2.2 Japanese Cosmetic Surgery as a 'Japan-West Hybrid'.

As Jones (2008b) aptly summarises, "Japanese cosmetic surgery is a Japan-West hybrid with its own distinct features; they are influenced by global (Western) notions of beauty but have a distinct Japanese flavour" (p. 41). Jones (2008b) mentions skin whitening and non-surgical breast enlargement procedures as two examples of Japan-West hybrids of cosmetic surgery procedures (pp. 41-42). Ashikari (2005) argues that the concept of "Japanese whiteness" is complex and "Japanese people's attitude towards the image of Caucasian skin is paradoxical" (p. 82). Ashikari's analysis cannot be revisited in greater detail in this study due to reasons of space and strict relevance; however, as Jones (2008b) concludes, it is important to note that "rather than being about emulating Western colouring the Japanese preference for paleness may be rooted in the country's own history and aesthetics. The Japanese middle class has long valued whiteness as a symbol of

Japaneseness itself – that is, as a marker of being different and more ‘refined’ than other Asian ‘races’” (p. 41).

This view of the Japanese preference for paleness contrasts with Darling-Wolf’s (2003) claim that “ideals of female attractiveness promoted in the Japanese media are based on Westernised standards” (p. 166). This does not only apply to women’s magazines but a wide range of popular cultural texts such as Western films, television series, comics and popular music (Darling-Wolf, 2000). Darling-Wolf (2003) notes that several of her interviewees “identified a clear racial hierarchy of attractiveness with whites at the top, Japanese at the bottom, and “halves” – individuals of mixed Asian and Caucasian ethnicity – in between (p. 166). Darling-Wolf’s conclusion highlights the complexity of surgical and nonsurgical cosmetic procedures in Japan as a Japan-West hybrid:

My informants particularly struggled to negotiate their Asian racial identity in the fact of Westernised (white) representations of attractiveness promoted throughout the Japanese media. In spite of their frequent rebellion against such representations and longing for more racially appropriate models, they did not challenge the validity of the cultural standards the media texts help construct and disseminate. While they often recognised the potentially harmful nature of Japanese women’s admiration for physical attributes characteristic of a different race, they did not question whether such traits were actually worthy of admiration” (p. 169).

Darling-Wolf (2003) adds that “the popularity of cosmetic surgery to create double-eyelids –advertised in most women’s magazines – [...] also suggests that my informants’ often tortured relationship toward Western and Westernised representations was not so far from the norm” (p. 166).

In addition to culturally homogenising procedures such skin whitening, nose jobs and double-eyelid surgery, Miller (2003) identifies a new fascination with breasts in Japan (p. 278). Although traditionally, other body parts, such as the nape of the neck, were considered far more sensual (p. 276), Miller argues that through the globalisation of the media and “through the agency of transnational television, film,

magazines, and especially pornography, Japanese became infected by an American-derived erotic fetishisation and commodification of the breast” (p. 278).

Despite this, Miller (2003) states that few breast implant surgeries are performed in Japan in comparison to the United States (p. 283). According to Miller (2003), one reason for “this apprehension over implants could stem from a Confucian belief that the body should not be tampered with” (p. 283). Another Japan-West hybrid of cosmetic procedures is the result of this Confucian belief:

One consequence of the aversion to implants is a burgeoning market for nonsurgical breast enhancement products and treatments. The term in Japanese for anything intended to change the breast into a larger or different shape is *bust up* (*basuto appu*).

Since 1992 the bust up product and service category has provided a boost to the Japanese beauty industry. One type of business in particular, the *esute* (aesthetic) salon, shrewdly zeroed in on this particular body “problem” and began offering nonsurgical techniques in the 1990s [...] Usually a bust up treatment course at a salon involves manual massage, the application of creams or packs, and mechanical stimulation with some type of appliance or apparatus [...] Often something like a suction cup hooked up by cable to an electromassage machine is placed over the breasts as part of these treatments (Miller, 2003, pp. 284-285).

The irony of the fact that the Confucian belief of non-intervention in one’s body is applied to breast augmentation but not to eyelid surgery once more highlights the highly contradictory nature of culturally connoted cosmetic surgery discourses.

6.3 Embracing the Corporatised Ethnic Hybrid: Structure and ‘Social Actors’ in Language and Visuals

In relation to the overall structure of the selected extracts, the presentations of the actual procedures are preceded by an introduction (C.J4, p. 106) which emphasises the necessity of informing oneself thoroughly about cosmetic surgery

before making any decisions. The two paragraphs adopt an authoritative tone, inviting the reader to accept the presented view as common-sense knowledge.

Following the introductory warning, the article discusses various procedures, with the body part, issue or treatment concerned being emphasised in two ways: first, it is given in both Japanese characters and in English, and second, the word stands out by being framed in a shaded square. The body parts in this article are made ‘salient’ (Machin, 2007, p. 130) through multiple elements, such as the size of the letter, emphasis through shading and framing and repetition in the form of the Japanese and English word.

All procedures are presented to the reader in a highly visual manner, with images such as before-and-after pictures, photographs of models and graphics illustrating how the procedure is performed taking up at least half of the space. The text is set in a small font and compressed to form a compact block of text supporting the square arrangements of the pictures, visually aligning with the images.

Considering Japan’s historical tendency to selective cultural hybridisation, the detailed analysis of the two selected cosmetic procedures investigates how Japanese cosmetic surgeries represent a ‘Japan-West hybrid’. In this concept, aspects of desirable appearance integrating both Japanese and Western notions of beauty are negotiated against each other, intersecting among text, image and discourse.

This article presents a different opening from the article analysed in the previous chapter, which began with a personal narrative in the form of a ‘small story’ of a cosmetic surgery ‘journey’, from the perspective of television researcher Penelope.

This article’s heading and subheading signal two different intentions. First, it aims to provide the reader with options about how “parts of the body that bother them” can be changed, and second, it intends to inform them about the procedures. The article strongly reflects the function of the *Cosmopolitan* magazine as a source of reliable and helpful advice to its readers.

The ‘social actor’ in the introduction (C.J4, p. 106) preceding the discussion of the actual cosmetic procedures is the writer as the voice of the magazine, reassuring the reader that the magazine is a reliable and professional source of information because she consulted “five reputable doctors certified by the Japan Association of Aesthetic Medical Inc. (JAAM)” for expert advice. Labelling the medical experts as “reputable” asserts an authoritative tone. The reliability of the doctors in relation to patient care is further highlighted by the fact that negative aspects of the procedures also form part of the discussion.

The introduction ends on the note that “surgery should always be undertaken as a last resort”, sending a strong message to the reader to carefully consider whether she wants to undergo cosmetic surgery or not. This phrase clearly acts as a warning to the reader and sits in tension with ‘soft’ verbs such as “bother” (C.J4, p. 106), which presents a surgical procedure as a ‘quick fix’ to a slightly upsetting ‘blemish’.

However, considering that this introduction is then followed by 12 pages of descriptions of procedures which constitute such “last resorts”, this appeal challenges the magazine’s claim for a balanced approach. The authority of the writer is exercised by expressing this view as a statement with low modality. The modal verb “should” expresses some modality insofar that it functions as advice; however, “should” as a modal verb with a very strong advisory tone communicates a sense of urgency and obligation to follow this suggestion to the reader.

It is also notable that this statement is not supported by further argument as to why cosmetic surgery should be undertaken as a last resort. Instead of providing specific medical or psychological grounds, the author of the article presents this view as widely accepted, and common-sense to the reader.

After the introduction, the article states the first cosmetic procedure, double-eyelid surgery, which is the only procedure in this article allocated two magazine pages (C.J4, p. 106-107), suggesting that this is a procedure of significant interest to the reader. As the article states, “creating a double eyelid from a single eyelid is the single most popular surgical procedure in Japanese cosmetic surgery” (C.J4, p. 106).

Both pages are dominated by photos and illustrations; the actual text on both pages only covers about a quarter of the page. The images establish a powerful combination of factual illustration and imagery: Nearly a third of the first page is dominated by the close-up photo of a Westernised eye, wide open with long lashes, covered heavily in mascara, elongating them further. A heavy make-up line on the eye emphasises the Western look of the eyelid.

Most of the left-hand side of the page is illustrated by one photo showing a doctor and his (female) patient at a consultation, and a series of four sets of photos which show a full-face shot of the patient paired with a close-up of her eyes. The series starts with a set of two before pictures, followed by three sets illustrating the change created by a 5, 7, and 10 mm double-eyelid. It is interesting to note that hardly any difference in the size of the eyelid is detectable in the photographs. Only the last one, demonstrating the effect of a 10mm double-eyelid, shows the change the operation is able to produce; however, the impact of the surgery is reinforced by the surgeon's instrument pulling back the skin to create the double-eyelid effect. This appears to show a discrepancy between denotation and connotation. Since the double-eyelid effect is not clearly visible in the images as such, the reader has to 'supplement' the change with the help of her imagination and the knowledge obtained from the text.

The second page has two sets of graphics on the right-hand side of the page, which illustrate the two techniques of how the double eyelid can be created, the "buried suture method" and the "incision method". The differences between these two procedures are illustrated by juxtaposed sets of before and after close-up photographs of eyes. The entire left hand side of the page is taken up by a photograph of a Western model, although it could be argued that the long, straight dark hair suggests an Asian touch.

The shot is taken from the chest up, with a deep v-neck half-exposing the breasts. The woman is facing the camera/viewer with a slightly upward glance; a dramatic and at the same time sexual and seductive look is created by the long, dark hair, which is asymmetrically parted and furthermore falls over the left side of the face, covering

that part of the face completely. The eye on the right side of the face is visible, and draws the gaze of the reader very strongly towards it.

Machin (2007) classifies these as ‘demand images’. A gaze directly looking at the viewer suggests power on different levels. On one hand the reader is acknowledged and visually addressed by the gaze; on the other hand, the ‘image act’ asks something of the reader in an imaginary relationship (p. 111).

This photo establishes links between Western appearance, the attractiveness of wide, open Western eyes and sexual attractiveness. The reader is positioned as a viewer being offered significant aesthetic improvements, but also a transformation to ‘seductress’. The ‘demand’ implied in this images is for the reader to face what she could have, but at the moment does not possess. Similar to the previous article *When plastic surgeons say NO*, the all-transforming power of cosmetic surgery is strongly suggested in this image.

In contrast to the photograph of the model, the series of photographs used to illustrate the differences in effect of the double-eyelids of different sizes represents a very different type of image. Whereas it can be argued that the photograph of the model on p. 107 of the article has high sensory modality (that is, stirs the emotions of the viewer) the series of double-eyelid photographs addresses the criterion of naturalistic modality. As Machin (2007) points out, the naturalistic criterion implies that “the more an image resembles the way we would see that something if we saw it in reality, from a specific viewpoint and under specific conditions of illumination, the higher its naturalistic modality. It is the truth of perception” (p. 61).

These pictures have been printed to demonstrate the outcomes of double-eyelid surgery. In relation to the “truth of perception”, it is interesting to note that a closer look at the eyelid close-ups reveals few differences, as outlined above. Furthermore, the gaze created by the procedure is closer to the Japanese gaze on the before picture than the gaze of the Western model. The knowledge in seeing a difference in those four photographs is therefore generated from the captions or the text below, not from

the images themselves. Naturalistic they might be in relation to the photography, but they are not realistic in demonstrating their claims.

In comparison to the two dramatic photographs of the Western model and the close-up of the eye on pages 107 and 106 respectively, the text appears very technical, as can be expected of an informative article. Again, the experts are male doctors, who are registered with a specialist professional organisation. Trust through expert insight is proffered by explaining the procedures in detail, and also by stating that negative aspects will not be omitted from the discussion. The reader of the article is being positioned as an increasingly informed consumer in the decision-making process.

The second section of the introduction builds on a ‘no pain, no gain’ argument, arguing that disadvantages to cosmetic surgery, such as accepting risks and the associated pain, are part of the transformation process. It is interesting to note, however, that the writer anticipates that the natural decision of a patient would be to give in and accept the pain and risk associated with surgery. The willingness of the potential patients to accept those negative aspects of cosmetic surgery is formulated as a factual statement: “*Having resolved to accept the associated pain and various risks* (my italics), it is vital that the person who is to undergo the procedure be the one who decides whether or not to go ahead.” The expected acceptance of pain and risks is contrasted with the active role of the person making the final decision whether to undergo the procedure or not. This corresponds with Gill’s (2007) notion as mentioned in 4.3, namely that in the realm of women’s magazines, the decisions women make, particularly in relation to the ways they look, are constructed as ‘freely’ chosen.

This discursive strategy of ‘legitimising’ cosmetic surgery because the patient has consciously accepted the negative aspects that come with it has been identified as a key argument in Davis’s (1995) interviews with cosmetic surgery patients in the Netherlands. Furthermore, as Pitts-Taylor (2007) states, the women in Davis’s interviews “were eager to identify their own desires as normal, while readily seeing others’ use of cosmetic surgery as potentially pathological” (p. 89). In a narrative which accepts the complex nature of cosmetic surgery, the patient manages to

distance herself from the pathological patients and positions herself in the rationalising process of considering cosmetic surgery as ‘a last resort’.

The role of the patient is extended in the next section, which is introduced by the series of pictures showing a reader undergoing a consultation to see what kinds of double eyelids are possible. The captions state that:

at the consultation, a prospective patient tells the doctor exactly how she would like her eyelids to look, and the doctor advises whether or not the look is medically possible based on the shape of her eyes. He holds a fine needle-like implement up to her eyelid to show her a range of different crease positions to determine the width of the new lid (C.J4, p. 107).

The patient is first characterised as the one who is in charge by telling the doctor what she wants; however, authority is passed to the medical expert since he is going to say yes or no, depending on physiological indications. What is also contrasted here is the ‘emotional’ desire of what the patient wants against the ‘rational’ analysis of a male medical expert. This ‘orthodox’ assignment of roles is very similar to the previous analysis in Chapter 5, in which the ‘social actor’ of the small story narrative, Penelope, expresses her frustration about having been turned away by a surgeon whose rational, male expert opinion overruled her judgement. The report part of the article also mentions various situations in which quoted medical experts Linsell and Nettle make the ‘right’ decisions for or against a certain surgical procedure for their patients.

Rationality, embodied in the male surgeons, is reinforced in the next section, where Dr. Hiraga adds that double-eyelid surgery is “effective not only for aesthetic but also for functional reasons. When you create double lids, you lift skin that sags down in front of the eye with a single lid, opening up the eyes to make them larger and expanding the field of vision” (C.J4, p. 107).

It is interesting to note that the argument in this case is significantly different to a dominant narrative by cosmetic surgery patients stating that they underwent surgery

to 'bring out their true selves' (Davis, 1995). The reasons stated in this article actually suggest that the procedure is beneficial for medical reasons. This argument contributes to a rational and fact-based narrative, and supports the magazine's role as trustworthy advisor providing factual information, thus enabling the reader to make informed decisions.

This section demonstrates, as Gill (2007) argues, that women's magazines are contradictory texts, in which "the notion of contradiction has become a key way of understanding the fragmented nature of ideologies and the (sometimes glaring) inconsistencies between different discourses in magazines" (p. 192). The fact that the female reader as the potential patient is on one hand addressed by the matter-of-fact tone of medical experts, but on the other hand represented as the main decision-maker, highlights the complexities of female agency within feminist discussions about the surgical body. The reasons for the potential patient assuming agency are also varied and possibly conflicting.

The text passages that follow deal with the discourses around cosmetic surgery also being a means of altering ethnic features. This aspect suggests what Pitts-Taylor (2007) identified as a new direction in the cosmetic surgery industry, that is, 'ethnically appropriate' cosmetic surgery (p. 31) which pays attention to the individual consideration and characteristics of a certain group of people:

While the racialisation of beauty has long been part of cosmetic surgery's history, now the promotion of ethnically appropriate surgery is informed by multiculturalism. Instead of aiming to erase racial difference, ethnically appropriate cosmetic surgery identifies differences in the needs and interests of racial and ethnic groups. Figuring out the variations among ethnic skin types in terms of likely reactions to surgery, lasers and other procedures are now seen as a quality-of-care matter among surgeons [...] the "main caveats involve cultural features." Such features include attitudes among African Americans, Latinos' ideals of body shape, and so on. Ethnically targeted cosmetic surgery now aims to rethink Euro-centric beauty ideals in order to preserve the ethnic features of the person, and to honour her or his racial heritage (p. 31-32).

Nonetheless, as pointed out in 6.2, the situation in Japan is more complex, simultaneously embracing Westernising features and procedures while at times resisting them. One of the medical experts quoted in the article, Dr. Hiraga, states that “in general, Japanese people’s faces are flat around the eye area, so that a deep double lid with a width similar to that with a Caucasian face is inappropriate” (C.J4, p. 107). He argues further that sometimes because of the ‘wrong’ physiological conditions, it might not be possible for a surgeon to create a double-eyelid at all. As stated above, once more rational detachment and professionalism are suggested as the only acceptable considerations in decision-making and successful cosmetic surgery. The last sentence suggests there are limits on what can be reasonably desired, and that compromises between Japan and the West need to be sought.

This conflict between realistic/healthy and unrealistic/extreme surgical procedures is similar to the conflict discussed in the article analysed in the previous chapter. In *When plastic surgeons say NO*, the main conflict presented to the reader was where to draw the line between ‘normal’ and extreme cosmetic surgery. As Pitts-Taylor (2007) states, the question of “Where do we decide to draw the lines of acceptability?” (p. 103) serves to construct a normative discourse around cosmetic surgery. Pitts-Taylor (2007) elaborates that:

while feminists worry about the beauty culture and the addictive lures of surgical technology, medical professionals are wrestling with new diagnostic criteria designed to help them identify the surgically obsessed (p. 103).

Pitts-Taylor (2007) also states that the role of the cosmetic surgery patient is changing and requires more complex negotiation processes around what is considered appropriate surgery. She highlights this dilemma in a slightly provocative comparative profile, drawing upon widespread popular perspectives:

A good candidate for cosmetic surgery will not have a specific set of attitudes about surgery, will undertake it for the right reasons at the right time, and will want to honour her authentic inner self (even her ethnically appropriate self). A bad candidate for cosmetic surgery will have the wrong attitude and the wrong reasons,

will want to change the wrong body parts at the wrong times, and will want to erase her ethnic or racial identity (Pitts-Taylor, 2007, p. 35).

This article does not explicitly argue for ethnically appropriate cosmetic surgery. However, it states that some procedures, which go too far, might not achieve the desired aesthetic result. By mentioning this, subtly the reader is encouraged to integrate ‘racial considerations’ into her decision making.

The last sentence of the first page leads into the topic of the second page, the presentation of the two different surgical methods for double-eyelid surgery. Once more, the medical/rational and individual/emotional sides of the argument are linked: “Surgery can be roughly divided into two types as shown on the page at left. The surgical method is determined according to the state of the eyelid and the client’s wishes” (C.J4, p. 106).

The two diagrams on the second page present dense technical information, as the writer indicated to the reader in the introduction. More interesting than the actual description of how the procedure works is the question of who makes the perfect patient for either the buried suture or incision method. It is stated that “The buried suture method is suitable for people in whom it is easy to create a double eyelid”, and “The [more expensive] incision method is suitable for eyelids in which it is not easy to create a crease” (C.J4, p. 107). Although this is not clearly stated, the only person to make the decision about which procedure is suitable for a certain patient or not is the medical expert, which limits a patient’s agency and decision-making.

As stated above, the reader’s concern for ‘ethnically appropriate’ cosmetic surgery is addressed again in saying that the buried suture method “can also be used for a gentle double-lidded look starting from the inner corner of the eye.” The reader is told that a subtle change is what she should aim for, not an ‘extreme make-over’.

The last paragraph presents both methods in more detail, explaining which steps are actually taken during the operation. The reader is presented with factual information in order to create an informed position. The tone and choice of vocabulary of the explanations are very much tailored for a lay audience.

The article completes the section on the buried suture method by providing three succinct arguments for or against the method in the last sentence. A similar summary can be found for the incision method: “The procedure takes around 30-40 minutes under local anaesthetic and does not require hospitalisation” (C.J4, p. 107).

The combination of those three arguments makes both procedures appear quick and easy, and follows the uncomplicated problem-solution approach characteristic of popular magazines. The reader can mentally ‘tick off’ the list of arguments as to why this procedure is non-invasive and therefore a convincing option for something that should only be a ‘last resort’.

The article ends with one last piece of advice to the patient: “Patients undergoing either procedure need to bring sunglasses along with them on the day” (C.J4, p. 107). If bringing along sunglasses on the day of the operation is the only requirement of a potential patient, making decisions for or against cosmetic surgery procedures must be a very straight-forward and uncomplicated process.

Similar to the extract on eyelid surgery, the page dedicated to the procedure to remove sweat glands is dominated by images (C.J4, p. 113), underlying Kress and Van Leeuwen’s (2001) argument that discourses are constructed in multiple modes. More than the top half of the page is taken up by the photograph of the same Western model shown in profile from forehead to chest. She is wearing a cut-away singlet which leaves the shoulder facing the reader bare; the arm is outstretched and pointing backwards, exposing a hairless armpit.

The gaze of the model is not looking at the viewer, but is “off frame”, that is, looking away to a different direction, a feature typical for advertising and promotional images as well as women’s lifestyle magazines (Machin, 2007: p. 112). As Machin argues, these types of images function “more like an exhibit” of the people visually represented. This implies the viewer “will associate with the theme of their feelings rather than their individual case”:

Off frame represents off world, or inner thoughts [...] when those represented do look off frame there is also meaning potential in terms of *where* they look. This has simple metaphorical association of up and down where up is positive, powerful, high status and down is negative, low energy, low status (p. 112).

In this case, the model is looking off to the right of the frame, slightly upwards into the distance. As Machin (2007) states, the metaphorical associations of the direction of an off frame gaze “are only meaning potentials whose realisation depends on their combination with other semiotic resources” (p. 113). This section on sweat gland removal does not establish a strong link between the image of the model and the text, and the format of the photograph thus provides the viewer with the opportunity to project her own thoughts, hopes and expectations into the image.

The bottom half of the page is nearly equally divided between text and a set of four illustrations of how the procedure is performed. The illustrations are very simple and reminiscent of patterns and instructions for sewing or other handicrafts, representing the skin as material which can be reshaped for aesthetic effect.

The text starts by introducing a medical expert, Dr. Nishiyama, who reassures the patient that their issue is common: “There are quite a lot of people who mistakenly believe they suffer from osmidrosis (body odour) either because someone has told them so or because they’ve just decided so on their own” (C.J4, p. 113).

The adverb “mistakenly” highlights the misconceptions of people who believe they suffer from body odour because they have been told or they have decided so themselves. The patient is seen as a victim of public opinion, which in this particular case is exacerbated by the fact that the reader/potential patient is caught between aesthetic as well as hygienic pressures.

The following few lines comment on the two different types of sweat glands, eccrine and apocrine glands, adding a medical discussion to the text. The extract then continues to state that “Racial differences mean that Caucasians have a large number of these glands, while Japanese people have few. The most frequently performed

surgical procedure, which is highly effective in treating body odour, involves making a horizontal incision in the armpit and removing the apocrine glands from under the skin in the area where armpit hair grows” (C.J4, p. 113).

The contrast between the two ‘races’ can be read in two different ways. From a Caucasian point of view, the first statement would mean that Japanese people would not have to deal with a significant problem anyway; however, from the standpoint of the Japanese women, who have already “decided that they suffer from body odour” (C.J4, p. 113), they consider themselves the ‘lucky ones’, because they are not as disadvantaged as the Caucasians, and the ‘problem’ can therefore be easily fixed. One of the simple solutions is immediately presented in the sentence following that observation.

Arguments to support the decision-making process are once more delivered briefly, in three concise arguments: “This procedure takes one and a half to two hours, is performed under local anaesthetic and does not require hospitalisation” (C.J4, p. 113).

The most striking feature of this extract apart from the simplified presentation of sweat gland removal, is the set of four pictures and the captions illustrating the procedure. The illustrations are supported by even more limited captions, which reduce the whole procedure to an exercise in four seemingly uncomplicated steps:

- (1) An incision is made along the wrinkle lines under the arm.
- (2) The section of skin from which hair is growing is peeled back.
- (3) After the skin is peeled back, the apocrine glands are removed with scissors from the underside of the skin.
- (4) The incision is stitched. There is very little hair growth after surgery.

Skin is peeled back, the glands are removed with scissors and the incision is stitched – the image evoked here is one of cosmetic surgery as a surgeon’s patchwork project.

6.4 Summary: Towards a 'Hafu' Cinderella

The analysis of these extracts from a cosmetic surgery special adds a new dimension to the analysis of discourses of cosmetic surgery in women's magazines in three different countries and cultural contexts. The article analysed in the previous chapter presents the construction of argument and narrative around the individual decision-making and justification process involved in the consideration and results, and, despite its publication in the Australian *Cosmopolitan*, represents a genre easily transferable to other cultural contexts.

These three extracts taken from the article *Eyes, nose, breasts ... How can you change the parts of the body that bother you? How actual procedures are performed on different areas of your body* analyse surgical procedures which only create meaning in their 'localised', culture-specific contexts. However, discourses around victimisation and agency, the distribution of the power of decision-making between medical expert and patient, male and female, and the provision of possible arguments which can be used to create the reader's self-justifying narrative for or against these procedures, are similar.

Furthermore, as Pitts-Taylor (2007) states, "the dominant logics of contemporary cosmetic surgery now reach significantly beyond beauty ideals" (p. 35). This notion becomes even more complex when local beauty ideals interconnect with Western and corporatised ideals and require an intricate negotiation process of what counts as 'ethnically appropriate' surgery.

This analysis used the selected pages to outline that the cultural negotiation process is a complex and integral part of reader positioning in issues related to cosmetic surgery. It is important to note that in the case of Japan, notions of beauty are not simply contrasting national and ethnic identities with the values of an 'other'. Similar to the discourse of the acceptability of cosmetic surgery, what is considered beautiful and culturally appropriate is also a highly complex negotiation; however, as this article demonstrates, this complexity is obscured by simplified, popular representations.

Ashikari (2005) outlines this complexity aptly when commenting on the dominance of Caucasian models in Japanese women's magazines:

In Japan, many images of *haku-jin* women (literally white people; Caucasians) are used in advertisements of whitening cosmetics as well as other make-up products...Most informants do not pay attention to the fact that those models are Caucasians. Caucasian models appear to be a transparent symbol of 'world culture' and of 'universal beauty' in the Japanese mass media. When my informants look at a beautiful young Caucasian model in an advertisement with a slogan, such as 'for making your skin beautiful and young', they can simply see 'youth' and 'beauty' in the model's face. They are looking at a beautiful woman in the advertisement, but not particularly a beautiful *Caucasian* woman" (p. 82).

As this suggests, in our 'liquid' world, identity is constituted of different identities, and of different cultural identities and the assigned culture-specific values, which can be negotiated whichever way the individual chooses, albeit within fairly defined parameters of feminine attractiveness.

7. Torture and Transformation: Leg-lengthening in China

7.1 Situating the Articles

Leg-lengthening was the topic of a report published in both the Australian and German edition of *marie claire*. The two versions of this feature story were the only examples of a syndicated report which was published in different national editions during the data collection period.

The English-language version of the report was first published in the Australian edition (MC.A21, April 2002), under the title *Growing pains: Going to extreme lengths to be tall*, with text and photographs by journalist Richard Jones. The same report was published a couple of months later in the German edition (October 2002), with the title *Die Fabrik der langen Beine* [The factory of long legs] (MC.G16), using text and photographs by the same journalist.

As Gill (2007) observes, *marie claire* and some of its articles claim to offer a more intellectual dimension than most women's magazines:

Whilst most of the content is similar to that of the other magazines, *Marie Claire* [sic] also features an award-winning 'reportage' section which regularly focuses on women of colour in different parts of the world. Over the years it has reported on a variety of different women [...] Those features generate many appreciative comments from readers who like to be informed about women's lives elsewhere in the world and are pleased to be addressed as intelligent and curious rather than obsessed with beauty (p. 201).

Gill's view corresponds strongly with the 'mission statement' of the *marie claire* group for which "the role of the feminine press is to help them make sense of the world's diversity" (see 4.1).

The German edition of *marie claire* clearly labels the articles as reportage, and because of the parallel nature of the articles selected for this analysis, this suggests that both the English and German version represent examples from *marie claire*'s

‘reportage’ section, as identified by Gill above. Therefore, they can be expected to follow an informative agenda. Nevertheless, as Gill (2007) argues, although those reports aim to ‘broaden’ their readers’ “sense of the world”, there is underlying cultural othering at play which limits the educative approach:

The writing, the photography and *mise-en-scène* of the reportage pieces constitute [...] what we might call a *National Geographic*-style racism – in which the women under discussion are treated as exotic, uncomplicated, close to nature, inherently pure and moral, and so on. ‘Cultures’ are treated as hermetically sealed (p. 201).

Gill (2007) also makes the criticism that, by featuring women from all over the world as equal, individual and diverse, *marie claire* reports ignore global capitalist processes which generate and reinforce substantial inequalities:

This is diversity postmodern-style (and post-Benetton style) in which any powerful image can be juxtaposed with any powerful image without an attempt to make sense of it or understand the processes that produce these different lives. It is the ‘rich tapestry’ school of diversity in which there is the privileged West and then the Rest with their brightly coloured clothes, simple lives and quaint costumes [...] and of course their beautiful, eminently photographable faces (p. 201).

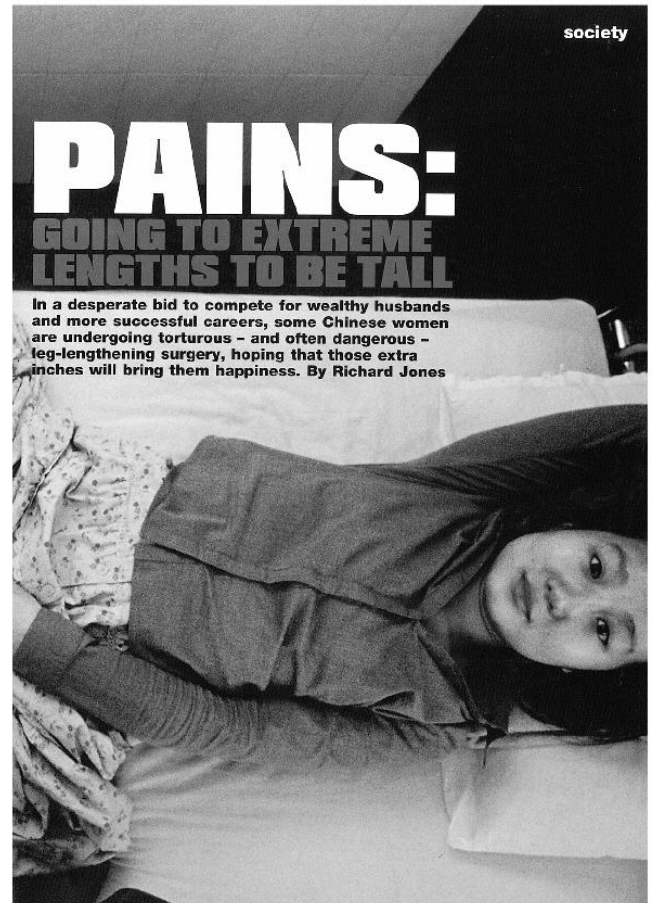
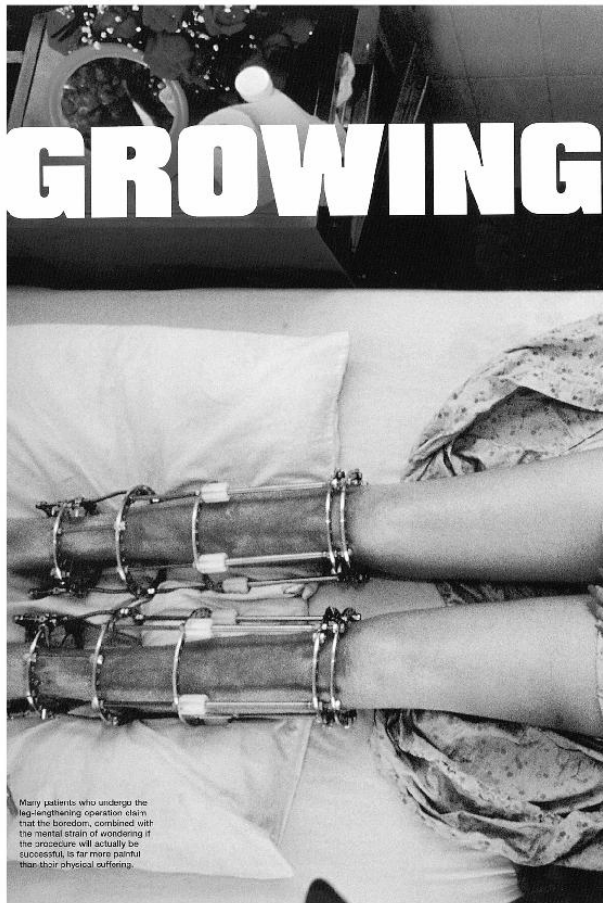
Whilst these two articles do not represent an ‘ideal’, ‘ethnic’ world, but an invasive surgical procedure of a gruelling nature, it can be argued that the reader is placed ‘outside’ the cultural context of the leg-lengthening operations. Through cultural othering, the reader is distanced from the lives of the Chinese women and positioned in a judgemental role.

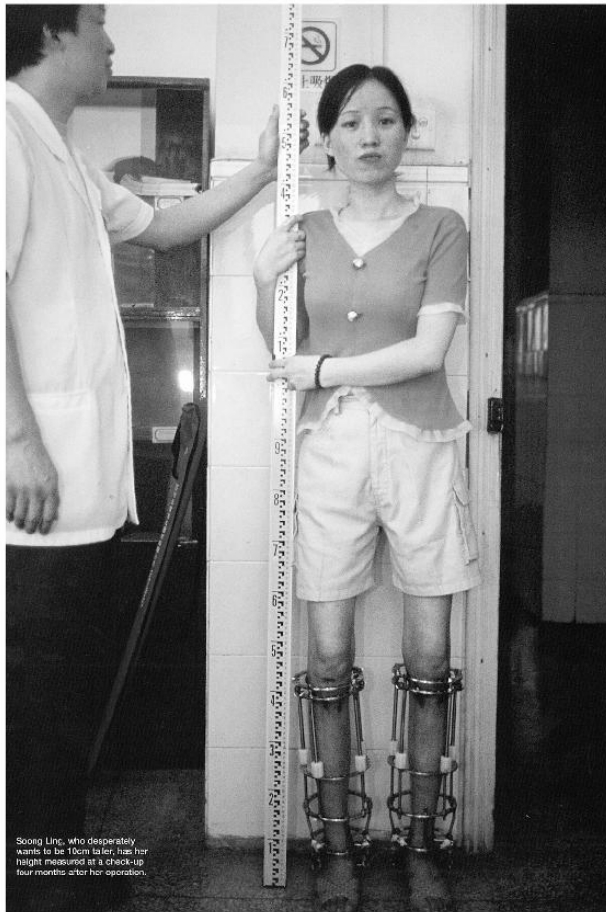
Both versions of the report on the leg-lengthening procedure in China take up five pages in the Australian edition (pp. 56-60) and four pages in the German edition (pp. 56-58 and p. 60). In the Australian article, the first three pages are solely dedicated to photographs, with the text of the report starting on page 59. Similarly to the Australian article, in the German version, the first page and half of the second page are taken up by one photograph, with the text starting on the right-hand side column of the second page. The last column of the last page of the German issue is related

but separate to the actual leg-lengthening story in China since it comments on the application of leg-lengthening procedures in Germany.

The Australian and the German versions of the article are reprinted below, with the German article followed by an English translation by Melanie Friedlander.

MC.A21, pp. 56-57:





Song Lin, who desperately wants to be 10cm taller, has her height measured at a check-up four months after her operation.



One patient hopefully measures for her longer legs, while another (below) undergoes the rigorous three-hour surgery.

