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UNIVERSITY OF OKLAHOMA

GRADUATE COLLEGE

FEMALE FEAR: THE BODY, GENDER, AND THE BURDENS OF BEAUTY

A Dissertation

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

By

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Norman, Oklahoma

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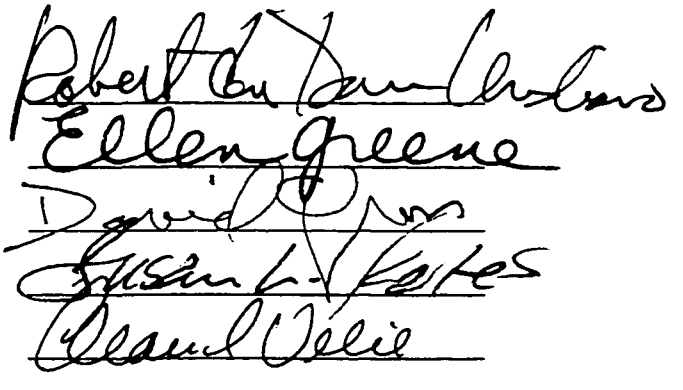
DEPARTMENT OF ENGLISH

BY



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Introduction

This project began as a study of the growing popularity of salon tanning. In that project, I was faced with the not surprising, but certainly unsettling, notion that many young women fear their natural bodies, insisting that the body is only socially presentable in a processed and artificial state. Through cultural theory and some ethnographic research, I was able to address the ways that these young women altered their self-images through tanning, but I was not able to understand why they so readily accepted tanned skin as more attractive than pale skin. The young women in that study, like many women, were attempting to conform to projected images of the ideal female body that pertain to this culture. Certainly, few women are physically capable of achieving our society's highly prescriptive beauty ideal; and the idea that many women live in fear due to the impossibility of this match-up is difficult to comprehend. But women face a double-binding fear regarding their bodies: the fear of being different from the projected ideal coupled with the fear of our inability to emulate that ideal. These fears are not easily expressed to others or ourselves, a situation which renders dispelling that fear nearly impossible. Hence my tanning study produced as many questions as answers.

These unanswered questions led to my research on the female body as a site of fear in our culture. At the end of the twentieth century, this fear can be seen in nearly every aspect of American culture. Our media's propagation of the perfect female may be criticized, but it has yet to be diminished. Movies, music videos, magazines, and television ads make subtle but powerful gestures. As the ideal is replicated, beauty becomes a given rather than a point of contemplation. The entertainment industry seems above reproach, pointing out that large markets exist for their products; they are satisfying the needs of the masses. Society buys beauty. In order to be a part of the market, women representing products must appeal to the larger audience, regardless of how that audience was created. Hence most women appearing on television, in advertising, or in movies meet or exceed all beauty standards. Women cannot escape beauty culture, so many feel participating is their only option.

The decisions regarding participation in beauty culture revolve around two basic fears associated with the female body. The first fear involves issues of control. A woman who does not subscribe to beauty may be regarded as "out of control." Historically, the out-of-control woman has been accused of everything from witchcraft to hysteria. But in today's beauty climate, phrases such as "unruly brows" or "uncontrollable weight" come into play. Fashion,

body, and cosmetic appearances are, in fact, ways of projecting a controlled body image.

The second fear affecting a woman's decision to participate in beauty culture is one of feminine stereotypes. Being female does not establish one's femininity. Femininity must be earned, and today it is earned through subscriptions to fashion and beauty magazines. If a woman refuses to be bothered with the established beauty ideal, her femininity is called into question as she is accused of masculinity or lesbianism.

Nowhere is this second fear more apparent than in the fields of politics and athletics. These are two public areas where women who do not pursue the beauty ideal can supposedly excel and achieve fame. But careful consideration of these areas shows that women can never be fully divorced from cultural beauty definitions. Women athletes who portray strength while resisting the beauty ideal are commonly labeled as "butch." For those athletes who do subscribe to beauty, opportunities are ever-increasing. The July 2000 issue of Elle magazine illustrates how "beautiful" athletes are fast becoming beauty products. In this issue, six well-known female athletes pose in revealing sports gear, their hair and make-up done by professional artists. This article illustrates the importance of judging female athletes not simply on the basis of talent, but on beauty as well.

In politics, women can achieve power regardless of physical characteristics. But our culture's habitual support for the beautiful body, coupled with our general distrust of the female body, creates a crossfire where political distrust is often articulated in a body-specific dialect. In politics we find an articulation of the submerged ideas concerning the female body. Former attorney-general Janet Reno came to represent the masculine female, being critiqued as much for her body as her stand on many issues. Hillary Clinton has, likewise, been criticized for her strength, being heralded as the husband in her family. Only after her husband publicly admitted his affair with Monica Lewinsky -- only after she was publicly cuckolded -- did Mrs. Clinton's approval ratings increase.

The Monica Lewinsky situation is a good example of how these two fears are equally prominent within our culture. Monica was regarded as a woman out-of-control, unable to suppress her appetite for a married man, unable to control her appetite for food. The media regarded her actions as no more interesting than her body as she was immediately known not simply as the president's mistress, but as an overweight young woman. Her contract with Jenny Craig further illustrates our obsession with her weight. Monica's nemesis, Linda Tripp, became known for her perceived masculinity. Tripp's face showed signs of age; her hair style was considered outdated, and her body did

not meet current weight standards. Additionally, she was in the position of authority, luring Monica into her trap. This authority secured her role as masculine woman. She was lampooned as a man repeatedly, and in one *Saturday Night Live* skit Tripp was actually portrayed by actor John Goodman. In a final twist of distastefulness, Tripp succumbed to the knife, having plastic surgery that drastically changed the shape of her face and neck. Through surgery and various make-overs -- by seeking physical approval -- Tripp sought approval for her actions.

My dissertation contends that a true understanding of these body fears lies in uncovering how the female body became a site of fear in the first place. Until we understand the impetus for this correlation, we cannot diminish the influence it wields; we cannot insist that women abandon bodily obsessions until we understand the sum total of these obsessions. Before we can attempt to understand the cultural mechanisms of the ideal female body, we must attempt an understanding of how these ideals began, focusing on the ideological undergirding which allowed their creation. Female body fear, stemming from males and females alike, replicates, divides, and merges; within the chaos, new fears emerge. In the following pages, I will map the beliefs, ideas, and propaganda which have been instrumental in the persistence of female fear, employing a three-part process touching on the past as well

as the present. Elaine Showalter has argued that "hysterical epidemics require at least three ingredients: physician enthusiasts and theorists; unhappy, vulnerable patients; and supportive cultural environments" (17). This statement is appropriate to all aspects of this study; in hopes of understanding any phenomenon, we must dissect each component. In analyzing the manifestation of female fear, I will accordingly focus on the authoritative voices within this matrix, the diachronic condition of the female and her willingness to participate in body-altering practices, and the cultural ideologies which inform this fear and seek to legitimate these practices.

In Chapter One, I offer an historical overview which touches on each of Showalter's ingredients. I historically position the female body, discussing various anatomical and socio-political theories from Aristotle to Naomi Wolf. Specifically, I want to establish a relationship between fear and gender identification, the body's physical ability to represent its birth gender. The female body has historically been regarded as weak, unstable, and uncontrollable; these labels, in various ways, contribute to both the female's fear of her natural body and her general acceptance of body-altering practices. This historical positioning will undergird the entire text as I seek to understand the social situation of female body fear and alteration.

The role of physician enthusiasts will be of ultimate importance in Chapter 2 when I turn attention to clinical beauty culture. Women spend a great deal of time and money in clinical beauty settings, playing what appears to be the role of "vulnerable patient." Focusing on department store cosmetics counters, spa salons, and tanning salons, I investigate the clinical marketing strategy. I analyze the history of clinical beauty, questioning why it has served, for so long, as an alternative to clinical medicine. I then analyze the issues of authority that come into play as beauty culture employees prescribe treatments and regimens. My research suggests a very complicated association between beauty culture and traditional medicine. It also suggests that while some practices are harmful to women, women are finding many fulfilling aspects of beauty culture.

In Chapter 3, I return to my initial project, the phenomenon of salon tanning, exposing all three ingredients of what is surely a tanning epidemic. In this section, I look specifically at young females and their relationship to the "beauty myth." I explore the discourse community -- a key element within the "supportive cultural environment" -- of tanning, looking specifically at the clinical, almost medical, nature of salons, their methods of operation, and the information they offer. I then discuss fragmentation and ritualism in an attempt to understand these young women's repression of the pale self in honor of the tanned

self. Why, despite the documented dangers of excessive tanning, do some young women persist in ritual tanning. I will here attempt to answer the questions left behind, seeking to show why having a tan has been so easily accepted as desirable and feminine.

All aspects of this three part strategy are foregrounded in Chapter 4 when I discuss the representations of female fear in contemporary women's novels and movies. Using texts such as Bridget Jones' Diary, Jemima J, Eating the Cheshire Cat, and the movie Boys Don't Cry, I look at the ways that new art works by women are attempting to deal with these fears. Primarily, I analyze the women in each story as "unhappy, vulnerable patients." Through this analysis, I attempt to determine the role of art in beauty culture. While books and movies are easily part of the "supportive cultural environment," I ask this: are books and movies which focus on the problem of beauty culture actually bringing light to the situation? Are they establishing a dialectic on female fear, or are they helping perpetuate this problem by treating it as a given? Are they, in fact, becoming a new breed of "enthusiasts and theorists" ?

This work draws upon information from various scholars and modes. I use texts from history, medicine, women's studies, literature, and popular culture to illustrate the elements of fear intrinsically tied to female beauty

culture. I hope that this work will prompt future discussions concerning fear-inspired productions of the female body. Only through an exploration and critique of this fear can we seriously hope to dispel dangerous bodily and ideological practices. Hopefully, this work can stand with other women's texts as a reclamation of our own enthusiasm and our own theories.

Chapter 1

Excavating Fear: A History of Fear and the Female Body

I was first introduced to the broad concept of female fear in Naomi Wolf's *The Beauty Myth,* which analyzes the commercial and social uses of the female body, particularly in post-war America. Wolf contends that American women have been subjected to rigorous beauty standards as a method of suppressing their power. Simply put -- if a woman must devote time and energy to her appearance, her time and her mind preoccupied, she cannot compete equally with men. Wolf looks closely at the female response to the beauty myth, and her theories will be an integral part of this chapter. But as I read *The Beauty Myth,* I still felt in the dark, so to speak. Her thesis made sense to me, but she never explained how such a situation could take place to begin with. It just happened. What were the cultural factors which allowed men and their institutions to suppress women through the concept of beauty? As a result of my own questions, I decided to analyze the historical position of woman in order to understand more fully why the beauty myth was a possibility in the first place. What cultural beliefs made possible this mass pursuit of bodily perfection? I was forced to travel back farther than

American ideology in search of Western Culture's initial regard for the female body. Through philosophical, medical, and historical writings, I repeatedly observed two principal beliefs concerning the female body: 1) the female body is a weaker version of the male body, being so intrinsically tied to maleness that a woman must exert caution in maintaining her femininity; 2) the female body lacks restraint or control, rendering it inconstant and dangerous. Through an historical understanding of the female body, I was decidedly more equipped for an exploration of contemporary body ideology.

Aristotelean writings offer an interesting place to enter this discussion as they appear obsessed with analogies between males and females. According to Aristotle, the male's ability to produce semen is of prime importance, marking him as the sex which gives form to other sexed subjects (Davis 85). The achievement of manhood and semen production serves as a substantial gender identifier. In a discussion on semen in *On the Generation of Animals*, Aristotle explains the direct relation of semen to menstrual fluid, arguing that women cannot produce semen since they produce this counterpart. He goes on to say, "a boy actually resembles a woman in physique, and a woman is as it were an infertile male" (Lefkowitz and Fant, *Women in Greece and Rome* 59). The infertility of the female is explained in the fact that

> the female . . . is female on account of inability of a sort, viz., it lacks the power to concoct semen out of the final state of the nourishment (this is either blood, or its counterpart in bloodless animals) because of the coldness of its nature. (59)

Coldness is often noted as a key division in the two sexes, as will come into play with Galen a half-century later. But of primary importance here is the idea that women are unformed men. For Aristotle, women were supposedly defective examples of a superior gender, an idea which marked women with substandard abilities in all arenas. Plato's *Timaeus*, a philosophical creation story, excavates the woman-as-boy idea. Within this dialogue, it is decided that Timaeus "should speak first, and starting with the origin of the cosmic system bring the story down to man" (40). After explanations of the human body, matter, water, diseases, and so on, Timaeus comes to the final focus: "The difference between the sexes; creation of women, birds, animals, reptile and fish" (122). He begins by minimizing the importance of this section, explaining that his goal of explaining the universe through the birth of man is "pretty well complete," and that "there is no need to say much about [the origin of women, birds, etc.]" (122). We then learn that "men of the first generation who lived cowardly or immoral lives were, it is reasonable to suppose, reborn

in the second generation as women." The imperfection of women is, therefore, a given since they are the reincarnation of imperfect men. The gods created the sex act by "pierc[ing] a hole into the column of marrow which extends from the head down through the neck along the spine" thereby providing "an outlet." The desire inspired by these anatomical changes renders the male sex organs "naturally disobedient and self-willed" (122). The female desire is explained as analogous to male desire, but with somewhat frightening exceptions:

> Much the same is true of the matrix or womb in women, which is a living creature within them which longs to bear children. And if it is left unfertilized long beyond the normal time, it causes extreme unrest, strays about the body, blocks the channels of breath and causes in consequence acute distress and disorders of all kinds. (123)

Here we see the womb become the defining sign of the feminine in male-centered sexuality. The bodies of the male and female are not discussed as anatomically different; both have a pierced hole which allows the realization of sexual desire. Both are driven beyond reason by this desire. However, the woman harbors within her body a foreign "living creature," an organ seemingly difficult to control.

The obsessed womb can, in its waywardness, cause a host of dilemmas. "Wombiness" is discussed at length in Hippocrates' *Diseases of Women* and *Nature of Women* which offer curative regimens for various womb dislocations. For example, suffocation may occur due to the upper abdominal womb. This may be cured by a host of pessaries, fumigations, drinks, and induced sneezing (*Women in Greece and Rome* 70) Wombiness in the hip area may cause amennorhea. "When this condition occurs, wash the woman with warm water, make her eat as much garlic as she can, and have her drink undiluted sheep's milk after her meals." This is merely the very beginning of the cure as various fumigations and a laxative follow (71). Dropsy of the womb, characterized by small periods, bloating, dry breasts, and pain, involves one of the most upsetting cures (71-72). In addition to washing, a laxative, and pessaries, the woman is subjected to "a vapor bath made with cow dung" and then a douche. The procedure is followed "over again, until her period comes" (72).

It is quite frightening to imagine that a "living creature" wanders about the body, wreaking havoc, disturbing normal functions. But perhaps more frightening is the idea that women were subjected to bizarre and invasive procedures which attempted to control the wayward womb. Women were, in ancient Greece, differentiated from men on two bases: their innate inferiority and their

inability to control their primary distinguishing organ. Both of these characteristics easily forged negative relationships between women and their bodies. The perpetuation of these beliefs illustrates the incredible power of this negativity.

Thomas Laqueur's *Making Sex* offers an important study of gender distinctions in the west. Laqueur contends that our current two-sex model of gender evolved from a former one-sex model. That is, women and men were seen as having the same bodies, the same vital and sex organs; the inferiority of the female body lay in the fact that her sex organs remained inside the body while the male had them on the outside. Laqueur points out the one-sex tendencies in Aristotle and Hippocrates while acknowledging their interest in differentiating the sexes. Indeed much Aristotelean theory seems contradictory on these points. The second century AD writings of Soranus are excellent examples of a one-sex philosophy despite their external attempts to serve the medical needs of the female body. While he wrote on various areas of medicine including "internal medicine, surgery, materia medica, hygiene, ophthalmology, medical history, and anatomical nomenclature," it is his *Gynecology* for which he is most remembered (Temkin xxiii-xxiv). Giving specific instructions to midwives and other physicians, the book explains all aspects of birth and delivery, with chapters

on various ailments specific to women including "On Inflammation of the Uterus," "On Hemorrhage of the Uterus," and "On Difficult Labor." The most interesting chapter for our current inquiry is "Whether Women Have Conditions Peculiarly Their Own," which would seemingly go without answer given the book's topic. However, Soranus is not so quick to answer this question. He first analyzes the two sides of the argument, beginning with the arguments in support of specific female diseases, citing Aristotle and Zenon the Epicurean who claimed gendered differences based upon ideas that "the female is imperfect, the male, however, perfect." Given this hypothesis, Soranus explains, "that which is different in its whole nature will also be subject to its own diseases" (129). Soranus then offers the counter-argument, citing the Asclepiadeans who claimed females have no specific diseases because "the female is composed of the same elementary particles as is the male" (130). He then concludes that "In their bare statements all these men are correct, but in their arguments they are wrong." Soranus eventually offers a blending of these two philosophies:

> Now we say that there exist natural conditions in women peculiarly their own (as conception, parturition, and lactation if one wishes to call these functions conditions), whereas conditions contrary to nature are not generically different

> but only in a specific and particular way. (132)

Women are, he explains, only capable of suffering gender-specific ailments when they are affected in a specific area specific to women, such as the uterus. Again we come to a very narrow definition of gender differentiation.

In his chapter "On the Retention of the Menstrual Flux and on Difficult and Painful Menstruation," Soranus further illustrates the underlying properties of the one-sex model in his explanation of menstruation. While some fail to menstruate due to disease, for others "it is physiological for them not to menstruate." This occurs:

> because of their age (as in too young or on the contrary too old) or because they are pregnant, or mannish, or barren singers and athletes in whom nothing is left over for menstruation . . . (133)

Soranus describes menstruation as a weakening process, noting that "the majority of those not menstruating are rather robust, like mannish and sterile women" (26). Seemingly, without suffering from this process, a gendered female can be termed as existing in the male realm. The idea of a "mannish" female serves as further proof of a one-sex model amid constant gender differentiation attempts. The second-century physician and philosopher Galen was slightly ahead of the wandering womb theories,

saying that the idea was "'totally preposterous'" (Laqueur 110). But he concurrs with Aristotle on the coldness of the female body. In Book II of his *Mixtures*, he discusses cool and warm bodies:

> hibernating animals are frequently found to have a greater amount of fat, and women to have more than men; female-kind is by nature colder than male-kind, and for the most part stays at home. (Selected Works 247)

This discussion of the cooling properties of fat at first seems to support a two-sex model; indeed, Galen asserts a greater correlation between the female body and an ungendered bear body. However, Galen's beliefs concerning the cool female body are directly related to the one-sex model. According to Laqueur, Galen "developed the most powerful and resilient model of the structural, though not spatial, identity of the male and female reproductive organs" in the second century, whereby he

> demonstrated at length that women were essentially men in whom a lack of vital heat -- of perfection -- had resulted in the retention, inside, of structures that in the male are visible without. (4)

Galen also believed the female to be capable of semen production, though she would naturally produce a "'scantier, colder, and wetter'" substance (40).

For more than one thousand years, the male and female body were primarily differentiated by the female's seemingly obvious inferiority. She possessed all that the male possessed; she merely lacked the perfection required to expell the reproductive organs. Through this retention, she supposedly found herself, at times, devoid of reason, the victim of a wandering organ. And since she could not exercise the necessary control, man saw fit to exercise control for her.

During the time of Soranus, women not only served as midwives, but they were also, as evidenced by his book, expected to be literate. From the second century through the medieval age, midwives held this position of authority. But as the sixteenth century approached, different attitudes towards women and the guidance they needed emerged. These attitudes would do away with the few powers delegated to women, rendering them dependent on males for all aspects of science and reason.