"IF I WANT TO CHANGE MY JOB, IT WOULD HELP IF I WERE TALLER," EXPLAINS ONE PATIENT. "AND IT WILL HELP ME FIND A BETTER GUY!"

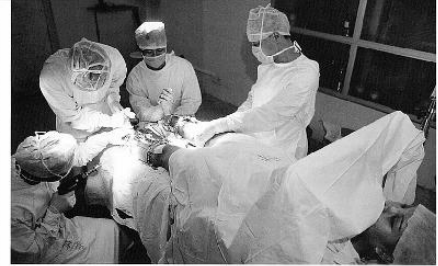
In a hospital ward in southern China, patients with large metal cages attached to their lower limbs take torturous steps, using Zimmer frames for support. Every day they turn in and out of the cages, keeping the bones below their knees apart by up to one millimetre. Most of the patients are women. All of them wish they were taller. Thanks to an operation that claims to increase leg length by an average of 6-10cm, their dreams are becoming reality.

Hundreds of Chinese women, as well as a handful of men, are undergoing the harrowing surgical procedure that originated in Russia to correct birth defects like dwarfism and uneven leg lengths, or to repair legs disfigured by accidents. It is only recently that the operation has been used for cosmetic purposes.

Images of alluring women in local advertising campaigns and on television fuel the idea that height equates with power and prestige. And in a country as heavily populated as China, where competition for jobs and successful husbands is fierce, many women will undergo virtually any treatment they believe will improve their quality of life.

"When I saw the advertisement, I saw my future," says Miss Miao, who travelled more than 1,600km from her home town to have the operation, after she saw an advertisement for body lengthening in a women's magazine.

"Before I read the magazine, I felt as if I had no hope at all," she recalls. "I was short, and not that good looking. If I want to change my job, it would help if I were taller. A tall girl is always more welcome in a job interview.



"And it will help me find a better guy. I'm not young; I'm 28. Most of my friends are already married with families. I worry about my future and this will help. I already feel more confident," she insists.

From her natural height of 164cm, Miss Miao has "grown" to 169cm, but at a price: a considerable price – both financially and physically. "The pain is very hard to take," she says, rubbing her legs. "It was unbearable at the beginning. Now, as my legs have stretched, the pain has come back. It's hard to sleep. I rarely sleep for more than two hours at a time."

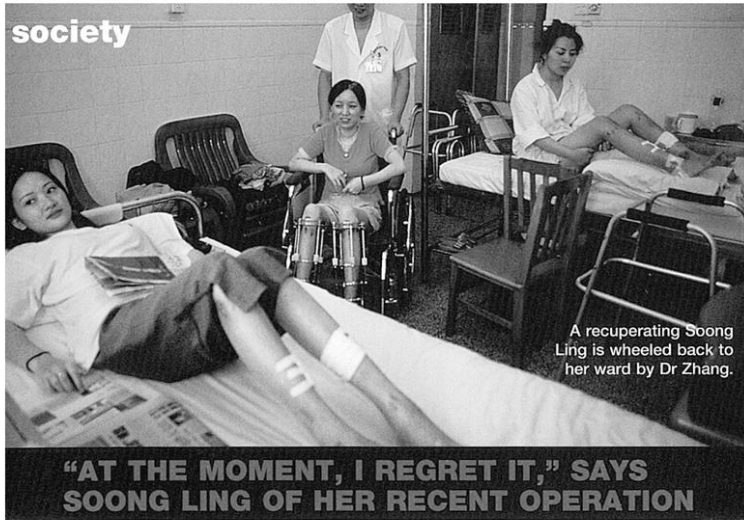
"I do two hours of exercise in the morning and evening, mostly on a step machine,

and sit in bed massaging my bones and stretching for most of the day. I adjust the cage three times a day. On a good day, I can stretch myself by about half a millimetre."

While radical cosmetic procedures like Miss Miao's are becoming increasingly popular, they're by no means accepted by Chinese society at large. Women who have the operation usually try to hide it from family and friends. They seem to hope they'll be able to emerge transformed from the procedure without exposing all that they've endured.

As for as cosmetic surgery goes, leg lengthening is a particularly traumatic procedure. Three hours of intense sawing, drilling,

PHOTO: JAMES HAMILTON



hammering and grafting by a team of five surgeons are just the beginning of an ordeal that continues over 18 months.

But Dr Zhang Yi Qing, a surgeon at the Guangzhou Air Force Hospital who performs at least one operation a week, describes the surgery as “routine”. A hole is cut into the patient’s leg just below the knee joint, and the shin bone is sawn in half. “This is the point of bone regeneration,” Dr Zhang explains, pointing to his handiwork on X-rays spread out on a light table. A long nail, called a “locked nail”, is then inserted into the bone cavity. Once the nail is banged into position using a metal hammer, the cage is affixed to the leg with 16 steel pins. Drills are used to create several holes in the patient’s leg and bones. The cage can then be adjusted regularly to force the bones apart and stretch the skin, muscle and nerves. As bone ends are separated, regenerated bone forns to fill in the spaces, resulting in – hopefully – a longer pair of legs.

There are no official statistics on the operation’s success rate, but the results can sometimes be disastrous. If the bone doesn’t set properly, it continually breaks, eventually leaving the patient confined to a wheelchair.

The procedure first gained notoriety in the West two years ago, when 15-year-old Emma Richards had a similar operation – arguably the first performed in the UK purely for cosmetic purposes. At 145cm, Richards claimed to be psychologically affected by her small stature, which prevented her from fulfilling her dream of becoming a flight attendant. The British media pounced on the story, expressing outrage over the £12,000 (\$33,000) operation, which was paid for by the National Health Service. Richards had both her femurs broken in a five-hour operation before metal frames were attached by 12cm pins screwed into each bone. She spent four months in bed “stretching” her legs, adjusting the frames each day. Since that operation, Richards has made the news repeatedly, having broken her severely weakened legs three times, lost half her original weight and contracted an infection

in her legs. In the end she gained 12.5cm, but this still leaves her 2.5cm short of the minimum height requirement for flight attendants.

In China, the procedure hasn’t generated the sort of media attention Richards’ ordeal received, but it seems to have become just another symptom of what people will endure in the quest for fame, fortune and happiness.

“There have been at least 600 operations. Probably more,” says Dr Liu Bin, a surgeon who operates on several patients each week at the Air Force Hospital. (Unofficial reports suggest the figure is more likely to be in the thousands across China.) “If we could reach out to more people, then I’m sure it would be much more popular.” These operations are big business for the select group of surgeons who charge up to \$20,000 for the full treatment. The doctors advertise on TV and in magazines, hoping to entice women who believe that being taller will make them happier. And, despite a local economic slump, customers are flocking to the handful of hospitals offering the service, many of them going to extreme lengths to keep it a secret.

Soong Ling, who lives on the outskirts of Guangzhou, is visiting the hospital for a check-up on the surgery she had four months previously. Desperate to increase her height of 150cm by 10cm, the 22-year-old didn’t tell her husband she was undergoing the operation. “I knew that he didn’t really want me to have it,” she admits, “so I just did it while he was away on business. He was really mad when he found out, but by then it was too late.”

Ling admits that her desire to have the operation was fuelled by jealousy and insecurity. She was concerned about her husband, a tour operator, mixing with “tall, beautiful girls” – mostly flight attendants – in the travel industry. She believes the extra height will increase her confidence and thereby enhance her relationship with her husband.

Miss Miao has been in hospital for more than six months. A long way from her home town of Chongqing, she doesn’t want to see her boyfriend until it is all over, and lied to him

about her absence, saying she’d taken a new job in Guangzhou. Working away from home is common in China, so it sounded plausible.

“Luckily, he is quite busy and can’t afford either the time or the flight to visit,” she says.

Miss Miao’s mother, who shares a room in the hospital with her only child, borrowed the 80,000 yuan (\$18,600) for the operation from a family member. “This is our secret,” she says. “We’re not going to advertise it. It will help with her future. We will be able to pay back the money when she gets a better job. She’s very clever and this will make all the difference.”

But success rates in the real world rely – at the very least – on the quality of the surgery. Despite the 100 per cent success rate Chinese doctors are eager to report, circumstantial evidence suggests this is far from the reality.

Soong Ling’s operation did not proceed smoothly, and the cage infected her legs. Antibiotics eventually cleared up the infection, but only after she’d endured several bedridden weeks with pus seeping from her legs.

Ling’s initial concerns about the post-operation scarring she may suffer quickly dissipated in the light of an operation that proved far more complicated than she was led to believe. She has recently discovered that one of her legs is now slightly longer than the other.

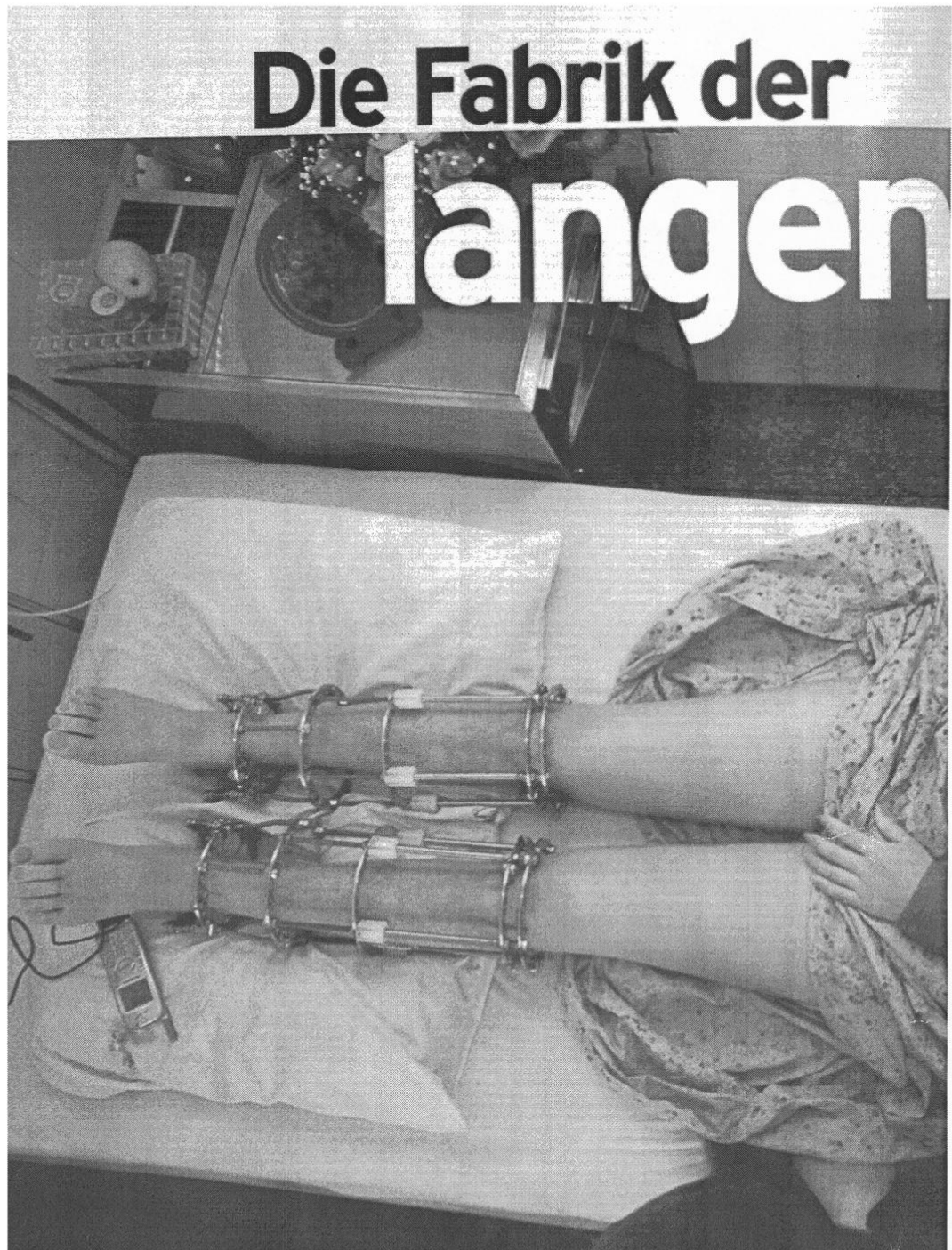
“Perhaps my husband was right,” she says. “At the moment, I regret it.”

“Most of the girls say their legs feel very different,” points out Miss Miao, for whom the biggest burdens are the mental strain and boredom that follow the operation and are, she feels, “much worse than the physical pain. This is a big change to the body and it affects the mind. One girl down the hallway cries all night; she can’t take it. After the first operation, I had this cage on my legs and thought I’d never walk again. It took me eight days to stand up.”

Mr Xian, one of the oldest patients – and one of the few men – in the ward, agrees with her. “The most difficult thing is the time I have to spend sitting in this bed. The boredom, for me, is worse than the pain. I cannot go back; sometimes I wish I could. I look around and wonder what I’m doing here.” But then he remembers the upside. Mr Xian’s wife was six centimetres taller than him. “Now,” he says, smiling, “I’m two centimetres taller than her.”

Miss Miao, too, remains a believer, despite the intense challenges the operation brings.

“It was very painful, but I was too excited to feel any pain,” she recalls. “I’m here to get taller and I’m determined to succeed. I cannot even think about failure.” ■



Beine

Am liebsten wären sie hoch gewachsene Europäerinnen. Für diesen Traum nehmen junge Chinesinnen höllische Schmerzen auf sich. In Spezialkliniken lassen sie sich recken und strecken wie auf einer mittelalterlichen Folterbank. Text und Fotos: Richard Jones



Millimeterarbeit: Täglich dreht Miao an den Schrauben der Metallschienen, um ihre Beine zu verlängern. In sechs Monaten hat sie bereits sechs Zentimeter geschafft

Es tut weh. Sehr weh. Mit schmerzverzerrtem Mund reibt Soong Ling ihre Knie. Das zarte Mädchen mit Haaren so schwarz wie Rabengefieder ist eine kleine Schönheit. Buchstäblich klein mit ihren 1,54 Metern. Das entspricht zwar dem Durchschnitt der südchinesischen Bevölkerung, aber nicht dem modernen chinesischen Geschmack. Und deshalb ist Soong Ling hier in Kanton gelandet, in einer „Spezialfabrik der langen Beine“, wie Schönheitskliniken mit Schwerpunkt Beinverlängerung in China genannt werden. Allein in Kanton, der 7-Millionen-Stadt im Perlfloss-Delta, gibt es ein halbes Dutzend davon.

Im schmucklosen Innenhof der Klinik bietet sich ein gespenstischer Anblick. Klunk, klunk, klunk – die Beine eingezwängt in mittelalterlich wirkende Eisenstänge, humpeln zehn, zwanzig junge Frauen über den Steinboden. Alle größenwahnsinnig geworden, oder was?

China – ein Land auf dem Weg in eine mörderische Leistungsgesellschaft. Statt Mao-Parolen breiten sich seit Anfang der Neunzigerjahre hemmungsloser Kapitalismus und brutales Elitedenken aus. Guolasi heißt eine neue, oft tödliche Krankheit. Männer wie Frauen fallen plötzlich um. Zu Tode gearbeitet! Aber nicht einmal dieser gefährliche Fleiß scheint zu genügen, auch gutes Aussehen ist Bedingung, um nach oben zu kommen. Und das bedeutet für Frauen heute etwas anderes als im imperialen China. Nicht mehr mandeläugig, flachbrüstig und klein sollen sie sein, sondern möglichst westlich wirken.

Wie in kaum einem anderen Land der Welt boomt die Schönheitschirurgie in China. Allein in den letzten fünf Jahren sind tausende von Straßenkliniken entstanden, in denen in nur 45 Minuten asiatische Mandelaugen „auf westlich“ getrimmt werden. Für knapp 300 Euro bekommt

marie claire **reportage**

The Factory of Long Legs

They would love most of all to be like tall European girls.

To fulfil this dream, young Chinese women are prepared to suffer excruciating pain. In special clinics, they have themselves elongated and stretched like on a medieval torture rack. Text and photos: Richard Jones.

Precision work: Every day, Miao turns the screws of the metal rails in order to lengthen her legs. In six months, she has already achieved six centimetres.

It hurts. A lot. Soong Ling is rubbing her knees, her mouth contorted with pain. The delicate girl with hair as black as raven feathers is a little beauty. Literally little, at her height of 1.54 metres. This may correspond to the average height of the southern Chinese population, but not to the modern Chinese taste. And therefore Soong Ling has arrived here in Canton, in a “special factory of long legs”, as plastic surgery clinics with specialisation in leg lengthening are called in China. Half a dozen of these can be found in the 7-million city of Canton in the Pearl River Delta alone.

The bare courtyard of the clinic offers a ghastly sight. Clonk, clonk, clonk – ten, twenty young women hobble across the stone floor, their legs jammed into medieval looking iron rods. Have they all become megalomaniacs?

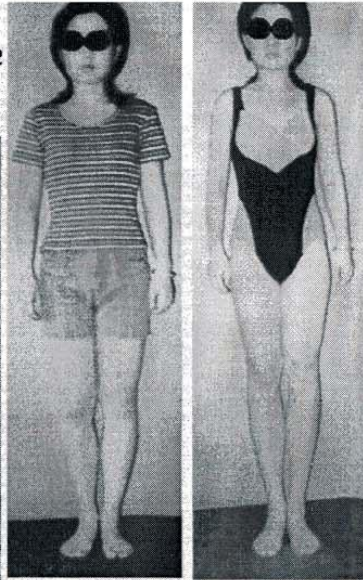
China – a country on the way to becoming a gruelling performance society. Since the beginning of the nineties, uninhibited capitalism and brutal elitism are replacing Mao slogans. Guolasi is the name of a new, often fatal illness. Men as well as women suddenly drop dead. Worked to death! However, not even this dangerous industriousness seems to be enough, good looks are also a condition to climb up the social ladder. And this means something different for today’s women than it did in the Imperial China. They are no longer required to be almond-eyed, flat-chested and small, but preferably to look Western.

In hardly any other country is plastic surgery booming as it is in China. In the last five years alone, thousands of street clinics have emerged, in which in just 45 minutes Asian almond eyes are trimmed to look “Western”. In the Beijing “turn of the millennium clinic” one gets a higher nose bridge for just under 300 Euros. And the latest thing: longer legs!

marie claire reportage



Erfolgskontrolle: Soong Ling liebt ihre neuen bambusdünnen Beine. Dass sie ihr Gewicht vielleicht nicht tragen können, schreckt die junge Frau nicht. Rechts: Mit Vorher-Nachher-Fotos werben die Spezialkliniken um Kundinnen



Die Körpergröße entscheidet, ob man in China einen Platz an der Uni, einen lukrativen Job oder einen Ehemann bekommt

man in der Pekinger „Jahrtausendwende-Klinik“ einen höheren Nasenrücken. Und der letzte Schrei: längere Beine!

Dünn und mait wie ein abgeknicktes Bambusrohr liegt Miao, 26, im Klinikbett. Die sorgfältig pink lackierten Fußnägel bilden einen seltsamen Kontrast zu den mit Desinfektionsmittel verschmierten Schienbeinen und den hässlichen Metallstangen. Seit sechs Monaten ist Miao hier, 1600 Kilometer von ihrer Heimatstadt Chonqing entfernt. Von der chirurgischen Beinverlängerung hat sie durch die Frauenzeitschrift „Hoffnung“ erfahren. Einen dreistündigen Eingriff und bereits ein halbes Jahr Schmerzen hat sie hinter sich, acht weitere Wochen und zwei Operationen liegen noch vor ihr. Doch für Miao zählt das alles nicht: Sechs Zentimeter sind „geschäft“, und damit ist die magische Marke von 1,60

um drei Zentimeter überschritten. Noch zwei Zentimeter sind drin, hat der Arzt gesagt. Aber warum das alles?

Bereitwillig erzählt Miao von ihrem frühen Ego-Trauma: „Ich war immer der Liebling meiner Familie, die Hübscheste in meiner Klasse. Aber in der Pubertät sind meine Schwestern und Freundinnen alle schneller gewachsen als ich. Ich blieb zurück als Zwerg, 1,57 Meter. Schrecklich!“ Der Sturz einer Lieblingstochter von ihrem Thron – reicht das als Motiv für einen Eingriff, der langwierig und gefährlich ist? Und die für China unvorstellbar hohe Summe von 12000 Euro kostet?

Um Miao und ihre Leidensgenossinnen in Kanton, Peking oder anderswo in China besser zu verstehen, muss man die Obsession kennen, die in diesem Land ausgebrochen ist. Mehr noch als eine möglichst helle Haut, große Augen oder eine

europäische Nase ist die richtige Körperlänge so etwas wie die Eintrittskarte in die Elite. Ein paar Zentimeter können darüber entscheiden, ob man einen der begehrten Studienplätze zugeteilt bekommt oder Chancen hat, eine gut bezahlte Arbeit zu finden. In den Stellenanzeigen der Zeitungen ist fast immer eine erforderliche Mindestgröße angegeben – für Männer wie für Frauen. Die prestigeträchtigen Jobs, bei denen man mit dem Ausland zu tun hat, werden nur an Frauen ab 1,65 Meter und Männer ab 1,70 Meter vergeben. Was für Ausbildung und Karriere gilt, zählt auch auf dem Heiratsmarkt. Um einen erfolgreichen Mann zu bekommen, braucht eine Chinesin heute vor allem eins: Größe.

Zum Beispiel Wang Fulin aus Peking, 29 Jahre alt. Frisch operiert in einer Kantoner Schönheitsklinik. Ihr Mann ist ein gut verdienender Geschäftsmann, reist viel. Seit Jahren plage sie Eifersucht, erzählt Wang. Ihre ärgste Vorstellung: Der Gatte könne sie eines Tages wegen einer langbeinigen Stewardess verlassen. Weil er für acht Monate ins Ausland musste, ist sie heimlich nach Kanton gefahren. Nie hätte er in diese kostspielige Operation eingewilligt. Nur die Mutter ist eingeweiht, hat einen Bankkredit aufgenommen, den die Tochter bei ihr abstottern will. Was aber wird sie ihrem Mann sagen, wenn sie ihn, um sechs oder acht Zentimeter gewachsen, bei seiner Rückkehr in die Arme schließt? „Ach, irgendwas“, erklärt Wang eher unwillig, „zum Beispiel, dass ich Medikamente eingenommen habe.“

Der gnadenlose Kampf um mehr Körpergröße hat natürlich nicht nur Chirurgen auf den Plan gerufen, sondern auch jede Menge Quacksalber, Kräuterdoktoren, Hormonspezialisten. In Apotheken werden Pillen, Säfte und magnetische Einlegesohlen angeboten, die das Wachstum anregen sollen. Manche Ärzte versuchen, ihre Patienten mit Hormonen „großzuspritzen“. Die weitaus erfolgreichste und gleichzeitig aufwändigste Methode ist aber die Chirurgie. Bis zu zehn Zentimeter Wachstum sind ohne weiteres möglich. Und so gut wie garantiert.

„Wir machen 600 Beinverlängerungen jährlich“, sagt Chefarzt Dr. Zang Yi Qing in Kanton. Tendenz steigend. Auf seinem Schreibtisch liegen Röntgenaufnahmen

Success control: Soong Ling loves her new bamboo-thin legs. That they may not be able to carry her weight does not scare the young woman.

Right: The special clinics advertise with “before-and-after” photos to attract clients.

In China, body height determines whether one gets a place at university, a lucrative job, or a husband.

Miao, 26, is lying in the hospital bed, thin and flat like bent bamboo. The carefully polished pink toenails present an odd contrast to her shins that are smeared with disinfectant, and the ugly metal rods. Miao has been here for six months, 1600 kilometres from her home town of Chonqing. She learnt about the surgical leg lengthening in the women’s magazine “Hope”. She has already gone through a three-hour procedure and six months of pain, eight further weeks and two more operations lie ahead of her. However, for Miao all this does not count: She has “achieved” six centimetres, which exceeds the magic mark of 1.60 by three centimetres. Another two centimetres are possible, according to the doctor. But what for?

Miao readily talks about her former ego-trauma: “I was always my family’s favourite, the prettiest in my class. But during puberty, my sisters and my girlfriends all grew faster than me. I stayed short as a dwarf, 1.57 metres. Terrible!” The downfall of a favourite daughter from her throne – is this enough reason for a procedure that is both long and dangerous? And that costs 12,000 Euro, for China an unimaginable sum?

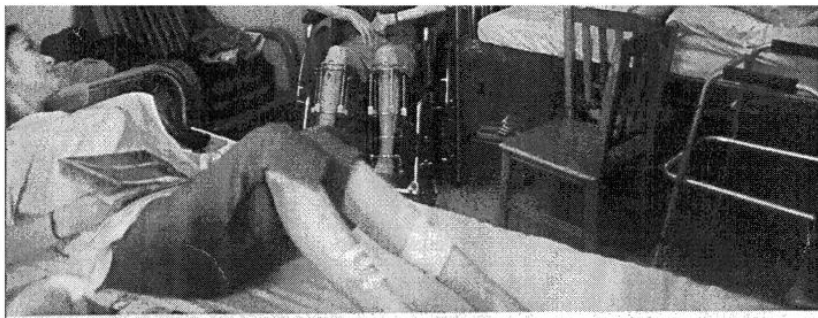
To be able to better comprehend Miao and her fellow sufferers in Canton, Beijing, or elsewhere in China, one needs to know about the obsession that has broken out in this country. More than quite fair skin, large eyes or a European nose, the right body height is something like an entry ticket into the elite. A few centimetres can determine whether one gets one of the desired places at university or finds a well-paying job. The job ads in the newspapers almost always state a minimum height – for men as well as for women. The prestigious jobs, which involve contact with overseas, are only given to women from 1.65 metres and to men from 1.70 metres. What applies to education and career also counts on the marriage

market. To get a wealthy husband, a Chinese woman needs one thing above everything else: body height.

For example, Wang Fulin from Beijing, 29 years old. Recently operated on in a Cantonese beauty clinic. Her husband is a businessman who earns good money and travels a lot. For years, jealousy has troubled her, tells Wang. Her worst fear: her spouse could leave her one day for a long-legged stewardess. As he had to go overseas for eight months, she secretly went to Canton. He would never have agreed to this costly operation. Only her mother is let in on it, has taken out a credit that the daughter wants to pay off over time. But what is she going to tell her husband when she embraces him upon his return, six or eight centimetres taller? “Oh, anything”, says Wang rather reluctantly, “for example, that I took medications.”

The merciless battle to be taller has naturally not only called onto the scene surgeons, but also plenty of quacksalvers, herbalists and hormone specialists. Pharmacies offer pills, drops and magnetic shoe inserts that are to encourage growth. Some doctors try to make their patients grow taller by means of hormone injections. However, the method that is most successful by far and at the same time involves the most is surgery. Up to ten centimetres of growth are possible without any problem. And virtually guaranteed.

“We perform 600 leg lengthening procedures per year”, says head physician Dr. Zang Yi Qing in Canton. The trend continues upwards. X-rays and before-and-after photos are lying on his desk.



Stangen bald los zu sein wie ihre beiden Zimmernachbarinnen

und Vorher-Nachher-Fotos. Lauter zarte Frauen mit angestrengten Gesichtern und langen, dünnen Beinen. Bei manchen wirken sie fast unnatürlich, wie Stelzen. „Der Eingriff“, sagt Zang Yi Qing, „ist heute Routine in China.“ Natürlich werde er auch in Europa und den USA durchgeführt, „aber nur bei Fehlbildungen der Beine, nicht aus Schönheitsgründen.“ (Hier irrt Dr. Zang! Siehe Kasten.) Doch wie funktioniert der Eingriff überhaupt?

Mit wenigen Worten erklärt der Arzt die schon seit Mitte des 20. Jahrhunderts bekannte Methode. Längenwachstum ist auch noch bei ausgewachsenen Menschen möglich, wenn man so genannte künstliche Wachstumsfugen in den Oberschenkelknochen und/oder in den Schienbeinen schafft. Im Klartext: Die Knochen werden durchgesägt. Übt man mechanisch dauerhaften Zug auf sie aus, bildet sich neues Knochengewebe. Muskeln, Blutgefäße und Nerven halten wie beim natürlichen Wachstum in der Kindheit mit. Damit der konstante Zug entsteht, wird eine Art Schraubstock in den Knochen eingepflanzt, an dem die Patientin selbst jeden Tag ein wenig drehen kann. Zusätzlich wird der Knochen mit dünnen Metalldrähten durchbohrt, an denen die Fixative, die Stangen, befestigt sind, die das Bein stabilisieren sollen. Je nachdem, wie viel Dehnungsschmerz die Patientin sich zumuten kann, sind täglich ein halber bis ein Millimeter Wachstum möglich. Nach sechs Monaten können die Drähte in einer zweiten Operation entfernt werden. Nach einem Jahr, wenn der Knochen sich gut stabilisiert hat, wird noch einmal operiert. Jetzt kommen auch

die Nägel raus. Hinter dieser lapidaren Beschreibung verbirgt sich eine Leidensgeschichte für Leib und Seele. „Als ich aus der Narkose aufwachte und die Stangen sah, habe ich nur geheult“, erzählt Soong Ling. „Ich kam mir vor wie verkrüppelt.“ Schlafen kann sie, wegen der Schmerzen, seit Wochen selten mehr als zwei Stunden am Stück. Ihr Tagesablauf in der Klinik:

Jeweils morgens und nachmittags zwei Stunden Reha, den Rest der Zeit liegt sie auf dem Bett, massiert die schmerzenden Beine und tröstet ihre Bett Nachbarin, die Tag und Nacht heult.

Aus Angst. In der Klinik kursieren Schauermärchen über versaute Operationen und überlastete Chirurgen. Zeitungen veröffentlichen Berichte über Infektionen, nicht verheilte Knochen, Beine, die das Gewicht nicht mehr tragen. Bereut Soong Ling den Eingriff? „Niemals“, sagt sie mit fester Stimme. „Als ich acht Tage nach der Operation zum ersten Mal aufstehen sollte, habe ich nicht nur vor Schmerzen geweint, sondern auch vor Freude. Jetzt wird alles besser für mich.“

Ihre Urgroßmutter, erzählt sie noch, habe schlimmere Schmerzen ertragen müssen, um die zu ihrer Zeit so begehrten Lotosfüße zu bekommen. Lotosfüße – seit 1930 verboten. Durch Einbinden künstlich klein gehaltene und nur noch zum Tripeln taugliche Füße. „Grauenhafte Vorstellung“, sagt Soong Ling. Und humpelt mühsam in ihren Eisenstangen davon. ■

In der Klinik kursieren Gerüchte über verpfuschte Operationen und überlastete Chirurgen

Beinverlängerung – auch in Deutschland?

Die in China bevorzugte Methode der chirurgischen Beinverlängerung geht auf den russischen Arzt Gavril Ilizarov zurück. Sie wird in Deutschland vereinzelt praktiziert bei Menschen mit Knochenfehlbildungen. Seit gut vier Jahren gibt es in Deutschland aber eine wesentlich einfachere, weitaus weniger schmerzhaftere Methode. Entwickelt wurde sie an der Uniklinik München von dem Chirurgen Rainer Baumgart, gemeinsam mit Kollegen und Ingenieuren. Was ist anders?

Ein mitwachsendes, mit einer kleinen Sendeantenne ausgerüstetes Implantat wird in die Knochen eingepflanzt. Es lässt sich von außen, ohne Kabelverbindung, über einen Mikrocomputer steuern. Der ins Implantat eingebaute elektro-

motorische Antrieb zieht die Knochen gleichmäßig auseinander. Die Vorteile: Es sind keine äußeren Fixative nötig, der Patient kann also viel schneller wieder fast „normal“ leben. Da die Haut nach der Operation geschlossen wird, besteht kaum ein Infektionsrisiko, und die Narben sind fast unsichtbar. In erster Linie wird auch diese Operation bei Patienten mit medizinischer Indikation durchgeführt, und nur in diesen Fällen zahlt die Kasse. Aber auch aus Schönheitsgründen wurde an der Münchner Uniklinik bereits mehrfach operiert. Ein Trend wie in China wird jedoch kaum daraus werden. Schon aus Kostengründen: Wer Oberschenkel und Schienbeine verlängern lassen will, muss bis zu 70 000 Euro hinblättern. Infos: www.beinverlaengerung.de

Nothing but delicate women with strained faces and long, thin legs. On some of them, they look almost unnatural, like stilts. “The procedure”, says Zang Yi Qing, “is routine in China today.” Of course it is also being performed in Europe and the USA, “however, only when there are malformations of the legs, not for aesthetic reasons.” (Here, Dr. Zang is wrong! See box.) Yet how does the procedure actually work?

[...] to soon get rid of her rods like her two roommates.

Rumours of botched operations and over-worked surgeons are circulating in the hospital.

In a few words, the doctor explains the method that has already been known since the mid-20th century. Growth is still possible for fully grown persons, if one creates so-called artificial epiphyseal plates in the femur and/or the shinbones. In other words: the bones are sawn through. If they are subject to an enduring mechanical traction, new bone tissue forms. Muscles, blood vessels and nerves keep up like during the natural growth in childhood. In order to create the constant pull, a type of bench vice is implanted into the bone, which the patient can turn a little bit by herself each day. In addition, the bone is pierced with fine metal wires, to which the fixatives, the rods, are fastened, that are meant to stabilise the leg. Depending on how much elongation pain the patient can bear, half a millimetre up to one millimetre of growth can be achieved daily. After six months, the wires can be removed in a second operation. After one year, when the bone has stabilised, another operation is performed. Now the nails are removed. Behind this matter-of-fact description lies a tale of woe for body and soul. “When I woke up from the general anaesthetic and saw the rods, I just cried and cried”, tells Soong Ling. “I felt crippled.”

For weeks, she has not been able to sleep for more than two hours in a row because of the pain. Her daily routine at the hospital: Each day two hours of physiotherapy in the morning and in the afternoon, the rest of the time she lies on the bed, massages her hurting legs and consoles her roommate, who is crying day and

night. For fear. Horror stories are circulating in the hospital about botched operations and over-worked surgeons. Newspapers publish reports about infections, bones that have not healed, legs that can no longer bear the weight. Does Soong Ling regret having the procedure? “Never”, she says with a firm voice. “As I had to get up for the first time eight days after the operation, I not only cried because of the pain, but also out of joy. Now everything is going to get better for me.”

Her great-grandmother, she adds, had to suffer much worse pain to get the lotus feet so desired at her time. Lotus feet – illegal since 1930. Feet artificially kept small by wrapping them and that were only just fit for scuttling. “Horrible thought”, says Soong Ling. And she struggles to hobble away in her iron rods.

Leg lengthening – also in Germany?

The surgical method of leg lengthening preferred in China goes back to the Russian doctor Gavril Ilizarov. In Germany, it is sometimes performed on people with bone malformations. However, for a bit over four years, a significantly simpler and far less painful method has been available in Germany. It was developed at the University Clinic of Munich by the surgeon Rainer Baumgart, together with colleagues and engineers. What is different? An adaptable implant equipped with a small transmitting aerial is implanted into the bones. It can be operated externally, cable-free, via a microcomputer. The electro-motor drive integrated into the implant evenly pulls the bones apart. The advantage: No external fixatives are needed; the patient is therefore much quicker able to live almost “normally” again. As the skin is closed after the operation, the risk of infection is very low, and the scars are almost invisible. This operation is also mainly performed on patients with a medical indication, and only in these cases will the public health insurance pay for it. Yet the Munich University Clinic has already operated several times for aesthetic reasons as well. But it will hardly turn into a trend like in China. On cost grounds if nothing else: those who want to lengthen their thighs and shins have to fork out up to 70,000 Euro.

Info: www.beinverlaengerung.de

7.2 What Price Beauty¹⁶: Theme and Structure of the Articles

7.2.1 Setting the Agenda: Heading, Title Photograph and Captions.

Despite the fact that *marie claire* is a syndicated magazine with a similar corporate philosophy across its local editions, and the same journalist having researched and produced the images for the story, it becomes obvious early in the Australian and German versions of the leg-lengthening report that they are presenting the story from two different viewpoints.

Both headings use either metaphorical or highly idiomatic language. The German heading refers to the specialised hospitals in which the leg-lengthening procedures are carried out as “the factory of long legs”. The heading invokes the hospitals as being impersonal assembly lines in which, through advanced medical technology, ‘technobodies’ (Balsamo, 1996) are produced in piecework (see 2.4). The Australian heading highlights the pain associated with the procedure rather than the technical nature of the procedure, as indicated in the wording of the title “growing pains”.

The introductory paragraph supporting the heading sets the agenda for each article. The introduction of the Australian issue introduces the content of the article below:

In a desperate bid to compete for wealthy husbands and more successful careers, some Chinese women are undergoing torturous – and often dangerous – leg-lengthening surgery, hoping that those extra inches will bring them happiness (MC.A21, p. 57).

In contrast, the German article introduces the story as follows:

¹⁶ The expression “what price beauty?” is a common phrase in popular discussion of cosmetic surgery. An article in the Australian edition of *marie claire* used it as an article heading (MC.A1), and the 2010 television show *The Price of Beauty*, in which celebrity Jessica Simpson travels around the world to explore different beauty regimes, also draws upon this phrase (http://www.vh1.com/shows/jessica_simpson_the_price_of_beauty/series.jhtml). The expression probably originates from an American silent film of the 1920s titled “What price beauty?” (<http://www.silentera.com/PSFL/data/W/WhatPriceBeauty1925.html>).

They would love most of all to be like tall European girls. To fulfil this dream, young Chinese women are prepared to suffer excruciating pain. In special clinics, they have themselves elongated and stretched like on a medieval torture rack (MC.G16, p. 57).

Both articles associate the procedure of leg-lengthening with torture; however, it is the German text which makes this comparison in a highly 'visual' manner by using strongly connoted metaphors such as "hellish pain" and "medieval rack", and comparing the methods of the clinics to a medieval torture chamber.

The German introduction also assumes that the main motivation to undergo this surgery is to become more westernised, that is, as tall as European women. The absolute nature of the claim ("most of all") is evidenced in a short, declarative sentence, unsupported by a subordinate clause providing supporting arguments for this claim. The statement is an example of what Fairclough (2003) classifies as 'free indirect reporting'. Such statements sit between direct and indirect styles, that is, they have some of the tense and pronoun shifts typical of indirect speech, but without a reporting clause (Fairclough, 2003). The statement is an utterance made by the writer, although, with a reporting clause could be read as an indirect quotation of one of the patients. Thus, this propositional assumption, or an assumption about what is or can be, is assigned significant 'epistemic' truth (Fairclough, 2003).

The claim is given further authority by referring to the 'social actors' in this sentence by the plural pronoun "they", indicating that a larger, generic group of women hold this view. Furthermore, this pronoun reinforces the institutional anonymity of a hospital the writer has decided to represent as a factory, where not individuals but a non-specified group of patients is treated.

In contrast to a discourse of 'ethnically appropriate' cosmetic surgery as identified in Chapter 6, the first sentence of the German introduction clearly draws upon cultural othering. The cultural 'other', represented by the Chinese women undergoing leg-lengthening surgery in order to become more European, is represented as 'inferior'. The 'desirability' of tall Western women over the Chinese is expressed in the second

sentence, which claims that Chinese women are prepared to bear extreme pain for this “dream” thus, being tall is characterised as a goal of ‘white’ and Western women. In this section, Chinese women are not represented as women exerting some level of agency by choosing surgery that suits their ‘ethnic’ background, but are represented as victims of cosmetic surgery which serves to homogenise and westernise.

The Australian article, on the other hand, attempts to invite the Western reader in by drawing upon agency, investment and transformation discourses of cosmetic surgery. By deciding to invest in their appearance, Chinese women enable themselves to achieve the ‘trifecta’ of an eligible partner, professional success and inner happiness. These discourses are of a global nature, and invite the reader to identify with the cosmetic surgery struggles of Chinese women. By drawing upon discourses which are familiar to the Australian reader, *marie claire* achieves the generalising representation of all women as “equal”, which Gill (2007) criticised as ignoring the complexities of personal and cultural identity.

In both versions, the heading is supported by a reprint of the same photograph, a bird's eye view shot of a female patient lying on her back on a hospital bed. She is looking up to the camera lens and thus the viewer. The skirt she is wearing has been lifted above the knee so the metal frames which cover the legs from the ankles to the knees are clearly visible. The metal frames on one level ‘denote’, that is, they ‘document’ the reality of leg-lengthening procedures (Machin, 2007, p. 23), which require these ‘instruments’ in order to ‘stretch the legs’. Nevertheless, the metal frames are also strongly connotative, and as a powerful iconic “possessive attribute” (Kress & Van Leeuwen, 2006, p. 87) reinforce the metaphors of torture and the pain associated with it.

The young woman, who is identified as ‘Miao’ in the German article, fits into the category of “represented participants” (Kress & Van Leeuwen, 2006, p. 48). In contrast to “interactive participants”, who are represented as “participants in the act of communication”, represented participants are “participants who constitute the subject matter of communication [...] the participants about whom or which we are

speaking or writing or producing images” (Kress & Van Leeuwen, 2006, p. 48). Thus Miao is represented as the goal of the viewer’s objectifying gaze. However, the gaze of represented participant Miao also “directly addresses the viewers and so establishes an imaginary relation with them” (Kress & Van Leeuwen, 2006, p. 89). This is “a visual form of direct address”, demanding “that the viewer enter[s] some kind of imaginary relation with her” (Kress & Van Leeuwen, 2006, pp. 117-118).

Kress and Van Leeuwen (2006) argue that a direct gaze, whether it emanates from a human being or not, “anthropomorphises” the participant looking at the viewer (p. 118). It can therefore be argued that the ‘dehumanising’ salience of the metal bars is complemented by the ‘humanising’ gaze of ‘Miao’ inviting the invisible onlooker to engage with her cosmetic surgery story. However, the middle to long distance from which the picture is taken does not overcome the barrier between onlooker and represented participant completely. Kress and Van Leeuwen (2006) state that:

at middle distance, the object is shown in full, but without much space around it. It is represented as within the viewer’s reach, but not as actually used. This type of picture is common in advertising [...] At long distance there is an invisible barrier between the viewer and the object. The object is there for our contemplation only, out of reach, as if on display in a shop window or museum exhibit (pp. 127-128).

Despite the engaging gaze, Miao is reduced to a ‘medical exhibit’ on a hospital bed.

In both the Australian and the German version of the report, captions comment on the photograph. The Australian version states:

Many patients who undergo leg-lengthening operation claim that the boredom, combined with the mental strain of wondering if the procedure will actually be successful, is far more painful than their physical suffering (MC.A21, p. 56).

In this paragraph, the three aspects which represent the drawbacks of cosmetic surgery and the Cinderella discourse – boredom, mental strain and physical suffering – reinforce the physical suffering as clearly represented in the image these captions accompany. Nevertheless, by introducing a narrative of ‘beauty knows no pain’, the

obvious physical discomfort involved in this invasive procedure is relativised. As Pitts-Taylor (2007) states in her analysis of cosmetic surgery television, shows such as *Extreme Makeover* build their narrative on the Cinderella discourse, whose transformative power is illustrated in the moment of the ‘big reveal’ (p. 58):

To this end, cosmetic surgery is stripped of any interpersonal, financial and physical aspects of surgery that might complicate this view. Most notably, the physical pain and trauma of surgery are, to varying degrees, minimised (pp. 54-55).

The trauma of the leg-lengthening surgery is not “minimised” in the photograph, but the associated captions downplay trauma to some extent through a ‘no pain, no gain’ narrative.

The German captions are of a more technical nature, explaining how time-consuming and tedious the leg-lengthening surgery is:

Precision work: Every day Miao adjusts the dials of the metal splints in order to stretch her legs. In six months she has already managed 6 centimeters (MC.G16, p. 57).

Even though the captions convey an objective and matter-of-fact tone, they reinforce the notion of leg-lengthening surgery as a drastic cure. Success comes very slowly, after lying in the photographed position for six months day in, day out.

Whereas the Australian introduction might evoke some empathy and understanding for the motivation of Chinese women to undergo such painful surgery, the German one reinforces significant doubt over whether the sacrifice and suffering justify the end. Neither article plays down the physical pain and trauma involved in leg-lengthening and both distance the reader clearly from the Chinese women represented in the report. Nevertheless, the Australian version’s use of less metaphorical and negatively connoted language further invites the readers to involve themselves in the personal narratives behind this invasive body modification process.

7.2.2 Structure of the Articles.

After the introductory pages, both versions of the reports launch into the main text body by setting the scene, describing the atmosphere in the hospital and commenting on Chinese society. The Australian article is then mainly driven by introducing the reader to the various ‘social actors’ in the report and by what they have to say. Their comments are woven into the overall narrative of the report by the writer’s comments and passages describing the procedure, cost, risks and downsides and a comparison to a case of leg-lengthening in the West. The German version of the report follows a similar approach, interweaving narrative passages by the author with direct quotations of the interviewees. Both reports conclude with the direct quotation of a leg-lengthening patient, which in the German version is summarised by a final comment of the writer.

7.2.3 Differences in the German Layout.

In the German version, a different structural layout from the Australian version is noticeable. The text of the actual story is supplemented by a visually segregated text box on the last page (MC.G16, p. 60), commenting on the performance of leg-lengthening surgery in Germany. Machin (2007) defines segregation in relation to composition and page layout as “the use of physical frames to create difference” (p. 157). By providing this segregated text box of ‘factual’ content, the editing of the German version of the article emphasises its informative report-style character. Whilst the Australian version solely focuses on China as the cultural ‘other’ in their report, the German version establishes links to the country and cultural context of their readers.

Despite the cultural contextualisation offered by the German article, cultural othering is also at play in the German version. Although the superiority of the German medical world over China is established through the mention of more advanced surgical techniques and not discourses of agency and femininity, the subtext underneath the cost factor assumes a higher level of ‘rationality’ among German

patients. After a description of the advantages of the advanced and less invasive leg-lengthening operation in Germany and a mention that such a procedure is covered by public health insurance if there is a medical indication, the text concedes that “the Munich University Clinic has already operated several times for aesthetic reasons as well” (MC.G16, p. 60). This statement is followed by another concessive statement “But it will hardly turn into a trend like in China”. This represents an ‘irrealis statement’, which makes predictions about the future or exists as a hypothetical statement (Fairclough, 2003, p. 109). Although the sentence does not claim absolute ‘truth’ by using the concessive adverb “hardly”, the author’s claim of ‘epistemic truth’ is still strong.

The claim of epistemic truth in the German article is supported by the last sentence, which states a reason and evidence for this: the substantial cost of 70,000 Euro is a deterrent. Nonetheless, the phrase “on cost grounds if nothing else” (MC.G16, p. 60) implies that the cost is a powerful, but not the only deterrent. The reader who finished her reading of the report with this sentence has already been informed that Chinese women are prepared to pay 12,000 Euros for the procedure, “for China an unimaginable sum” (MC.G16, p. 57).

The propositional assumption (Fairclough, 2003: p. 55) in the subtext is clear: The ‘rational’ Germans are positioned against the ‘irrational’ Chinese victims of a cosmetic surgery “trend” (MC.G21, p. 60). The use of the noun “trend” also emphasises the ‘irrationality’ and superficiality of the leg-lengthening operations, since “trend” can be connoted as a popular culture tendency many people follow without much reflection.

Another difference in the German layout of the article is two sentences on page 59 and 60 which are made salient by separation and contrast. Separation in regards to composition and layout is defined by Machin (2007) as “separation by space rather than by frames” (p. 157). The two sentences “In China, body height determines whether one gets a place at university, a lucrative job, or a husband” (MC.G16, p. 58) and “Rumours of botched operations and over-worked surgeons are circulating in the hospital” (MC.g16, p. 60) are also made salient by contrast (Machin, 2007, p.

157), that is through effects such as changing the size of the font or colouring. In this case, the two statements are reprinted outside the main text body as isolated statements. In addition, they are printed in a bigger font size and made salient by the layout, which spreads the sentences across eight (statement on MC.G16, p.58) and seven (statement on MC.G16, p.60) lines. This results in each line consisting of one to four words, giving each word of the phrase, and therefore also the whole phrase, more emphasis.

The salience of these two statements suggest a victimisation discourse: Chinese women are ‘cultural’ cosmetic surgery victims because procedures like leg-lengthening are crucial to advance in society, and they are also ‘physical cosmetic surgery victims’ because they face botched operations. These two features of layout and structure indicate that the German version of the report pursues an agenda highly critical of the Chinese leg-lengthening procedures.

7.2.4 Setting the Scene.

The Australian version of the report sets the scene by describing the patients in a hospital ward in Southern China. It is stated that most of them are women, with large metal ‘cages’ attached to their lower limbs, turning a dial on the rods every day to force the bones below their knees apart by up to one millimetre. This description reinforces the associations of the tedious and painful nature of the procedure as indicated in the heading “growing pains”. The women are “taking tentative steps”, and “thanks to an operation that claims to increase leg length by an average of 6-10 cm”, they are also taking tentative steps towards “their dreams [...] becoming reality” (MC.A21, p. 59).

Similar to the introductory paragraph of the German version, the notion of becoming taller, and thus transforming many other aspects of their lives is the “dream” of those Chinese women undergoing leg-lengthening surgery. The choice of the word “dream” reinforces the Cinderella discourse, drawing upon elements of fairy tales. As Jones (2008a) pointed out in her analysis of the multiple cosmetic surgeries of

Lolo Ferrari, a French pornography star who died of complications associated with her extreme breast augmentations, the transformative power of the Cinderella discourse is supported by the “Snow White” aspect (pp. 132-136). After an ‘enchanted’ sleep under anesthesia (Jones, 2008b, pp. 130-132) the cosmetic surgery patient awakes to her dream having been transformed into reality.

The Australian version of the report moves on to provide reasons why women undergo such invasive procedures. The article strongly draws upon the commodity and investment discourse of cosmetic surgery by stating that “many women will undergo virtually any treatment they believe will improve their quality of life” (MC.A21, p. 59). Contradictory discourses come into play here: On one hand, Chinese women are represented as so desperate to improve their lives that at a last resort they are willing to become ‘victims’ of the social pressure to undergo cosmetic surgery. On the other, they exert agency by applying “cosmetic surgery as a coded practice of “self-care that brings wellness” (Pitts-Taylor, 2007, p. 54).

The principal reason why Chinese women undergo leg-lengthening surgery is stated as being the fact that height equates to prestige and gives an advantage in fierce competition for jobs and husbands in a heavily populated country (MC.A21, p. 59). The linking of increasing competition in the world of work to the investment discourse highlights an aspect Elliott (2008) identified as a powerful element in the “new economy” (p. 9).

In contrast, the German version draws on different discourses. The first sentence of the main text body of the article “It hurts. A lot.” (MC.G16, p. 57) is broken up into a sentence consisting of the minimum number of components to form a sentence – subject and verb – and an adverb constituting a separate phrase. The subject-verb sentence to open the article positions the reader in the middle of a story of pain and victimisation.

The first two paragraphs, setting the hospital scene, describe a desolate place:

The bare courtyard of the clinic offers a ghastly sight. Clonk, clonk, clonk – ten, twenty young women hobble across the stone floor, their legs jammed into medieval looking iron rods. Have they all become megalomaniacs? (MC.G16, p. 57).

From the opening of the article, the overwhelming presence of pain and the grotesqueness of the situation are used to support the notion of woman as victim, emphasising that this operation is something that goes beyond what is rationally understandable and justifiable. The rhetorical question concluding the first paragraph of the article functions to align agreement of the reader with the assessment of the writer.

Similar to the Australian version, the reason for undergoing this procedure is given as ‘beauty’, as extra height enabling women “to climb the social ladder”. Clearly, this draws upon the investment discourse of cosmetic surgery, which is represented as an urgent matter in order to stay competitive in the ‘new economy culture’, characterised by “a gruelling performance society, uninhibited capitalism and brutal elitism” (MC.G16, p. 57).

The frequent use of negatively connoted adjectives, adverbs and emotive phrases such as “contorted with pain”, “ghastly sight”, “legs jammed into medieval looking iron rods”, “gruelling performance society”, “uninhibited capitalism” and “brutal elitism” have a cumulative effect emphasising aspects of physical and mental torture. These terms invoke pressures of class and ‘new economy’, as pointed out in Elliott’s framing of cosmetic surgery as an ‘investment’ in the body in order to stay competitive in a fast-changing corporate world (see 2.3.5).

In contrast to the Australian version, the German report explicitly links the leg-lengthening procedure, as well as cosmetic surgery in China in general, to issues of ‘race’ and racial passing (identification with an ethnic group other than that assigned by prejudice, mostly assimilation to the ‘white’ majority). This reflects the view that cosmetic surgery and particular notions of race are strongly intertwined, as advocated by medical historians such as Gilman (1999) and Haiken (1997) (Davis, 2003: p. 91). In opposition to the discourse of ‘ethnically appropriate’ cosmetic surgery, the

German article assumes that the reason behind the cosmetic surgery ‘craze’ in China is the desire to look Western:

[Chinese women] are no longer required to be almond-eyed, flat-chested and small, but preferably to look Western [...] in just 45 minutes Asian almond eyes are trimmed to look “Western” [...] one gets a higher nose bridge for just under 300 Euros. And the latest thing: longer legs! (MC.G16, p. 57).

Consistent with the inversion of the discourse of ‘ethnically appropriate’ cosmetic surgery, cultural othering is openly expressed through physical identification. According to Van Leeuwen (2008), in narratives “physical identification is always over-determined: physical attributes tend to have connotations, and these can be used to obliquely classify or functionalise social actors” (p. 45). Expressions such as “almond-eyed”, “flat-chested” and “the delicate girl with hair as black as raven feathers” represent participants in terms of physical characteristics, and therefore selectively focuses the reader on the ‘social actor’s physical characteristics (Van Leeuwen, 2008); inevitably, this excludes other aspects that constitute the ‘social actor’s’ identity. As Van Leeuwen (2008) adds, “physical identification occurs a good deal in stories” (p. 44). It can be argued that the Chinese women undergoing leg-lengthening represented in this report are represented as ‘characters in a story’ purposefully constructed to invite the Western reader to cast their gaze upon a cultural other.

In the paragraph quoted above, cosmetic procedures such as leg-lengthening are also trivialised by classification as “the latest thing”, a value judgement of the procedure as irrational and wrong – from the ‘rational’ judgment of a Western point of view.

In this section I commented on how the report positions the reader from the beginning of the story. As the analysis in this section showed, both versions of the leg-lengthening report are rich in grammatical, semantic and discursive structures. Since the remaining text is no less rich, the next section follows a condensed approach focussing on the representation of the ‘social actors’ in text and visuals.

7.3 ‘Investors’ vs. ‘Victims’?: Discourse, Narrative and Representation of ‘Social Actors’ in Language and Visuals

As emphasised by the salient photograph on the first few pages of both versions of the report, most ‘social actors’ of the report are female patients, with the Australian version also mentioning one man. Other ‘social actors’ represented are the male surgeons and family members of the patients. The latter consist of Soong Ling’s husband, Miss Miao’s boyfriend and mother and Mr. Xian’s wife, who, as ‘minor’ ‘social actors’ have the function of supporting the narratives of the more prominently featured ‘social actors’.

In the Australian version, the patients are first represented as a generic group (“hundreds of Chinese women, as well as a handful of men”; MC.A21, p. 59), but as the report progresses, the ‘social actors’ are named and personalised. The two Chinese patients represented are ‘Miss Miao’ (p. 59) and ‘Soong Ling’, another female patient of 22 years (MC.A21, p. 60) and one of the few male patients, ‘Mr. Xian’ (p. 60). An example of a ‘Westerner’ undergoing cosmetic leg-lengthening surgery is “15-year-old Emma Richards” from the UK (MC.A21, p. 60). The personalisation invites the reader to more closely engage with the individualised ‘small’ story of the ‘social actors’; however, it can also distance the reader by evoking a feeling of repulsion towards a ‘concrete’ person and her ‘irrational’ motivation to undergo cosmetic surgery. The personalised mention in the Australian version of a British teenager who had leg-lengthening surgery for cosmetic purposes, that is, the mention of a person from the same cultural background as the vast majority of readers, highlights the complexity of the inviting and distancing process. On one hand, the reader is positioned to identify with the cultural ‘self’, but on the other hand is distanced, since ‘Emma’ is represented as the ‘odd one out’ among an otherwise Chinese cast.

‘Complementing’ the patients, the surgeons are named as “Dr Zhang Yi Qing, a surgeon at the Guangzhou Air Force Hospital, who performs at least one operation a week” and “Dr Liu Bin, a surgeon who operates on several patients each week at the Air Force Hospital” (MC.A21, p. 60). Once more, such personalisation can either

invite the reader to ‘trust’ experienced surgeons, or distance her through the assumption that surgeons who operate often and on many patients are not in a position to perform an operation of a high standard. Similar to the personalised representation of the patients above, the reader is positioned to create her own ‘small’ cosmetic surgery story from the content she is provided with in the article.

The ‘*dramatis personae*’ in the German version differs slightly. The two female patients represented under the same name as in the Australian version are “Miao, 26” (MC.G16, p. 58) and Soong Ling (MC.G16, p. 57). One new patient is introduced, “Wang Fulin from Beijing, 29 years old” (comparing the personalising information provided about Wang Fulin, it appears that she has been ‘created’ as a third ‘social actor’ integrating certain aspects of Miss Miao’s and Soong Ling’s lives as stated in the Australian version) (MC.G16, p. 58).

In the German version only one surgeon is mentioned, “head physician Dr Zang Yi Qing in Canton”. Other personalised ‘social actors’ in the German version are Wang Fulin’s husband who is described as a wealthy businessman, her mother, who took out a bank loan so Wang Fulin could have the leg-lengthening operation, and Soong Ling’s great-grandmother, who was one of the last Chinese women with lotus feet, a practice abandoned in 1930 (MC.G16, p. 60). Considering the more critical stance of the German version towards leg-lengthening surgery as outlined in 7.2, Soong Ling’s great-grandmother is clearly constructed as the ‘social actor’ positioning the reader to realise the ironic link in the gruelling nature of cosmetic surgery of the ‘old’ and contemporary days. This mention of Soong Ling’s great-grandmother, as made in the last paragraph of the German article, has a strong distancing effect on the reader.

Although both articles differ slightly in the ‘social actors’ represented, they agree insofar as apart from one male patient mentioned in the Australian article, the patients are women, while the men are either the doctors or the husbands. Thus, as outlined in the previous analyses, men are represented once again as powerful agents of transformation, either as doctors carrying out the operations and thus remaking the women, or as the successful husbands whom the women need to keep faithful by looking as attractive as they can. The women are constructed as fulfilling a more

dependent role through classification as patients, wives, or supportive mothers, although the personal narratives indicate that within those roles more closely linked to victimisation and manipulation discourses there are also discourses of agency, investment and transformation in play.

This complex interplay of gender roles is clearly evidenced in the reasons the author of the German version gives for Miao's decision to undergo leg-lengthening surgery. The main reason, the patient's "ego-trauma" (MC.G16, p. 58), highlights the pressure on Chinese women to be and remain attractive:

I was always my family's favourite, the prettiest in my class. But during puberty, my sisters and my girlfriends all grew faster than me. I stayed short as a dwarf [...] The downfall of a favourite daughter from her throne – is this enough reason for a procedure that is both long and dangerous? (MC.G16, p. 58)

The vanity discourse in this statement is emphasised by the rhetorical question at the end and the pseudo-psychological, dismissive evaluation of Miao's motivation as an "ego-trauma". The vanity discourse is also drawn upon to explain Wang Fulin's motivation to undergo leg-lengthening surgery:

Her husband is a businessman who earns good money and travels a lot. For years, jealousy has troubled her, tells Wang. Her worst fear: her spouse could leave her one day for a long-legged stewardess (p. 58).

Whilst Wang Fulin's husband is represented by functionalisation (Van Leeuwen, 2008: p. 42), that is, in terms of what he does, Wang Fulin's assumed 'rival', the "long-legged stewardess", is categorised by functionalisation and, even more visually, by physical identification (Van Leeuwen, 2008, p. 48). Drawing upon roles and characterisation more apt to romance novels, this representation in particular reinforces gender-based roles of men and women in society by drawing upon the connotations that cling in particular to clichés of romance novels.

Another aspect in relation to the representation of 'social actors', namely the way the report was edited in the Australian and German versions, shows significant

differences. These lie in the distribution of direct and indirect quotations brought forward by the ‘social actors’. The narrative in the Australian version is advanced by direct quotations of the ‘social actors’, which are intersected and linked by comments and narrative passages of the writer. In contrast, in the German version, the ‘story’ is predominantly presented from a third person perspective. Descriptive passages interweave with passages in which the writer indirectly represents the view of the ‘social actors’. This is done through indirect speech or the extensive use of the German ‘subjunctive I’, which immediately allows the reader to identify a statement as reported speech by the specific verb conjugation this grammatical mood requires.

I argue that through the editing process of the German version, in which the main ‘social actor’ is the author retelling the story, the German reader is distanced to a greater extent from the identity construction process of the Chinese leg-lengthening patients than the Australian reader. In the Australian edition, the reader is positioned to engage on a more personal level by the story being told from a first-person narrative perspective through the direct quotations.

As stated above, in the Australian version, the reasons for undergoing leg-lengthening surgery are presented through the comments of the interviewees. The first one mentioned in the article is Miss Miao, who states that:

I was short and not that good-looking. If I want to change my job, it would help if I were taller. A tall girl is always more welcome in a job interview. And it will help me find a better guy (MC.A21, p. 59).

Drawing on the investment and transformation discourse of cosmetic surgery, Miao claims to feel more confident. The hope that a ‘good investment’ will help transform one’s life is supported by Miss Miao’s (fairy god) mother, who borrowed the equivalent of \$18,600¹⁷ for the operation:

¹⁷ The article does not specify whether these are US or Australian dollars.

This is our secret. We're not going to advertise it. It will help her future. We will be able to pay back the money when she gets a better job. She's very clever and this will make all the difference (MC.A21, p. 60).

Miao's mother's position adds another facet to the Cinderella discourse, namely the aspect of silent suffering as a justification for the transformation 'revealed' in the final 'Cinderella moment'. However, these aspects are immediately leveled out by stating the downside of the surgery: "The pain is very hard to take...It is hard to sleep. I rarely sleep for more than two hours at a time" (MC.A21, p. 59).

Soong Ling gives similar reasons for undergoing the procedure like Miss Miao:

Desperate to increase her height of 150 cm by 10 cm, the 22-year-old didn't tell her husband she was undergoing the operation [...] "He was really mad when he found out, but by then it was too late." Ling admits that her desire to have the operation was fuelled by jealousy and insecurity. She was concerned about her husband, a tour operator, mixing with "tall, beautiful girls" [...] in the travel industry. She believes the extra height will increase her confidence and thereby enhance her relationship with her husband (MC.A21, p. 60).

This section integrates vanity, investment and transformational discourses, but also draws upon agency. On one hand, Soong Ling is manipulated by jealousy and dominant discourses of femininity and attractiveness as key qualities 'to keep your man'; on the other, she is represented as someone exerting agency in order to improve her situation.

In any case, Soong Ling expresses concern about the quality of the operation, which did not proceed smoothly. "She has recently discovered that one of her legs is now slightly longer than the other. 'Perhaps my husband was right,' she says. 'At the moment, I regret it.'" (p. 60). A statement like this relativises the agency discourse and reinforces notions of victimisation and manipulation. The opposition of women as 'irrational' and men as 'rational' is reinforced by the mention of the husband, who was against the procedure from the beginning.

As illustrated in the previous analyses, the reader is positioned between oppositions which make it difficult to reach a conclusive resolution in relation to Soong Ling's narrative of identity construction. Nonetheless, the focus on 'irrational' aspects of Soong Ling's 'small' story functions to distance the reader. The omission of facts such as the high cost of the procedure and how a 22-year old patient managed to raise the funds for it reinforce the underlying notion of desperation. Soong Ling's narrative highlights that a constructive resolution process of how to reach the ultimate goal, the operation and with it, a 'better life', is not the focus, but the leg-lengthening procedure itself – which, as the transformative 'catalyst' to change, beauty and happiness – must be attempted, no matter what.

Similar to Soong Ling, Mr. Xian, the only male patient featured in the leg-lengthening story, uses contradictory arguments to describe his position towards his surgery, acknowledging the pain, but also admitting that his has been worthwhile to reach his goal:

The most difficult thing is the time I have to spend sitting in bed. The boredom, for me, is worse than the pain." [...] But then he remembers the upside. Mr. Xian's wife was six centimeters taller than him. "Now", he says, smiling, "I'm two centimeters taller than her (MC.A21, p. 60).

The Australian version does not ignore the risks and downsides of the invasive procedure. Sections describing the procedure and commenting on statistics and success rates state that "the results can sometimes be disastrous" (MC.A21, p. 60). The interviewees admit this, but their narratives also link to broader discourses of agency and investment; however, in contrast to the articles analysed in Chapters 5 and 6, allusions to victimisation and manipulation are more prevalent.

Leg-lengthening and leg-lengthening patients are clearly represented as part of the spectrum of cosmetic surgery that 'goes too far'. Nevertheless, apart from Soong Ling's admission that the surgery was a mistake, Miss Miao's and Mr. Xian's narratives strongly draw upon 'no pain, no gain' rhetoric, which legitimises the decision to undergo leg-lengthening surgery by mythopoesis (Fairclough's

‘legitimation through narrative’, 2003, p. 98). This constructs ‘social actors’ as agents, at least to the extent that they are making a conscious decision to accept the trauma associated with the surgery.

If the Australian article follows a narrative in which the complication of not being attractive and tall enough should be resolved by rejecting extreme measures such as leg-lengthening, the German version emphasises the ‘irrationality’ and the victimisation of the patients even more strongly. Once again, this is done by the use of highly descriptive and value-laden similes and metaphors in order to describe the procedure and the patients: “thin legs [...] [looking] almost unnatural, like stilts”, “I felt crippled”, “bamboo-thin legs”. These similes and metaphors are reinforced by descriptive statements emphasising the physical and mental trauma of the surgery: “not able to sleep for more than two hours in a row because of the pain”, “crying day and night because of fear of horror stories of botched operation”, patients are lying in bed “thin and feeble, like a bent bamboo shoot”, “infections”, “bones that have not healed”. Moreover, by using predominantly Asian similes, cultural othering is also implied, distancing the reader from the Chinese women’s experiences with cosmetic surgery. The othering process is evident in the patronising language of the journalist and the use of similes describing the piteous sight, thus making the reader feel sorry for the Chinese women.

The last page of the article is nearly entirely dedicated to describing the procedure of leg-lengthening. The claim of a “matter-of-fact-description” is contradicted by utilising a gruesome expression:

The bones are sawn through [...] In order to create the constant pull, a type of bench vice is implanted into the bone [...] In addition, the bone is pierced with fine metal wires [...] Depending on how much elongation pain the patient can bear [...] half a millimetre up to a millimetre of growth can be achieved daily. Behind this matter-of-fact-description lies a tale of woe for body and soul (MC.G16, p.60).

Despite constructing narratives highly critical of leg-lengthening, concessive relations between arguments obscure any definitive stance against leg-lengthening

surgery. This is suggested in both the Australian and German version, but most strongly evidenced in the conclusion of the Australian narrative:

Miss Miao [...] remains a believer, despite the intense challenges the operation brings. “It was very painful, but I was too excited to feel any pain”, she recalls. I’m here to get taller and I’m determined to succeed. I cannot even think about failure (MC.A21, p. 60).

In this conclusion, the Australian ending presents a satisfactory resolution for Miss Miao. Although this does not necessarily offer a conclusive resolution for the reader, ending a critical article on this note relativises the disadvantages of the surgery. In contrast, this is not where the German article ends. It invites the reader to engage in the resolution process by posing the question “Does Soong Ling regret having the procedure?”.

The answer provided gives weight to the surgery and contradicts the writer’s narrative by drawing upon the powerful legitimisation of the Cinderella discourse:

As I had to get up for the first time eight days after the operation, I not only cried because of the pain, but also out of joy. Now everything is going to get better for me (MC.A21, p. 60).

Soong Ling, similar to Miss Miao in the Australian version, is represented as having constructed a satisfactory and conclusive resolution for herself; however, the author finishes the article with the following paragraph:

Her great-grand-mother, she says, had to suffer much worse pain to get the lotus feet so desired at her time. Lotus feet – illegal since 1930. Feet artificially kept small by wrapping them and that were only fit for scuttling. “Horrible thought”, says Soong Ling. And she struggles to hobble away in her iron rods (MC.G16, p. 60).

The conscious irony of comparing leg-lengthening surgery with the “horrible” procedure of lotus feet, suggests a conclusive and ‘rational’ solution drawing on the discourse of cosmetic surgery as victimisation and enslavement. Concessive relations

and contradictions are integrated in the narrative, but crossed over in the conclusion presented by the writer to the reader: patients undergoing this type of surgery have “lost the plot” and forgotten “where to draw the line”. The tonal superiority, expressed by the writer in the last paragraph of the article, emphasises cultural othering again: unable to realise what the ‘objective’ western reader can see straightaway, Soong Ling is represented as the naïve victim of her own cultural surroundings. Similar to the integration of discourses in narratives and the use of lexical and semantic resources to support them, both the German and Australian versions highlight the torture and the victimisation aspect of the text.

As stated in 7.2.1, both articles use the same reprint as their title photograph. The Australian article has another full-page photograph reprinted on p. 58, which shows patient Soong Ling standing up against a wall next to a measuring ruler, with a doctor standing next to her checking her height. The caption states: “Soong Ling, who desperately wants to be 10cm taller, has her height measured at a check-up four months after her operation”. The photograph is a full-body shot, which shows her legs from the thighs downwards (the patient is wearing shorts in the photograph), displaying very thin, stick-like legs, with the lower limbs (from the knee downwards) still in their metal frames. Nearly the same picture is used in the German article (p. 58), although, in contrast to the Australian version, the picture only takes up about a quarter of the page.

Most interesting is the angle of Soong Ling’s face in both photographs. In the Australian issue, she is facing the camera directly, pursing her lips in a manner which appears slightly defiant. The image represents a demand picture, in which the gaze of the viewer is drawn to engage with the participant in the image.

The picture published in the German edition shows the same people in the same spot, but this time Soong Ling’s head is slightly tilted (she seems to be looking up towards someone or something on her left-hand side), the mouth is slightly open – a much more vulnerable and pensive look than the photograph used in the Australian issue, which assigns some agency to ‘Soong Ling’ by requesting an imaginary engagement of the reader with her.

In the German article, a set of before-and-after pictures is placed next to Soon Ling's picture, showing a young woman with significantly skinnier legs in the after picture. The caption supporting all three of these pictures comment: "Success control: Soong Ling loves her new bamboo-thin legs. That they may not be able to carry her weight does not scare the young woman. Right: The special clinics advertise "before-and-after photos to attract clients" (MC.G16, p. 58).

What is noticeable is how in the German issue the captions not only state objectively what can be seen on the picture, but also provide an evaluation. The skinny, bamboo-like legs mentioned in the text are visualised in the photograph, reinforcing assessment of this type of surgery as 'wrong'.

On page 59 of the Australian article, about two thirds of the page is taken up by two more photographs. One shows a patient sitting on her bed, with the legs in the metal cages being the main focus. Below, the picture shows an operation, with four surgeons working on a patient's leg. It appears they are in the process of drilling the metal bars into the patient's bone. The caption once again has a rather detached tone: "One patient hopefully measures her new longer legs, while another (below) undergoes the rigorous three-hour surgery." (MC.A21, p. 59). While the text allows some concessions, the intention of the visuals is clearly to support the critical agenda pursued by both versions of the report.

7.4 Summary: Towards a Suffering Cinderella

The articles analysed in this chapter present similarly critical views of aesthetic leg-lengthening procedures in text and visuals. As outlined above, the integration of agency discourse and concessive statements poses a counter-position to the writer's opposition to the surgery.