In *The Death of Nature*, Carolyn Merchant discusses the ways that woman's association with uncontrollable urges gave rise to rampant antifeminism during the sixteenth and early seventeenth centuries. Books, plays, and paintings portrayed women as lusty and untrustworthy (133). But more frightening than this general misogyny is the artistic connection forged between the lusty woman and witchcraft. According to Merchant, "hundreds of paintings and graphics

on witchcraft" surfaced during this period (134). Merchant cites Henri Boguet's *Discours des Sorciers*, published circa 1590, in establishing the correlation between lust and witchcraft. Boguet, a French chief justice, chronicled "the trials of six women accused of sexual acts with the devil" (134). He explained that women were targeted by the devil "'because he knows that women love carnal pleasures, and he means to bind them to his allegiance by such agreeable provocations.'" Merchant establishes that such accusations were commonplace in England as well:

> In England, several hundred women identified as having witch marks, often within the *labia majora* [author's italics], were put to death in the years 1644-45 by Matthew Hopkins, an English lawyer whose campaign to exterminate witches earned him the title "the witch-finder general." (138)

While both females and males were accused of witchcraft, all estimates agree that females far outnumbered males in both accusations and prosecutions.[1] "Combined modern statistics for several European countries indicate that of the total tried (some 100,000), women comprised approximately eighty-three percent" (138). With these numbers in mind, the witchtrials must be read as an assault

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[1]Merchant offers quotes from Bodin (1580), James I (1597), Alexander Roberts (1616), and calculations from English Home Circuit Court, all ranging from 20/1 to 100/1.

not on evil, but on women and any power they were feared to possess.

This assault carried over into the workplace, where women were forced out of occupations they had historically maintained. Trades and crafts slowly ousted women, forcing them to become solely dependent upon their husbands (151-2). While most of these situations reflect their contemporary marketplace, the situation of midwives reflects cultural fears associated with the female body and female authority, and witchcraft served as a convenient rationalization for new restrictions on this occupation.

Midwifery had traditionally been "the exclusive province of women: it was improper for men to be present at such a private and mysterious occurence as the delivery of a child" (152). Women had maintained this sovereignty, despite being unable to receive formal, degreed training. While alterations were certainly needed in order to improve the live birth rates and health of post-partum mothers, the new restrictions were hardly concerned with health and healing. Rather than regulating training or improving accessibility to medical information, The Church became involved in licensing. Ecclesiastical licensing began in 1512 under an act which "permitted representatives of the Church to grant licenses for the practice of medicine and surgery to persons who had first been examined by the Bishop of London or the Dean of St. Paul's" (Forbes 143).

This act applied to midwives as well, and so they too were "examined." But this examination was more concerned with personal and spiritual character than obstetric knowledge. Indeed the women were questioned by church leaders who, we can assume, knew nothing about birthing babies. Suitable midwives then took an oath which reflected the spiritual nature of this process, promising to work faithfully, aid rich and poor alike:

> Also, I will not use any kind of sorcery or incantation at the time of the travail of any woman; and that I will not destroy the child born of any woman, nor cut, nor pull off the head thereof, or otherwise dismember or hurt the same, or suffer it to be so hurt or dismembered . . . (Forbes 145)

While any license might be regarded as a step in insuring that midwives were learned in their field, this process assumed that many midwives were involved with witchcraft and sought to discourage their use of the occult. Midwives may have been targeted by The Church since they were, by necessity, allowed to baptize critically ill babies at the time of birth. Therefore, church leaders were justified in their effort to regulate aspects of midwifery. But The Church failed to lend credibility to the practice as the occupation continued to be diminished in stature. A license could assuage fear in part, but as the witch trials

continued, women, particularly those with power and healing abilities, became increasingly suspect. Even defenses of the accused women increased the misogynist sentiment. Physician Johann Weyer argued that women should not be physically punished as witches since their weaker mental capacities made them more available to and, therefore, more commonly victimized by the devil (Merchant 141). Regardless of how one interpreted womens' accountability in witchcraft, the female was marked as incapable of rejecting evil, her body and mind both weak and uncontrollable.

The sovereignty of the female midwife diminished in 1634 as "male surgeons who wished to practice midwifery with forceps, a technology that would be available only to licensed physicians," apppeared (Merchant 153). Midwives had been resistant to this new technology, wanting no part regardless of its inavailability to them. For midwives, the use of tools in birth was "violent" and unnatural (153). Throughout the seventeenth century, men published works which sought to discredit the female midwives, pointing out their poor training and reliance on superstition.[2] Some women worked to improve training, attempting to further credit their profession. "Yet despite these attempts by a few persons to upgrade and include women in the advancing medical and scientific knowledge of the period, women began to lose control over

[2]Merchant states that various members of the Chamberlen family, who had invented forceps, published on the incompetence of midwives.

midwifery and thus over their own reproductive functions" (154-5).

The end of female midwifery is a pivotal point in my analysis of the female body. While historically the female had been regarded as a weaker male, she had, at least, been allowed domain over her weakness. When this domain ended, the female had been declared unqualified and undisciplined in virtually every category: physical, spiritual, moral, intellectual. Men would now dictate health and reason to the female body, a practice passively accepted today by legions of women dreading visits to the male gynecologist.

But in the seventeenth century, it should not be surprising that the female body became the domain of men. The Renaissance had ushered in scientific studies which proved the internal maleness of the female body. In the study of anatomy, drawings and terminology assuming the one-sex model sought to give visual and linguistic proof of the interior penis. If woman harbored a penis, who better than man to treat her reproductive organs.

Laqueur provides illustrations from several Renaissance anatomy texts in support of the one-sex model. In these drawings, the bodies of men and women are indistinguishable. The work of Jacopo Berengario often uses the dissected female body, urging readers to notice the similarities of the female to the male body. In one drawing, the female has removed her uterus in order to

point out that its neck "resembles a penis" (80). Throughout the drawings in Berengario and Vesalius, the vagina is fashioned as an exact replica of the penis, again, only outside in (82-89). Another illustration features the female sex organs labeled as male sex organs: "ovaries as testicles and the Fallopian tubes as spermatic ducts" (81). The male-centered vocabulary of anatomy achieved results equal to the male-centered illustrations. Laqueur states:

> The absence of a precise anatomical nomenclature for the female genitals . . . is the linguistic equivalent of the propensity to *see* the female body *as* a version of the male . . . Language constrained the seeing of opposites and sustained the male body as the canonical human form. (96)

This male centered vocabulary existed longer than one might expect. Laqueur cites one example of such terminology from the nineteenth century (98). Even as anatomists determined the role of female reproductive organs, the language was deeply rooted in patriarchal rhetoric.

This odd attempt at gender distinction, coupled with the believed inferiority of the female body, offers an unsettling self-image for women. Woman is distinguished by her body's failure to expel that which rests in her abdomen; furthermore, she is known to have an organ which

may act of its own free will. She can, therefore, reasonably fear her body's ability to alter itself. She can fear even becoming a man.

As discussed earlier, Soranus' mention of mannish women and barren singers raises questions concerning intergendered states. While the use of one sex to describe another may, at first, insinuate a two-sex system, I have suggested that these identifiers be read as proof of a synthesis of sex roles. This reading is supported well into the sixteenth century, and beyond, as stories of spontaneous sex changes circulated in Europe.

Laqueur analyzes the underlying concerns associated with female musicians and women who, against their passive nature, participate in rigorous or "mannish" activities. He quotes the work of Lord Julian who "warns [women] against undertaking "manly exercises so sturdie and boisterous . . . or even singing or playing upon their instruments 'hard and often divisions'." Laqueur explains that:

> The concern here goes beyond women playing unladylike music, beyond transgressing the bounds of gender; it seems that inappropriate behaviors might really cause a change of sex. (126)

The one-sex model is illustrated nowhere more powerfully than in the examples of spontaneous sex changes, often

claimed as a result of these inappropriate behaviors. According to Laqueur, people have believed girls to grow a penis as a result of "'frolicking' with a chambermaid" or chasing pigs. Laqueur cites in detail the story of Marie-Germain; this story was recorded by both Ambroise Paré, Charles IX's chief surgeon, and Michel Montaigne, though with slightly varying details (126).

Montaigne relays the events of Marie-Germain's transformation in his essay, "Of the power of the imagination." Though he does not claim to have met Germain, he accepts the story and retells it as follows:

> Passing through Vitry-le-Francois, I might have seen a man whom the bishop of Soissons had named Germain at confirmation, but whom all the inhabitants of that place had seen and known as a girl named Marie until the age of twenty-two. He was now heavily bearded, and old, and not married. Straining himself in some way in jumping, he says, his masculine organs came forth . . . (Frame 69)

Montaigne states that girls of that region continue to sing a song "by which they warn each other not to take big strides for fear of becoming boys." He attributes this transformation to imagination, seeming less than surprised by this possibility, citing situations throughout the ages where the imagination made possible otherwise unthinkable

events associated with gender, appearance, and mentality (68-70). But Montaigne's catalogue of gender transformation is particularly interesting since it involves only female to male changes. Marie-Germain's story is accompanied by brief accounts of Lucius Cossitius and Iphis, each born gendered female yet miraculously, or by the "power of imagination," transformed into a male on her/his wedding day (69). Of course, the female-to-male transformation is to be expected since, as Gaspard Bauhin explained, "Nature tends always toward what is most perfect."[3]

Montaigne accepts the likelihood of this event, but it is Paré who offers a medical explanation. Paré claimed to have come in contact with Germain, a "young man with a thick red beard" who had spent the first fifteen years of his life as a girl named Marie. He explains the transformation in more detail, stating that during puberty, Marie "jumped across a ditch while chasing pigs." As a result of this rather unladylike behavior:

> at that very moment the genitalia and the male rod came to be developed in him, having ruptured the ligaments by which they had been held enclosed.
>
> (Laqueur 126)

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[3]Laqueur quotes Bauhin from William Harvey's *Lectures on the Whole Anatomy*, trans. C.D. O'Malley, F.N.L. Poynter, and K.F. Russell. Berkley: U of California P, 1961.

Laqueur relays Paré explanation which is, predictably, related to the lack of female heat. Paré explained that: "'women have as much hidden within the body as men have exposed outside; leaving aside, only, that women don't have so much heat, nor the ability to push out what by the coldness of their temperament is held bound to the interior'" (127).

These quite dissimilar explanations for Marie-Germain's supposed alteration offer important insight. Montaigne's acceptance of this situation, coupled with his reliance on female to male transformations, reiterates the female body's less than static position. For Montaigne, culture works side by side with imaginaton. But Paré offers the most useful reading for our purpose since, as a surgeon, he is able to explain the situation in medical terms, explaining that Marie had held a penis inside for some time; she has simply been unable to expell it. However, her excitement during the pig chase must have produced the heat necessary to expell this hidden perfection. For Paré, the situation is a natural reaction to overexertion in the young female body.