The narratives follow a similar structure to the issues identified in the analyses in Chapters 5 and 6. The complication lies in the decision and justification to undergo cosmetic surgery, which is further complicated by constructing a convincing

narrative from the available dominant discourses of cosmetic surgery. The complications around cosmetic surgery processes are also highlighted in this story, because patients admit regret for their decision, but at the same time also defiantly pursue their dreams.

Differences between the two versions of the article can be identified in the conclusion sections. Apart from exceptions such as Soong Ling, the patients in the Australian version do not regret the surgery. The Australian version, concluding with Miss Miao's determined attitude to follow her operation and recovery through to a positive result, positions the reader in such a way that she can ultimately draw her own conclusions. Similar to the previous analysis, there is an element of an 'inconclusive' resolution identifiable. The German article, however, clearly concludes by implying that this surgery is not advisable.

Linking this report to the two previous articles used for analysis, I argue that representations of cosmetic surgery often involve a discussion around its normative values. The procedure of leg-lengthening is constructed as a type of surgery which goes beyond the physically and psychologically acceptable, even though the narrative states that it is socially acceptable in a specific cultural context.

The intention of the writers and editors of both versions is to provide the more 'intellectual' *marie claire* reader with an example of cosmetic surgery which is undeniably 'wrong'. By providing an example from another cultural context, the reader is invited to engage in a story representing a 'cultural other'. Furthermore, the reader is positioned in relation to clear norms against this type of surgery; however, since this surgery is outside the reader's own cultural context, the story does not necessarily position the reader to critically evaluate cosmetic surgery practices in her own cultural context.

The cultural 'supremacy' of the West is expressed through ironic details and comments. The German version states that Miao "learnt about the surgical leg-lengthening in the women's magazine 'Hope'" (MC.G16, p. 58). The irony of the title of the women's magazine which 'coaxed' Miao into the surgery highlights the 'irrational victim' positioning of the Chinese women. Moreover, Miao is the

protagonist who is referred to as Miss Miao in most instances throughout the article. It is not possible to clearly establish whether this form of address in the article intends to reflect a certain level of formality and respect that might be expressed in the Chinese language by the use of titles before names. I argue that the onomatopoeic sound ridicules Miao, in particular by evoking almost colonial clichés of demure Asian women.

In my view, these two articles support Gill's (2007) criticism of the *marie claire* reports as "National Geographic journalism". Even when these reports discuss 'global' issues such as cosmetic surgery, the *marie claire* reader is distanced from her cultural context and the relevance of the addressed issue in her own social and cultural environment. The women in other countries, who are supposedly "individual, equal and diverse", are relativised to characters playing a constructed role in a 'drama' with only very vague links to the reality of the *marie claire* reader.

Although in relation to the 'simple, strategic solution' schema, the narratives of the 'social actors' appear strategic, the justification of an invasive procedure such as leg-lengthening is not so simple a matter. Nevertheless, strategic simplification is applied in the narrative of the overall story by drawing upon a limited repertoire of discourses which obscures the complexity involved in any body modification and identity construction process.

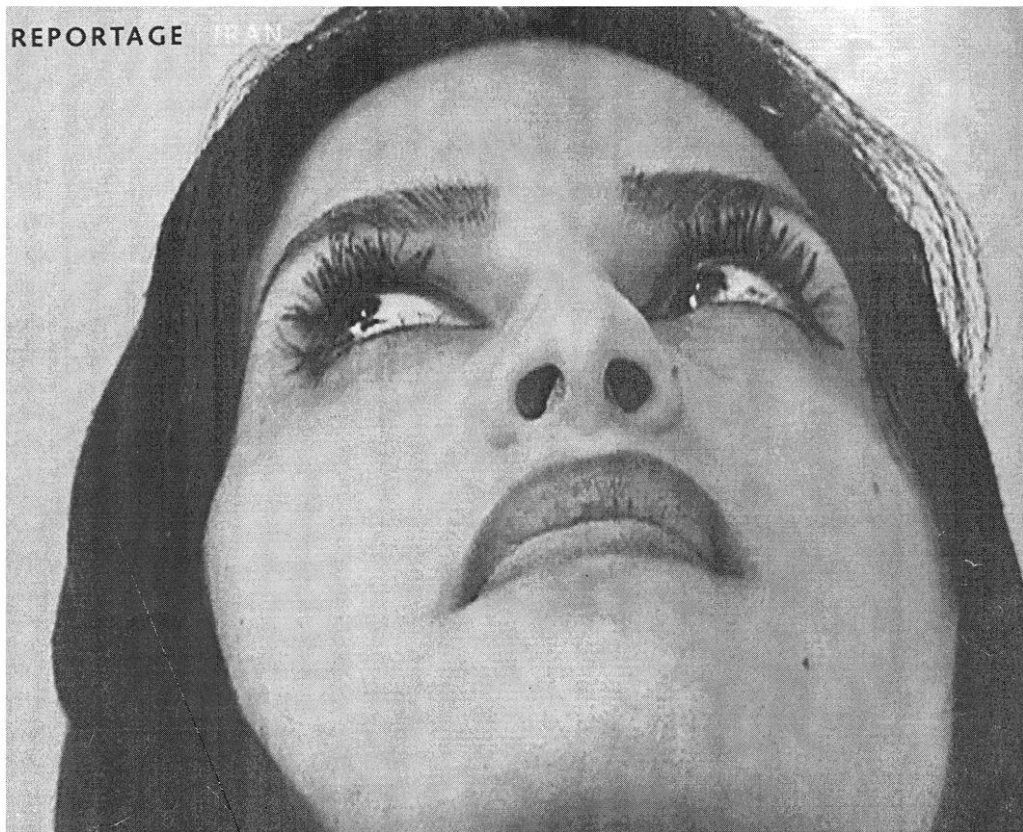
8. Agency and Political Protest: Nose-Jobs in Iran

8.1 Situating the Article

As mentioned in 4.3, the analysis described in this section is based on two texts. The first text is an article published in the German edition of *Marie Claire* magazine in August 2001, with the title *The revolution of the small noses*, written by writer Stefan Brunner (MC.G14) (pp. 58-62). The article is classified as ‘reportage’ and, similar to the leg-lengthening articles analysed in Chapter 7, falls into the ‘reportage’ genre characteristic of the *Marie Claire*’s magazine (Gill, 2007, p. 201). The second text is a letter to the editor by a reader, Gesine Franzen, in response to the article, published a month later in the September edition 2001 (MC.G15) (p. 26).

The report uses supporting images provided by ZDF *Auslandsjournal*, a weekly foreign journalism program by the German public service broadcaster ZDF (Zweites Deutsches Fernsehen), comparable to *Foreign Correspondent* on ABC. It can be assumed that the story was originally broadcast as part of the ZDF *Auslandsjournal* series, and that the story was reproduced in *Marie Claire* Germany.

The report is a major article in the magazine, covering five full pages, with the second page being a full-page photograph. The article and the letter to the editor as well as their English translations by Melanie Friedlander are reprinted below.



DIE REVOLUTION DER KLEINEN NASEN

Nirgendwo haben operierte Nasen mehr politische Brisanz als im Iran. Mit ihrem Kult um westliche Beauty-Ideale provozieren die persischen Frauen das körperfeindliche Regime der Mullahs

Die 29-jährige Anglistik-Studentin Jasmin (oben) ist mit ihrer operierten Nase längst nicht die einzige. Weitere Frauen sind geplant

Sanft fällt der Schleier auf ihren schwarzen Mantel, fñgt sich von rechts und links zum Passepartout um ein orientalisches Antlitz, das die Spuren von Frust und Unterdrückung unter teurem Make-up verbirgt. Unter Schminke, die auf den Straßen Teherans nicht erlaubt ist. Jasmin

nimmt das linke Ende des Schleiers und schlägt es elegant wie einen schicken Schal über die rechte Schulter. Sie rñckt den Stoff zurecht, der Pony soll zu sehen sein, auch die Strähne, die sich frech vor dem Ohr wiegt. Haare zeigen, obwohl es in der Öffentlichkeit nicht erlaubt ist. →

REPORTAGE IRAN

(photo)

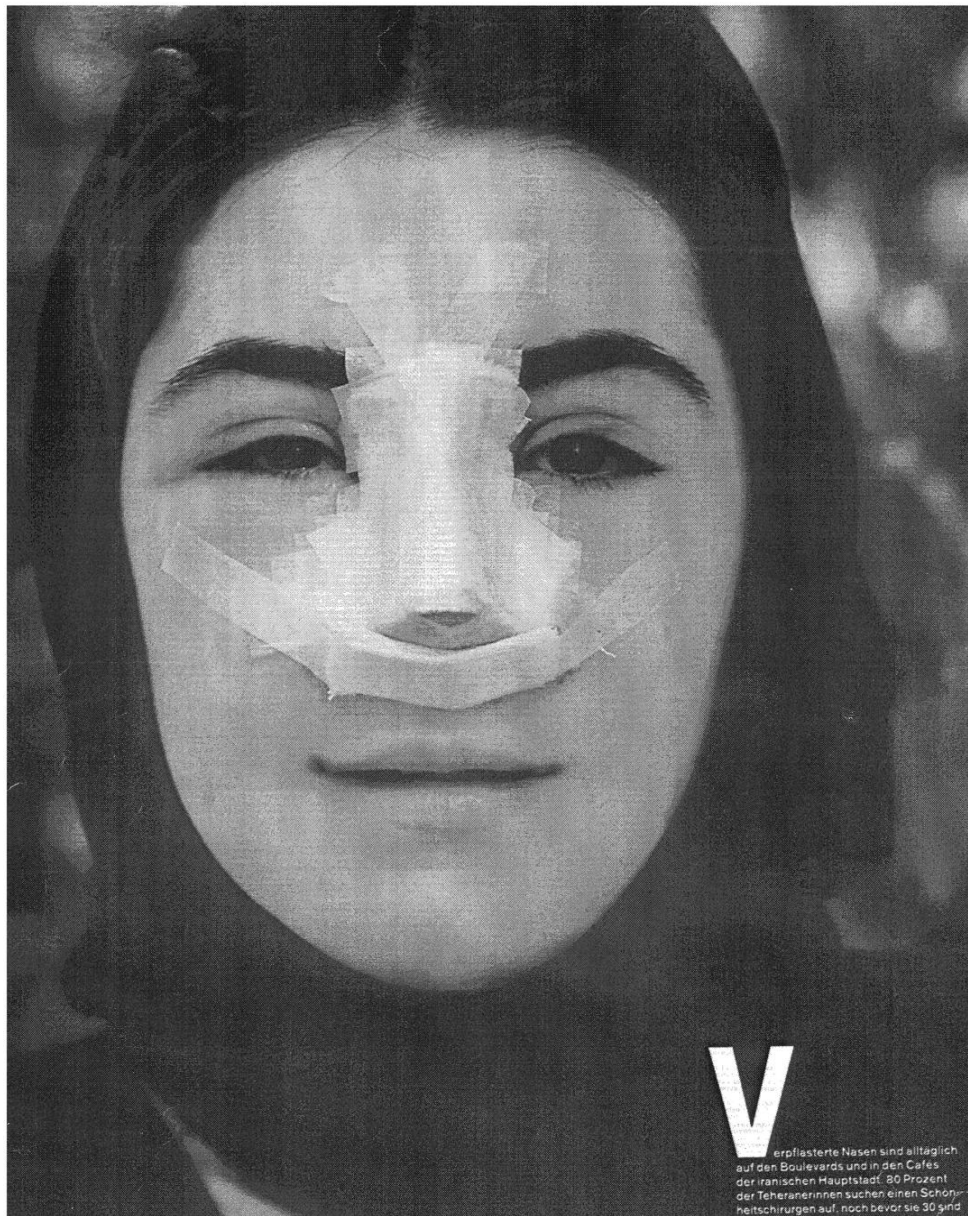
23-year old student of English language and literature
Jasmin (above) is far from happy with her operated-on nose.
Further procedures are planned.

THE REVOLUTION OF THE SMALL NOSES

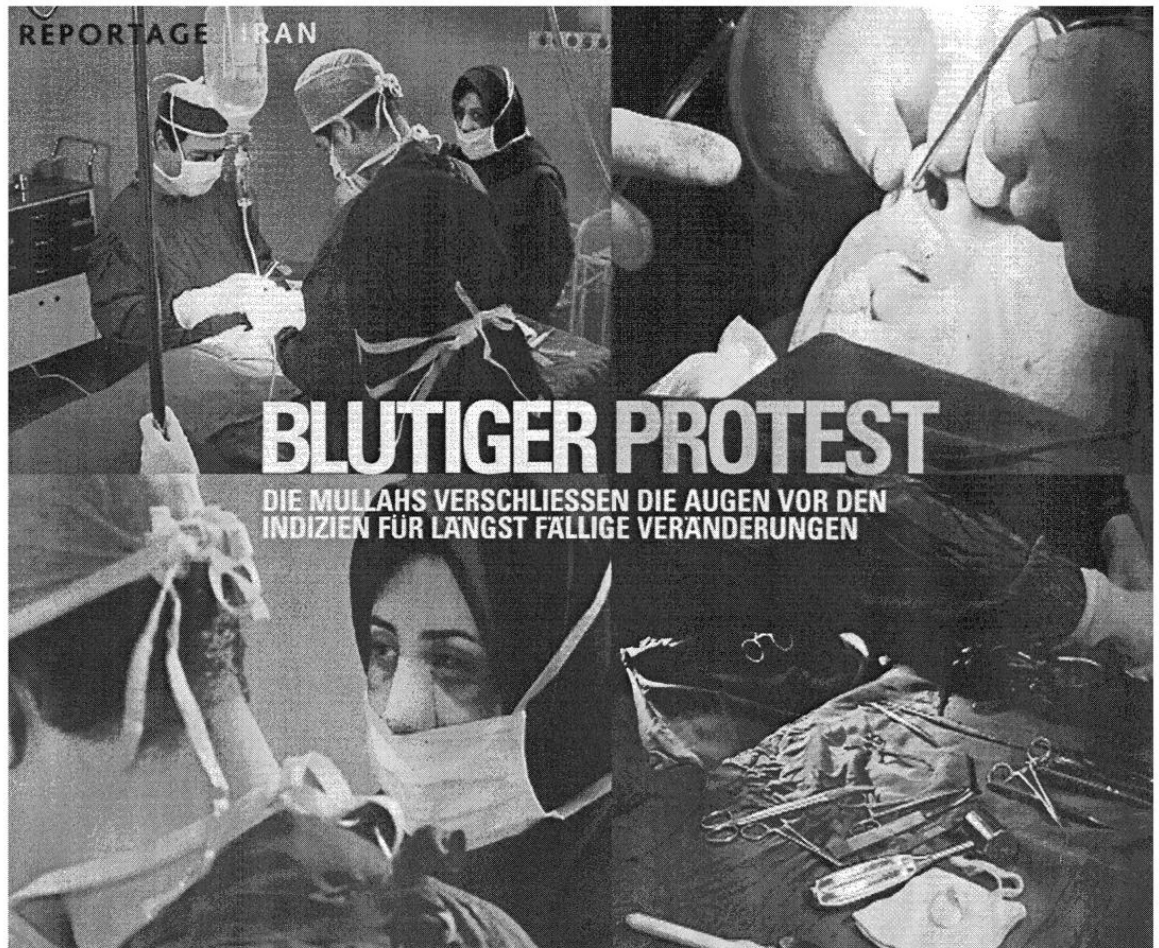
Nowhere else are operated noses more politically explosive than in Iran. With their cult of Western beauty ideals, Persian women are challenging the body-hostile regime of the mullahs. The veil falls gently over her black coat, aligning itself to form a frame to the right and left sides of an oriental face that hides the traces of frustration and suppression under expensive make-up. Under make-up that is not allowed on the streets of Teheran.

Jasmin takes the left corner of the veil and elegantly swings it across over her right shoulder like a fancy scarf. She adjusts the material, the fringe is meant to be visible, as well as the strand of hair that is naughtily swaying in front of her ear. Showing hair, although this is not allowed in public.

Text: Stefan Brunner – Photos: ZDF Auslandsjournal



Bandaged noses are an everyday sight on the boulevards and in the cafés of the Iranian capital. 80 percent of Teheran's women consult a cosmetic surgeon before they turn 30.



BLUTIGER PROTEST

DIE MULLAHS VERSCHLIESSEN DIE AUGEN VOR DEN INDIZIEN FÜR LANGST FÄLLIGE VERÄNDERUNGEN

300 bis 400 Nasenkorrekturen werden allein in Teheran pro Woche durchgeführt. Selbst die OP-Schwester des Chirurgen Begher Fajali lag schon unterm Messer.

Behutsam zieht sie den Schleier aus dem Gesicht – wie einen Vorhang, der eine geheimnisvolle Bühne offenbart, auf der mit subtilen Mitteln gefochten wird: um Selbstverwirklichung und Gleichstellung, um das Recht auf Schönheit und darauf, Frau zu sein – wenigstens auf dem bisschen Haut, das der Öffentlichkeit laut geistlich-iranischer Lesart des Korans zumutbar ist. Jasmin hat sich die Nase verkleinern lassen, andere lassen sich die Kinnpartie neu konturieren, die Lippen aufspritzen oder zumindest die Augenbrauen tätowieren. Eingriffe in Gottes Werk, die eigentlich nicht erlaubt sind. Doch Allah wird von den jungen Iranerinnen nicht gefragt, wenn sie in einem der unzähligen Teheraner Schönheitssalons ihr Aussehen diskutieren: Beauty-Belange gleich irdische Belange. „Wenn man im Westen in die Kirche geht, dann hat das doch auch nichts mit Schönheit zu tun“, ereifert sich Hale, 21, die sich vor anderthalb Jahren die Nase operieren ließ. So resolut wie die Agrar-Studentin vertei-

digen viele ihren Anspruch auf Schönheit. Sie rebellieren gegen den Schleierzwang und damit gleichsam gegen das Mullah-Regime. Bizarre Formen nimmt der Protest an, wenn nach der Operation die verpfasterten Nasen auf Teherans Einkaufsstraßen spazieren geführt werden. Und wenn es zur Konfrontation mit einem der 180000 Mullahs kommt? „Ich würde ihm mit meiner Wunde stolz gegenüberreten“, erklärt die 32-jährige Sila, die sich ihre Nase nach ihrer Heirat vor acht Jahren richten ließ. „Wir leben doch im 21. Jahrhundert. Außerdem sagt der Islam, dass man alles tun müsse, um dem Ehemann zu gefallen.“ Das sehen die Hüter des Korans ganz anders. Wie ein Kontrastprogramm klingt die Auslegung der Mullahs und Ayatollahs: „Im Islam ist es verwerflich, wenn der Mensch manipulierend in Gottes Werk eingreift, sich selbst Schaden zufügt oder verletzt“, erklärt Mohammed Djallili, der an der Theologischen Universität von Teheran Frauen Koran-Unterricht gibt. „Der Mensch erneuert damit viel-

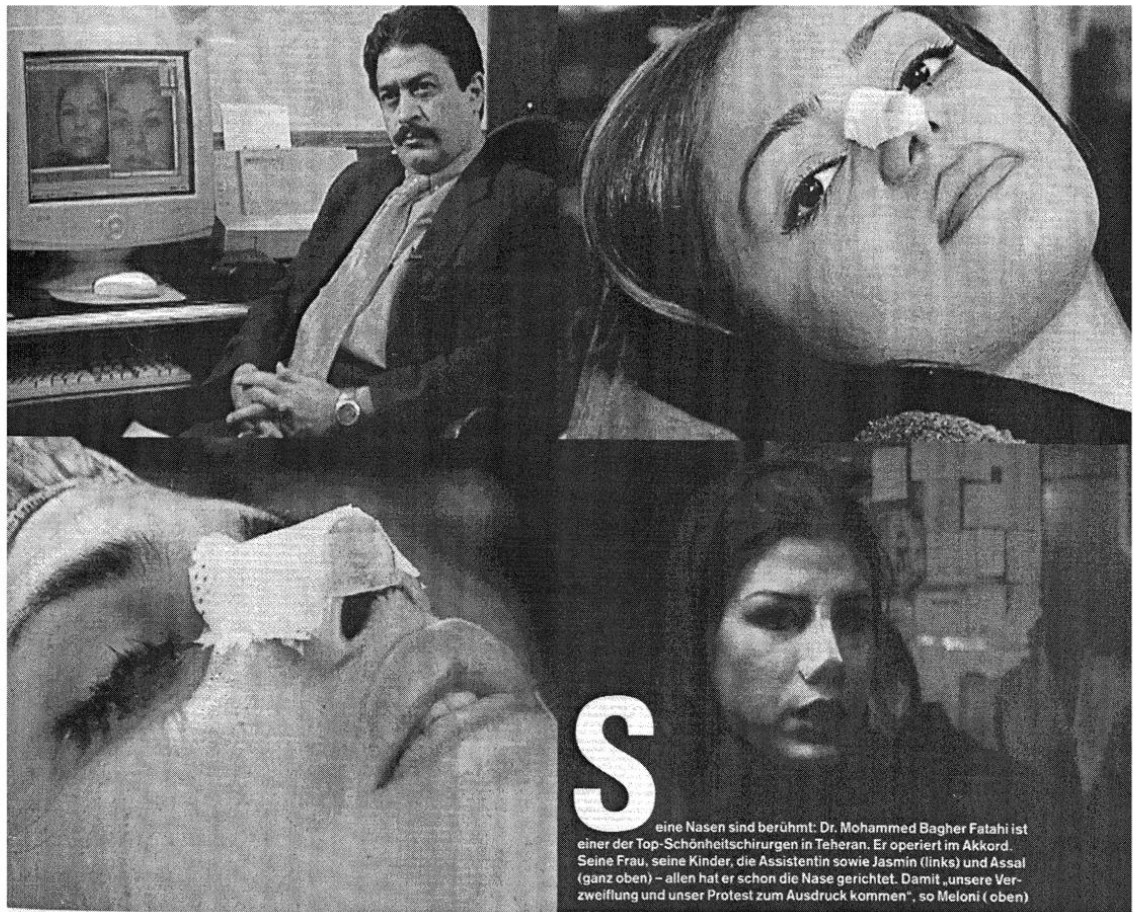
(photos)

BLOODY PROTEST

THE MULLAHS IGNORE THE EVIDENCE OF LONG-OVERDUE CHANGES

300 to 400 nose corrections are performed each week in Teheran alone. Even the scrub nurse of surgeon Bagher Fatahi has already gone under the knife.

Carefully, she pulls the veil from her face – like a curtain that reveals a mysterious stage, on which one fights with subtle means: for self-fulfilment and gender equality, for the right to beauty and to be a woman – at least on the little bit of skin that can be inflicted on the public according to the Iranian clerical reading of the Koran. Jasmin had her nose reduced, others have their chin reconstructed, their lips plumped up or at least their eyebrows tattooed. Intervention into God’s work that is actually not allowed. But Allah is not asked by the young Iranian women when they discuss their appearance in one of Teheran’s countless beauty salons. Beauty issues like earthly issues. “When they go to church in the West, it is not about beauty either”, says an indignant ‘Hale’, 21, who had her nose operated on one and a half years ago. Many defend their right to beauty as adamantly as the Agronomy student. They rebel against the necessity to wear a veil and in such ways to speak against the Mullah regime. The protest takes on bizarre forms when the bandaged noses are promenaded on Teheran’s shopping strip after the operation. And when there is a confrontation with one of the 180.000 Mullahs? “I would proudly confront him with my wound”, explains the 32-year old Sila, who had her nose corrected after her marriage eight years ago. “After all, we are living in the 21st century. And also, Islam says that one has to do everything to please the husband.” The guardians of the Koran totally disagree. The interpretation by the Mullahs and Ayatollahs sounds like quite a contrast. “In Islam it is condemnable when man interferes with and manipulates God’s work, damages or injures himself”, explains Mohammed Djalili who gives Koran lessons to women at the Theological University of Teheran. “A human being in such ways might renew their façade but they are destroying their inner beauty.”



Seine Nasen sind berühmt: Dr. Mohammed Bagher Fatahi ist einer der Top-Schönheitschirurgen in Teheran. Er operiert im Akkord. Seine Frau, seine Kinder, die Assistentin sowie Jasmin (links) und Assal (ganz oben) – allen hat er schon die Nase gerichtet. Damit „unsere Verzweiflung und unser Protest zum Ausdruck kommen“, so Meloni (oben)

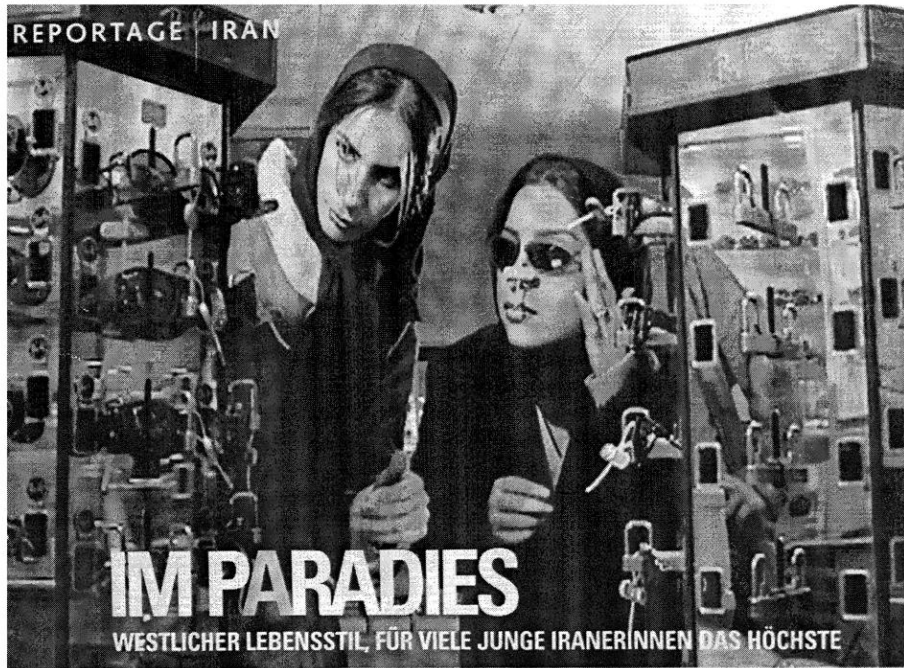
leicht seine Fassade, zerstört aber seine innere Schönheit.“ Schönheit – eben dagegen richtet sich das Regime doch, beklagt Hale und zupft ihren Schleier zurecht. Sie räumt ein, sehr gläubig zu sein. Doch in puncto Aussehen gehen ihr die Restriktionen zu weit. Im letzten Jahr legte sie sich unters Messer des stadtbekanntesten Chirurgen Mohammed Bagher Fatahi, der täglich bis zu zehn Patientinnen operiert. Auch für seine Frau und die beiden Söhne hat er neue Nasen kreiert; nächstes Jahr, dann ist sie 18, wird er die Tochter auf die Operationsliege bitten. In Konflikt mit dem Islam komme er nicht, im Gegenteil: „Der Koran sagt doch, Gott ist schön und mag die Schönen.“ Die Argumente der etablierten Ärzteschaft interessieren die Geistlichen nicht: „Unser Frauenbild ist unverrückbar“, predigt Mullah Djalili seiner in Tschadors gekleideten Klasse. „Wir sehen euch am liebsten so: verhüllt und beim Studium des Korans.“ Dass sich immer mehr und immer jüngere Frauen prostituieren, nimmt er nicht zur

Kennntnis. Auch nicht, dass hinter vielen privaten Türen exzessiv gefeiert wird. Und ebenso wenig den radikalen Anstieg der Schönheitsoperationen. Die Geistlichen verschließen die Augen vor den Indizien für längst fällige Veränderungen, nach denen die neue Generation verlangt. „Tiefe Ausschnitte, Schmuck, Schminke, Partys, alles ist verboten, aber wir tun es trotzdem“, erklärt Assal, 22. „Was im Westen alltäglich ist, bedeutet hier das Paradies.“ Einmal wurde sie schon festgenommen. „Zu viel Lippenstift. Sandalen, man konnte meine Füße sehen! Die Haare schauten unter dem Schleier hervor, meine Nägel waren lackiert, mit Klarlack. Und mein Mantel hatte einen Schlitz, durch den man die Hose sah.“ 30000 Toman Strafe musste sie zahlen, dann war sie wieder frei. Gut 80 Mark sind das, die Miete für eine Zwei-Zimmer-Wohnung. Assal hatte Glück. Denn bevor der im Juni im Amt bestätigte Reformier Mohammed Khatami 1997 zum Präsidenten gewählt wurde, hätte man sie vermutlich eingesperrt,

(photos)

His noses are famous: Dr. Mohammed Bagher Fatahi is one of the top cosmetic surgeons in Teheran. He operates non-stop. His wife, his children, his assistant as well as Jasmin (left) and Assal (far above) – for all those he has already corrected their noses. In order to “express our desperation and our protest”, says Meloni (above).

Beauty – this is exactly what the regime is objecting against, complains Hale and adjusts her veil. She concedes that she is religious. But when it comes to appearance the restrictions are going too far for her. Last year she went under the knife of the well-known surgeon Mohammed Bagher Fatahi, who operates on up to ten female patients daily. For his wife and his two sons he has also created new noses; next year, when she is 18, he will ask his daughter onto the operating table. He does not come into conflict with the Koran, quite the contrary: “Doesn’t the Koran say that God is beautiful and likes the beautiful?” The arguments of the established medical profession do not interest the clerics. “Our female image is unchangeable”, preaches Mullah Djalili to his Chador wearing class. “We like best to see you like this: veiled and studying the Koran.” He does not take notice of the fact that more and more and younger and younger women are prostituting themselves. Nor that behind many private doors excessive partying is going on. Nor the extreme increase in cosmetic surgery. The clerics are closing their eyes to the evidence of long over-due changes that the new generation demands. “Deep décolletés, jewellery, make-up, parties, all this is prohibited but we do it anyways”, says Assal, 22. “What people can have every day in the West would mean the paradise to people here.” She was arrested already once. “Too much lipstick. Sandals, my feet could be seen! My hair was peeping through from under the veil, my nails were polished, with clear nail polish. And my coat had a slit through which my pants could be seen.” She had to pay a fine of 30,000 Toman, then she was free again. That is a bit more than 80 Mark, the rent for a two-bedroom flat. Assal was lucky. For before the reformer Mohammed Khatami, who was confirmed in office in June, was elected president in 1997, she probably would have been locked up, at least flogged, maybe even stoned.



IM PARADIES

WESTLICHER LEBENSSTIL, FÜR VIELE JUNGE IRANERINNEN DAS HÖCHSTE

Eine neue Brille auf die neue Nase Jasmin (rechts) mit einer Freundin beim Shopping. Kleines Zeichen des Protests: der offene Mantel, der etwas Dekolleté sehen lässt, und ein Schleier, der ein paar Haarsträhnen freigibt.

zumindest ausgepeitscht, vielleicht sogar gesteigert. Khatami hat weitgehend abgeschafft, was 1979 nach Ausrufung der Islamischen Republik durch Ayatollah Khomeini eingeführt worden war: islamische Wächter, die zu Tausenden in ihren beigefarbenen Nissan Patrols durch die Stadt fahren. Unter dem sperrigen Namen „Mobile Wache, die sich für Gott opfert“, bewaffnet mit Kalaschnikows, verhafteten sie alle, die ihnen nicht islamistisch genug erschienen. Auch die gemischtgeschlechtlichen „Schwestern von Seinab“, benannt nach der Tochter des Propheten Mohammed, hielten Ausschau nach schlecht sitzenden Schleiern. Würden sie fündig, zogen sie der abtrünnigen Frau den Schleier in die Stirn und stießen ihr zum Halt eine Reißzwecke in den Kopf. Seit Khatamis Präsidentschaft wird der Verstoß gegen die Kleiderordnung in der Regel nur mit hohen Geldstrafen geahndet. Die Operation der Nase bleibt indes straffrei, und die stille Revolution nimmt gefahrlos ihren Lauf. „Unsere Schönheitsoperationen sind ein Zeichen des Widerstands“, erklärt Sila, während sie mit den Fingern den Nasenrücken entlangstreicht. „Ein Protest gegen das Regime“, meint Hale. Ihr Vater zeigt Verständnis. „Was sollen die Mädchen schon tun, sie dürfen nicht tanzen, also lassen sie sich bessere Nasen machen.“ In der Tat begünstigen Frust und Langeweile den Gang zum Nasenspezialisten. „Man muss nur auf die Straße schauen: Drogenabhängige, Arbeitslose, jeder sucht einen Weg, seiner Verzweiflung und seinem Protest Ausdruck zu geben. Wir lassen uns eben die Nase richten“, erzählt Meloni, Studentin, in einem Teheraner Café. Um beim Wettstreit um

Schönheitspunkte mithalten zu können, scheuen viele Frauen auch nicht vor mehreren Operationen zurück. Für optimal halten manche gar die vielfach veränderte Nase von Michael Jackson. In Irans Hauptstadt kursiert das Gerücht über eine 35-Jährige, die sich ihre Nase sechsmal umformen ließ, so lange bis fast nichts mehr da war. Der Arzt habe sich dann mit Teilen des Ohres behelfen müssen. Auch Assal hat schon zwei Operationen hinter sich. Und sie plant bereits eine dritte, denn „ganz zufrieden bin ich noch nicht“. So denken schätzungsweise 80 Prozent der Teheranerinnen unter dreißig. Sie planen einen Eingriff, obwohl die Kosten zwischen 1000 und 6000 Mark liegen – für viele ein komplettes Jahresgehalt. Die Frauen verkaufen ihren Schmuck, die Eltern legen ihre Ersparnisse drauf, und sollte es nicht reichen, gibt der Arzt Rabatt. Großzügige Gesten, die möglich sind, weil sich viele der rund 60 Nasenspezialisten Teherans innerhalb weniger Jahre zu Millionären hochoperiert haben. Gesellschaftlichen Aufstieg ermöglichen sie aber auch ihren Patientinnen. Von einem „privilegierten Gefühl“ spricht Sila, „denn mit einer operierten Nase gehört man automatisch der höheren Schicht an“. Außerdem stärke die optische Aufwertung das Selbstbewusstsein. Selbst die Ärzte sehen die therapeutische Magie ihres Skalpells. „Wir sind die Psychologen der Gesellschaft“, so Fatahi. „Wenn ich das Äußere verändere, dann wirke ich positiv auf das Innere.“ Jasmin kann das nur bestätigen: „Ich fühle mich wirklich freier“, sagt sie und spielt mit der Haarsträhne vor ihrem Ohr. „In Freiheit leben wir Frauen aber deswegen noch lange nicht.“ ■

REPORTAGE IRAN

(photo)

IN PARADISE

New glasses on a new nose. Jasmin (right) with a girl-friend on a shopping trip. Small signs of protest, the open coat that shows some décolletage, and a veil that reveals a few strands of hair.

Khatami has to a large extent abolished what had been introduced after the proclamation of the Islamic Republic by Ayatollah Khomeini in 1979: Islamic watchmen who in their thousands drove through the city in their beige Nissan Patrols. Under the cumbersome name “mobile guards who sacrifice themselves for God”, armed with Kalashnikovs, they arrested everybody who did not seem Islamic enough to them. Also the mixed-gender “Sisters of Seinab”, named after the daughter of the prophet Mohammed, watched out for poorly adjusted veils. When they found what they were looking for, they pulled the veil back over the renegade woman’s forehead and fixed it there by pushing a staple into her head. Since Khatami’s presidency, violations of the dress code usually only incur large fines. The operation of the nose, however, remains exempt from punishment, and the quiet revolution is taking its course risk-free. “Us having cosmetic surgery is a sign of the resistance”, explains Sila, while stroking the bridge of her nose with her fingers. “A protest against the regime”, reckons Hale. Her father understands: “What are the girls meant to do, they are not allowed to dance, so they are having their noses fixed.” In fact, frustration and boredom promote the decision to see a nose specialist. “You only have to look at the streets: drug addicts, unemployed people, everybody is looking for a way to express their desperation and their protest. We are having our noses done”, tells Meloni, student, in a Teheran café. To be able to keep up with the quest for beauty points, many women do not shy away from having several operations either. Many even consider as optimal Michael Jackson’s nose that was altered many times. In Iran’s capital rumours are circulating about a 35-year old who had her nose

modified six times, until there was almost nothing left of it. The doctor had to manage with parts of the ear. Assal, too, has had two operations. And she is already planning a third one, because “I am not yet totally satisfied”. An estimated 80 percent of Teheran’s women under thirty are thinking this way. They plan a procedure, although the costs lie between 1000 and 6000 Mark – for many a whole year’s salary. The women sell their jewellery, the parents give up their savings, and if it is still not enough, the doctor offers a discount. Generous gestures that are possible because many of the approximately 60 nose specialists in Teheran have made themselves millionaires within a few years. However, they are making social advancement possible for their female patients, too. Sila talks about a “privileged feeling”, “because with an operated nose one belongs automatically to the upper class”. In addition, the aesthetic improvement increases self-confidence. Even the doctors are aware of the therapeutic magic of their scalpel. “We are the psychologists of society”, says Fatahi. “When I change someone’s appearance, I have a positive influence on the inner person.” Jasmin fully supports this: “I really feel much freer”, she says and plays with the strand of hair in front of her ear. “But despite this, for us women, to live in freedom is still a long way away.”

marieclaire leserbriefe

Messerscharfer Protest

MC 7/01: Die Revolution der kleinen Nasen
Der Bericht über die Schönheitsoperationen im Iran hat mich in der Juli-Ausgabe am meisten gefesselt. Macht weiter so! Ich freue mich schon aufs nächste Heft.

ANJA KRAUS, PER E-MAIL

Ich finde es ziemlich erschütternd, dass den Iranerinnen nur ein Mittel bleibt, ihre Persönlichkeit zum Ausdruck zu bringen: sich beim Beauty-Chirurgen unters Messer zu legen. Hoffentlich hat die Herrschaft der Mullahs bald ein Ende. Immerhin gibt es in letzter Zeit positive Signale aus dem Land.

GESINE FRANTZEN, MÖNCHENGLADBACH

Eiskalte Tipps

Reiseberichte in MARIE CLAIRE
Ich bin (noch) keine regelmäßige Leserin Ihrer Zeitschrift. Doch wenn ich spontan zu einer Ausgabe greife, bin ich immer wieder begeistert. Zum Beispiel über den Reisebericht aus Grönland im Juni-Heft. Er ist so wunderbar und eindrucksvoll geschrieben, dass ich Lust bekommen habe, dorthin zu

reisen. Auch der verlockende Artikel im Juli über Portugal hat mir sehr gefallen.

DORIT MÜLLER, GIESSEN

Warum nackt?

MC 7/01: Die Sommer-Monster
Mit Erstaunen und großer Verwunderung habe ich die Fotos mit den nackten Kindern betrachtet. Meinen Sie nicht, dass zu Zeiten, in denen wöchentlich Kinder Opfer sexueller Gewalt und tödlicher Grausamkeit werden, solche Darstellungen mehr als unnötig sind? Die Geschichte über Ferien mit Kindern hätte sicherlich auch ohne weiteres mit bekleideten Jungs und Mädchen illustriert werden können.

BIANCA WOLFF, BRAUNSCHWEIG

Vorzeigefrauen

MC 7/01: Melissa Etheridge
Danke, danke, danke für das Interview mit Melissa Etheridge! Über meine absolute Lieblingssängerin ist so wenig zu finden, dass es immer ein ganz besonderes Highlight ist, wenn ich etwas über sie lesen kann. Als sie letztes Jahr in Deutschland war, habe ich leider ihr Konzert verpasst, weil ich meine Abi-Prüfungen hatte. Dann wollte ich Euch sagen, dass ich die Serie „Frauen des 21. Jahrhunderts“ richtig gut finde. Ich studiere Jura und habe fest vor, Karriere zu machen. Berichte über solche Frauen sind wirklich motivierend! Wie wär's mit einem Artikel über eine Juristin?

BARBARA SOMMER, PER E-MAIL



Gewinnspiel

Sagen Sie uns die Meinung! Denn auf Ihre Anmerkungen sind wir gespannt. Und Ihre Kritik hilft uns, MARIE CLAIRE noch besser zu gestalten. Wenn Sie uns in diesem Monat einen Leserbrief schicken, können Sie sogar gewinnen. Gemeinsam mit Niessing verlost MARIE CLAIRE einen eleganten Armreif aus 750er Gelbgold (Wert: 2150 Mark). Der geflochtene Reif ist so flexibel, dass man ihn leicht über die Hand ziehen kann. Und trotzdem sitzt er sicher. Der Gewinner oder die Gewinnerin wird benachrichtigt. Der Rechtsweg ist ausgeschlossen. Leider können bei dem Gewinnspiel Einsendungen aus Österreich oder aus der Schweiz nicht berücksichtigt werden.

Schreiben Sie uns oder schicken Sie uns eine E-Mail
Redaktion
MARIE CLAIRE,
Leserbriefe, Weißen-
stephaner Straße 7,
81673 München,
Fax 089/41 52-636,
E-Mail: Marie.Claire
@muc.guj.de.
Die Redaktion behält sich vor, Leserbriefe zu kürzen.

marie claire

Letters to the editor

I find it quite shattering that Iranian women have only one way left to express their personality: to go under the knife of a cosmetic surgeon. Hopefully, the regime of the mullahs is over soon. At least in recent times there are positive signs coming from the country.

GESINE FRANTZEN, MÖNCHENGLADBACH

8.2 Explosive Beauty: Theme and Structure of the Article

As outlined above, this analysis is based on two texts. The letter to the editor in response to the article is a short paragraph of three sentences, supported by a reduced image of the first two pages of the original article. The report provides a unique representation of cosmetic surgery within the data collection in relation to cosmetic surgery discourses.

As the introduction to the reports mentions, the article deals with rhinoplastic surgery ('nose jobs') in what is generally considered a country with one of the most restrictive and conservative political regimes in the world, Iran.

In comparison to the other articles, this report presents a very different perspective on cosmetic surgery, at least at first glance, since the title of the article – *The revolution of the small noses* – carries highly political connotations. The choice of the title of the article is unusual for a report on cosmetic surgery, since it connects terms related to political discourse – 'revolution' – to cosmetic surgery.

The theme of the article – cosmetic surgery as a means to challenge the body-hostile regime of the mullahs – is clearly stated in the opening paragraph following the heading:

Nowhere else are operated noses more politically explosive than in Iran. With their cult of Western beauty ideals, Persian women are challenging the body-hostile regime of the mullahs (MC.G14, p. 58).

An unusual aspect of the report is the focus not being primarily on cosmetic operations as such, but rather on their function as a means of political protest in a ‘body-hostile regime’. Cosmetic surgery, which was clearly represented as a ‘body-hostile’ procedure in both the Australian and German report on leg-lengthening procedures in China, is represented in this context as an opportunity for Iranian women to display protest and agency against repression.

Considering *Marie Claire*’s agenda to represent all women as “individual, equal and diverse” (Gill, 2007), the article strongly invites the Western reader to engage with the lives of their oppressed ‘sisters’ in Iran.

Nevertheless, a feature which is apparent throughout the article is a tendency to ‘minimalise’ cosmetic surgery, a media strategy Pitts-Taylor (2007) identified as typical for cosmetic surgery television shows such as *Extreme Makeover*. For Pitts-Taylor (2007), ‘minimalisation’ implies that any negative aspects of cosmetic surgery are intentionally excluded, in particular physical trauma (see 7.3).

Although Pitts-Taylor’s (2007) observation refers to the editing process of the footage in relation to makeover shows, I argue that visual representations in a television format and print representations can have minimalising effects through making choices in the selection of terminology and construction of discourse.

In the opening paragraph reprinted above, the sentence “With their cult of Western beauty ideals, Persian women are challenging the body-hostile regime of the mullahs” (p. 58) contrasts with the preceding sentence “Nowhere else are operated noses more politically explosive than in Iran” (MC.G14, p. 58), which highlights the impact of cosmetic surgery as a means of political protest against an oppressive regime. Moreover, the term ‘Persian’ instead of ‘Iranian’ reflects a conscious and more exotic choice, dissociating these recipients from contemporary political regimes. Furthermore, in a closer reading of the phrase “with their cult of Western

beauty ideals”, the word “cult” stands out because of its religious connotation. Through the collocation of “cult”, which can be read as extreme dedication to a cause, in this case, “Western beauty ideals”, cosmetic surgery is also ironically connoted as a ‘Western liberation force’.

Cultural othering is reinforced through the phrase “politically explosive”, which carries connotations of bombs and political conflict in Islamic countries as well as between Islamic and Western countries, further reinforcing ‘us versus them’. Drawing upon preconceived Western views about Islam, once again, and similar to previous analysis, intimations of Western ‘rationality’ and ‘superiority’ over repressive regimes invite the reader to engage with the narratives from an ‘objective’ distance.

8.2.1 Layout of the Report.

As pointed out in 8.1, the article covers five magazine pages with the second page being a full-page photograph. The first, third and fourth page of the article are also dominated by images, since they cover more than the top half of the page; the fifth page is nearly equally divided between image and text. On all pages, it is always the top part of the page which is dedicated to the image and the bottom half that is filled by the text.

Kress and Van Leeuwen (2006) state that multimodal texts such as magazine articles are carefully composed, distributing images and written texts purposefully across the page or pages. An important structural element in print texts is how ‘new’ and ‘given’ are located on a page or across a double-page: On a horizontal orientation, “the right [side] seems to be the side of the key information, of what the reader must pay particular attention to [...] the left is the side of the ‘already given’, something the reader is assumed to know already, as part of the culture, or at least as part of the culture of the magazine” (p. 180).

Similarly, the vertical orientation of visual and textual material also communicates a certain information value. Kress and Van Leeuwen (2006) argue that:

the information value of top and bottom, then, can perhaps be summarised along the following lines. If, in a visual composition, some of the constituent elements are placed in the upper part, and other different elements in the lower part of the picture space or the page, then what has been placed on the top is represented as the Ideal, and what has been placed at the bottom is put forward as the Real [...] The opposition between Ideal and Real can also structure text-image relations. If the upper part of a page is occupied by the text and the lower part by one or more pictures (or maps or charts or diagrams), the text plays ideologically, the lead role, and the pictures a subservient role [...] If the roles are reversed, so that one or more pictures occupy the top section, then the Ideal, the ideologically foregrounded part of the message, is communicated visually, the text serves to elaborate on it

(pp. 186-187).

Clearly, the latter orientation with the image on top and the text at the bottom of the page is the structure applied in this article, attributing stronger ideological power to the images. This article was the only one in the corpus of data displaying such a clear division between text and image on every page (excluding p. 59 of the article, which is a full-page photograph). This structure creates a powerful visual effect, and an unusual approach to telling a story in a magazine article, which distinctly segregates text and image through physical frames (Machin, 2008).

Nearly all images show either Iranian women's faces with their post-operative noses still covered in gauze or their 'new', unblemished noses after the operation, or scenes related to surgery (surgeon and nurses in and out of the operating theatre, or an operation itself). The only exception is the image complementing the text on the last page, which shows two Iranian women shopping for sunglasses. The photograph does not represent a scene which is related to cosmetic surgery, and its meaning has to be deduced from the context. Using advertising jargon, the images are 'bent', that is, the 'meaning' of the images and the complete 'story' can only be understood with the information provided in the supporting text. A text like this article fully supports Kress and Van Leeuwen's (2006) argument that discourses are not only text-based,

but are in fact multi-modal, and that the discourses represented in a ‘text’ can only be completely formed when reading written text and image in conjunction.

The first two pages of the report powerfully ‘set the scene’ in combining the visual impact of two close-up photographs and two text paragraphs using highly visual language. The first page is a ‘unit’ of its own, as the two text paragraphs conclude with a full-stop and do not continue over the page. An arrow indicates that the story continues overleaf; however, when turning the page, the reader looks at the full-page image of an Iranian woman’s face with a bandaged nose. By turning the page, a powerful before-and-after effect or rather, after-and-before effect, (since the caption commenting on the photograph on the first page states that the visual shows a participant’s reshaped nose) is created, with the reader looking at a presumably post-operated face on the first page and operated nose on the second page.

After immersing the reader into the scene, the article consecutively introduces various ‘social actors’, and presents their view on cosmetic surgery and the political situation in Iran through frequent direct quotations. The personal narratives of the ‘social actors’ are linked and supported by passages in which the writer comments on his view or provides statistics as well as historical and cultural background information. As illustrated in the analyses in Chapter 5 and 7, the quotations of the ‘social actors’ are an important part of the overall narrative of the article in which discourses of cosmetic surgery are drawn upon in order to construct a ‘small cosmetic surgery story’.

8.2.2 Setting the Scene.

The report begins with the setting of the scene, and constructs the image of an Iranian cosmetic surgery ‘protester’ through a process of cultural othering:

The veil falls gently over her black coat, aligning itself to form a frame to the right and left sides of an oriental face that hides the traces of frustration and suppression

under expensive make-up. Under make-up that is not allowed on the streets of Teheran (MC.G14, p. 58).

As established in Chapter 7, physical identification is used to represent the first 'social actor', who is represented as personalised and named in the following paragraph. 'Jasmin' is also visually represented in the photograph as a possibly Western model on the first page. The captions supporting the image classify her further through functionalisation as a "23-year old student of English language and literature" (MC.G14, p. 58), linking her to the Western, cultural other.

As argued by Van Leeuwen (2008), the 'overdetermination' of physical identification is apparent in this description. Jasmin's representation resembles the character from a Middle Eastern fairytale, since she is described with ideologically connoted attributes such as a veil, which suggests a sense of Islamic dress restraint or 'Oriental' grace. As Said (2003) argues in *Orientalism*, the 'Orient' is a most powerful Western construction of a cultural 'other'. This report sets up a contradictory agenda in which the reader is invited to engage with the 'social actors' on a political level, but at the same time works to distance her by reinforcing the foreign cultural context, drawing on cultural difference. Jasmin's representation as an 'Oriental princess' minimises cosmetic surgery by integrating the Cinderella discourse, which diverges from the article's agenda, to represent cosmetic surgery principally as political agency.

The writer also presents numerous assumptions. The author states that wearing makeup serves a political purpose and that makeup is in fact forbidden. This passive sentence construction confers the authority behind this practice on 'the regime', reinforcing resistance to political oppression via a Western 'beauty regime'.

The visual representation of Jasmin is a close-up of her face; the reader is looking at her from below. A few strands of hair can be seen from under the veil; the eyes are heavily covered in mascara, lipstick and lipliner can be seen on the lips. The makeup and the false eyelashes of the model represent Jasmin as a westernised magazine

‘cover girl’, emphasising a cultural hybrid identity much like the Japanese models for eyelid and sweat gland surgery.

If a represented participant is seen from a high angle, then the relation between the interactive participant (the producer of the image, and hence also the viewer) and the represented participants is depicted as one in which the interactive participant has the power over the represented participant. The represented participant is seen from the point of view of power (Kress & Van Leeuwen, 2006). This relationship is reinforced further by the fact that the gaze is averted and not directed at the viewer, thereby not establishing a direct connection. The viewer is positioned as an observer, who is not part of the communicative process that is established between represented and interactive participants when her gaze ‘locks eyes’ with the viewer. The Iranian woman is represented as an “object of contemplation, not as a subject [...] to enter into an imaginary social relation with” (p. 120).

Furthermore, the centre of the image is the topic of the article, the nose, or rather, the surgically altered nose. In Kress and Van Leeuwen’s (2006) analysis of the information value of centre and margins in an image, they state that:

if a visual composition makes significant use of the Centre, placing one element in the middle and other elements around it, we will refer to the central element as Centre and to the elements around it as Margins. For something to be presented as Centre means that it is presented as the nucleus of information to which all the other elements are in some sense subservient (p. 196).

Although Kress and Van Leeuwen (2006) through this observation refer to the arrangement of separate pictorial elements around a ‘centred’ image, I argue that this applies also to how elements are made salient within one single picture, in this example, making the nose the central element to which the viewer’s gaze would be drawn. The ‘centrality’ of the nose as the epitome of political protest is highlighted in the captions supporting the visual, which state that Jasmin is “far from happy with her operated-on nose” and that “further procedures are planned” (MC.G14, p. 58).

The significance of the operated nose for political protest is highlighted by both visual representation and textual reference. This statement also draws upon the discourse of vanity and raises issues of normative boundaries of cosmetic surgery, diverting the reader from the narrative of cosmetic surgery as a means of political protest. Furthermore, the declarative mode of the sentence obscures the fact that the statement reflects an assumption of the writer, through which reasons as to why Jasmin is not content with her ‘new’ nose are not given. Once again, passive agent deletion in the last sentence draws upon the style of medical reports and excludes Jasmin as the cosmetic surgery patient from active participation in the decision-making process.

The second paragraph of the text continues to construct Jasmin as a cultural ‘other’ but, it also emphasises her ‘acts of defiance’ by stating them one after the other. They culminate in the invasive undergoing of cosmetic surgery, described on the third page of the article:

Jasmin takes the left corner of the veil and elegantly swings it across over her right shoulder like a fancy scarf. She adjusts the material, the fringe is meant to be visible, as well as the strand of hair that is cheekily swaying in front of her ear. Showing hair, although this is not allowed in public (MC.G14, p. 58)¹⁸.

Carefully, she pulls the veil from her face – like a curtain that reveals a mysterious stage, on which one fights with subtle means: for self-fulfilment and gender equality, for the right to beauty and to be a woman – at least on the little bit of skin that can be inflicted on the public according to the Iranian clerical reading of the Koran. Jasmin had her nose reduced, others have their chin reconstructed, their lips plumped up or

¹⁸ The phrase “showing hair” has a confusing effect for a native speaker of English in the English translation, since it suggests that ‘someone’ or ‘something’ that is “showing hair” is omitted in the sentence. In the German original, the expression “Haare zeigen” (to show hair) is grammatically an infinitive. The specific German sentence structure requires the translation of the German infinitive as a gerund in order to stay as close to the original as possible. What the German sentence implies is the aspect that “The showing of hair [is done] although this is not allowed in public”. Similar to the phrase “Haare zeigen”, “intervention into God’s work that is actually not allowed” also lacks a subject. The subject the reader is required to supply herself is ‘this’, referring to Jasmin’s surgical procedures mentioned in the preceding sentence. The complete sentence is meant to read “This is intervention into God’s work that is not allowed.” As these examples show, the use of grammatically incomplete sentences is a common practice in German journalism to highlight key aspects of a report.

at least their eyebrows tattooed. Intervention into God's work that is actually not allowed (MC.G14, p. 60).

All these acts of revolt have a cumulative impact, especially through the repeated use of the verb "allowed": "Make-up is not allowed on the streets of Teheran", "showing hair is not allowed in public", and "intervention into God's work is actually not allowed". I argue that two value assumptions are at play here simultaneously; on one hand there is the value assumption that these actions are considered as wrong under the political regime in Iran. On the other hand, the author implies that these steps are 'right' and 'courageous'.

The three statements are grammatically constructed in a nearly identical manner, as declarative passively constructed sentences. The rigidity of the political regime is emphasised by putting the key phrase "is not allowed" towards the end of the sentence, leaving the reader with this as the last statement. Through passive agent deletion, all three statements are assumptions, although the last one is preceded by a sentence which provides some legitimation by commenting on the identity of the 'authoritative power' behind the rules and regulations. On an abstract level, it is the clerical reading of the Koran which, ultimately and in concrete terms, is performed by mullahs or men in positions of power. Thus, the report also reinforces gender divides between men as powerful and the women as the oppressed. Nevertheless, women such as Jasmin also exert agency, albeit through a complex procedure such as cosmetic surgery.

The introduction to the report therefore presents a contradictory narrative integrating discourses of vanity and agency, paired with a continuing construction of Jasmin as the cultural other. The shift from a discourse of cosmetic surgery as a political means to an act of agency, which is not only motivated by political but also by feminist reasons such as achievement of self-fulfilment and gender equality, diverts the article from its set agenda. Mentioning "self-fulfilment and gender equality, for the right to beauty and to be a woman" highlights cosmetic surgery as a means of attaining an ideal of universalised femininity. Whilst 'self-fulfilment' has been identified as one of the main reasons to undergo cosmetic surgery in the agency discourse, the 'right to

beauty’ is strongly associated with the vanity discourse of cosmetic surgery. In this instance, by juxtaposing the ‘right to beauty’ to the ‘right to be a woman’, conventionally negatively connoted arguments are inverted as positive acts of independence and self-determination, reminiscent of second-wave feminism (see 2.5.2 and 2.5.3).

The analysis of the introduction to the report highlights that a closer reading can detect that the narrative of the article is based on inconsistencies and fissures in discourses and argument. There is also a constant process of inviting and distancing of the reader at play. Whilst discourses of political protest and agency exerted on various levels invite the reader to engage and empathise with the women represented in the report, the apparent cultural othering distances the reader and positions her once again as the ‘rational’ observer.

As the following section outlines, on a surface level the agenda of presenting a narrative of cosmetic surgery as political protest is followed through particularly in the representations, discourses and narratives of numerous other ‘social actors’ through whom the writer is constructing the story. However, the analysis also indicates the inconsistencies in the representations of cosmetic surgery and the ‘social actors’.

8.3 Fighting for a Universalised Femininity: Discourse, Narrative and ‘Social Actors’ in Language and Visuals

The ‘social actors’ in the report include men and women, with the female ‘social actors’ all being Iranian women who have undergone cosmetic surgery. In addition to Jasmin, who, as the main ‘social actor’ opens and concludes the report, other women mentioned in the article are ‘Hale’, 21, an agronomy student and ‘Sila’, 32. Other women visually represented (p. 61) and represented by name are ‘Assal’ and ‘Meloni’; another female ‘actor’ not named but represented textually through functionalisation is a “scrub nurse of surgeon Bagher Fatahi”. The representation of the female ‘social actors’ in their functionalisation of cosmetic surgery patients has a

cumulative impact, emphasising that the Iranian women's decision to resort to cosmetic surgery is not the quest of an individual, but of many.

The male 'social actors' features in the article are 'Mullah Mohammed Djalili', 'surgeon Mohammed Bagher Fatahi', Hale's father, the former 'Iranian president Mohammed Khatami', and 'Ayatollah Khomeini'. These 'social actors' are represented as personalised and named actors, who are also assigned more individual authenticity through functionalisation.

Two groups represented more generically are religious 'police' under the name "mobile guards who sacrifice themselves for God", and a mixed-gender 'fashion police' who ensures that women follow the prescribed dress code, the "Sisters of Seinab" (MC.G14, p. 62). A spiritual 'social actor' referred to in the narratives of some of the female and male 'social actors' of the report is Allah. The majority of the 'social actors' mentioned in the two paragraphs above have an Islamic affiliation and thus contribute to processes of cultural othering.

The narrative is constructed around conflicting interests and complications arising from discourses represented by two opposing parties. On one hand, there are the three young women who undergo cosmetic surgery as an act of political protest and liberalisation, on the other, the patriarchal regime of the Ayatollah and the mullahs. 'Social actors' functioning as 'mediators' between those two positions are the surgeon and Hale's father, although they side more with the women's quest.

The narrative of mullah Djalili, who represents the entity of religious leaders in Iran, is clearly stated:

In Islam it is condemnable when man interferes with and manipulates God's work, damages or injures himself", explains Mohammed Djalili who gives Koran lessons to women at the Theological University of Teheran. "A human being in such ways might renew their façade but they are destroying their inner beauty (MC.G14, p. 60).

The arguments which the women in the report draw upon are of a different nature. As mentioned before, a unique discourse in relation to cosmetic surgery drawn upon by narratives in this report is the notion of cosmetic surgery as political protest. This can be read as part of the agency discourse, which has been transferred from a realm of personal fulfilment to a political level:

The protest takes on bizarre forms when the bandaged noses are being walked on Teheran's shopping strip after the operation. And when there is a confrontation with one of the 180,000 Mullahs? "I would proudly confront him with my wound", explains the 32-year old Sila, who had her nose fixed after her marriage eight years ago. "After all, we are living in the 21st century. And also, Islam says that one has to do everything to please the husband (MC.G14, p. 60).

As the last sentence of this statement indicates, the notion of physical attractiveness to the opposite gender is also used to support the women's reasons to undergo cosmetic surgery. Thus, two opposing approaches are also used to legitimise cosmetic surgery. Legitimation through rationalisation ("legitimation by reference [...] to the knowledge society has constructed") (Fairclough, 2003, p. 98) is evident in the statement "we are living in the 21st century", which is used metaphorically to refer to secular and rational values. Paradoxically, by referring to religion as the authority, the desire to look attractive is legitimised by authorisation through patriarchal values. However, these values were clearly denied in the preceding paragraph:

[This is] intervention into God's work, which is actually not allowed. But Allah is not asked by the young Iranian women when they discuss their appearance in one of Teheran's countless beauty salons (MC.G14, p. 60).

The complexity of cosmetic surgery narratives is expressively highlighted in those two paragraphs and especially in the juxtaposition of those two consecutive sentences "After all, we are living in the 21st century. And also, Islam says that one has to do everything to please the husband" (p. 60). Subversive discourses of legitimation by authorisation and personal rationalisation both support a process of 'turning sexism back to the mullahs' in this argument.

An interesting aspect of this report is the representation of two men as ‘allies’ to the women’s cause. Surgeon Fatahi, first introduced visually on p. 60, is represented again on p. 61. The images on page 60 of the article emphasise the radical quest of the women against the oppressive mullahs. The pictures are four squares centred on the caption in the middle, which reads: “Bloody protest. The mullahs ignore the evidence for long overdue changes.” The photographs showing the surgeon at work and the captions “300 to 400 nose corrections¹⁹ are performed each week in Teheran alone. Even the scrub nurse of surgeon Bagher Fatahi has already gone under the knife” position the medical expert as an integral part of political protest and liberation through cosmetic surgery; however, gender equality is not achieved despite the surgeon’s support for the women. The surgeon’s position as ‘Pygmalion’, who possesses the power to ‘mould’ his patients to a perceived ideal, emphasises the position of the women who are ultimately not independent and agentive beings.

Commenting on another aspect, the arrangement of four photographs around a (textual) centre matches Kress and Van Leeuwen’s (2006) concept of dimensions of visual space. They argue that Given-New and Real-Ideal can combine with Centre and Margin, and this would mean that apart from the Centre, the four pictures are Margins, the top left representing the Ideal-Given (two surgeons and nurse with a patient in operating theatre), the top right the Ideal-New (close-up of a patient’s nose being surgically altered), the bottom left the Real-Given (close-up of the theatre nurse, who also has a bandaged nose) and the bottom right the Real-New (operating instruments on a table) (p. 197).

In particular, the juxtaposition of Ideal-New and Real-New on the right margin is significant. While the ideal and new is a corrected nose, the new and realistic realisation is that cosmetic surgery is an operation that involves cutting, grafting, sewing and bleeding. Similar to the leg-lengthening article, cosmetic surgery is represented as ‘torture’; however, the accompanying text below positions cosmetic surgery as political and personal agency.

¹⁹ The German article literally refers to ‘nose jobs’ as ‘nose *corrections*’ (“Nasenkorrekturen”), which is a common term to refer to cosmetic surgery procedures. As pointed out by Pitts-Taylor (2007), the euphemistic notion of ‘correction’ ‘minimalises’ cosmetic surgery (see 4.6.3 and 4.7.3).

The contradictory nature of Dr Fatahi's position as supporter but also as 'Pygmalion' is reinforced by the visuals and captions on p. 61. Four separate photographs fill the top part of the page, the first one (top left) showing Dr Fatahi at his desk, the other three showing nose surgery recipients and patients of Dr. Fatahi: Jasmin, Assal and Meloni. The captions state that:

his noses are famous: Dr. Mohammed Bagher Fatahi is one of the top cosmetic surgeons in Teheran. He operates non-stop. His wife, his children, his assistant as well as Jasmin (left) and Assal (far above) – for all those he has already corrected their noses. In order to “express our desperation and our protest”, says Meloni (above) (MC.G14, p. 61).

Another facet of the surgeon as 'Pygmalion' is apparent in the representation of Fatahi as a 'healer', who 'fixes' the damage the repressive political system has produced:

Even the doctors are aware of the therapeutic magic of their scalpel. “We are the psychologists of society”, says Fatahi. “When I change someone's appearance, I have a positive influence on the inner person (MC.G14, p. 62).

The complexity of the representation of surgeon Fatahi, who integrates patriarchal wellbeing aspects in his role as the male surgeon as well as liberating ones, is obscured by the contradictory representation of cosmetic surgery as personal and political agency, as well as transformation. Fatahi's 'male' powers as Pygmalion are well hidden under his role as the helpful intermediary, who acts in the patient's and not his own interest.

In relation to the justification of cosmetic surgery from the patients' point of view, Sila and Hale are quoted in the following way:

Us having cosmetic surgery is a sign of the resistance, explains Sila, while stroking the bridge of her nose with her fingers. “A protest against the regime”, reckons Hale. (MC.G14, p. 62).

This discourse is reinforced further by another male ‘social actor’, Hale’s father, who supports his daughter’s view:

What are the girls meant to do, they are not allowed to dance, so they are having their noses fixed. (MC.G14, p. 62).

Once again, a male ‘social actor’ is represented as an ‘ally’ to the women; however, a closer reading raises a question about the value assumptions expressed in this statement. Cosmetic surgery is assessed as a justified practice in a social context of oppression but by linking the argument that young women in Iran are denied opportunities to enjoy themselves to cosmetic surgery, an invasive practice is repositioned as recreation. The rhetoric of the ‘just-do-it’ discourse (see 2.5.2) as represented by Hale’s father is in strong contrast to the agenda of the report to represent cosmetic surgery as the last resort in a repressive cultural context, also expressed in the statements of Sila and Hale above.

A closer reading of this sentence reveals that even a position like the one of ‘Hale’s’ father, constructed in support of the women’s situation, trivialises the significance which the women assign to their actions. Similar to the representation of surgeon Fatahi, representations based on gender division characterising men as the ‘rational’, ‘acting’ ‘homo faber’ and women as the ‘emotional’, ‘reacting’ and involved in superficial activities such as beautification are at play.

The notion of cosmetic surgery as on a par with less invasive beautification practices is expressed in the following statement by Assal:

Deep décolletages, jewellery, make-up, parties, all this is prohibited but we do it anyway”, says Assal, 22. “What people can have every day in the West would mean paradise to people here.” She was arrested already once. “Too much lipstick. Sandals, my feet could be seen! My hair was peeping through from under the veil, my nails were polished, with clear nail polish. And my coat had a slit through which my pants could be seen.” She had to pay a fine of 30.000 Toman, then she was free again (MC.G14, p. 61).

This statement is preceded by the author's assertion that conservative religious leaders such as mullah Djalili are anachronisms in the 21st century, failing to acknowledge how the new generation of Iranian women live their lives. The mullahs prohibit excessive parties, prostitution and cosmetic surgery.

With Assal's argument following the writer's comment on significant changes in a conservative society, the collocation of cosmetic surgery with make-up, parties and prostitution connotes a frivolous lifestyle. In particular, through collocation to prostitution, cosmetic surgery which previously was regarded as an 'emancipatory' practice is assigned a contradictory value assessment as morally 'wrong'. The juxtaposing of cosmetic surgery and entertainment, intended to support the women's narrative by presenting their oppression as the driving complication for cosmetic surgery, in fact undermines the credibility and authenticity of this agenda.

Nevertheless, the representation of the West as the cultural 'other' from Assal's point of view, and the mention of the heavy fine she had to pay for non-compliance to the strict dress code in Iran, obscure these inconsistencies in narrative and argument. The use of the highly culturally and religiously connoted 'paradise' to describe the West positions the reader to evaluate the repression in Iran as 'hell', and invites the Western reader to empathise with the Iranian women.

Immediately following Assal's 'small story' of political protest and punishment, the arbitrary, restrictive and violent acts of the mullahs are emphasised by describing the policing actions of the Iranian regime in the past:

Khatami has to a large extent abolished what had been introduced after the proclamation of the Islamic Republic by Ayatollah Khomeini in 1979: Islamic watchmen who in their thousands drove through the city in their beige Nissan Patrols. Under the cumbersome name "mobile guards who sacrifice themselves for God", armed with Kalashnikovs, they arrested everybody who did not seem Islamic enough to them. Also the mixed-gender "Sisters of Seinab", named after the daughter of the prophet Mohammed, watched out for poorly adjusted veils. When they found what they were looking for, they pulled the veil back over the renegade woman's forehead and fixed it there by pushing a staple into her head. Since

Khatami's presidency, violations of the dress code usually only incur large fines. The operation of the nose, however, remains exempt from punishment, and the quiet revolution is taking its course risk-free (MC.G14, p. 62).

The genre shifts to 'serious' political reportage, uncharacteristic in popular women's magazines. Nonetheless, stating that "violations of the dress code only incur large fines" and that "the operation of the nose remains exempt from punishment" suggests a sense of improvement of the Iranian women's situation which is arguable. The representation of cosmetic surgery as the last resort to individual and political agency frames cosmetic surgery as a 'simple and strategic solution', in which a nose job almost immediately leads to a "quiet and risk-free revolution".

The detailed illustration of the actions of the mixed-gender 'fashion police' "Sisters of Seinab" presents an interesting aspect, since it represents women as the reinforcers of conservative values and in a position to exert repressive political power. The word 'sisters' has an ironic tone, since they do not display any notion of female 'sisterhood' to the women they target, unlike the implied reader of the feature.

The last page of the report, which includes the section describing the repression in past and current Iran, reinforces the political connotations of cosmetic surgery in Iran by arguing that cosmetic surgery remains exempt from punishment. Nevertheless, the assumption that "the quiet revolution is taking its course risk-free" (p. 62) minimises the risks of cosmetic surgery and simultaneously its importance as political protest, emphasised many times throughout the article. As the report outlines, the political climate in Iran is oppressive and violent, and characterising cosmetic surgery previously presented as an act of defiance and protest as a "quiet revolution" carries ironic undertones.

In the course of the narrative on the last page, the description of the policing actions of the regime is followed by Sila's and Hale's 'small stories' of cosmetic surgery as political protest. This argument is contrasted by Hale's father's minimalising statement that cosmetic surgery is a compensation for not being allowed to go dancing, which is reinforced by the writer's assumption that "in fact, frustration and

boredom promote the decision to see a nose specialist”. Such an argument is closely linked to the ‘just-do-it’-discourse, which is immediately countered by Meloni:

You only have to look at the streets: drug addicts, unemployed people, everybody is looking for a way to express their desperation and their protest. We are having our noses done”, tells Meloni, student, in a Teheran café (MC.G14, p. 62).

Solidarity between people from all walks of life is claimed, with the link being the dissatisfaction with the oppressive political regime. The absence of solidarity between all women – especially women who aspire to live a more liberal lifestyle, as opposed to the one promoted by the conservative “Sisters of Seinab” – highlights the complex social power distributions at play in Iran.

Furthermore, the article claims that cosmetic surgery exists as part of business transactions:

The women sell their jewellery, the parents give up their savings, and if it is still not enough, the doctor offers a discount. Generous gestures that are possible because many of the approximately 60 nose specialists in Teheran have made themselves millionaires within a few years (MC.G14, p. 62).

There are socioeconomic, as well as self-esteem advantages of cosmetic surgery:

Sila talks about a “privileged feeling”, “because with an operated nose one belongs automatically to the upper class”. In addition, the aesthetic improvement increases self-confidence (MC.G14, p. 62).

In this last statement clearly cosmetic surgery shifts from political protest to self-improvement, invoking the Cinderella and personal investment discourses. Most strikingly, the ethical aspects of cosmetic surgery which are normally only mentioned in highly specific stories focusing on the transformation of celebrities such as Michael Jackson or Cher are clearly connected to Western supremacy and class discourses.