Marie-Germain's story exemplifies clearly the ways that young women suffered from the fear associated with the female body. Her story brings together the two most frightening elements of femininity in the early modern period. Certainly, she is out of control, a young woman

chasing pigs without concern for her feminine role. As a result of her uncontrollable urge, she expels her masculine member. Women learned early that excitement could lead to nothing good. In excitement, the wandering womb and the hidden perfection might take over the body, inflicting physical and emotional damage. It is, therefore, no small wonder that hysteria, either real or imagined, became an issue of importance.

Hippocrates named hysteria for its relationship to the wandering womb. But even Galen pointed out the absurdity of an organ in motion. Laqueur points out that, due to new discoveries in anatomy, "by the sixteenth century there was manifestly no place in the body for the organ to move to" (110). He consequently argues that later discussions of the wandering womb were meant figuratively (112). This allowed physicians to carry on the misogynist attitudes towards the womb without having to retract what might be considered erroneous theories. This figurative quality also allowed doctors to offer nonspecific diagnoses at will. The womb, regardless of movement, was still the seed of female weakness and woe.

In *Ventriloquized Bodies*, Janet Beizer discusses the historical situation of hysteria in an attempt to understand the proliferation of literature on the topic during the nineteenth century. She described the "eruption" of discourse on the disease as "the nineteenth-

century equivalent of a media event" (3). While hysteria had long been argued (since the early seventeenth century) as "a cerebral disease affecting both sexes," these theories did not take flight as "the uterine theory continued to have numerous and staunch supporters until well into the nineteenth century" (5).

In fact, the nineteenth century saw a "coexistence" of these theories: "As nineteenth-century explanations of hysteria evolve and ostensibly leave the womb, they inevitably return to its image" (7). While it became accepted that the womb did not move throughout the body affecting different organs at different times, the new symptoms were frequently sexualized. Sufferers were "described as a nervous sex, suffering from vapors, spleen, and fainting fits, or eroticized as hysterical nymphomaniacs" (Showalter 15). The same uncontrollable urges which had made women sexually available to the devil now resulted in general promiscuity. Other symptoms included "headache, muscular aches, weakness, depression, menstrual difficulties, etc., and usually a general debility requiring constant rest (Ehrenreich and English 93). Doctors frequently diagnosed hysteria when they were simply at a clinical loss:

> A disease whose essential defining characteristic was time and time again given as indefinability, whose causes and symptoms were

> too numerous to be circumscribed, and whose methods of treatment were limited only by the imagination, hysteria in the nineteenth century was an accomodating vehicle for just about any idea or entity one wished to contain or displace. (Beizer 34)

The progression of the nineteenth century only increased the attention to hysteria, making it important to question the unprecedented attention given to hysteria. How could a nervous system epidemic occur? Keeping in mind her three part recipe for any hysteria ["physician enthusiasts and theorists; unhappy, vulnerable patients; and supportive cultural environments" (17)], I will turn now to Elaine Showalter's research. Like Beizer, Showalter discusses the enthusiastic treatments offered at Paris' Salpêtrière where Jean-Martin Charcot diagnosed women at the rate of ten per day. Charcot was instrumental in promoting the disease during the 1870's when he held public lectures, his famous leçons du mardi. During these displays, he "publicly diagnosed patients he had never seen before," making a spectacle of various women in his care (31). His treatments, still tied to female organs, focused on the ovaries which were thought to "send signals along the spinal cord to other organs" (33).

Charcot's teaching helped spread this enthusiasm around the world as his students became recognized

authorities on hysteria. In 1906 Harvard Medical School invited Pierre Janet, a professor of psychology and director of the psychological laboratory at Sapetriere, to deliver a series of lectures. Janet chose to speak on hysteria, presenting fifteen lectures in an attempt

> to sum up before the American students some elementary psychological researches about [the] well-known disease . . . in order to show them how the study of the mental state of the patient can sometimes be useful to explain many disturbances and to give some unity to apparently discordant symptoms. (Janet vii)

Since some of the fifteen were presented at Johns Hopkins and Columbia as well, many future doctors were educated on this epidemic. Throughout the lectures, Janet stresses the importance of diagnosing hysteria:

> You must be able quickly to recognize this disease, in order to foresee its evolution, to provide against its dangers, and immediately to begin a rational treatment. This early diagnosis is much more important still from another point of view: it will keep you, allow me to tell you plainly, from making blunders. (11)

Janet strikes fear in the hearts of physicians-in-training as he illustrates how misdiagnosed hysteria can result in

blunders and even "medical crimes." Because hysteria can mimic hundreds of disorders, doctors are logically drawn to the seat of the patient's discomfort. From their, the treatment "frightens the family, agitates the patient to the utmost . . . and exhaust[s] the strength of the sick person." These bothersome aspects of misdiagnosis pale in comparison to the debilitating effects of incorrectly ordering surgery:

> Do not try to count the number of arms cut off, of muslces in the neck incised for cricks, of bones broken for mere cramps, of bellies cut open for phantom tumours, and especially of women made barren for pretended ovarian tumours. Humanity ought indeed to do homage to Charcot for having prevented a greater depopulation.
>
> (12)

Janet's numerous, lengthy lectures on symptoms, coupled with his threats of misdiagnosis, insured hysteria's continuing popularity. While his case studies of hysterics involve both men and women, the reiterations of female sex organ involvement continue to suggest that the physical nature of woman renders her more suceptible to the disease. Take the example of Leg., a woman who during her menstrual period searches her lover's belongings and confirms his deceit. "She fell into a great passion; her menstrual discharge was stopped, of course, and she had a crisis of

delirium in the form of monoideic somnabulism, during which she acted the scene over again" (61). Leg. continued to be traumatized during her menstrual period and was eventually institutionalized (62).

In many ways, our physician enthusiasts were responsible for the "supportive cultural environments" which allowed hysteria to progress and multiply. Centuries of concerns about the unruly female body were justified through these scientific though nonspecific explanations. But the complicity of these women is the most difficult ingredient to comprehend. Their willingness to be labeled hysteric, the willingness of some to be publicly displayed as hysteric, reminds us of the powerlessness these women possessed over their own bodies. Indeed such feelings of powerlessness in the public sphere could easily translate into a lack of self control. Perhaps women were hysterical, in part, due to their inability to resist this physician diagnosed label. And as Showalter points out, "the longer the epidemic continues, the greater the participants' need to believe it is genuine" (19).

As the epidemic did continue through the second half of the nineteenth century, Ehrenreich and English point out that "the vague syndrome . . . had become so widespread as to represent not so much a disease in the medical sense as a way of life" (94). Because so many middle and upper-class women suffered this illness, thus becoming dependent

upon their spouses, they inadvertently "set the sexual romanticist ideal of femininity for women of all classes" (95).

Even for women who did not suffer (or rather, were not diagnosed with) hysteria, immobility and dependence were required for a few days a month. Doctors generally recommended that women suspend all taxing and brain-using activities for the length of their menstrual cycle. This was a widely held belief at the turn of the century, but even in 1916, examples such as the following from Dr. Winfield Scott Hall are found:

> All heavy exercise should be omitted during the menstrual week . . . a girl should not only retire earlier at this time, but ought to stay out of school from one to three days as the case may be, resting the mind and taking extra hours of rest and sleep. (qtd. in Ehrenreich and English 100)

Other excerpts warn women against general activities such as walking, shopping, and partying (100).

Interestingly, working and lower-class women were omitted from these cautions. Indeed they could not miss work during menstruation without jeopardizing their jobs. Medical professionals "sturdily maintained that it was affluent women who were most delicate and most in need of medical attention. . . Working-class women were robust,

just as they were supposedly 'coarse' and immodest" (102-3). This fits interestingly with the idea that hysteria was "an exaggeration of the feminine personality" (qtd. in Beizer 42). Hysteria had come to represent division within the female gender. And as it corresponded to extreme femininity, it also worked to reassure male sex roles. In other words, as Evelyne Ender explains, "While she plays, hysterically, at being a woman, he can reassure himself that he is a man" (30).

In the first half of the twentieth century, after years of misinformation and superstition, women knew very little about their bodies. And since their physicians were eager to diagnose hysteria, women's concerns and complaints were regarded with little confidence. The doctor, for the patient's sake as well as his own, was obligated to take her word at less than face value. And even as more was learned, women were still urged to fear gynecological organs as providers of pain and producers of death.

A 1935 educational book for women indicates a gradual deviation from these attitudes while further educating us on the alarming misinformation which had been distributed. Emil Novak, a physician with thirty years of gynecological experience, claimed to have written *The Woman Asks The Doctor* in order to educate women for their own safety, pointing out that "the intelligence or the ignorance of the patient in such matters [gynecology] has actually spelled

the difference between life and death" (vii).

Novak's work undoubtedly helped many women to understand the general principles of menstruation, menopause, infertility, and disease. But his discussions of past and contemporary superstitions concerning menstruation are most useful for our discussion. The book's second chapter, titled "Superstition and Folk-lore of Menstruation," discusses and dispels various myths dating before Hippocrates (8). Novak later seeks to dispel false medical information including the idea that bathing or being caught in the rain during menstruation can cause illness. Novak states, "Our grandmothers were certainly as a rule taught that the daily bath must be abjured during menstruation, while now many 'modern' girls take a shower daily, or perhaps go in swimming, without regard to menstruation" (78). While he declares that a "tub bath would be objectionable for esthetic reasons," Novak says that sponge baths and showers can be taken without regard to menstruation (78). Fortunately, this information seems to have reached a large readership as the book was reprinted in 1938, 1940, and 1944.

Novak's discussion serves as an example of science's gradual victory over the spurious body logic of the last thousand years. While the womb may have wandered for many years, it is no longer unpredictable when exposed to cold water. And if a modern girl could go swimming, certainly

she could attend school during menstruation. Unfortunately, Novak worked in a medical community educated by hysteria lectures; hence, change would still come slowly.

Science and modern thought assuaged some fears associated with uncontrollability. But the twentieth century brought variations on the old fears. Young women may no longer fear jumping mud puddles, but they may still fear being categorized as masculine. Women may no longer fear wandering organs, but, no less than before, they feel pressure to project a controlled presence. In terms of contemporary fears, beauty and the pursuit of beauty are generally regarded as paramount. Every part of the female body must be attended, so much so that there are not enough hours in the day to complete proper grooming. Here I return to Naomi Wolf; her discussion of the beauty myth addresses, in part, how issues of power have merged into this singular but unending pursuit. Wolf's *The Beauty Myth* seeks to explain the causes of this hysterical obsession. While I do not always agree with her conclusions, Wolf offers an important perspective within this debate.

Wolf's central thesis is that male-dominated powers have created and perpetuated beauty culture in order to control women's capital and time. While Wolf, at first thought, seems to claim a vast, male-driven conspiracy, her key evidence lies within the pages of women's magazines.

Women's magazines were founded during the most heated years of women's emancipation, roughly the 1860s and 1870s. Wolf argues that, from the start, these magazines wielded great power, working to undermine the women's movement. Wolf points out that the beauty myth began to take shape during the early years of the magazines, and she suggests the objective was to categorize those working for liberation as unattractive and non-feminine (62-69). Her claim concerning the magazines' power is supported by their role in the war-effort. Traditionally devoted to domesticity, the magazines turned attention, during World War I, to encouraging much-needed women to join the war-effort (62). In order to preserve gender roles, advertisers sought to remind these now-working women that they should "look feminine," encouraging them to use skin care and make-up products, even while doing a "man-sized job" (62). Wolf explains that "the magazines needed to ensure that their readers would not liberate themselves out of their interest in women's magazines" (63).

These products, and the male work force, were certainly in jeopardy in 1944 when a Manpower Commission survey found that more than sixty percent of these war-effort women wanted to remain in the work force (63). Of course, this prompted fear. What would happen to men if they came home to no jobs and, what's worse, working wives? Wolf attributes women's magazines with then reestablishing

traditional gender roles, describing them in extraordinarily powerful terms:

> Women's magazines for over a century have been one of the most powerful agents for changing women's roles, and throughout that time -- today more than ever -- they have consistently glamorized whatever the economy, their advertisers, and, during wartime, the government, needed at that moment from women. (64)

Wolf credits these magazines with convincing women that they were much more needed in the home, that their place was, in fact, in the home. Wolf goes on to describe the marketing of household products in the 1950s and the psychological techniques used by advertisers. Citing the work of Betty Friedan, Wolf offers a catalogue of marketing techniques, ranging from guilt exploitation to the spiritual rewards of cleanliness. Playing up social insecurities, marketers stressed that, to be a good housewife and mother, women require special products (64-5).

Wolf then explains that, as women eventually re-entered the workplace, the household products had to be replaced with other, money-making products. With insecurity as a principal player, beauty products took center stage (65-66). According to Wolf, the beauty myth

was invented to "*save magazines and advertisers from the economic fallout of the women's revolution* [author's italics]" (66).

While Wolf convincingly argues that women's magazines were a powerful media, she never really explains why they were unable to keep women out of the workplace forever. If these magazines can establish and re-establish women's roles, why do they not prevent women's needs for work outside the home? Wolf indicates, for the most part, that women were "restless, isolated, bored, and insecure," which prompted their eventual return to work (66). This failure on the part of women's magazines undermines the extraordinary power with which Wolf had previously credited them. In fact, the issues of power discussed within *The Beauty Myth* are often questionable. Wolf gives women credit for abandoning compulsory domesticity, yet she gives them little credit for anything else. She insinuates that contemporary readers are incapable of critically analyzing these magazines which are now, she asserts, "a serious force for women's advancement" (72). She applauds contemporary women's magazines for addressing serious women's issues. But she criticizes women for misreading the magazines, saying:

> Even editors worry that many readers have not learned how to separate out the prowoman content from the beauty myth in the magazines, whose

place is primarily economic. (73)

According to Wolf, women who see today's magazines as purveyors of the beauty myth are simply misunderstanding the magazine's message in relation to the advertisers' message (72-73).

While magazines may include many interesting and educational articles for women, they are fraught with images of stereotypical beauty. Wolf should not blame readers for misinterpreting the importance of these images. To the contrary, she should hold the money-making magazines accountable for the real messages they are producing. Their production of these images reinforces the importance of these images. And while few women have time to read each article in a magazine, most women have time to flip through the pages and read each image.

Wolf's discussions of power in relation to the beauty myth are disturbing in several ways. In almost every instance, women are powerless and, aside from Wolf herself, are described as gullible. Wolf attacks the beauty myth with the energy of a revival preacher, describing it as a constant benefit to male-centered institutions. She suggests that women are complicit in their victimization because they have not yet learned to read magazines "in a more informed way" (74-75). But can an entire gender be categorized as noncritical readers? Can Wolf and her own readers alone be capable of understanding this male-driven

hoax?

As I read and reread Wolf's book, I became more and more defensive. Are women looking to photographs and advertisements instead of text? Could we be missing the point? It seems ludicrous to suggest that millions of women merely misread the magazine industry's constant attempts to empower us. Perhaps Wolf herself has missed a significant point. Perhaps she has forgotten that many women other than herself seek empowerment.

Throughout Wolf's book, the beauty myth makes a fool of women who are powerless to stop it. Wolf is right when she asserts that women are harmed by the attention given to beauty. But her disregard for women's critical thinking led me to ask a new question: What are women gaining through beauty culture? Why, despite turning against compulsory domesticity, have women been unwilling to reject beauty standards and products? Perhaps reasons exist outside of Wolf's argument. I disagree with her assertion of women's mindless fascination with beauty images. All women do not see magazine photographs as a prescription for how our lives must be. These images can be read in many ways. For some women, yes, they are oppressive and destructive. But for others, they may not be disempowering.

My intention is not to refute Wolf's entire thesis. Certainly, women cannot reach their full potential in the

workplace when agonizing, far more than men, over wardrobe and cosmetics. But I take issue with her unwillingness to accept women as powerful and critical beings. Wolf focuses on how men profit from the beauty myth while women are repeatedly victimized. She gives no attention to how women might actually profit. Beauty serves as a burden, but for many women it is an acceptable burden. Might some women gain empowerment as a result of that burden? The possibility seems minute, even unbelievable following Wolf's lengthy sermon. But after careful consideration of the historical fears encountered by women, the beauty myth seems to occupy a unique space in fear and fear alleviation. I argue that women find in beauty culture a method of combating the two primary fears associated, by themselves and others, with the female body.

Right or wrong, the horrors of a thousand years have been compressed and answered by one cultural pursuit. By working to meet contemporary beauty standards, women find a way to reiterate femininity. Whether a woman seeks power in the business world or in a professional sport, projecting a "beautiful" image will provide her with social acceptance. By working to meet beauty standards, a woman is simultaneously projecting an image of self-control. She is controlling her size, her hair, her skin's health, and sometimes even her eyecolor. She is reminding society that she makes decisions for her body, that her body does not

make decisions for her. For many women, the pursuit of beauty can be an all-purpose endeavor. This may seem quite unfair, and Wolf would certainly argue that women cannot benefit from any activities which require bowing to superstitions and male-centered institutions. Many would argue that fear-inspired activities cannot alleviate fear. But women seem to have found reasons to work within male-centered institutions to perpetuate the pursuit of beauty. Regardless of how effective the means are, women believe they are defending themselves with beauty. The products of beauty culture serve as a shield, protecting them from the more dangerous threats of womanhood.

This argument involves more than a theoretical assertion that women find personal value in beauty practices. To understand the perceived advantages of beauty culture to women, I will turn to popular beauty culture sites including tanning salons, spa salons, and up-scale cosmetics counters, attempting to understand why these attract so many women. What body fears bring women to these sites, and what specifically do women gain from these products and activities? I will ask these women to discuss beauty culture and their relationship to it. Indeed, the voices of many women are necessary in our understanding of this hysterical phenomenon. As I argue, women, in fact, are appropriating beauty culture for their own purposes. Beauty culture is no longer a male-centered

institution; and while some aspects may be harmful to women, women are finding a sense of community which often supersedes any ill effects.

Chapter 2

Body Authorities: Experts and the Science of Beauty

A visit to a tanning salon is commonly like a visit to a doctor: the sign-in and form fill-out, the waiting area where each person listens for his or her name to be called, the smell of sanitizers permeating the air, the uneasy posture of the "patients," and, all too often, the stark white walls and floors which reiterate cleanliness. These conditions, more and more, are reminiscent not simply of the doctor's office, but of the current state of "beauty." Medicalized notions of beauty permeate all areas of beauty culture. Newspapers and magazines advertise various procedures performed by certified aestheticians, and a trip to the mall reminds us that beauty counters are the domain of lab-coated women who "prescribe" rather than suggest. At some counters, one is diagnosed with a skin type, then treated accordingly by women who look like ultra-chic scientists. At day spas, lab-coated women--who also resemble laboratory scientists--boast of the power to revitalize skin and remove impurities, promising the ultimate in beauty science. These businesses are perfect examples of "clinical beauty culture," a term I use to describe sites which promote procedures and products while

offering visual and informational ties to health, science, technology, and sterility.

Medicalized authority in issues of beauty reminds us that we are naturally sick, unclean, imperfect, and in need of consultation. And as discussed in detail in the next chapter, this authority reiterates "original ugliness" (MacCannell and MacCannell) and the "inherent pathology" (Adams 73) of the female body. But with expert, scientific advice, ugliness and its unclean counterparts can be overcome.

The proliferation of medicalized beauty forums indicates the public's overwhelming acceptance of these experts. My intention is not to emphasize the popularity of products and services offered in clinical beauty settings. Rather, I am interested in the ways in which beauty and clinicism became intertwined. I am also interested in the role that employee-customer rapport has played in sustaining that connection. To understand these issues, I will first probe the history of clinical beauty sites, showing how and why medical science complemented beauty culture's objectives early on. I will then analyze the texts, both informational and symbolic, which women receive in clinical beauty sites before services are even offered. This will include a reading of the physical atmosphere and brochures produced and provided by sites in the Oklahoma City/Norman, Oklahoma area. It will also

include analysis of national advertising campaigns waged by several well-known product lines. Through these analyses, I hope to show the various "supportive cultural environments," affecting, and affected by, clinical beauty culture.