The notion that cultural homogenisation and Westernisation can pave the way to higher social status is reinforced by the photograph on p. 62, which shows two Iranian women trying on sunglasses in a shop. The women are photographed between two shelves of sunglasses. They are placed in a consumerist environment, and through the shelves on the left they are “framed” by a Western world. One of the women has a pair of sunglasses on; the captions comment “In paradise. Western lifestyle, for many young Iranian women it’s the ultimate”, idealising the practices and rewards of Western and globalising consumerism.

A closer reading of the argument and the report as a whole reveals that the report’s agenda is to emphasise political protest and values such as emancipation and liberalisation; however, other discursive constructions are in fact opposed to these goals. Ignoring these inconsistencies, the article concludes by commenting on the question of success or failure of the cosmetic surgery protest in Iran:

I really feel much freer”, [Jasmin] says and plays with the strand of hair in front of her ear. “But despite this, for us women, to live in freedom is still a long way away (MC.G14, p. 62).

This conclusion emphasises the limitations of cosmetic surgery. Nevertheless, by including a note of critical forbearance in Jasmin’s words, this statement can create an even stronger identification of the Western reader with the Persian ‘sisters’. So oppressed are they that they have to resort to cosmetic surgery as their only means of protest. Although they take such extreme steps, the gap between relative and absolute empowerment is significant, and the Iranian women’s success remains limited.

The reader is put into a position in which it becomes increasingly difficult to condemn the actions of the Iranian women as an act which also pursues goals other than political protest and emancipation, such as attractiveness, fun and socioeconomic advantages. This approach is personified in the letter to the editor, in which reader Gesine Franzen states that:

I find it quite shattering that Iranian women have only one way left to express their personality: to go under the knife of a cosmetic surgeon. Hopefully, the regime of

the mullahs is over soon. At least in recent times there are some positive signs coming from this country (MC.G15).

The letter presents a highly interesting case, since questionable practices of identity management, beauty regime and consumerism are represented as a means of empowerment and protest. That the irony of this is neither addressed in the article nor in the letter to the editor appears to reflect how attractive the Cinderella-discourse is as a dominant narrative. Nevertheless, in the end, it is not a perfect fairytale with a 'liberated' protagonist that prevails. As expressed in the letter to the editor, what is highlighted is the powerful influence of cultural othering, constructing 'good vs. evil' binaries around West and East, reinforcing some traditional stereotypes about society, gender and religion in a Middle Eastern country.

8.4 Summary: Towards a 'Political' Cinderella

Analysis of this report shows that the article attempts to construct discourses of cosmetic surgery as political agency rather forcefully by linking cosmetic surgery and the idea of revolution. Nonetheless, even in an article suggesting a clear agenda of representing cosmetic surgery as a means of political protest, dominant discourses of transformation and agency are driving the story and the narrative forward. Thus, the narrative of the overall article is more complex and less linear than it appears at first glance.

The mention of torture, a secret "beauty police" and heavy fines, as well as misogynist comments by the mullah represented in the article, are designed to create a sense of identification with the Iranian women and respect for their defiant actions. However, often arguments based on dichotomous gender concepts are used to support the political claims and discourses of agency highlighted in the narratives of the 'social actors'.

As in the article about leg-lengthening in China and the article on specific cosmetic surgery procedures in Japan, such as double-eyelid surgery, cosmetic surgery is

undergone in order to create a more Western look. As argued before, this ties in with the general tendencies in a 'liquid' and globalised/localised society, where homogenisation is taking place, and increasingly within 'culturally appropriate' boundaries. What makes the case of nose jobs in Iran stand out is the notion that the West and a Western appearance are associated with liberation on an individual and political level.

The 'agon' of the story, the use of cosmetic surgery as political protest, is not resolved conclusively, since a miraculous transformation through cosmetic surgery seems to be achievable when the body as a physical entity is concerned. However, when the body/face as a political site comes into play, a 'simple, strategic solution' faces unforeseen challenges.

This article presents a complex ideological context, in which the condemnation of Islam is supported by constructions of being surgical as liberated and independent. Current feminist viewpoints see cosmetic surgery as a complex process where victimisation and agency are often simultaneously at play.

This report demonstrates how two extremes of the agency discourse – giving in to powerful discourses of Western beauty and transformation, and the discourse of cosmetic surgery as political protest – are used to construct a narrative only marginally related to issues of cosmetic surgery. The 'cosmetic surgery body/face' is constructed as a political site, on which are inscribed a quasi-traditional image of feminism as emancipation from patriarchal oppression and a clear condemnation of Islam.

8.5 Summary of Analyses

The four analyses used previous research to extend ways of seeing cosmetic surgery as represented in the context of popular women's magazines. They identified dominant discourses in relation to these representations of cosmetic surgery, such as victimisation, agency, transformation and investment discourses.

The first article selected for detailed analysis presented text with a heading that indicated it contained discussion of the normative limits of cosmetic surgery. As a closer reading of the text showed, this was only fulfilled on a surface-level. This analysis highlighted the struggle for “normative limits” of human self-fashioning (Weiss & Kukla, 2009, p. 128), and how this struggle for “normative limits” is closely connected to the theme of nature and ‘naturalness’ in cosmetic surgery, as analysed by Fraser (2003). As this analysis also demonstrated, the Cinderella-discourse is interwoven with discourses of agency and nature.

The features on double-eyelid surgery and the removal of sweat glands in Japan examined the issue of ‘ethnic’ cosmetic surgery. As outlined by Kaw (2003) and Pitts-Taylor (2007), the issue of ‘ethnic’ cosmetic surgery is not significantly distinct from ‘normal’ cosmetic surgery, since ‘ethnic’ cosmetic surgery is constituted by very similar discourses that define representations and narratives of non-ethnic cosmetic surgery. As the analysis showed, normative discourses are also represented in these extracts on ‘ethnic’ cosmetic surgery, and again, a closer reading reveals that similar to the first analysis, the article fails to set clear boundaries. The medical experts quoted in the extracts present themselves as advocates for ‘ethnically appropriate’ surgery, stating that some surgical outcomes are not advisable because of their ‘unnatural’ effects on the Japanese face; however, the surgeons do not support such arguments with medical evidence as to what exactly constitutes a ‘natural’ Japanese look, and when the boundary from a ‘natural’ to an ‘unnatural’ appearance is overstepped.

A more extreme case of ‘ethnic’ cosmetic surgery, leg-lengthening operations in China, was presented in two localised and significantly different versions of the same article, which supports the global schema – local discourses function as identified by Machin and Van Leeuwen (2003) as a standardising feature of syndicated magazines. Whilst the version published in the Australian edition of *Marie Claire* does not downplay the invasiveness of the procedure and the associated risks and pain, the Cinderella and agency discourses defining the patients’ narratives relativise the negative implications. The German version, on the other hand, takes a highly critical position towards leg-lengthening surgery. This is achieved on various levels, by

using a layout that emphasises the risks of this highly invasive surgery, by using strong metaphors of torture, and by omitting the male patient who provided one of the many personal narratives in the Australian article. In Miao's case, she underwent cosmetic surgery to overcome an "ego-trauma", emphasising the vanity aspect of her personal cosmetic surgery story.

The article on nose jobs in Iran presented a unique case study since it introduced the theme of cosmetic surgery as political protest. Nevertheless, as the analysis showed, the article digressed from its original agenda, and the discourses integrated in the cosmetic surgery patients' narratives are of a more universal nature, drawing on agency, vanity, and transformation. Apart from a mullah's religious concerns about cosmetic surgery, none of the physical and psychological risks of cosmetic surgery was mentioned even once in the article. Similar to the Australian version of leg-lengthening surgery in China, the emphasis on common discourses 'across cultural differences' obscured the potential physical and psychological trauma associated with cosmetic surgery. The analysis highlighted how such an approach reshapes the dominating role of the discourse of cosmetic surgery as political protest and as liberation ironic.

It has been argued that inconclusive narratives are an intrinsic part of cosmetic surgery narratives and magazine narratives in particular (Gill, 2007: p. 192). Nevertheless, most of the analysed articles presented a final resolution which can also be interpreted as 'conclusive', although contradictory discourses drove the stories forward. The final personal resolution and evaluation of the 'small story' of a cosmetic surgery patient often presents conflicting arguments suggesting that the person concerned had, albeit on a surface level, managed to reconcile those (for example, in the conclusion of the 'Penelope narrative', see 5.4). This highlights the complex and contradictory nature of cosmetic surgery as part of identity construction, even as represented in a simplified magazine narrative. It also emphasises the urge of the cosmetic surgery patient as 'social actor' to create a 'conclusive' resolution to an individual cosmetic surgery 'story' in which conflict in bodily and ideological issues can eventually be overcome.

The analyses revealed that the narrative patterns in the selected articles strongly followed the ‘simple, strategic solution’ pattern identified by Machin and Van Leeuwen (2007) in *Cosmopolitan* texts dealing with problem-solving in different areas of life (see 1.2 and 2.1). Similar to the application of this pattern to problem-solving, the narrative of cosmetic surgery as a ‘simple, strategic solution’ permeates the selected texts. The only exception was presented by the German version of the *Marie Claire* report on leg-lengthening in China, which was critical of the procedure and clearly distanced the reader from the leg-lengthening patients and their ‘irrational’ reasons for undergoing the procedure. This observation is congruent with the characterisation of the ‘simple, strategic solution’ pattern as a global schema, which differs content-wise through the use of local discourses.

Moreover, the ‘(in)conclusive’ narrative pattern mentioned above, as well as the role of the medical expert and cultural othering, are powerful means to both invite and distance the reader from the contradictory identity construction processes represented in the magazine articles. In the first analysis, the ‘(in)conclusive’ resolution of the personal narrative framing the factual report initially distances the reader from the cosmetic surgery recipient and narrator, but ultimately invites the reader, if not to identify, then at least to consider and possibly empathise with the narrator’s situation.

In the extracts on culturally specific cosmetic procedures in Japan, the normative discourse in an ‘ethnic’ cosmetic surgery context is linked to the role of the medical expert as “Pygmalion” (Jones, 2009, p. 171), who bestows on patients an “aesthetic gift” (p. 179). Nevertheless, as Jones (2009) stated, the surgeon as Pygmalion has many faces, and the persona of the surgeon as the generous artist has a Janus face representing the oppressive side of the surgeon as the ultimate decision maker, who “cut[s] down women to size” (Davis, 2009: p. 35). As the analysis of those text extracts argues, agency is suggested by creating opportunities for decision-making; however, these decisions are of a minor nature or ultimately made by surgeons, and the only decisions left for the patients to make are trivial, such as which sunglasses to bring on the day of the operation (see 6.3).

Contradiction permeate the text of the Australian version of the report on Chinese leg-lengthening, but the ‘conclusive’ resolution in the last few lines, stated in the narrative of a leg-lengthening patient, obscures complexity in a similar manner as in the article *When plastic surgeons say NO*. Again, at the end of the report, the resolution of a personal narrative invites the reader to take a closer look at the situation of an individual, and overcome the critical distance created by the presentation of the confronting medical facts.

While the Australian version uses cultural othering so that it can potentially be used by readers to reassure themselves about their ‘normal’ cosmetic surgery needs, the German version creates cultural othering for positioning its readers to mainly elicit the ‘victimising’ aspect of cosmetic surgery culture. The cultural othering in this case achieves distancing towards the procedure and the controversial motivation behind it, but also manages to invite the reader to reflect on the situation of the Chinese women. By distancing readers from the invasive leg-lengthening procedure, and by presenting the Chinese women as cultural others who have fallen victim to an irrational notion of desirability, the text distances the reader from cosmetic surgery in general.

A similar othering position is constructed in the article on nose jobs in Iran, which reinforces distance through the use of stereotyping Middle East metaphors applied to the descriptions of people and settings. On the other hand, the discourse of cosmetic surgery as political protest and a means of liberation invites the reader to consider the wider cultural situation of Iranian women. Through highlighting the similarities in the motivation to undergo surgery and the powerful motive of political protest, the reader is positioned to empathise with the cultural other. The consequential ‘change of view’ can facilitate a transformation process in the mind of the reader, through which the cultural other is transformed into ‘sister in oppressed womanhood’, as expressed in the letter to the editor.

A closer reading of this text pointed out how cosmetic surgery in Iran also plays the role of a strategic solution to achieve, admittedly, in this political context, complex goals. However, the irony of representing an intrusive procedure such as cosmetic

surgery, which has a significant impact on body and identity, as a means to corporeal and political liberation, is obscured by powerful narratives of political agency. The complexity and the (in)conclusive nature of cosmetic surgery discourses in narratives in popular text certainly present an extreme construction in this context. Cosmetic surgery, which in feminist theorising of body and identity has been seen as a tool to 'colonise' women's bodies, is in this instance represented largely as a means of liberation, decolonisation and agency. What this analysis shows is a paradoxical subversion of the complex issue of cosmetic surgery to a strategic choice. The 'just-do-it' appeal (Bordo, 2009) of the normalisation discourse of cosmetic surgery is strongly represented in this article.

The complex and the contradictory nature of cosmetic surgery as a means of identity construction is therefore highlighted in the overall narrative and the (in)conclusive resolution, and in the way the reader is positioned in an ambivalent manner.

Considering that texts are multimodal, the incongruous nature of argument and reader positioning in relation to cosmetic surgery narratives is also reinforced by the use of Western models, thick make-up and metaphorical images of low naturalistic modality in relation to the reality of cosmetic surgery. This not only further obscures the boundaries of normative limits of cosmetic surgery, but also visually reinforces ambiguity in relation to cultural identity and the reality of surgery.

9. Conclusion

9.1 A Retrospective View of the Study

This study analysed representations of cosmetic surgery in two syndicated women's magazines *Cosmopolitan* and *marie claire* across three different cultural contexts. Drawing upon sociological and feminist theories on the body, embodiment, body modification and the cosmetic surgery body as well as cultural theories of identity construction, this study investigated two questions. The first question was how cosmetic surgery is discursively constructed in the magazine articles of *Cosmopolitan* and *marie claire*, and second, how those discourses within narratives invite or distance the reader to engage in the complex identity construction process integral to contemporary 'liquid' and 'surgical' society. This is a society which is characterised by "body destabilisation [...] and a new franticness surrounding the body" (Orbach, 2009, p. 8) and in which "there is no such things as *a body that can simply be*" [my italics] (p. 111).

The data for the study were compiled from three national or 'localised' editions of *Cosmopolitan* and *marie claire*. The data, gathered over a nine-year period from 1995-2003 from the Australian, German and Japanese editions, totalled 110 articles, which made narrowing down necessary. To achieve a more manageable corpus, articles of purely informative content were excluded and more focus placed on genres containing journalistic content such as reports and features. Admittedly, the Japanese extracts chosen for the deep case study analysis were predominantly reports of non-journalistic content; however, as my general overview of the data corpus illustrated (see 4.2), in the Japanese magazine editions, most articles were of informative genres and very few fit journalistic genres. Thus, the selection of Japanese articles was based on considerations of topics and themes connecting to the other articles.

The analysis ultimately became a case study based on five reports and one letter to the editor related to four themes of cosmetic surgery. At first glance, those four themes strongly connected to at least one dominant discourse of cosmetic surgery;

however, the closer reading and interpretation process revealed complex and contradictory discursive connections in relation to agency and investment discourses. In combination with a strong emergence of (cultural) othering in cosmetic surgery representations, this made the selected articles highly relevant material for the purposes of this study.

The multimodal character of the magazine articles selected for analysis required a mixed methodological approach. To explore the data within the diverse frameworks of critical discourse analysis, critical reading practice and visual communication, I adopted multimodal discourse analysis. Thus, two methodological approaches which grew out of Halliday's concept of systemic-functional linguistics, critical discourse analysis and visual analysis, were chosen to analyse and interpret both textual and visual elements of cosmetic surgery discourses. Furthermore, to investigate how discourses of cosmetic surgery 'hang together', I integrated narrative analysis as a third method. Although this method is not connected to critical linguistics, interpretations of discourse as a representation of social events and actions, as well as an understanding of discourse as a powerful tool of identity negotiation, provided an interface between those two methodological fields.

9.2 Strengths and Limitations of the Study

Conceptualisation of the study as a deep case study analysis concentrating on a small number of articles and four themes is an approach with several valuable strengths, but also some limitations.

The analysis, which is based on four detailed analyses, precludes any generalisations in relation to the representation of cosmetic surgery discourses in magazine narratives. The discoveries made in the analysis are limited to a sample of articles actually considered, and even connections between the four analyses cannot claim to validly transfer to cosmetic surgery articles in women's magazines in general.

The eclectic methodological approach does not lend itself to an analysis which applies the analytical resources of each method in great detail. Lacking a specialist background in linguistics and visual communication, I did not systematically draw upon specific linguistic tools for in-depth analysis of grammar, semantics and discourse., nor could I draw upon professional expertise in the construction of images that a visual communication expert would use as a valuable ‘member resource’. I also acknowledge that for a multimodal discourse analysis integrating visual analysis, the omission of the analysis of colour in three out of the four case studies is a shortcoming. In most instances, however, this deficit was not a deliberate choice but a matter of circumstances that required monochrome reprints of articles for better resolution (see 4.3).

Although the mixed methodology approach has areas which can be improved for further research, the application of a multimodal critical discourse analysis approach brings unique strengths to this study. As acknowledged by some critics of critical discourse analysis (CDA) and critical discourse analysts themselves, CDA to date has focused predominantly on written or spoken texts at the expense of visual analysis. Theorists of visual analysis and critical reading practice argue that a preference of textual over visual analysis is an oversight of the intrinsic multimodality of the majority of contemporary texts, such as in the magazine articles selected for analysis. This limits readers’ and analysts’ approaches to traditional interpretation resources and does not adequately address the challenges critical reading faces today in making meaning from multiple reading paths provided in increasingly crowded print formats, especially in the popular media.

Mitchell’s (1994) “pictorial turn” suggests a more visual view of the world, as opposed to privileging textuality as the dominant “lingua franca” (p. 11). As Callow (2005) states, this concept by Kress (1997, 2003) captures the current challenge to engage with broader concepts of visuality in order to enable a more enriching understanding of images as part of reading practices moving beyond purely print-text based approaches (p. 17). The current cognitive shift from print to illustrative text indicates that visual materials are becoming more complex and abstract, whilst syntactic demands on written texts have lessened. As Kress (1997, 2003) argues, the

increasing emphasis on visual material in texts calls for a broader approach to literacy and critical reading, which this study addressed by a multimodal discourse analysis approach.

As visual communication theorists concede, some analytical categories of visual analysis such as modality are still considered a ‘fuzzy’ area. Furthermore, the analysis of visuals is also to some extent based on socially acquired ‘member resources’ for interpretation, or concepts that do not adequately reflect the unique character of representation of images. Since visual analysis within multimodal discourse analysis is a relatively recent research area, a systematic approach of ‘decoding’ images as per Kress, Van Leeuwen and Machin provides not an incontestable, but highly strategic complement to traditional critical discourse analysis of written and spoken texts. By integrating systematic visual analysis into multimodal discourse analysis, this study contributes to the increasing pool of analysis investigating the relationship of visual and textual elements in multimodal texts.

Similar to visual analysis, the application of narrative analysis in sociological research and discourse analysis is an emerging research area. Although the combination of discourse and narrative analysis can be criticised as having a ‘blurry’ methodological boundary, I argue that discourses are powerful socially constructed knowledges, which become reinforced when integrated in narrative patterns, apparently overcoming ideological contradictions and inconsistencies. A methodological approach which acknowledges the intrinsic interconnectedness of discourses and narrative in cosmetic surgery ‘stories’ allows insight into how complex issues become trivialised in the simplifying narrative style, typical of magazine genres.

As stated in 3.1.1, critical discourse analysts themselves concede that another weakness of this method lies in its limited impact on the change of social structures, since critical discourse analysis can take on the format of merely an intellectual exercise. Nevertheless, I argue that it is the nature of this topic itself that disallows critical discourse analysis as a purely academic approach with little social relevance.

As sociologists, cultural and feminist theorists emphasise (see Chapter 2), it is becoming increasingly difficult to distance oneself from the current body-conscious society, in which the body is part of a lifestyle and beauty industry:

The marketing of the beauty and style industries is ingenious. Editorial pages in magazines and style sections in newspapers name problems which hitherto didn't exist [...] Adroitly [...] the very problems the style industries diagnose are the same ones the beauty industry purports to fix [...] And the purported fixes are offered as solutions which we can't help but to wish to take advantage of [...] We do not see ourselves as victims of an industry bent to exploit us [...] We reject the idea of being under 'assault' from the beauty industry as offensive to our intelligence. We believe that we can be critical of the negative practices of this persuasive industry and simply enjoy fashion and beauty, yet the constant exhortation to change gets under our skin (Orbach, 2009, p. 92).

Considering that women's magazines, regardless of their individual approach, are carriers of powerful beauty, fashion and lifestyle messages, the persuasive impact of magazine articles in relation to text and visuals, and particularly increasingly of the visual, is not to be underestimated. Popular magazines' readers are also consumers, and, as Bauman (2000) points out, the anxieties around an increasingly fluid identity makes them very susceptible to pursue straightforward solutions to this dilemma, increasingly by resorting to extreme body modification practices (see 2.2.1). Orbach (2009) continues to argue that:

over the past thirty years the new grammar of visual culture, the notion of the consumer as empowered, the workings of the diet, pharmaceutical, food, cosmetic surgery and style industries, and the democratisation of aspiration have made us view the body we live in as a body we can, must and should perfect (pp. 135-136).

Orbach's (2009) observations of the mechanisms of the "beauty and style industries" and a new "visual culture" reinforce Misson's (1994) view that "the fact that magazines are leisure reading makes them all the more efficient in producing their ideological effect because the circumstances of reading make the messages they send all the more difficult to resist" (p. 74). Nonetheless, Misson (1994), similar to Orbach

(2009) above, adds that the “ideological effect” of popular magazines is not straightforward, but rather reflects complex power structures, fluctuating between the reader and the magazine offering “pleasure in exchange for power over us” (Scholes, 1987, p. 75, quoted in Misson, 1994, p. 74). In other words:

[readers] going to buy a magazine are in control: they [...] can choose what they expect will give them the greatest entertainment, instruction and/or delight, and they can read it selectively for their own purposes [...] They have also, however, relinquished control in significant ways. They have invested their money, and so there is an *a priori* expectation of agreement with the magazine’s view of things [...] [making] them particularly uncritical of the implicit messages (Misson, 1994, p. 74).

The intertwining notion of power and ideology, consumer choices and the ‘fluid’ nature of identity is characteristic of current ‘liquid’ society which affects its citizens on many levels of their everyday lives. Taking this consideration into account, a critical discourse analysis of sample texts dealing with invasive body modification processes such as cosmetic surgery is a relevant reflection of anxieties around identity construction.

Based on the objectives of this study, I argue that this study, through the integration of visual analysis, has contributed to a multimodal discourse analysis approach in the context of critical reading. Nevertheless, the integration of narrative analysis needs to be more clearly defined and strengthened as a strategic method in the future. I believe that future researchers in this field can learn from the limitations revealed in this study and can contribute to further refinement and broader applicability of those methods.

9.3 Conclusions of the Case Studies

9.3.1 'A Simple, Strategic (and Surgical) Solution?'

In the introduction I quoted a statement from an example in the emerging genre of cosmetic surgery fiction, which represents an acquiescent approach to cosmetic surgery. A cosmetic surgeon and author, Lesesne (2006), states that cosmetic surgery is a “simple decision”, which does not require “Freudian analysis” or “overthinking” (p. 11).

This line of argument is also evidenced in the ‘simple and strategic’ problem-solution schema Machin and Van Leeuwen (2007) identify as a typical pattern in *Cosmopolitan* magazine. The argument in narrative theory that at the core of each narrative lies an ‘agon’, that is, an ‘issue’ as the driving force for action, calls for an investigation into what extent this pattern is transferable to cosmetic surgery discourses integrated in magazine narratives.

The common link between all four analyses is the representation of cosmetic surgery as a highly normative practice, in which strong value assumptions of what is ‘socially acceptable’ or ‘socially unacceptable’ are at play. The first analysis highlighted that cosmetic surgery is the epitome of body modification, in which extreme positions such as cosmetic surgery as ‘normalcy’ and ‘pathology’ emphasise the tension of identity negotiation. The reader is positioned among contradictory arguments and positions, from which a resolution can only be created with difficulty by sometimes forcefully and illogically merging opposing discourses.

While the other three analyses also constructed cosmetic surgery as a normative practice, they are moreover linked by the notion of cosmetic surgery as a normative practice in which ‘racial’ and ethnic norms are obviously at play. The analysis of the Japanese magazine extracts on double-eyelid surgery and surgical removal of sweat glands as examples of ‘localised’ procedures highlighted that this is an area in which the logics of contemporary cosmetic surgery clearly go beyond beauty ideals and involve a complex *cultural* identity construction process.

Although the Japanese article is connected to the reports on leg-lengthening in China and nose jobs in Iran through the notion of ‘ethnic’ cosmetic surgery, of those three it is the one also most closely linked to the first analysis. This is because both articles represent an ‘Australian’, ‘German’ or ‘Japanese’ cosmetic surgery story to a reader from the same nationality and cultural context, whereas the reports on leg-lengthening in China and nose jobs in Iran are representing a cultural, cosmetic surgery ‘other’ to a Western reader.

As outlined in the analysis on leg-lengthening procedures in China, both the Australian and the German versions of the *marie claire* reportage are critical of such an operation which goes beyond physically and psychologically acceptable norms. This is in line with the *marie claire* agenda to provide their ‘informed’ reader with an example of ‘wrong’ cosmetic surgery. Nevertheless, by giving an example from another cultural context, the reader is positioned to engage with a ‘cultural other’, and this cultural othering is reinforced by the use of irony and value judgements expressing ‘Western superiority’ over the Chinese patients. While the reader is positioned in favour of clear norms against this type of surgery, since this surgery is outside the reader’s cultural context the story does not necessarily position the reader to critically evaluate cosmetic surgery practices and assumptions within her own cultural context. Furthermore, by following a ‘shock-horror’ approach in its reporting style, the magazine reinforces conservative views of cosmetic surgery.

The analysis of the article about nose jobs in Iran presented a unique case because this report is the only one in the data collection which strongly links cosmetic surgery to political protest against an oppressive political regime. The analysis highlighted a highly ambiguous intermingling of agency discourses representing cosmetic surgery as liberation and transformation discourses with the goal of Westernisation and thus, higher social status. A further insight was that the narrative construction was only lightly concerned with cosmetic surgery as a means of beautification. In this report, the ‘cosmetic surgery body/face’ is rather seen as a political site, on which an image of feminism as emancipation from patriarchal

oppression and, more ideologically, a clear condemnation of the Islamic regime in Iran are inscribed.

As the four analyses indicated, the articles all contain elements of the ‘simple, strategic solution’ pattern. This becomes apparent in the narratives of ‘small’ cosmetic surgery stories which construct the decision to undergo cosmetic surgery as a straightforward process. These narratives imply that cosmetic surgery enables patients to achieve a certain aim, ranging from concrete goals such as more height or a job promotion to more conceptual entities such as a sense of self-worth or political liberation. Whilst conflicts, sacrifices and setbacks are not excluded from the narrative, they are minimalised by representing them as necessary obstacles which have to be accepted in order to achieve cosmetic surgery success, and are thus integral to cosmetic surgery narratives.

While this aspect is consistent with the agenda of syndicated magazines to offer clear advice and positions to their readers, a closer reading of the articles showed a use of contradictory cosmetic surgery discourses in narratives. This leaves the reader to negotiate her identity construction process within blurred normative boundaries, reinforcing anxieties concerning her own body and identity characteristic of our ‘liquid’ society.

9.3.2 (In)conclusive (Re)solutions.

This conflict between a ‘trivialisation’ of issues in simplifying patterns and the actual complexity of argument is highlighted in the narrative conclusion of the articles. These are attempts to provide resolutions, and thus, a satisfactory closure to the narrative, by highlighting positive aspects of cosmetic surgery in concessive relations; however, by maintaining those concessive relations, the resolution can only be considered as ‘conclusive’ on a surface level. Since the contradictions of the discourses applied in the narrative cannot be totally eliminated in the conclusions, and the narratives thus merely provide an ideological compromise, I argue that these conclusions provide ‘inconclusive-conclusive’ resolutions. While the overall

narrative is represented as 'simple and strategic', it is modified by the notion of an (in)conclusive (re)solution. This notion adds to the argument promulgated by feminist theorists of cosmetic surgery that cosmetic surgery as part of the identity construction process cannot be defined within the parameters of one discourse, but rather requires the negotiation and integration of many.

The notion of (in)conclusive (re)solutions also emphasises the significance of text-context relationships as an effective means of reading. Since magazine articles represent a multiple recontextualisation of 'texts', a further complication among dominant ideas is obvious. Moreover, my analyses suggest that readers of magazine articles published in syndicated magazines with a more or less overtly expressed commercial agenda are familiar with dominant magazine narrative patterns, drawing upon them as a 'member resource'. This is the case in the production process of an (in)conclusive (re)solution on the part of the writer, and can be expected to be the same in the reader's interpretation process. Through an 'over-application' of a common discourse schema such as the 'simple, strategic solution' pattern, the reader is invited to accept the 'trivialising' approach. An understanding that body- and identity-related issues in a 'liquid' world can never be conclusive will afford the readers greater flexibility with respect to their own identity construction process. This individual identity negotiation process cannot be absolute and final, but flexible by deviating from patterns suggesting an easy resolution.

Linking the findings of this study to the research outcomes of previous feminist analyses of cosmetic surgery, the four analyses also confirmed that contemporary representations of cosmetic surgery are not limited to one major view, but rather amalgamate various aspects of cosmetic surgery. In addition, the four case studies indicate that magazine representations of cosmetic surgery prefer to juxtapose contrasting discourses in their narratives. While 'positively connoted' discourses representing cosmetic surgery as acts of agency reflect upon 'rational' investments, 'negatively connoted' discourses such as vanity and reflections of victimisation present the other end of the argument, with many positions on this spectrum. As feminist research has found, discourses such as vanity and victimisation, which are considered outdated because of their limited image of women as cosmetic surgery

patients, are often offered in popular texts and discussion. This adds to and supports the trivialising orientation of popular texts in which simple binaries offer immediately appealing, straightforward views rather than an approach that acknowledges complexity.

This shift to create distinct boundaries is evidenced in the application of dichotomous relationships between ‘social’ actors. Binaries such as male-female, rational-irrational, right-wrong and socially acceptable-socially unacceptable are highly contested in feminist theory (see 2.3, 2.4.4). Such binaries characterise the relations between represented ‘social actors’ in the text; this is particularly highlighted in male-female relations, in which husband-wife, boss-employee and surgeon-patient relationships reinforce established power inequalities. This assigning of dichotomous characteristics and values extends to the represented participant-reader relationship, particularly when the reader is positioned to face a cultural other. Moreover, even when the reader is not engaging with a cultural other but a cultural ‘same’, she is positioned as the participant in this interaction who is potentially enabled to make a ‘rational’ decision – albeit choosing between simple binary relations which inadequately reflect ‘liquid’ social conditions.

This structure of a double supremacy draws upon binaries to construct both ‘social actors’ within the texts and represent participants and reader as clear oppositions, in which one part holds a superior stance over the other. This is strongly evident when ‘ethnically appropriate’ or ‘ethnic’ cosmetic surgery is described and a Westernised image of beauty and appearance is constructed as the ideal. As in the analysis of the Japanese magazine extracts on double-eyelid surgery, the writer positions the Japanese reader in opposition to a textually and visually represented ideal of Westernised beauty. This notion of Westernised hegemony is even reinforced in articles reporting on cosmetic surgery procedures carried out in countries different from the reader’s cultural context. As the analyses on Chinese leg-lengthening and nose jobs in Iran have highlighted, the superiority of a Westernised appearance over an ‘ethnic’ appearance is assumed in the narrative. Moreover, in the represented participant-reader relationship, the Western reader is positioned as the ‘rational’ analyst who is able to distance herself from making ‘wrong’ cosmetic surgery

decisions as opposed to the cultural ‘other’, predominantly represented as a cosmetic surgery ‘victim’.

As Heyes (2009) argues, the concept of ‘ethnically appropriate’ and ‘ethnic cosmetic surgery’ (p. 191) is increasingly foregrounded in feminist research (Davis, 2003; Heyes, 2007, 2009; Kaw, 2003). She emphasises that:

what feminist readings of ethnic cosmetic surgery need most [...] is a critical approach that reads all bodies as ethnically marked – not just as differential sets of ethnic and non-ethnic parts – and understands white, Western people as also engaged in racial and ethnic projects of bodily conformity or appropriation (p. 193).

My analyses of cosmetic surgery under four different themes demonstrated that cultural othering is used to create a distance between cosmetic surgery issues Western and non-Western women face in their identity construction processes, and that identification with the issues of non-Western women is created from a superior, ‘white’ point of view. This supports Heyes’ (2009) observation that representations of ethnic cosmetic surgery, particularly in popular discussion, ignore that “cosmetic surgery invokes norms that almost no white, Western people can actually live up to” (p. 203) and that cosmetic surgery needs to “be understood as a fantasy construction as much as attempts to literalise “the” white, Western body” (p. 203).

Heyes (2009) is raising a justified point that in order to overcome ethnic binaries of white and non-white, feminist theory needs to overcome this dichotomy by acknowledging that “all cosmetic surgery is ethnic” (p. 191). Heyes (2009) argument that “in a curious racial inversion [...] pale-skinned women lift[ing] their faces to erase lines and folds [...] may be working against their ethnic heritage in a way that goes unremarked and untheorised” (p. 202) supports her call for a more “fine-grained analysis of women’s complicity, resistance, passivity and agency” (p. 193).

9.4 Questions for Further Investigation

This study investigated the transferability of the ‘simple, strategic solution’ schema to cosmetic surgery narratives and confirmed that this is a global pattern with localised content. In relation to the conclusion of cosmetic surgery narratives, I also identified that the schema needs to be modified by including the feature of ‘(in)conclusive (re)solutions’. The findings of my study also support Heyes’ (2009) claim that a re-contextualisation of cosmetic surgery, which no longer separates ethnic cosmetic surgery as a different issue from ‘normal’ cosmetic surgery, is long overdue.

One identifiable weakness of the study lies in the limited analysis of the narratives of cosmetic surgery patients in China and Iran whose surgical procedures were constructed as acts of agency, but also represented as strongly ethnically connoted procedures. As highlighted in the current feminist discussion on ethnic cosmetic surgery (Davis, 2003; Heyes, 2009; Pitts-Taylor, 2007), ethnic cosmetic surgery is segregated from ‘normal’ cosmetic surgery (that is Western and ‘not extreme’ – in type as well as in number). This segregation reflects ‘false’ political correctness towards issues related to race and colonisation, when ‘whites’, in many instances, judge ethnic cosmetic surgery as ethically ‘wrong’. Such binary views, also expressing notions of cultural supremacy, were highlighted in the use of clichéd metaphors in the choice of vocab and formatting choices which visually objectify the represented cosmetic surgery patients (see Chapters 7 and 8).

What a position of cultural supremacy ignores is the complexity of viewpoints of ethnic cosmetic surgery recipients themselves, who might claim to experience social disadvantage because of ‘racial’ features, but at the same time might strongly downplay this as their main motivation. As Heyes (2009) points out, ‘ethnic’ cosmetic surgery is not only to be understood as a form of gender normalisation and beautification, but also an intervention into racial psychology and ethnic belonging, where intricate considerations are at play. Thus, discourses and narrative as represented in the Chinese leg-lengthening report as well as in the report on nose jobs in Iran present a limited repertoire of discourses, which is then further limited

through the recontextualisation process of reported interview statements in a journalistic print article.