I will then share information from interviews I conducted with women who work or have worked in clinical beauty culture in the Oklahoma area. Focusing on three clinical sites-- day spas, upscale cosmetics counters, and tanning salons-- I interviewed fourteen women, asking them the same sixteen questions concerning their training, work environment, customer concerns, and level of authority. It is important to note that while all workers were currently or had recently been employed by sites meeting my definition of clinical beauty, some sites looked more clinical than others. Tanning salons are the most diverse in appearance. Some strive for a fun or a health-club atmosphere while others strive for a purely clinical look. Nonetheless, all tanning salons stressed clinical ideals such as cleanliness and the positive relationship of tanning to good health.

While the interviews provided me with insight into many aspects of clinical beauty culture, I will focus on three areas: the women's conception of themselves as authorities on the body, their personal analyses of clinical beauty culture, and the social environment created

by beauty culture. As I began these interviews, I must admit my personal preconceptions concerning the relationships between beauty-culture employees and their customers. I expected a confirmation of Erich Fromm's theories on individuation and authoritarianism. If we believe Fromm's classic thesis that humans are afraid of free will, that we seek out roles in authoritarianism in a futile attempt to reverse the process of individuation, the consultant-client relationship works as a perfect illustration. Fromm called authoritarianism one of the most important "mechanism[s] of escape from freedom," explaining that the two most apparent "forms of this mechanism are to be found in the striving for submission and domination" (142). Were not beauty employees exploiting their medicalized environment in order to more easily dominate those who sought expert guidance? Answers are not so clear-cut as I probe the power of beauty culture's "physician enthusiasts."

My study carefully analyzes how ordinary beauty practices have been affected and, in some cases, legitimized by this replication of the clinical atmosphere. But of equal importance, my study gives an historical context and a voice to these beauty culture employees. I encouraged them to share stories which reflect their experiences, concerns, and self-conceptions. Their stories offer provocative explanations for the success of clinical

beauty culture. Through these various texts, I attempt to answer these questions: Do clinical beauty sites exploit their customers through this attempt at legitimization? Is beauty culture an actual science or even a result of true science? Are customers intimidated by pseudoscientific evidence and this perceived authority? Or, do clinical beauty sites actually fill many physical and psychological needs of women, needs traditionally ignored by the established medical community? My study suggests that clinical beauty culture is much more than an effective market strategy.

II

The medicalization of non-medical goods is hardly a novel marketing strategy. In fact, medicalized advice dates back to the early years of the twentieth century. The medical community had proven its worth with a diphtheria vaccine in 1894, and discussions of germ eradication came into vogue (Lears 59). Germs were being connected to specific illnesses, and, "by 1900, a bacteriologically based public health movement solidified the idea that microorganisms caused ill health and suffering" (Brumberg 68). Cleanliness of the body and the home were suddenly of great importance (69). And consumers were constantly reminded of the scientist's role in germ eradication:

> Hopes for sterility centered on the scientist,

> who became a popular authority figure in advertising--so much so that the white lab coat became a necessary prop even for floor wax ads. (Lears 60)

Scientism provided "techniques for total control of the self and the environment, total imposition of culture over nature" (60). And so, science and beauty culture are inextricably tied in theory and in origin.

In theory, beauty culture argues that its products are "good for you" (Allen 16), just as science has promoted better health and longevity. But the origins of beauty culture are themselves a part of clinical science. Indeed clinical beauty culture began at the turn of the century with the introduction of spa salons and cosmetics, services and products described, from their inception, as medical in essence.

The turn of the century introduced the rise of medical authority with the rise of dermatology as an area of particular interest to us. The cleanliness obsession of that time extended itself to adolescent skin. Parents of acne-prone teens sought medical attention in order to preserve their reputations as hygienic homemakers (Brumberg 68-70). Again, they sought help also to preserve the moral reputation of the acne sufferer as breakouts were commonly associated with masturbation and sexually transmitted diseases. In fact, dermatology actually derived from the

study of sexually transmitted diseases (63). While uncleanliness of the skin was considered the primary cause of acne, textbooks urged physicians "to consider immorality as a cause if acne did not respond to the usual clinical ministrations" (64).

With the sexual implications of acne, it is no wonder than female-operated salons became a popular way for young women to fight this irritation. In the early twentieth century, young women were more likely to seek treatment for acne. Joan Jacob Brumberg explains that "cultural mandates that link femininity to flawless skin," combined with the medical community's growing interest in acne, forced these young women to seek help (61). Contemporary to these social and cultural conditions, two women were beginning, from meager resources, small cosmetics companies which would define themselves according to the science of skin health. Their philosophies and ensuing popularity would change the way women, young and old alike, approach skin health.

While cosmetics and spa salons are two distinct beauty sites today, they began as a single unit. Elizabeth Arden and Helena Rubinstein both began "house[s] of beauty" or salons in the first years of the twentieth century. These salons provided a variety of skin treatments including massage and baths, and they also sold skin-care products. Arden was actually well-known for her work as a massage

therapist and facialist. Color would eventually be added to these products, creating the cosmetics industry we know now. But in the early years, products focused more on skin health, skin softness, and youth rejuvenation. Each woman saw science as the cornerstone of her business. Arden worked with chemists to create her products, and Rubinstein worked with dermatologists (Allen 21-27). As these women set the stage for today's cosmetics industry, cosmetologists in large cities were following their lead, offering skin treatments to meet the needs of skin-obsessed women. With the rising interest in acne, cosmetologists offered a variety of procedures for eradicating the illness. In Manhattan and the Bronx alone, there were almost two thousand such salons by 1925. And since acne was now viewed as a possibly serious condition, these salons were regarded by the medical community as renegade clinics (Brumberg 72). But that did not deter women from seeking their treatments. In fact, Brumberg states that these salons "clearly attracted enough teenage acne sufferers to constitute a persistent thorn in the side of professional medicine" (72).

Brumberg sees the cost of dermatology and its insufficient availability as key reasons for the popularity of these salon treatments. But that would not explain why today, when dermatologists are plentiful and often cheaper than day spas, such treatments still attract countless

women. I suggest that, initially, the very personal nature of acne, combined with the social stigmas of masturbation and venereal disease, caused young women to prefer the female-oriented, pampering salon over the male-oriented doctor's office. Brumberg herself states that doctors discouraged these visits to the cosmetologist because the acne might actually be a form of "tuberculosis or syphilis" (71). Indeed, the condition of acne made young women highly suspect in the eyes of the medical community. Young women, at this historical moment, would quite probably prefer treatment from someone more concerned with eradication of acne than with its origin.

Of course, young women were led to regard salon treatments as comparable to dermatology. The cosmetics business was, even in 1933, offering products such as the Vienna Youth Mask. This mask, created by Arden with the help of a Viennese doctor, was a diathermic procedure, meaning that electricity was used to repair the skin. The apparatus was described as

> made of papier-mâché and lined with tin foil, which is fitted to the client's face and connected by conducting cords to a diathermy machine. (Allen 33)

Arden supposedly believed that "electricity so applied replenishes the cells in a woman's face, which, she said, die first under the eyes and next under the chin" (33).

While this machine may seem medieval, even torturous, to modern readers, its connections to science, technology, and medicine, combined with Arden's perceived authority, easily gained the customers' confidence. Arden served as prototype for "beauty expert."

Arden's beauty farms, extended-stay spas, began in 1934. For $600-$750, women received a week's worth of pampering and domination. But clinical procedures abounded. One participant described the day as filled with "massages, exercises, facials, face masks, wax baths to "draw out all the poisons" (39). The idea that toxins can be drawn from the skin as a result of beauty products is quite prevalent today at day spas, businesses which have all but replaced week-long spas in our busy culture. In fact, these descriptions of early beauty sites are almost identical to what I found while researching spa salons today. While the Vienna Youth Mask may be long gone, other procedures have taken its place. And while cosmetics counters have become an entity unto themselves, no longer relying on the spa salon for promotion, they have taken these same clinical promises to the department store shopper. In the next pages, I will carefully describe these two sites, and their new counterpart, the tanning salon; we will see the directions taken by clinical beauty,finding that past attempts to align beauty with science have been nothing if not augmented.

III

As I visited day spas, I first noticed the lab-coated workers. At one of the three spas, I was met by a stern, lab-coated woman, hair pulled back abruptly, a visual icon of chic science. While I was confined to the lobby for most visits, one spa owner allowed me to interview her inside the treatment room. This area was extremely clean, consisting of many white towels, various professional products, and a treatment table much like that found in a doctor's office. These sites attempt to appeal to all senses. Two of the locations featured the tranquil sounds of a small water fountain accompanied by aromatherapy. Another salon provided soothing new-age music in the background. Medical aspects of the day spa are revealed in its treatment of mind, body, and spirit; only by treating the three as one unit can any patient be healed. And the word "heal" is commonly used among these sites.

Each of these three day spas offer brochures featuring numerous treatments, with brief explanations and listings of the products involved. Prices and, in some cases, procedure times are provided. At each spa, aestheticians were extremely proud of their salon services as well as their continued training, as seen in the text of these brochures. Again, all texts stress the integration of health and beauty.

Salon One's brochure describes it as a "health center," highlighting its specializations in massage, skin care, and spa therapy. The brochure begins by focusing on massage, detailing the variety of massage techniques in a rhetoric of medical treatment. Salon One explains massage "has either a direct or indirect relation to every structure and function of the body." The text goes on to explain benefits such as "stimulate[d] immune function," pain relief, and stress reduction. Clients can also expect "direct and immediate benefits to the skin, connective tissue, muscles, large blood vessels, nervous system, organs of the abdomen, bones, joints, and ligaments." Improved health certainly seems possible through a visit to this salon. Massage is a common therapy, used even in the offices of chiropractic doctors. By beginning with this accepted medical therapy, Salon One is able to more easily garner clinical acceptance for its other services.

Salon One's brochure gives skin care the least attention, quickly listing available facials, one of which is "performed by a certified esthetician." "Healing" returns as spa therapies are introduced. Formulated baths, individualized for each client, are given as "hot water disperses the healing qualities of the formula." Perhaps even more "healing" is the herbal wrap, performed by wrapping the client in "warm linen sheets which have been soaked in a special blend of herbs." The process is

further described as follows:

> The herbs induce perspiration, draw toxins from the tissue, promote relaxation from the deep heating action and nourish the skin. A shower treatment is then given to lower the body temperature and tonify [sic] the tissue.

Here we return to the benefits offered by Arden's beauty farm, the removal of toxins, suggestive of thorough inner cleansing. Mental health is again addressed as the client is "relaxed." And, almost as a bonus, the skin will be improved, nourished, and toned. Beauty will be more possible through this health-promoting procedure.

Salon Two offers a large variety of services, but the brochure focuses on facials and body treatments. We learn that these procedures are under the direction of a licensed aesthetician who holds "certification from some of the most advanced skin care seminars" in various major cities. Each facial is scientifically named and described. Offering antioxidants, exfoliants, and salicylic acids, some of the facials are recommended for serious skin conditions such as: "rosacea, melasma, and hyper-pigmentation." Even an "Acne Management Facial" is offered. For those having actual laser surgery, surgery performed by a cosmetic surgeon, the salon offers "Pre and Post Laser Treatments;" These facials supposedly prepare the skin for the procedure or soothe it afterwards. In this instance, aesthetician

and surgeon walk hand-in-hand, giving clients the optimal benefits of medical treatment as they become beautiful.

The "body treatments" section of this brochure mentions many of the same healing properties seen at Salon One. Clients can exfoliate and detoxify. Certain procedures claim to stimulate metabolism. Beauty is always related as clients are assured that procedures "increase firmness and tone while improving the skin texture" or "reduce unsightly orange skin appearance and cellulite." Massage is also offered at Salon Two. Though briefly mentioned, this brochure offers slightly different health information, claiming that massage not only "removes toxins and relieves stress," but that it also "aids in digestion [and] increases nutrition in red blood cells."

While Salons One and Two offer numerous pseudo-medical procedures, the third brochure offers the most medicalized information I received. Salon Three actually begins its brochure by categorizing its owner as a "licensed Paramedical Aesthetician and Certified Massage Therapist who has been involved in the fields of massage, aromatherapy, skin care, makeup, and Aesthetics for many years." Spa treatments, skin care, and Power Peel are highlighted in this brochure. The same benefits are promised, but perhaps stronger medical associations are implied. One treatment "stimulates, detoxifys [sic], hydrates and oxygenates the body." Another features a

"lymph drainage massage." Anyone who has ever suffered from mononucleosis might wonder why her doctor didn't perform or even recommend this procedure. Skin care treatments offer the "removal of impurities" and "cleanse and heal." The constant promises of detoxification suggest that only through science can skin and the body achieve purity. But it is the Power Peel which sets Salon Three apart. Power Peel is described as an actual medical procedure; it is, therefore, necessary to assure clients that the procedure is pain free. And for the first time in the text of three lengthy brochures, clients are referred to as "patients."

Power Peel is described as "a new dermatological technique otherwise known as micro-dermabrasion." "Dermabrasion" is a procedure commonly performed by dermatologists in order to peel off damaged skin. The brochure suggests Power Peel for "the treatment of fine lines, rough and dull skin, scars, acne, stretch marks, and keloids," insignificant and serious skin problems alike. The peel may be performed on face and neck, chest, hands, elbows, or stretch marked areas.

The procedure is legitimized not only through its association with dermatologists. The brochure further does so through the following information:

> Recently approved by the FDA for use in the USA, this is "state of the art" skin peeling. The

treatment is not painful and patients suffer no "down time."

The recent FDA approval suggests that this procedure has the authority of a new prescription medication. Only after years of medical testing can this procedure be performed. The assurance of no "down time" implies that the procedure is closely related to surgery, a procedure from which one must recover. And, of course, the term "patients" reinforces each of these points. Power Peel is described as a serious medical procedure, lending legitimacy to the salon's many "para-medical" procedures.

Power Peel would certainly appeal to women who have serious skin concerns, women one might expect to find in a dermatologist's office. But just as women sought paramedical skin correction from cosmetologists seventy-five years ago, they continue to do so. The warming electrical currents of the Vienna Youth Mask have been replaced by skin abrasion, but the allure of salon therapies has yet to change.

The physical atmospheres of spa salons and clinical cosmetics counters are quite different. The mall offers hustle, crowds, and public address directives. Gone are the auditory delights of waterfalls, the pleasures of aromatherapy. Yet clinicism muscles its way behind crowded glass counters.

Certain images and product lines are synonymous with

clinical cosmetics. Clinique has established itself as the icon of clinical beauty. Introduced in 1968 by Estee Lauder, Clinique was "the first full allergy-tested fragrance-free line of cosmetics" (Allen 60). Clinique salesladies sport white lab coats, stylishly cut and buttoned high. But in the cosmetics area of any fine department store, clinical associations extend far beyond the traditional lab-coat. Several lines have adopted yet altered this symbol, dressing their employees in black lab coats, creating a look that suggests business formality with scientific know-how. Prescriptives, a newer line of cosmetics, relies on its name for clinical symbolism. This name suggests that "prescriptions," or cosmetics needs, are being filled at the "cosmetics pharmacy." Pharmacy symbols are quite pervasive in the clinical cosmetics business. Indeed, the act of shielding products behind a glass case, a place where they may be clearly displayed but never touched, invokes the medical aura of the products. But, more importantly, it signifies the clinical authority of the cosmetics salesperson. In order to ask about, touch, or purchase products, women must approach the counter and wait to be acknowledged. Only after being diagnosed by the authority may you buy the desired or prescribed product.

Clinique's advertising complements the medical aspect of the products as well. Despite offering all traditional cosmetics in every conceivable color, ads very rarely focus

on the colorful, or creative, power of their products. In keeping with its skin care first focus, Clinique ads generally highlight products which promote and promise healthy skin. A signature ad features the 3-Step Skin Care System, which consists of soap, clarifying lotion, and moisturizer. In a recent version of this ad, the three products stand side-by-side against a white background. A white toothbrush covered with white toothpaste stands against the moisturizer. In the top left-hand corner, the heading reads "Twice a day." Along the binding, small print identifies the system followed by, "Simple, effective. Dermatologist-developed. Allergy Tested. 100% Fragrance Free." The ad appears clean and simple, implying that the products are no-nonsense, user friendly, and easily implemented into a daily routine. The toothbrush symbolizes the indispensable nature of hygiene. Much as toothbrushing preserves our teeth, so can these products preserve our skin. Of course, positive effects can be expected only when the products are used as recommended. Just as with oral hygiene, random routines are dangerous at best. The phrase "dermatologist-developed" reiterates the company's relationship to dermatology and insinuates that "twice a day" may be recommended by those dermatologists.

The 3-Step system comes in several skin-type formulas. This is stated in a subtle yet clinical tone at the ad's end. In the lower right hand corner appears, "Get skin

typed at www.clinique.com." Being "typed" suggests blood-typing. Skin is routinely typed at the Clinique counter. Using a sliding color chart accompanied by basic skin questions, customers are categorized as Type I, II, or III. This procedure simplifies product selection. But more importantly, women come to identify themselves according to their type. Customers acquire more than skin care products; they themselves are reified, renamed, reclassified. Just as the process of blood-typing categorizes humans, so also does this cosmetics quiz. Customers become a part of a larger female group, a group that shares the same skin privileges and problems. And, in a very real way, they have become a part of Clinique, branded according to skin-type by lab-coated diagnosticians.

While the sale of skin care services and products has a rich, clinical history, tanning, a relatively new beauty industry, has nicely patterned itself according to this proven strategy. All information provided at the salon reiterates health as well as beauty. The first tanning salon I visited is carefully described in Chapter 4. That facility glowed white, smelling of sanitizers. Clients, like patients, sat in a waiting room furnished only with chairs, magazines, and a television, hoping to hear their names called. Upon hearing their name, customers are given a closet-sized room furnished with all the necessities of

tanning: a bed, clock/radio, floor fan, towel, and goggles. While this salon was certainly the most "clinical" of those I visited, another salon found other ways of linking itself to the medical community. This second salon, while still dedicated to cleanliness and organization, provided free advertising to other para-medical beauty professionals. On the salon walls were advertisements for laser hair removal and permanent cosmetics applications. In Oklahoma, these procedures are performed by aestheticians under a doctor's supervision. Permanent cosmetics, or micropigmentation, is performed by tattooing color onto the eyes, eyebrows, or lips. Oklahoma law considers this a medical procedure and requires that only graduates of a certification course perform the procedure under doctor's supervision (Beard 25). These ads found in tanning salons reinforce notions of training and authority, associating the tanning employees with workers who are not only licensed to perform invasive beauty procedures, but who also work in a medical office.

The salons offered brochures for tanning products, establishing these formulas as skin-care products. California Tan Heliotherapy, one of the most widely known lines, advertises its products as part of a "three-part system." One salon featured a large wall poster which explained this system through a segmented chart adorned with golden-brown bodies. Another salon offered

Heliotherapy brochures which include Step explanations, product descriptions, an ingredient guide, and, again, golden brown bodies. These brochures describe the Step process as a therapy regimen. Step 1 tanners may choose from eleven products which are said to "provide rich tanning results for beginner tanners building their base tan." The products are described as "infused with superior skin care nutrients" that "help reduce the appearance of fine lines and wrinkles." A blond woman with a golden tan wears a gold slip-dress on this page. Her dress is simple in style, suggesting youth and comfort. Eyes closed and hair falling in a cascade of curls, she leans dreamily against a large rock in what may be a canyon. Step Two is prescribed for "advanced tanners who have reached their 'tanning plateau'" (a commonly used phrase in the tanning community). This page features the same blond woman. Her tan is no darker. Perhaps she has reached her "tanning plateau" in this photo. Only the clothing and pose have changed. She now walks on top of the rocks, against a pale blue sky. Her tan, if no darker, is elevated as she becomes one with the sky. Her outfit, again gold, is a bit more revealing. She wears a shimmering bikini top with a matching, fitted wrap skirt, exposing well-toned abdominal muscles. Step Three, Finalizer lotions, "preserve and prolong your tan by sealing your results." For this page, our blond has disappeared, replaced by a

darker brunette who wears leaves in her hair, invoking a tribal spirit. The transformation is complete with Step Three. Our tanner sits beside a crystal body of water in the most sexual of the three poses; one leg rests on a rock while the other is drawn near her breasts. A short green sundress falls carelessly around her waist, exposing legs and hips. Regimented use of the system has created not simply a tan, but a highly sexualized being who exudes stereotypical femininity.