This shortcoming of ignoring ethnic cosmetic surgery considerations ties in with the argument that the cultural background needs to be investigated in more detail when analysing cosmetic surgery in culturally different contexts (Ashikari, 2005; Darling-Wolf, 2000, 2003). Davis (2003) draws upon the example of “Iranian nose jobs” to illustrate the complexities of contextual understanding of cosmetic surgery:

Large numbers of affluent young women have their noses “fixed” in Iran every year, declaring that they “just want to look better”. Such surgery may well be a class issue, something that young women of a certain social background are entitled to do. However, in the United States when private clinics, catering to the growing community of Iranian exiles, perform the same nose surgery, it falls under the rubric of ethnic cosmetic surgery (“the Middle Eastern nose”) (p. 99).

The role and the narrative of the only male cosmetic surgery patient mentioned in the report on leg-lengthening in China, Mr. Xian, requires further investigation and analysis. Similar to the oversight of cultural nuances in analyses of cosmetic surgery, an interpretive weakness in relation to male cosmetic surgery patients in both feminist and clinical literature has been pointed out repeatedly (Heyes & Jones, 2009, p. 12). Atkinson (2008) argues that:

masculinity still tends to be framed by gender researchers along very narrow conceptual lines [...] Dominant constructions of masculinity are either interpreted as rigidly hegemonic/traditional or drastically alternative and deeply marginalised. Neither of these popular positions accurately captures how clusters of men often wrestle with and negotiate established constructions of masculinity in novel ways (p. 68).

Heyes and Jones (2009) argue that “men are still rewriting scripts of cosmetic surgery in a time of tremendous ideological and material flux but have not yet normalised the kind of stigma that confronted women twenty years ago” (p. 13). Mr. Xian, the male leg-lengthening patient, represents a unique example of a male patient

“rewriting scripts of cosmetic surgery” in a specific cultural context within a ‘liquid’ and ‘surgical’ society still predominantly affecting women, but increasingly also men. A deeper analysis of his narrative, which identified the fact that his wife was taller than him as the social stigma which made him choose cosmetic surgery, could have presented interesting insights into issues of cosmetic surgery, social stigma and masculinity in a climate of “growth of cosmetic surgical markets as a result of the impact of neoliberal ideals on non-capitalist economies” (Heyes & Jones, 2009, p. 14).

As Heyes and Jones (2009) argue, the study of cosmetic surgery is a rich and complicated area, and has many under-researched aspects. Male cosmetic surgery, cosmetic surgery tourism, feminist economic analysis of how and why cosmetic surgery is marketed with increasing success to more and more people from a lower socio-economic background, the impact of credits and loans for cosmetic surgery, cosmetic dental work and the blurring of the beauty salon/medical clinic line between non-surgical procedures and injectables, are a few topics worthy of further investigation (pp. 14-15).

Other questions I have highlighted that need addressing are the perpetuation of cosmetic surgery discourses that are considered as simplifying the complexities of cosmetic surgery and identity construction, such as the vanity discourse. In addition, the dominant male-female binary which appears to continue in the representation and the analysis of cosmetic surgery also invites further detailed analysis.

The most difficult challenge when approaching a topic, as Heyes and Jones (2009) state, is to come to terms with the researcher’s own implicated role “in a globalised and media-saturated world in which bodies play increasingly complex roles” (p. 15). This difficulty of ‘taking out’ one’s own cultural context is most evident when analysing cosmetic surgery topics related to different cultural contexts. Nevertheless, ‘putting in’ one’s understanding of a cultural context of which the researcher is a part takes a role in shaping more distinct insights and must be acknowledged. As outlined in 1.2, I have drew upon the ‘member resources’ available to me as a ‘hafu’ writing in English. I comment on the various cultural contexts involved in this study,

particularly in my analysis of eyelid surgery and the surgical removal of sweat glands in Japan.

In sum, feminist theory in particular has challenged persuasive dichotomies such as mind-body, male-female and nature-culture. These types of binaries are reinforced in many cosmetic surgery discourses, as demonstrated in the distinction between ethnic and white cosmetic surgeries. In analysing male-female cosmetic surgery, ethnic-white cosmetic surgery and the different normative frameworks associated with them, binaries which do not reflect the 'liquid' world authentically can be further challenged. This contributes to a more critical reading of the plethora of popular cosmetic surgery texts which base their powerful influence on the perpetuation of the simplified rhetoric those binaries afford them.

As I emphasised in 8.5, a dichotomous argument parallels ambivalent reader positioning. On the 'small' story level of a personal cosmetic surgery narrative, the reader is positioned at either closer or further distance to the narrative, with a conclusion which in most cases follows a dominant discursive plot, providing an apparently satisfactory solution. By doing this, the reader is invited to empathise or identify with the resolution offered by the magazine narrative. However, on the 'big' story level of cosmetic surgery as an invasive procedure on the body, through which conflicting ideologies of normative attractiveness, male-female dominance as well as white-ethnic hegemony are played out, the reader is left 'in limbo' to negotiate her own position.

As Blum (2003) argues (see 1.1.3), the omnipresence of cosmetic surgery in the media implies that it is virtually impossible for women (and increasingly men) living in a 'liquid' society to view cosmetic surgery from the 'outside'. A critical reading of articles on cosmetic surgery highlights the ambiguous arguments on various levels in strongly simplifying narratives congruent with the 'trivial' presentation of issues in life-style magazines. The reader, through identifying these structures, is enabled rethink her position towards dominant ideologies of female attractiveness, social conformity and individual identity. Such a process will not only afford a heightened

awareness of submerged discourses to readers, but also provide us more reflective choices in a 'liquid' society.

Postscript

From Pandora's Box to 'Operation Beauty II'

This thesis began with my reflections on my own perceived 'surgical' look. Told that I resembled a Japanese woman who had had cosmetic surgery, I was motivated, if not physically, then intellectually, to become 'surgical' by embarking on this study.

Whilst the initiation of 'Operation Beauty' was inspired by an 'oriental' experience, the research and writing process brought back some 'Western' memories of my secondary school days. I attended a 'humanistisches Gymnasium' in Germany, a highly academic secondary school with a strong tradition of the study of classics. The students in my secondary school days were introduced to Latin in Grade 5, and some embraced the opportunity to study classical Greek as an elective from Year 9 onwards. In any case, whether we dropped Latin as a subject after Year 10 or decided to take up both Roman and Greek language and culture, no student left the school without having studied Ancient Greek myths and legends at some stage.

One of the legends I remember very clearly was *Pandora's Box*. Pandora, overcome by curiosity, opens the box despite instructions to keep it closed, allowing all kinds of evils to escape into the world. At the very bottom of the box lies hope, but before it can also leave the box, Pandora, in shock over what her curiosity has wreaked upon the world, shuts the lid. So the world becomes a desolate place, until much later, Pandora opens the box again and hope finally emerges.

This study has had many 'Pandora' moments: from delving into the fascinating 'box' of material gathered, through being overwhelmed by the complexities of the content, to experiencing 'light-bulb' moments. Moreover, 'surgical' moments returned in the form of constant rewriting, reconceptualising and editing.

Retrospectively, I believe that for me, as for other researchers before, the early Pandora moment was the realisation that cosmetic surgery is closely linked to identity and identity construction on both an academic and personal level.

Whilst I was undertaking this study, I read *On Identity* by Amin Maalouf (2000), a Lebanese-French journalist and scholar. A notion of Maalouf's resonated with me, namely his conviction that every individual holds many and various 'allegiances' regarding her identity.

So what would my allegiances be? I am a German-Japanese female living in Australia, but consider myself European, with my primary and secondary education being German. My name suggests a hyphenated identity and my birth certificate states that I am Catholic, but I would rather see myself as a 'generic' Christian with an allegiance to rationalism and Buddhism.

My close friends include German friends 'back home', (who identify so strongly with the region they grew up in they mostly speak the Bavarian dialect and not standard 'high' German), an Indian living and working in Dubai with an Australian accent because he studied there, a British-Australian Jew who felt so European he migrated to Vienna permanently, a Colombian for whom I am always 'Michiquita', and an Australian from Albury/Wodonga, but very much the global citizen, having worked in Europe and East Timor.

I speak German, English, Japanese and Spanish. German is the language I feel most comfortable with, Spanish is the language I am most passionate about, and English is my working language. I have taught German, Japanese and Latin, and I look, in my view, mainly Caucasian, with some Asian features around my eyes, but many on first impression, when I meet them for the first time, claim that I look French. So far, so good: In relation to these categories, I seem to have both insider and outsider perspectives.

I feel that I must now go back to the very beginning of my academic journey and reassess my reaction to the 'hafu' comment made about me in Japan. I wonder where

I would place myself in the articulations among cosmetic surgery, ethnicity and cultural identity, and whether I would react in the same way now to a comment which a couple of years ago I regarded as offensive.

All in all, I believe that I would still find the comment that I looked like a Japanese woman who had undergone cosmetic surgery irritating, but not primarily because of the surgical aspect, but because I find any comments of that kind categorising. They do not seem to adequately reflect the current multifaceted and complex ways in which individuals construct their identities. The 'hope' arising from this study might, on a 'small story' level, lie in the realisation that if I was confronted with a similar comment again, I would respond more reflexively.

I would like to think that a heuristic approach to 'small' stories might lead to a questioning of the 'big' cosmetic surgery story. This might encourage exploration of commonly held beliefs and convictions about cosmetic surgery and identity, an exercise that offers a more critical understanding of how we construct identity.

As a person always in the process of examining my identity I can hardly think of any better encouragement to continue my research.

'Operation Beauty II' starts now.

Bibliography

- Abbott, H.P. (2008). *The Cambridge introduction to narrative*. Cambridge: Cambridge University Press.
- ACP Magazines. (2010). *Cosmopolitan*. <http://www.acp.com.au/cosmopolitan.htm>.
- Althusser, L. (1971). *Lenin and philosophy, and other essays*. New York: Monthly Review Press.
- Anleu, S. L. R. (2000). *Deviance, conformity and control*, Frenchs Forest: Longman.
- Anstey, M., & Bull, G. (2000). *Reading the visual: Written and illustrated children's literature*, Marrickville: Harcourt.
- Anstey, M., & Bull, G. (1996). *The literacy labyrinth*. New York: Prentice Hall.
- Appadurai, A. (1996). *Modernity at large: Cultural dimensions of globalisation*. Minneapolis: University of Minnesota Press.
- Ashikari, M. (2005). Cultivating Japanese whiteness: 'the whitening' cosmetics boom and the Japanese identity. *Journal of Material Culture*, 10(1), 73-91.
- Atkinson, M. (2008). Exploring male femininity in the 'crisis': men and cosmetic surgery. *Body & Society*, 14(1), 67-87.
- Ayers, R. (2000). Serene and happy and distant: an interview with Orlan. In M. Featherstone (Ed.), *Body modification* (pp. 171-84). London: Sage.
- Bakhtin, M. M. (1984). *Rabelais and his world*. Bloomington: Indiana University Press.
- Bakhtin, M. M. (1981a). Forms of time and of the chronotope in the novel: notes towards a historical poetics. In C. Emerson & M. Holquist (Trans.), *The dialogic imagination* (pp. 84-258). Austin: University of Texas Press.
- Bakhtin, M. M. (1981b). Discourse in the novel. In C. Emerson & M. Holquist (Trans.), *The dialogic imagination* (pp. 259-422). Austin: University of Texas Press.
- Balsamo, A. (1996). *Technologies of the gendered body: Reading cyborg women*. Durham: Duke University Press.
- Bamberg, M. (2009). Narrative analysis and identity research: a case for 'small stories' (paper submitted for publication in *Theory and Psychology*). Retrieved 9 July, 2009 from <http://www.clarku.edu/~mbamberg/publications.html>.

Bamberg, M. (2008). Twice-told tales: small story analysis and the process of identity formation. In T. Sugiman, K.J. Gergen, W. Wagner & Y. Yamada (Eds.), *Meaning in action* (pp. 183-204). New York: Springer.

Bamberg, M. (2004a). Considering counter narratives. In M. Bamberg & M. Andrews (Eds.), *Considering counter narratives: narrating, resisting, making sense* (pp. 351-371). Amsterdam: John Benjamins.

Bamberg, M. (2004b). Narrative discourse and identities. In J. C. Meister, T. Kindt, W. Schernus, & M. Stein (Eds.), *Narratology beyond literary criticism* (pp. 213-237). Berlin: Walter de Gruyter.

Bamberg, M., & Georgakopoulou, A. (2008). Small Stories as a new perspective in narrative and identity analysis. *Text & Talk*, 28(3), 377-396.

Barker, C., & Galasinski, D. (2001). *Cultural studies and discourse analysis*. London: Sage.

Bartky, S. L. (2003). Foucault, femininity and the modernisation of patriarchal power. In R. Weitz (Ed.), *The politics of women's bodies: sexuality, appearance, and behaviour* (pp. 25-46). New York: Oxford University Press.

Baudrillard, J. (1998). *The consumer society: Myths & structures*. London: Sage.

Bauman, Z. (2008). *The art of life*. Cambridge: Polity.

Bauman, Z. (2005). *Liquid Life*. Cambridge: Polity Press.

Bauman, Z. (2004). *Identity: Conversations with Benedetto Vecchi*. Cambridge: Polity Press.

Bauman, Z. (2003). *Liquid love: On the frailty of human bonds*. Cambridge: Polity Press.

Bauman, Z. (2001). *The individualized society*. Cambridge: Polity Press.

Bauman, Z. (2000). *Liquid modernity*. Cambridge: Polity Press.

Beck, U. (2001). *Was ist Globalisierung*. Frankfurt am Main: Suhrkamp.

Beck, U. (2000). *What is globalisation?*. Cambridge: Polity Press.

Beck, U. (1992). *Risk Society: Towards a new modernity*. London: Sage.

Bell, A., & Garrett, P. (2000). *Approaches to media discourse*. Oxford: Blackwell.

Biber, D., Conrad, S., & Reppen, R. (1998). *Corpus linguistics: Investigating language structure and use*. Cambridge: Cambridge University Press.

- Bignell, J. (2002). *Media Semiotics: An introduction*. Manchester: Manchester University Press.
- Black's medical dictionary* (2005). London: A & C Black.
- Blum, V. (2003). *Flesh wounds: The culture of cosmetic surgery*. Berkeley: University of California Press.
- Blum-Kulka, S. (2005). Modes of meaning-making in young children's conversational storytelling. In J. Thornborrow & J. Coates (Eds.), *The sociolinguistics of narrative* (pp. 149-170). Amsterdam: John Benjamins Publishing Company.
- Bordo, S. (2009). Twenty years in the twilight zone. In C. Heyes & M. Jones (Eds.), *Cosmetic surgery: A feminist primer* (, pp. 21-33). Farnham: Ashgate.
- Bordo, S. (1997). *Twilight zones: The hidden life of cultural images from Plato to O.J.*. Berkeley: University of California Press.
- Bordo, S. (1993). *Unbearable weight: Feminism, western culture and the body*. Berkeley: University of California Press.
- Borkenhagen, A. (2003). Pygmalions Töchter: Weibliche Selbstinszenierung mittels Schönheitschirurgie – Eine Studie mit dem digitalen Körperfoto-Test und qualitativen Interviewsequenzen an Brustreduktionspatientinnen. *Psychosozial*, 94(4), 45-53.
- Braun, V. (2009). Selling the “perfect” vulva. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 133-149). Farnham: Ashgate.
- Briggs, C. (Ed.). (1996). *Disorderly discourse: Narrative, conflict and inequality*. Oxford: Oxford University Press.
- Brooks, A. (2004). “Under the knife and proud of it:” an analysis of the normalisation of cosmetic surgery. *Critical Sociology*, 30(2), 207-239.
- Brooks, A. (1997). *Postfeminisms: Feminism, cultural theory and cultural forms*. London: Routledge.
- Bruni, F. (2004, January 17). Berlusconi plastic surgery claim. *The Age*. Retrieved from www.theage.com.au.
- Budgeon, S. (2003). Identity as an embodied event. *Body & Society*, 9(1), 35-55.
- Butler, J. (1993). *Bodies that matter*. New York: Routledge.
- Butler, J. (1990). *Gender trouble*. New York: Routledge.

- Cahill, A. (2003). Feminist pleasure and feminist beautification. *Hypatia*, 18(4), 42-64.
- Callow, J. (2005). Literacy and the visual: Broadening our vision. *English Teaching: Practice and Critique*, 4(1), 6-19.
- Carrington, V. (2005). Txting: the end of civilization (again)?. *Cambridge Journal of Education*, 35(2), 161-175.
- Cash, T. F., & Roy, R. E. (1999). Weight, gender and body images. In J. Sobal & D. Maurer (Eds.), *Interpreting weight: The social management of fatness and thinness* (pp. 209-228). Hawthorne: Aldine de Gruyter.
- Catalano, C. (2007, February 10). Board seeks tougher rules for plastic surgery ads. *The Age*, p. 9.
- Catalano, C. & Das, S. (2007, March 12). Doctors face tougher rules on cosmetic surgery ads. *The Age*, p. 1.
- Charles, S., & Lipovetsky, G. (2006). *Hypermodern times*. Cambridge: Polity Press.
- Chase, S. E. (2005). Narrative inquiry: multiple lenses, approaches, voices. In N.K. Denzin & Y.S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rd ed.) (pp. 651-680). London: Sage.
- Chen, N., & Moglen, H. (Eds.). (2007). *Bodies in the making: Transgressions and transformations*. Santa Cruz: New Pacific Press.
- Chouliaraki, L., & Fairclough, M. (1999). *Discourse in late modernity: Rethinking critical discourse analysis*. Edinburgh: Edinburgh University Press.
- Clarke, J. (2000). The sacrificial body of Orlan. In M. Featherstone (Ed.), *Body modification* (pp. 185-208). London: Sage.
- Cogan, J. C. (1999). Re-evaluating the weight-centred approach toward health: The need for a paradigm shift. In J. Sobal & D. Maurer (Eds.), *Interpreting weight: The social management of fatness and thinness* (pp. 229-253). Hawthorne: Aldine de Gruyter.
- Coleman, S. (2006). A defence of cosmetic surgery. In D. Benatar (Ed.) *Cutting to the core: Exploring the ethics of contested surgeries* (pp. 171-182). Lanham: Rowman & Littlefield.
- Cooke, G. (2008). Effacing the face: Botox and the anarchivic archive. *Body & Society*, 14(2), 23-38.
- Corneau, A. (Director) (2003). *Fear and Trembling* [Motion picture]. France: Canal+.

- Crossley, N. (2005). Mapping reflexive body techniques: on body modification and maintenance. *Body & Society*, 11(1), 1-35.
- Cushion, S. (2007). Protesting their apathy? An analysis of British press coverage of young anti-Iraq war protestors. *Journal of Youth Studies*, 10(4), 419-437.
- Darling-Wolf, F. (2003). Media, class, and Western influence in Japanese women's conceptions of attractiveness. *Feminist Media Studies*, 3(2), 153-170.
- Darling-Wolf, F. (2000). Texts in context: intertextuality, hybridity, and the negotiation of cultural identity in Japan. *Journal of Communication Inquiry*, 24(2), 134-155.
- Davies, B. (2000). *A body of writing 1990-1999*. Walnut Creek: AltaMira Press.
- Davis, K. (2009). Revisiting feminist debates on cosmetic surgery: some reflections on suffering, agency, and embodied difference. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 35-47). Farnham: Ashgate.
- Davis, K. (2007a). Reclaiming women's bodies: colonialist trope or critical epistemology?. In C. Shilling (Ed.), *Embodying sociology: Retrospect, progress and prospects* (pp. 50-64). Malden: Blackwell.
- Davis, K. (2007b). *The making of our bodies, ourselves: How feminism travels across borders*. Durham: Duke University Press.
- Davis, K. (2003). *Dubious equalities and embodied differences: Cultural studies on cosmetic surgery*. Lanham: Rowman & Littlefield Publishers.
- Davis, K. (1995). *Reshaping the female body*. London: Routledge.
- Davis, K. (1991). Remaking the she-devil: a critical look at feminist approaches to beauty. *Hypatia*, 6(2), 21-42.
- Decker, O. (2003). Vergötterte Körper. *Psychosozial*, 94(4), 13-23.
- Dorland's illustrated medical dictionary* (2003). Philadelphia: Saunders.
- Doyle, J., & Roen, K. (2008). Surgery and embodiment: carving out subjects. *Body & Society*, 149(1), 1-7.
- Duden, B., & Noers, D. (Eds.). (2002). *Auf den Spuren des Körpers in einer technogenen Welt*. Opladen: Leske + Budrich.
- Edmonds, A. (2009). "Engineering the erotic": aesthetic medicine and modernisation in Brazil. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 153-169). Farnham: Ashgate.

- Elliott, A. (2008). *Making the cut: How cosmetic surgery is transforming our lives*. London: Reaktion Books.
- Elliott, A. (2001). *Concepts of the self*. Cambridge: Polity.
- Elliott, A., & Ray, L. (Eds.). (2003). *Key contemporary social theorists*. Malden: Blackwell.
- Ettl, T. (2006). *Geschönte Körper – geschmähte Leiber: Psychoanalyse des Schönheitskultes*. Tübingen: edition diskord.
- Euler, S., Brähler, E., & Brosig, B. (2003) Das Dorian-Gray-Syndrom als „ethnische Störung“ der Spätmoderne. *Psychosozial*, 94(4), 73-87.
- Fairclough, N. (2006). *Language and globalization*. Abingdon: Routledge.
- Fairclough, N. (2003a). *Analysing discourse: Textual analysis for social research*. London: Routledge.
- Fairclough, N. (2003b). The contribution of discourse analysis to research on social change. In N. Fairclough, G. Cortese & P. Ardizzione (Eds.) *Discourse and contemporary social change* (pp. 25-48). Bern: Peter Lang.
- Fairclough, N. (2001). *Language and power*. Harlow: Longman.
- Fairclough, N. (1995). *Media discourse*. London: Arnold.
- Fairclough, N. (1992a). Discourse and text: linguistic and intertextual analysis within discourse analysis. *Discourse & Society*, 3(2), 193-217.
- Fairclough, N. (1992b). *Discourse and social change*. Cambridge: Polity.
- Fairclough, N. (1989). *Language and power*. London: Longman.
- Faludi, S. (1992). *Backlash: The undeclared war against women*. London: Vintage.
- Faulkner, J., & Williams, B. (2009). Riding critical and cultural boundaries: a multiliteracies approach to reading television sitcoms. In D. Pullen and D. Cole (Eds.) *Multiliteracies and technology enhanced education: social practice and the global classroom* (pp. 71-82). PA USA: IGI Global.
- Featherstone, M. (2000). Body modification: an introduction. In M. Featherstone (Ed.), *Body modification* (pp. 1-14). London: Sage.
- Featherstone, M. (1995). *Undoing culture*. London: Sage.
- Ferreter, L. (2006). *Louis Althusser*. Oxford: Routledge.
- Finkelstein, J. (1991). *The fashioned self*. Oxford: Polity.

- Fludernik, M. (2005). Histories of narrative theory (II): from structuralism to the present. In J. Phelan & P.J. Rabinowitz (Eds.), *A companion to narrative theory* (pp. 36-60). Malden: Blackwell.
- Flyvberg, B. (2006). Five misunderstandings about case study research. *Qualitative Inquiry*, 12(2), 219-245.
- Fowler, R., Hodge, R., Kress, G., & Trew, T. (1979). *Language and control*. London: Routledge & Kegan Paul.
- Fraser, S. (2009). Agency made over? Cosmetic surgery and femininity in women's magazines and makeover television. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 99-115). Farnham: Ashgate.
- Fraser, S. (2003). *Cosmetic surgery, gender and culture*. New York: Palgrave Macmillan.
- Freccero, C. (1999). *Popular culture: An introduction*. New York: New York University Press.
- Fukuyama, F. (1992). *The end of history and the last man*. New York: Free Press.
- Gatens, M. (1996). *Imaginary bodies: Ethics, power and corporeality*. London: Routledge.
- Gauntlett, D. (2002). *Media, gender and identity: An introduction*. London: Routledge.
- Gee, J. P. (1999). *An introduction to discourse analysis: Theory and method*. London: Routledge.
- George, A. L., & Bennett, A. (2005). *Case studies and theory development in the social sciences*. Cambridge, MA: MIT Press.
- Giddens, A. (1991). *Modernity and self-identity: Self and society in the late modern age*. Stanford: Stanford University Press.
- Gill, R. (2007). *Gender and the media*. Cambridge: Polity Press.
- Gillespie, M. A. (2003). Mirror, mirror. In R. Weitz (Ed.), *The politics of women's bodies: sexuality, appearance, and behaviour* (pp. 201-206). New York: Oxford University Press.
- Gilman, S. (1999). *Making the body beautiful: A cultural history of aesthetic surgery*. Princeton: Princeton University Press.
- Gimlin, D. (2007). Accounting for cosmetic surgery in the USA and Great Britain: a cross-cultural analysis of women's narratives. *Body & Society*, 13(1), 41-60.

- Gimlin, D. (2006). The absent body project: cosmetic surgery as a response to bodily dys-appearance. *Sociology*, 40(4), 699-716.
- Gimlin, D. (2000). Cosmetic surgery: beauty as commodity. *Qualitative Sociology*, 23(1), 77-98.
- Ginn, J., & Arber, S. (2002). Only connect: gender relations and ageing. In S. Arber & J. Ginn (Eds.), *Connecting gender & ageing: A sociological approach* (pp. 1-14). Buckingham: Open University Press.
- Godall, J. (1997). Whose body? Ethics and experiment and in art. *Artlink*, 17(2), 8, 10-15.
- Godall, J. (2000). An order of pure decision: un-natural selection in the work of Stelarc and Orlan. In M. Featherstone (Ed.), *Body modification* (pp. 149-171). London: Sage.
- Goffman, E. (1981). *Stigma: Notes on the management of spoiled identity*. Harmondsworth: Penguin.
- Goffman, E. (1979). *Gender advertisements*. London: Macmillan.
- Goffman, E. (1971). *The presentation of self in everyday life*. London: Penguin.
- Gough, A. (2003). Embodying a mine site: enacting cyborg curriculum. *Journal of Curriculum Theorizing*, 19, 33-47.
- Gough-Yates, A. (2003). *Understanding women's magazines: Publishing, markets and readerships*. London: Routledge.
- Grosz, E. (1995) *Space, time and perversion: Essays on the politics of bodies*, New York: Routledge.
- Grosz, E. (1994). *Volatile bodies: Toward a corporeal feminism*. Bloomington: Indiana University Press.
- Groupe Marie Claire (2009). *About the group: Editorial*. Retrieved from http://www.groupemarieclaire.com/gmc/57282-about_the_group/.
- Hachette Fujingaho (2009). *Marie Claire Japan*. Retrieved from <http://www.hfm.co.jp/product/marieclaire> (website no longer accessible; last accessed September 2009).
- Haiken, E. (1997). *Venus envy: A history of cosmetic surgery*. Baltimore: The John Hopkins University Press.
- Hall, S. (1997). The spectacle of the "other". In S. Hall (Ed.), *Representation: cultural representations and signifying practices* (pp. 223-291). London: Sage.

- Hall, S. (1996). New ethnicities. In D. Morley & K.-H. Chen (Eds.) *Stuart Hall: Critical dialogues in cultural studies* (pp. 441-450). London: Routledge.
- Hall, S. (1992). The question of cultural identity. In S. Hall, D. Held, & T. McGrew (Eds.), *Modernity and its futures* (pp. 273-326). Cambridge: Polity Press.
- Hall, S. (1980). Encoding/decoding. In S. Hall, D. Hobson, A. Lowe & P. Willis (Eds.), *Culture, media, language* (pp. 128-138). London: Hutchinson.
- Halliday, M.A.K. (1985). *An introduction to functional grammar*. London: Edward Arnold.
- Haraway, D. (1991). *Simians, cyborgs, and women: The reinvention of nature*. London: Free Association Books.
- Hardy, Marieke (2009, 2 July). Kissing off year's most vile show. Retrieved from <http://www.theage.com.au/news/entertainment/tv--radio/kissing-off-years-most-vile-show/2009/07/01/1246127569460.html>.
- Harkness, L. (2004). *The Australian guide to cosmetic surgery*. Port Melbourne: Coulomb Communications.
- Hearst Communications (2010a) *Cosmo Asia*. Retrieved from <http://www.cosmo.asia/r5/home.asp>.
- Hearst Corporation (2010b) *Cosmo Media Kit*. Retrieved from <http://www.cosmamediakit.com/r5/home.asp>.
- Hearst Corporation (2010c) *Marie Claire Media Kit*. Retrieved from <http://www.marieclairemk.com/r5/home.asp>.
- Hearst Corporation (2009) *Cosmopolitan*. Retrieved from <http://www.hearst.com/magazines/cosmopolitan.php>.
- Heyes, C. (2009). All cosmetic surgery is "ethnic": Asian eyelids, feminist indignation, and the politics of whiteness. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 191-205). Farnham: Ashgate.
- Heyes, C. (2007). Cosmetic surgery and the television makeover: a Foucauldian feminist reading. *Feminist Media Studies*, 7(1), 17-32.
- Heyes, C., & Jones, M. (2009). Cosmetic surgery in the age of gender. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 1-17). Farnham: Ashgate.
- Hodge, R., & Kress, G. (1988). *Social semiotics*. Cambridge: Polity.
- Honeycutt, K. (1999). Fat world/thin world: "Fat busters", "Equivocators", "Fat boosters", and the social construction of obesity. In J. Sobal & D. Maurer (Eds.),

- Interpreting weight: the social management of fatness and thinness* (pp. 165-181). Hawthorne: Aldine de Gruyter.
- Howie, M. (2004). The grammar of visual design in the English classroom. In W. Sawyer & E. Gold (Eds.) *Reviewing English in the 21st century* (pp. 269-271). Albert Park: Phoenix Education.
- Hussain, R. (2002). Cosmetic surgery history and health service use in midlife: women's health Australia. *The Medical Journal of Australia*, 176(12), 576-579.
- Intzidis, E., & Prevedourakis, G. (2008). An(other) enemy: the representation of otherness in video game culture. In N. Carpentier & E. Spinoy (Eds.) *Discourse theory and cultural analysis: Media, arts and literature* (pp. 209-223). Cresskill: Hampton Press.
- Japan Times (2009, July 1). *Japan's Marie Claire edition to end*. Retrieved from <http://search.japantimes.co.jp/cgi-bin/nn20090701b1.html>.
- Johnson, G. (2004). Reconceptualising the visual in narrative inquiry into teaching. *Teaching and Teacher Education*, 20, 423-434.
- Johnson, G. (2002). Using visual narrative and poststructuralism to (re)read a student teacher's professional practice. *Teaching and Teacher Education*, 18, 387-404.
- Johnson, G. (2001). A cautionary tale: a dialogic re-reading of a student teacher's visual narrative. *Narrative Inquiry*, 11(2), 451-478.
- Jones, M. (2009). Pygmalion's many faces. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 171-189). Farnham: Ashgate.
- Jones, M. (2008a). Makeover culture's dark side: breasts, death and Lolo Ferrari. *Body & Society*, 14(1), 89-104.
- Jones, M. (2008b). *Skintight: An anatomy of cosmetic surgery*. Oxford: Berg.
- Jones, M. (2004). Mutton cut up as lamb: mothers, daughters and cosmetic surgery. *Continuum: Journal of Media & Cultural Studies*, 18(4), 525-539.
- Kaw, E. (2003). Medicalisation of racial features: Asian-American women and cosmetic surgery. In R. Weitz (Ed.), *The politics of women's bodies: Sexuality, appearance and behaviour* (pp. 184-201). New York: Oxford University Press.
- Kaw, E. (1994). "Opening faces:" the politics of cosmetic surgery and Asian American women. In N. Sault (Ed.) *Many mirrors: Body image and social relations* (pp. 241-265). New Brunswick: Rutgers University Press.
- Kaw, E. (1993). Medicalisation of racial features: Asian-American women and cosmetic surgery. *Medical Anthropology Quarterly*, 7(1), 74-89.

Keating, M. C. (2005). The person in the doing: negotiating the experience of self. In D. Buton & K. Tusting (Eds.), *Beyond communities of practice: Language, power and social context* (pp. 105-139). New York: Cambridge University Press.

Keller, R. (2004). *Diskursforschung*. Wiesbaden: Verlag für Sozialwissenschaften.

Kellner, D. (1995). *Media culture: Cultural studies, identity and politics between the modern and the postmodern*. London: Routledge.

Kennedy, M. (2004). *A brief history of disease, science and medicine*. Mission Viejo: Asklepiad Press.

Klages, M. (2006). *Literary theory: A guide for the perplexed*. London: Continuum.

Klesse, C. (2000). Modern primitivism: non-mainstream body modification and racialised representation. In M. Featherstone (Ed.), *Body modification* (pp. 15-39). London: Sage.

Knight, P.G. (1997). Naming the problem: feminism and the figuration of conspiracy. *Cultural Studies*, 11(24), 40-63.

Kress, G. (2003). *Literacy in the new media age*. New York: Routledge.

Kress, G. (1997). *Before writing: rethinking the paths to literacy*. London: Routledge.

Kress, G. (1993). Against arbitrariness: the social production of the sign as a foundational issue in critical discourse analysis. *Discourse & Society*, 4(2), 169-191.

Kress, G., & Hodge, R. (1979). *Language as ideology*. London: Routledge & Kegan Paul.

Kress, G., & Van Leeuwen, T. (2006). *Reading images: The grammar of visual design* (2nd ed.). London: Routledge.

Kress, G., & Van Leeuwen, T. (2001). *Multimodal discourse: The modes and media of contemporary communication*. London: Arnold.

Kress, G., & Van Leeuwen, T. (1996). *Reading images: The grammar of visual design* (1st ed.). London: Routledge.

Kuczynski, A. (2006). *Beauty junkies: Inside our \$15 billion obsession with cosmetic surgery*. New York: Doubleday.

Kubisz, M. (2003). *Strategies of resistance: Body, identity and representation in Western culture*. Frankfurt (Main): Peter Lang.

Labov, W. (1977). *Language in the inner city: Studies in the black English vernacular*. Oxford: Basil Blackwell.

- Langellier, K. (1989). Personal narratives: perspectives on theory and research. *Text and Performance Quarterly*, 9, 243-276.
- Langman, L. (2003). Culture, identity and hegemony: the body in a global age. *Current sociology*, 51(3/4), 223-247.
- Lasch, C. (1979). *The culture of narcissism*. New York: Warner Books.
- Lemke, J. (1995). *Textual politics: Discourse and social dynamics*. London: Taylor & Francis.
- Lesesne, C. (2006). *Confessions of a Park Avenue plastic surgeon*. London: Harper Collins Entertainment.
- Lorber, J. (2003). Believing is seeing: biology as ideology. In R. Weitz (Ed.), *The politics of women's bodies: Sexuality, appearance and behaviour* (pp. 12-25). New York: Oxford University Press.
- Maalouf, A. (2000). *On identity*. London: The Harvill Press.
- Machin, D. (2007). *Introduction to multimodal analysis*. London: Hodder Arnold.
- Machin, D. & Van Leeuwen, T. (2007) *Global media discourse: a critical introduction*, Abingdon: Routledge.
- Machin, D., & Van Leeuwen, T. (2003). Global schemas and local discourses in Cosmopolitan. *Journal of Sociolinguistics*, 7(4), 493-512.
- Machin, D., & Thornborrow, J. (2003). Branding and discourse: the case of Cosmopolitan. *Discourse & Society*, 14(4), 453-471.
- Maisuria, A. (2005). Sexy words, iconic phrases and slippery terms – it's all newspaper talk: a theoretical analysis of the language used by the newspaper industry to manifest and perpetuate discourse. *Information for Social Change Journal*, 22, 38-65.
- Makoul, G., & Peer, L. (2004). Dissecting the doctor shows: a content analysis of *ER* and *Chicago Hope*. In L. D. Friedman (Ed.), *Cultural sutures: Medicine and media* (pp. 244-263). Durham: Duke University Press.
- Malmkjær, K. (Ed.) (2002). *The linguistics encyclopedia*. London: New York.
- Mansfield, A., & McGinn, B. (1993). Pumping irony: The muscular and the feminine. In S. Scott & D. Morgan (Eds.), *Body matters* (pp. 49-69). London: The Falmer Press.
- Mayring, P. (1983). *Qualitative Inhaltsanalyse*. Weilheim: Beltz.

- McCracken, E. (1993). *Decoding women's magazines from Mademoiselle to Ms.* New York: St Martin's Press.
- McRobbie, A. (1999). *In the culture society: Art, fashion and popular music.* Abingdon: Routledge.
- McRobbie, A. (1994). *Postmodernism and popular culture.* London: Routledge.
- McRobbie, A. (1991). *Feminism and youth culture: From 'Jackie' to 'Just Seventeen'.* Basingstoke: Macmillan.
- Medew, J. (2008, September 29). Call for ban on cosmetic procedures for teenagers. *The Age*, p.3.
- Meek, M. (1991). *On being literate.* London: Bodley Head.
- Menninghaus, W. (2003). *Das Versprechen der Schönheit.* Frankfurt am Main: Suhrkamp.
- Miller, L. (2003). Mammary mania in Japan. *Positions*, 11(2), 271-300.
- Miller, N. (2008, November 11). Cosmetic doctors risk fines over ads. *The Age*, p. 6.
- Mills, S. (2004). *Discourse.* London: Routledge
- Misson, R. (2007). *The Times, Time and the "Timeless": Current Dilemmas in Teaching Literature.* Keynote address for the Conference on English Education Colloquium Teaching Literature in an age of accountability, Multimodality and Critical Literacy NCTE Conference, New York, 19 November 2007.
- Misson, R. (2004). Questioning popular culture. In W. Sawyer & E. Gold (Eds.) *Reviewing English in the 21st century* (pp. 115-118). Albert Park: Phoenix Education.
- Misson, R. (1994). Every newsstand has them: teaching popular teenage magazines. In B. Corcoran, M. Hayhoe & G. M. Pradl (Eds.) *Knowledge in the making* (pp. 73-89). Portsmouth: Boynton/Cook Publishers.
- Mitchell, W. (1994). *Picture theory: Essays on verbal and visual representation.* Chicago: The University of Chicago Press.
- Morgan, D. (1993). You too can have a body like mine. In S. Scott & D. Morgan (Eds.), *Body matters* (pp. 69-89). London: The Falmer Press.
- Morgan, K. P. (2009). Women and the knife: cosmetic surgery and the colonisation of women's bodies. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 49-77). Farnham: Ashgate.

- Morgan, K. P. (1991). Women and the knife: cosmetic surgery and the colonisation of women's bodies. *Hypatia*, 6(3), 25-47.
- Morgan, W. (2004). Critical literacy. In W. Sawyer & E. Gold (Eds.) *Reviewing English in the 21st century* (pp. 103-114). Albert Park: Phoenix Education.
- Nash, M. (2009, February 22). Foreign Bodies: enticed by cut-price plastic surgery, Australian women are flying to Thailand for "mummy makeovers". *The Sunday Age Magazine*, pp. 16-17.
- Negrin, L. (2008). *Appearance and identity: Fashioning the body in postmodernity*. New York: Palgrave Macmillan.
- Negrin, L. (2002). Cosmetic surgery and the eclipse of identity. *Body & Society*, 8(4), 32-42.
- Nöth, W. (2000). *Handbuch der Semiotik*. Stuttgart: Metzler.
- Nothomb, A. (2004). *Fear and trembling*. London: Faber and Faber.
- Orbach, S. (2009). *Bodies*. London: Profile Books.
- Osterhammel, J., & Petersson, N. P. (2003). *Geschichte der Globalisierung: Dimensionen, Prozesse, Epochen*. Munich: C. H. Beck.
- The Oxford dictionary and thesaurus* (1995). Oxford: Oxford University Press.
- Pacific Magazines (2010). *Magazines*. Retrieved from <http://pacificmagazines.com.au/>.
- Pacific Magazines (2010). *Marie Claire*. Retrieved from <http://www.pacificmagazines.com.au/Pages/Magazines/Magazine.aspx?mid=c00aed e5-fc25-4ae8-9d7f-5b4689d112ff>.
- Patton, C., & Liesch, J. (2009). In your face. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 209-223). Farnham: Ashgate.
- Peacock, L. (2007, May 5-6). Cut-price deals. *The Weekend Australian*.
- Pitts-Taylor, V. (2007). *Surgery junkies: Wellness and pathology in cosmetic culture*. Piscataway: Rutgers University Press.
- Pitts-Taylor, V. (2006). *In the flesh: The cultural politics of body modification*. New York: Palgrave Macmillan.
- Pitts-Taylor, V. (2000). Body modification, self-mutilation and agency in media accounts of a subculture. In M. Featherstone (Ed.) *Body modification* (pp. 291-305). London: Sage.

- Postman, N. (1987). *Amusing ourselves to death*. London: Methuen.
- Probyn, E. (1991). This body which is not one: speaking an embodied self. *Hypathia*, 6(3), 111-124.
- Renfrow, D. G. (2004). A cartography of passing in everyday life. *Symbolic Interaction*, 27(4), 485-506.
- Robertson, R. (1995). Glocalisation: time-space and homogeneity-heterogeneity. In M. Featherstone, S. Lash & R. Robertson (Eds.) *Global modernities* (pp. 1-25). London: Sage.
- Said, E. (2003). *Orientalism*. London: Penguin.
- Sassatelli, R. (2000). Interaction order and beyond: a field of analysis of body culture within fitness gyms. In M. Featherstone (Ed.) *Body modification* (pp. 227-249). London: Sage.
- Sault, N. (Ed.). (1994). *Many mirrors: Body image and social relations*. New Brunswick: Rutgers University Press.
- Scholes, R. (1987). Textuality: power and pleasure. *English Education*, 19(2), 69-82.
- Schroer, M. (2005). *Soziologie des Körpers*. Frankfurt am Main: Suhrkamp.
- Seid, R. P. (1989). *Never too thin: Why women are at war with their bodies*. New York: Prentice Hall Press.
- Shields, C. M. (2007). *Bakhtin*. New York: Peter Lang.
- Shilling, C. (2007). Sociology and the body: classical traditions and new agendas. In C. Shilling (Ed.), *Embodying sociology: retrospect, progress and prospects* (pp. 1-18). Malden: Blackwell.
- Shilling, C. (2003). *The body and social theory* (2nd ed.). London: Sage.
- Shilling, C. (1993). *The body and social theory* (1st ed.). London: Sage.
- Silent Era (2008). *What price beauty?*. Retrieved from <http://www.silentera.com/PSFL/data/W/WhatPriceBeauty1925.html>.
- Simons, H. (2009). *Case study research in practice*. London: Sage.
- Smith, E. O. (2002). *When culture and biology collide: Why we are stressed, depressed, and self-obsessed*. New Brunswick: Rutgers University Press.
- Sobal, J., Bove, C., & Rauschenbach, B. (1999). Weight and weddings: the social construction of beautiful brides. In J. Sobal & D. Maurer (Eds.) *Interpreting weight:*

The social management of fatness and thinness (pp. 113-135). Hawthorne: Aldine de Gruyter.

Sony Music Entertainment (2010). *Jennifer Lopez* [Official website]. Retrieved from <http://www.jenniferlopez.com/>.

Stirn, A. (2003). Körperkunst und Körpermodifikation: Interkulturelle Zusammenhänge eines Phänomens. *Psychosozial*, 94(4), 7-11.

Stephens, J. (2004). Visual literacy – enabling and promoting critical viewing. In W. Sawyer & E. Gold (Eds.) *Reviewing English in the 21st century* (pp. 253-261). Albert Park: Phoenix Education.

Stokes, F. (2008). *Botchulism* [Web log]. Retrieved from <http://botchulism.blogspot.com>.

Summers, A. (2003). *The end of equality*. Sydney: Random House.

Talbot, M. (1992). The construction of gender in a teenage magazine. In N. Fairclough (Ed.), *Critical language awareness* (pp. 174-201). London: Longman.

Thomas, L., Wareing, S., Singh, I., Peccei, J. S., Thornborrow, J., & Jones, J. (1999). *Language, society and power: An introduction*. London: Routledge.

Thornborrow, J., & Coates, J. (2005). The sociolinguistics of narrative: identity, performance, culture. In: J. Thornborrow & J. Coates (Eds.) *The sociolinguistics of narrative* (pp. 1-16). Amsterdam: John Benjamins Publishing Company.

Tong, R., & Lindemann, L. (2006). Beauty under the knife: a feminist appraisal of cosmetic surgery. In D. Benatar (Ed.) *Cutting to the core: exploring the ethics of contested surgeries* (pp. 183-193). Lanham: Rowman & Littlefield.

Turner, B. S. (1996). *The body & society: Explorations in social theory*. London: Sage.

Turner, B. S. (1992). *Regulating bodies: Essays in medical sociology*. London: Routledge.

Tusting, K. (2005). Language and power in communities of practice. In D. Barton & K. Tusting (Eds.) *Beyond communities of practice: Language, power and social context* (pp. 36-55). Cambridge: Cambridge University Press.

Unsworth, L. (Ed.) (2008). *Multimodal semiotics: Functional analysis in contexts of education*. London: Continuum.

Unsworth, L. (2001). *Teaching multiliteracies across the curriculum: Changing contexts of text and image in classroom practice*. Buckingham: Open University Press.

- Van Dijk, T. A. (Ed.). (1997a). *Discourse as structure and process*. London: Sage.
- Van Dijk, T. A. (Ed.). (1997b). *Discourse as social interaction*. London: Sage.
- Van Dijk, T. A. (1993). Principles of critical discourse analysis. *Discourse & Society*, 4(2), 249-283.
- Van Leeuwen, T. (2008) *Discourse and practice: New tools for critical discourse analysis*, Oxford: Oxford University Press.
- Van Leeuwen, T. (2004) 'Ten reasons why linguists should pay attention to visual communication', in P. LeVine & R. Scollon (eds.), *Discourse and technology: multimodal discourse analysis*, Washington, D. C.: Georgetown University Press, pp. 7-20.
- Van Leeuwen, T. (1993) 'Genre and field in critical discourse analysis: a synopsis', *Discourse & Society*, 4(2), pp. 193-223.
- Van Leeuwen, T. & Jewitt, C. (2001) (eds.) *Handbook of visual analysis*, London: Sage.
- VH1 (2010). *Jessica Simpson's The Price of Beauty*. Retrieved from http://www.vh1.com/shows/jessica_simpson_the_price_of_beauty/series.jhtml
- Victorian Curriculum and Assessment Authority (2006). *Victorian Certificate of Education Study Design English and English as a Second Language*. East Melbourne: Victorian Curriculum and Assessment Authority.
- Victorian Curriculum and Assessment Authority (2005). *Victorian Certificate of Education Study Design English Language*. East Melbourne: Victorian Curriculum and Assessment Authority.
- Victorian Curriculum and Assessment Authority (2003). *Victorian Certificate of Education Study Design Media*. East Melbourne: Victorian Curriculum and Assessment Authority.
- Walters, M. (2001). *Globalisation*. London: Routledge.
- Weedon, C. (1997). *Feminist practice and poststructuralist theory*. Oxford: Blackwell.
- Weiss, D., & Kukla, R. (2009). The "natural look": Extreme makeover and the limits of self-fashioning. In C. Heyes & M. Jones (Eds.) *Cosmetic surgery: A feminist primer* (pp. 117-131). Farnham: Ashgate.
- Weitz, R. (2003a). A history of women's bodies. In R. Weitz (Ed.) *The politics of women's bodies: Sexuality, appearance, and behaviour* (pp. 3-12). New York: Oxford University Press.

Weitz, R. (2003b). Women and their hair: Seeking power through resistance and accommodation. In R. Weitz (Ed.) *The politics of women's bodies: Sexuality, appearance, and behaviour* (pp. 135-152). New York: Oxford University Press.

Wolf, N. (1990). *The beauty myth*. London: Chatto & Windus.

Woodward, J. (2006). Cosmetic eyelid surgery. In S. Fekrat & J. Weizer (2006) (Eds.), *All about your eyes: a practical guide in plain English from the physicians at the Duke University Eye Center* (pp. 169-172). Durham: Duke University Press.

Yin, R. (2003a). *Case study research: Design and methods* (3rd ed.). Thousand Oaks: Sage.

Yin, R. (2003b). *Applications of case study research* (2nd ed.). Thousand Oaks: Sage.

Young, I. M. (2003). Breasted experience: the look and the feeling. In R. Weitz (Ed.) *The politics of women's bodies: Sexuality, appearance, and behaviour* (pp. 152-164). New York: Oxford University Press.

Young, I. M. (1991). *"Throwing like a girl" and other essays in feminist philosophy and social theory*. Bloomington: Indiana University Press.

Appendix 1: The Data Corpus

All articles of journalistic content gathered about cosmetic surgery from editions of *Cosmopolitan* and *Marie Claire* published in Australia, Germany and Japan between 1995 and 2003

The tables show the code assigned for each article, the edition in which the article was published and the title of the article. For German and Japanese articles, the English translation of the title has been added in square brackets.

The coding system I devised uses ‘C’ (*Cosmopolitan*) and ‘MC’ (*Marie Claire*) to denote the magazine, and ‘A’ (Australia), ‘G’ (Germany) and ‘J’ (Japan) to denote the country of publication.

Articles are numbered chronologically, with ‘1’ assigned to the first article published between 1995 and 2003. The numbers contained in the code do not imply any form of hierarchy and serve no other purpose than to assign a unique code to each article.

1. *Cosmopolitan* Australia

Code	Edition	Title
C.A1	1996/07	Cosmetic surgery special. The cutting edge.
C.A2	1996/07	Cosmetic surgery special. “I’ve had eleven operations.”
C.A3	1996/07	Cosmetic surgery special. Knifestyles of the rich and famous.
C.A4	1996/09	Cut it out! (Letter to the editor responding to ‘The cutting edge’)
C.A5	1997/03	Diary of a liposuction.
C.A6	1997/06	Men who have cosmetic surgery: Would you respect him in the morning?
C.A7	1997/06	The ups & downs of living with big breasts.
C.A8	1997/08	A weight off my mind. (Letter to the editor responding to ‘The ups & downs of living with

		big breasts')
C.A9	1997/08	Get real. (Letter to the editor responding to 'The ups & downs of living with big breasts')
C.A10	1997/11	Lights, camera, liposuction!
C.A11	1998/05	Genital makeovers. Plastic surgery of pleasure.
C.A12	1998/05	Genital makeovers. Boys' toys. Phalloplasty.
C.A13	1998/11	Fake vs. Real.
C.A14	1999/05	Pump it up! Women who want to look like Dannii, Pammy, Cindy ...
C.A15	1999/07	"I paid for her boob job, then she dumped me"
C.A16	1999/07	Bad-taste breasts (Letter to the editor responding to 'Pump it up!')
C.A17	1999/09	Obligation-free boobs (Letter to the editor responding to "I paid for my girlfriend's new breasts, then she dumped me.")
C.A18	1999/12	Breast defence (Letter to the editor responding to the October issue, in which Pamela Anderson's breasts were described as "ridiculous".)
C.A19	2000/11	Death by plastic surgery.
C.A20	2000/12	Want a boob job? Read this first.
C.A21	2001/04	Can you pick the boob job?
C.A22	2001/07	Only in America. Wacko things women do to their bodies.
C.A23	2001/11	Do you take this woman (and her new breasts) to be your wife?
C.A24	2002/05	Got breasts? You need to read this.
C.A25	2003/01	The breast test: how well do you know boobs?
C.A26	2003/03	Real breast test (Letter to the editor responding to "The breast test")
C.A27	2003/08	Do you need a smile makeover?
C.A28	2003/08	When plastic surgeons say NO.
C.A29	2003/11	Would you get a boob job for your boyfriend?

2. *Cosmopolitan* Germany

Code	Edition	Title
C.G1	1996/01	Lift & Laser - das neue Make-up? [Lift & laser – the new make-up?]
C.G2	1996/01	Sind Sie der Typ für eine Schönheitsoperation? [Are you the type for cosmetic surgery?]
C.G3	1995/11	Lebensabschnitte. [Chapters in one's life.]
C.G4	1997/05	Lasern oder lasern lassen? [To laser or to have it lasered?]
C.G5	1997/09	Medizinfragen (Ich wünsche mir größere Brüste). [Medical questions (I would like to have bigger breasts).]
C.G6	1998/04	Wer schön sein will, muß schneiden? [Those who want to be beautiful, must cut?]
C.G7	1998/05	„Dr. Esther Maué antwortet“ in Nr. 2/98. [“Dr. Esther Maué responds” in No. 2/98.] (Letter to the editor)
C.G8	1998/12	Dr. Esther Maué antwortet. Ich denke seit Jahren darüber nach, mir meine Brüste vergrößern zu lassen. [Dr. Esther Maué responds. For years I have been thinking about having my breasts enlarged.]
C.G9	1999/05	Größer ... straffer ... schöner! [Bigger ... firmer ... nicer!]
C.G10	2000/06	Bin ich schön? [Am I beautiful?]
C.G11	2001/04	Wie ein Filmstar. Hits, news und trends der ästhetischen Zahnmedizin. [Like a movie star. Hits, news and trends of aesthetic dentistry.]
C.G12	2001/04	Design am Bein. [Design on the leg.]
C.G13	2002/11	So wirkt Botox. [That's how botox works.]
C.G14	2003/04	Störend Körperhaare dauerhaft entfernen – mit der Lichtepilation rückt dieser Traum vieler Frauen ein großes Stück näher. [Permanent removal of annoying body hair – with light epilation, this dream of many women is coming closer.]
C.G15	2003/11	Strahlend schön – so geht's! [Glowingly beautiful – that's the way it goes!]

3. *Cosmopolitan Japan*

Code	Edition	Title
C.J1	1996/10	USA. Wakaku, kirei de itai. Biyou seikei wa mohaya joushiki? [USA. I would like to stay young and beautiful. Is cosmetic surgery already common knowledge?]
C.J2	1998/02	Shiritai!! Biyouseikei no subete. [I want to know!! All about cosmetic surgery.] Biyouseikei ni tsuite hontou no koto o oshiete! [Tell me the truth about cosmetic surgery!]
C.J3	1998/02	Shiritai!! Biyouseikei no subete. [I want to know!! All about cosmetic surgery.] Biyouseikei shujutsu ukeru mae ni shikkari chekku shite! Koko ga seikou to shippai no wakaremichi. [Before you undergo cosmetic surgery, check carefully! Here are the crossroads between success and failure.]
C.J4	1998/02	Shiritai!! Biyouseikei no subete. [I want to know!! All about cosmetic surgery.] Buibetsu/jissai no shujutsu wa kou okonawareru. [That's how partial operations actually take place.]
C.J5	1998/02	Biyouseieki shujutsu no taikensha ga honne de kataru seikou & shippai ki. Biyouseikei shujutsu de watashi wa kou kawatta! [People who know cosmetic surgery operations from their own experience truthfully tell the successes and failures. A report. With cosmetic surgery operations, this is how I've changed!]
C.J6	1998/10	Utsukushii ha o te ni irete mezase! Sumairu byuutii. [Get beautiful teeth. Aim at smile beauty!]
C.J7	1998/10	Chikagoro uwasa no shinbi shikatte nani suro tokoro? [The recent talk about cosmetic dentistry, what does it actually do?]
C.J8	2000/12	Igaku no chikara de nayami o kaiketsu suru. [Solve troubles with the power of medicine.]
C.J9	2002/12	Saishin iryou no waza de, compurekusu ga gekiteki ni kaishou dekiru. [With the technique of the latest medicine, complexes can be solved dramatically.]
C.J10	2001/03	Biyou raitaa ga taiatari ripooto shimasu. Itte kimashita, byuutii kurinikku!! [The beauty writer reports.... I have been to the beauty clinic!!]

4. Marie Claire Australia

Code	Edition	Title
MC.A1	1995/09	What price beauty?
MC.A2	1996/05	Pecs appeal: why men are the new cosmetic surgery junkies.
MC.A3	1997/02	Cosmetic surgery: the new technology.
MC.A4	1998/01	The doctor who rebuilt his family.
MC.A5	1998/02	Lunchtime lifts.
MC.A6	1998/04	Fair treatment (Letter to the editor responding to "Lunchtime lifts")
MC.A7	1998/07	Change the way you age.
MC.A8	1998/11	Nip and tuck tourism.
MC.A9	2000/07	What works & what hurts.
MC.A10	2000/10	Can you guess what's fake?
MC.A11	2000/10	Cosmetic confusion (Letter to the editor responding to "What works and what hurts")
MC.A12	2000/12	Is this the new face of China?
MC.A13	2000/12	Faking it. (Letter to the editor responding to "Can you guess what's fake?")
MC.A14	2001/03	Ferrari: Death by plastic surgery.
MC.A15	2001/05	Cosmetic cowboys.
MC.A16	2001/05	Marie Claire cosmetic surgery campaign.
MC.A17	2001/06	Body beautiful? (Letter to the editor responding to "Lolo Ferrari: Death by plastic surgery")
MC.A18	2001/07	The A-Z of anti-ageing
MC.A19	2001/07	Beauty at a cost (1) (Letter to the editor responding to "Cosmetic Cowboys")
MC.A20	2001/07	Beauty at a cost (2) (Letter to the editor responding to "Cosmetic Cowboys")
MC.A21	2002/04	Growing pains: Going to extreme lengths to be tall.

MC.A22	2002/08	Younger skin at every price.
MC.A23	2003/03	Doctor of Deceit.
MC.A24	2003/04	Beauty killers of New York.
MC.A25	2003/05	No regrets. (Letter to the editor responding to “Doctor of Deceit”)
MC.A26	2003/06	Fastfixes. “Lunchtime” surgery may be on the rise, but is it for you?

5. Marie Claire Germany

Code	Edition	Title
MC.G1	1995/07	So schön kann doch kein Mann sein... [A man can't possibly be so handsome...]
MC.G2	1995/09	...die große Lösung. [... the big solution.]
MC.G3	1996/04	Cher.
MC.G4	1996/07	Wie Töchter ihre neuen Mütter sehen. [How daughters see their new mothers.]
MC.G5	1996/10	Kleine Schnitte. [Little cuts.]
MC.G6	1997/01	Hotline Schönheitsoperationen - die häufigsten Fragen. [Cosmetic surgery hotline – the most frequently asked questions.]
MC.G7	1999/06	„Manchmal schäme ich mich für meine Zunft“ [“Sometimes I feel ashamed of my guild.”]
MC.G8	1999/09	Operation schöner Mann. Jetzt sind die Kerle dran. [Operation handsome man. Now it is the guys’ turn.]
MC.G9	1999/09	Umfrage: „Würden Sie sich für die Schönheit unters Messer legen?“ [Survey: “Would you go under the knife for beauty?”]
MC.G10	1999/11	Lifting per Laser. [Lifting by laser.]
MC.G11	2000/05	Gänsehaut im OP. [Goosebumps in the operating theatre.]
MC.G12	2000/10	„Nie wieder Brille!“ [“Never again glasses!”]
MC.G13	2001/08	Die Revolution der kleinen Nasen. [The revolution of the small noses.]
MC.G14	2001/09	Messerscharfer Protest (1) [Razor-sharp protest] (Letter to the editor responding to “The

		revolution of the small noses.”)
MC.G15	2001/09	Messerscharfer Protest (2) [Razor-sharp protest] (Letter to the editor responding to “The revolution of the small noses.”)
MC.G16	2002/10	Die Fabrik der langen Beine. [The factory of long legs.]

6. Marie Claire Japan

Code	Edition	Title
MC.J1	1998/12	Shiwa ni wa koraagen?! Gendai biyou no jijou o saguru. [Collagen for wrinkles? Exploring the circumstances of modern beauty.]
MC.J2	2001/02	What’s happen in the world of beauty. Saishin biyou no shinjitsu. Dai kyuu kai. Puchi seikei (hiaruronsan chuushahen) [The truth about the latest beauty. No. 9. Puchi seikei (a chapter on hyaluron acid injections.)]
MC.J3	2001/03	What’s happen in the world of beauty. Saishin biyou no shinjitsu. Dai jukkai. Puchi seikei (botsurinusukin no maki) [The truth about the latest beauty. No. 10. Puchi seikei (a volume on the botulinum bacillus.)]
MC.J4	2001/05	What’s happen in the world of beauty. Saishin biyou no shinjitsu. Dai juuni kai. Foto feisharu. [The truth about the latest beauty. No. 12. Photo facial.]
MC.J5	2001/08	What’s happen in the world of beauty. Saishin biyou no shinjitsu. Dai juugo kai. Keana bakuhatsu. [The truth about the latest beauty. No. 15. Explosion of pores.]
MC.J6	1998/09	What’s happen in the world of beauty. Saishin biyou no shinjitsu. Dai juurokkai. Enu raito. [The truth about the latest beauty. No. 16. N-Light.]
MC.J7	2002/01	Jotai kaitai shinsho. Hiaruronsan houkyou. [A new book on taking the female body apart. Breast enlargement with hyaluronic acid.]
MC.J8	2002/02	Jotai kaitai shinsho. Kyokubu kurisutaru piiringu. [A new book on taking the female body apart. Local crystal peeling.]
MC.J9	2002/03	Jotai kaitai shinsho. Puchi seikei saishinhan. Hito koraagen. [A new book on taking the female body apart. The latest edition

		on puchi seikei. Collagen on people.]
MC.J10	2002/08	Jotai kaitai shinsho. Seruraito jokyo reezaa. [A new book on taking the female body apart. Cellulite-removing laser.]
MC.J11	2003/07	Botokusu. Saizensen 2003. Botokusu paati o shitte imasuka? [Botox. Forefront 2003. Do you know about botox parties?]
MC.J12	2003/07	Botokusu. Saizensen 2003. Manzoko? Fumanzoko? [Botox. Forefront 2003. Content? Not content?]
MC.J13	2003/07	Botokusu. Saizensen 2003. Nichifutsu no biyou dokutaa ni kiku botokusu no genjou to inshou. [Botox. Forefront 2003. We ask Japanese and French beauty doctors about the present condition and impression of botox.]
MC.J14	2003/08	Seruraito bokumetsu sengen. [A declaration of the destruction of cellulite.]

Appendix 2: Permission to reprint articles

For Chapter 5: *When plastic surgeons say NO (Cosmopolitan Australia, August 2003).*

Von: "Hayes, Elizabeth" <EHayes@acpmagazines.com.au>

An: "michiko.weinmann@daad-alumni.de" <michiko.weinmann@daad-alumni.de>

opie:

Betreff: RE: Permission to reprint article

Datum: 07.07.2009 04:18:52

Hi Michiko,

This is fine, as long as you are simply reprinting the article as is then there's no problem.
Do you need me to send you the pages to use?

Cheers,
-Lizzie

Elizabeth Hayes
ACP Magazines
Syndication Department
Ph. 02 8267 9565

-----Original Message-----

From: michiko.weinmann@daad-alumni.de [mailto:michiko.weinmann@daad-alumni.de]

Sent: Tuesday, 7 July 2009 11:41 AM

To: Hayes, Elizabeth

Subject: Permission to reprint article

To whom it may concern

Dear Ms Hayes,

I am writing to seek permission to reprint the article, "When plastic surgeons say NO", published in *Cosmopolitan* in the August 2003 issue.

I am a PhD student in the School of Education at RMIT University, Melbourne, and my research explores the representations of cosmetic surgery in articles published in women's magazines in Australia, Germany and Japan.

The article will solely be used for research purposes related to my thesis, and there is no commercial gain or interest involved in any way.

If you have any further concerns, please contact my PhD supervisor Dr. Julie Faulkner at julie.faulkner@rmit.edu.au, or myself at michiko.weinmann@daad-alumni.de.

I have a deadline to complete my thesis and therefore would appreciate a reply at your earliest possible convenience. Thank you in anticipation.

Yours sincerely,
Michiko Weinmann

For Chapter 6: *Shiritai!! Biyouseikei no subete* (Cosmopolitan Japan, February 1998).

記事転載許可証

TO MIS. MICHIKO WEINMANN

下記の、弊社刊行物の一部につきまして、貴方の学位論文への転載を許可いたします。

誌名：COSMOPOLITAN 日本版 1998年2月号
記事：「知りたい美容整形のすべて」

上記、掲載の際には、掲載誌名、社名のクレジットを明記してください。

また、商業目的にご使用の際には、別途申請をお願いいたします。

2009年10月29日

(株)集英社

〒101-8050

東京都千代田区一ツ橋2-5-10



Permission to Reprint

This is to certify that we grant permission to:

Ms Michiko Weinmann

*to reproduce the following article as part of her
doctoral thesis :*

**'All you need to know about cosmetic surgery',
Cosmopolitan (Japan), February 1998**

Please clearly acknowledge the magazine and company
when reprinting this article.

A separate application must be made if the article is to
be used for commercial purposes .



29 October 2009

**Shueisha Publishing Co Ltd
2-5-10 Hitotsubashi, Chiyoda-ku
Tokyo 101-8050**

For Chapter 7: Growing pains: Going to extreme lengths to be tall (*Marie Claire* Australia, April 2002) and **Die Fabrik der langen Beine** [The factory of long legs] (*Marie Claire* Germany, October 2002).

and

For Chapter 8: Die Revolution der kleinen Nasen [The revolution of the small noses] (*Marie Claire* Germany, August 2001)

Von: Lulu Dougherty <Lulu.Dougherty@pacificmags.com.au>
An: michiko.weinmann@daad-alumni.de

Betreff: Fwd: Permission to reprint article
Datum: 03.08.2009 02:33:51

Dear Michiko,

Please feel free to use the article for your research. Unfortunately, we don't have electronic versions of issues before 2005, so here is colour scan, hopefully it might better than what you have now.

Good luck with your thesis.

Regards,
Lulu

Lulu Dougherty
Production & Syndication Editor
marie claire
Ph: 02 9464 3520
Mob: 0419 297 369
lulu.dougherty@pacificmags.com.au

----- Weitergeleitete Nachricht von michiko.weinmann@daad-alumni.de -----
Datum: Thu, 16 Jul 2009 08:33:23 +0200
Von: michiko.weinmann@daad-alumni.de
Antwort an: michiko.weinmann@daad-alumni.de
Betreff: Permission to reprint article
An: felicity.robinson@pacificmags.com.au

Dear Felicity,

I am writing to seek permission to reprint the article, "When plastic surgeons say NO", published in Cosmopolitan in the August 2003 issue.

I am a PhD student in the School of Education at RMIT University, Melbourne, and my research explores the representations of cosmetic surgery in articles published in women's magazines in Australia, Germany and Japan.

The article will solely be used for research purposes related to my thesis, and there is no

commercial gain or interest involved in any way. If you have any further concerns, please contact my PhD supervisor Dr. Julie Faulkner at julie.faulkner@rmit.edu.au, or myself at michiko.weinmann@daad-alumni.de.

I have a deadline to complete my thesis and therefore would appreciate a reply at your earliest possible convenience. Thank you in anticipation.

Yours sincerely,
Michiko Weinmann

Von: "Sachau, Ivonne" <sachau.ivonne@guj.de>
An: <michiko.weinmann@daad-alumni.de>
Kopie:
Betreff: AW: Abdruck eines Marie Claire Artikels in Doktorarbeit
Datum: 06.07.2009 15:29:37
Liebe Frau Weinmann,

herzlichen Dank für Ihre E-Mail.

Wir haben Ihre Anfrage geprüft und von den zuständigen Kollegen folgendes Feedback bzgl. der Reproduktion der u. g. Marie Claire Artikel erhalten:

Mit dem genauen Quellenhinweis auf die jeweilige Ausgabe können Sie die Artikel gern verwenden.

Für weitere Fragen stehen wir Ihnen selbstverständlich jederzeit zur Verfügung.

Viel Glück & Erfolg für Ihre Doktorarbeit!

Freundliche Grüße,
Ivonne Sachau

-----Ursprüngliche Nachricht-----

Von: michiko.weinmann@daad-alumni.de [mailto:michiko.weinmann@daad-alumni.de]
Gesendet: Montag, 6. Juli 2009 13:09
An: Sachau, Ivonne
Betreff: Abdruck eines Marie Claire Artikels in Doktorarbeit

Sehr geehrte Frau Sachau,
bevor ich es auf die lange Bank schiebe, schreibe ich Ihnen am besten sofort eine Email.

Wie am Telefon kurz erläutert, promoviere ich an der RMIT-Universität in Melbourne (Australien) über das Thema "Repräsentationen von Schönheitsoperationen in Artikeln in Frauenzeitschriften in Australien, Deutschland und Japan".

Für meine Analysen habe ich zwei Marie Claire-Artikel herangezogen:

- Die Revolution der kleinen Nasen (August 2001) und
- Die Fabrik der langen Beine (Oktober 2003).

Für eine bessere Nachvollziehbarkeit meiner Argumentation würde ich die Artikel gerne in Anhang meiner Arbeit abdrucken. Dazu wäre ich Ihnen sehr verbunden, wenn Sie entweder diese Artikeln noch elektronisch vorliegen hätten und mir per Email zukommen lassen könnten, oder

mir schriftlich die Genehmigung, die Artikel zu reproduzieren (ich habe die Artikel in der Bayerischen Staatsbibliothek München ausfindig gemacht und kopiert), erteilen könnten.

Die Artikel werden selbstverständlich nur für rein akademische Zwecke und im Rahmen meiner Dissertation verwendet und abgedruckt.

Falls Sie noch genauere Details benötigen sollten, so können Sie mich jederzeit unter oben angegebener Emailadresse erreichen, oder meine Betreuerin unter julie.faulkner@rmit.edu.au kontaktieren.

Für eine baldige Antwort wäre ich Ihnen sehr verbunden.
Ich bedanke mich im Voraus herzlich für Ihre Bemühungen und verbleibe mit freundlichen Grüßen

Michiko Weinmann

----- Original message -----

Date: Mon, 6 Jul 2009 15:29:37 +0200

From: "Sachau, Ivonne" <sachau.ivonne@gui.de>

To: michiko.weinmann@daad-alumni.de

Subject: FW: Reprint of a Marie Claire article in PhD thesis

Dear Ms. Weinmann,

Thank you very much for your email.

We have assessed your request, and we have received the following feedback from the relevant colleagues in regards to the reproduction of the below-mentioned Marie Claire articles:

You are welcome to utilise the articles with the exact reference to the edition that they are sourced from.

Please do not hesitate to contact us if you have any further questions.

Good luck & success for your PhD thesis!

Yours sincerely,
Ivonne Sachau

Certified translation from the German language.
Melanie Friedlander, NAATI accredited translator,
no. 45816, of Hampton VIC 3188, Australia. 18.10.2009



----- Original message -----

From: michiko.weinmann@daad-alumni.de [mailto: michiko.weinmann@daad-alumni.de]

Sent: Monday, 6 July 2009 13:09

To: Sachau, Ivonne

Subject: Reprint of a Marie Claire article in PhD thesis

Dear Ms. Sachau,

Rather than delay, I am sending an email to you straight away.

As I briefly explained on the phone, I am currently completing a PhD degree at the RMIT University in Melbourne (Australia) on the topic "The Representation of Plastic Surgery in Articles in Women's Magazines from Australia, Germany, and Japan".

For my analysis, I have used two Marie Claire articles:

- The Revolution of the Small Noses (August 2001) and
- The Factory of Long Legs (October 2003).

To be better able to follow my argumentation, I would like to reproduce these articles in the appendix of my thesis. For this purpose I would greatly appreciate if you could either email these articles to me, in case that you still have them in electronic form, or give me the written permission to reproduce the articles (I have found copies of them at the Bavarian State Library in Munich).

The articles will naturally only be used and reprinted for academic purposes within the context of my research thesis.

If you require further information, you can contact me at any time at the above email address, or you can contact my supervisor at julie.faulkner@rmit.edu.au.

I look forward to receiving your reply soon.
Thank you in advance for your efforts.

Yours sincerely,

Michiko Weinmann

Certified translation from the German language.
Melanie Friedlander, NAATI accredited translator,
no. 45816, of Hampton VIC 3188, Australia. 18.10.2009