While sexuality is the primary ingredient in marketing strategy, science and healthcare are also significant considerations. The chart, diagrammed according to performance, specifies which therapeutic ingredients are provided in each product. As a result, tanners can learn which ingredients will help them achieve the look featured on that page. The abundance of text suggests that tanners can make an informed tanning decision based upon this brochure. The Ingredient Guide implies an explanation of each scientific product. But many of these ingredients or compounds possess complicated names which are never fully explained, insuring the tanners' dependence on salon employees for full understanding of the product. The chart offers terms such as anti-oxidants, DNA enzyme complex, liposomal delivery system, CuO_2, biosaccharide complex, bioecolia, and Tissue Respiratory Factors. These terms suggest that the products are the work of dermatologists or

other medical professionals who understand the complex process of skin-color manipulation. This scientific undergirding is reiterated by the Ingredient Guide's definitions, which include even more scientific terms like bioengineered, carbohydrate complex, oxidize, and free radicals. In defining Tissue Respiratory Factor, the guide says only, "skin care complex," leaving tanners with no understanding of how respiration may be affected by this product. To a great degree, these texts suggest that most women should not expect to understand tanning; they should merely participate.

Just as spa salons have done for more than seventy-five years, these texts rely on suggestions of science, hoping that impressive terminology will propel product sales. But in studying these very successful sites, it is clear that they have depended on far more than suggestion. In order for potential customers to accept the scientific basis for these clinical beauty acts, the information must be presented with and by authority. But even more importantly, women must want to believe that these products represent the best that research has to offer, that these products and services equal those offered by doctors. The women who perform these services and sell these products have sustained and expanded the clinical setting. They have, for many years, assured women that they are receiving helpful services. And I was quite eager to ask them about

this authority and its relationship to the clinical setting. Through these interviews, I hoped to understand the complex relationship between customers and beauty providers. Moreover, I hoped to understand why clinical beauty culture's approach appeals to so many women.

IV

I began the interview process by contacting several clinical beauty sites in central Oklahoma and asking if women would participate. At spa salons, I interviewed two owner/aestheticians, one manager/massage therapist/cosmetologist, and one cosmetologist. At cosmetics counters, I interviewed five cosmetics salesladies. And at tanning salons, I interviewed two salon managers and three salon employees. All women were asked the same questions in interviews that ranged from 20 to 90 minutes, depending on the interviewee's detail and elaboration.

Initial questions focused on the training these women received as I hoped to assess their actual level of authority. I was impressed by the level of training received by several of my subjects. Four of the makeup clerks had participated in week-long training seminars before beginning work. They continue to attend periodic seminars where new products, color lines, and "technologies" are showcased. Aestheticians also confirmed

that they all receive continuous training through seminars. It is, however, interesting to note that all of these cosmetics seminars and many of the aesthetician seminars are sponsored by product manufacturers. So while women are, in theory, receiving information concerning skin health, this information is affected and motivated by profit. Tanning salons varied most widely in their training regimens. When asked about training, all five stressed learning to properly clean the beds and goggles as primary job training. While this is important and illustrates the dedication to a clinical atmosphere, it is not what I was expecting. Two of the subjects discussed computer training, stressing its importance to the proper scheduling of appointments. Three of the subjects had learned about tanning products only by reading the packaging inserts available with the tanning products sold at their salon. This is frightening considering the inserts I have analyzed in this chapter. Only two of my subjects had attended seminars on tanning where they learned about all aspects including safety and product usage. Of course, again, product seminars are provided by the manufacturers. One salon manager described her facility's seminars as follows:

> We have product seminars sometimes hosted by the makers of the product line. We have had someone fly in from out of state, and they will talk

about their product line--the ingredients, the benefits of the different [ingredients].

She goes on to explain that with each new product adopted by the salon, management reviews the literature they are given and then passes this along to employees during meetings or seminars. Employees must learn the product information, which was provided by the manufacturers, as well as use the product in order to "speak from personal experience on the smell, how we like it, how it works."

Immediately after questions about training, I asked each woman if she considered herself an authority in her field. In sales, a sense of authority is obviously necessary as workers must convey product and process knowledge. All cosmetics workers considered themselves authorities due not only to the training sessions, but also to personal interest in products, skin health, and application techniques. All five cited an abundance of repeat customers as evidence of skill and quality service. Two women offered additional anecdotal evidence. One saleslady recommended a product which cleared up a customer's chronic skin condition. The saleslady relayed to me that a week after she recommended the product, the customer returned and showed her the clearing patch on her face, saying, "I used this on my skin and it works; you know what you're talking about." Another saleslady gave a makeover to a 55 year old woman who had never before worn

makeup. The customer was very happy with the new look and the application instructions, so happy that she bought all the products used that day. The saleslady said, "She looked really good when I was done . . . And she came back three days later to tell me how great it was. How much she appreciated it, that it just really gave her a charge when she was feeling down." All salesladies alluded to such experiences, saying that customer testimonials constantly affirmed their authority.

The authority of day-spa workers is more easily probed since licensing exams are available in all areas and are required for all workers except massage therapists. All four of the day spa workers I interviewed held a license, and the manager/hair dresser/massage therapist, was quite close to being licensed in her second area, massage therapy. Each cited continuing training as a reason for her sense of authority. All of my subjects insisted that they attend frequent seminars to learn new techniques since beauty is ever-changing. These women also felt a strong sense of authority, citing examples of clients' dependence on their recommendations or clients' willingness to concede to their recommendations. They cited stories of helping women feel more comfortable with their bodies. The hair stylist/massage therapist found authority in her ability to relieve people of long-suffered pain. An aesthetician reveled in helping some women to overcome makeup addiction.

These women who were "cured" developed confidence in their natural appearance and began to leave home makeup free, a previously unthinkable act. A hairdresser described her satisfied customers as follows: "Every 30 minutes to an hour, somebody is walking out of my chair, most generally with a smile on her face and loving her hair."

Only in tanning salons did I find women who did not seem entirely confident in their authority. While two of the women claimed to attend tanning seminars, only one of those two described herself as a tanning authority. The other, when asked if she considered herself an authority, said, "No." But she went on to describe her self-styled training and appeared to spend a great deal of time reading about safety and cleanliness:

> I read everything that comes out. I try to get the safest bulbs. They [customers] complain about that because they're not the ones that will fry them the first day. . . . I try to stay up on that.

This woman went on to say that she could answer any fears or concerns held by tanners, but she would not call herself an authority on the subject, seeming genuinely uncomfortable with the title. Her comments consistently echoed her concern for habitual tanners and their intense need for immediate results, even if those results came in the form of a burn. Perhaps considering herself an

authority on the subject would, in her mind, implicate her in this body abuse.

Of the other three interviewees, two felt confident in their authority based upon work experience. The first detailed her training, beginning with a discussion of computer training before moving on to cleanliness. Eventually, she stated, "This is my second tanning salon to work at, and I feel that we've read a lot about the tanning products." She went on to say that her authority level was intensified by being a student nurse, which allowed her to help those customers who suffer from heat rashes and product allergies. While her vocalization of medical expertise bordered on nurse-sanctioned skin damage, she did describe, in great detail, knowledge about her facility, the technical working of the beds, and product differentiation. She felt that she had earned authority and that she was obligated to do so, saying:

> When I first started working here, I didn't know all of these things. But I found out that these are important things to people, and you need to know that. I would expect someone to know . . . and [customers] have a right to know. This is something they are doing to their bodies.

But even with that said, this employee doesn't describe herself as capable of educating customers on how tanning affects the body. She is merely able to explain the

results they can expect from various tanning products, products described in elaborate scientific terms.

Another worker with experience-based authority offered poor proof of on-the-job training. She said, "I received about two hours of training" [to work in the salon]. Of course, this involved computer training, bed cleaning, merchandise sales, and salon regulations. She then took a test, not over the process of tanning, but over the pamphlet descriptions of each tanning accelerator sold in her salon. She explained, "If we didn't make over a 75, it was like school, we had to take it over until we passed it." Again, the worker was learning about the appearance of a tan without learning about the process of tanning or its long-term effects. She was learning only what the product manufacturers wanted her to know. Our fifth worker answered the question, "Do you consider yourself an authority," by saying, "Heavens no. Not even a little." Despite feeling like an outsider in the tanning industry, this woman said that customers were confident in her authority level. But she explained, "The difference between me and perhaps someone else, I would be really honest with them. . . . I never misled the customer to believe that I knew everything about the different products." Even her statement shows an emphasis on product knowledge, not tanning process knowledge.

All employees felt they projected an image of

authority, regardless of actual knowledge level. This self-image is reiterated daily by the responses of female customers who are seemingly quite obedient to the recommendations (or prescriptions) of the salon workers. The clinical aura has created this image of authority, and many women are quite willing to portray the obedient customer. Stanley Milgram's study of obedience has shown us the importance and power of projecting the image of authority. Milgram defined authority as "consist[ing] of a minimum of two persons sharing the expectation that one of them has the right to prescribe behavior for the other" (143). The clinical environment helps to create that expectation. Milgram's study reminds us that we are socialized to value authority and that certain cultural symbols seem to require obedience. In their discussion of Milgram and his theories, Arthur G. Miller et al. explain:

> from early childhood throughout our lives, we are taught to obey authority and are rewarded for doing so. Obedience becomes an unquestioned operative norm in countless institutions and settings, many of which are endowed with very high cultural status (what Milgram termed "overarching ideology") --e.g., the military, medicine, the law, religion, education, the corporate-industrial world. Successful outcomes in countless circumstances often reflect

> productive obedience to authority, whether it be a person's grades, health, promotions, medals, military victory, athletic performance, or recognition.

The salon's proposed focus on health, combined with the multiple visual associations with the medical field, allow clinical beauty culture to occupy this position of "high cultural status." Critical inquiry into the legitimacy of that authority seldom happens because expectations dictate the power structure. As Milgram explains, "The power of an authority stems not from personal characteristics but from his perceived position in a social structure" (139). Here we see the power of standing behind a counter, or what's more, standing behind a counter in a white lab coat. Milgram acknowledges the effect of scientific prestige on his own study, explaining that "impressive laboratory equipment" and "the mystique of science" played a part in his obedience system (143). Customers expect to receive useful information and recommendations from women who understand beauty on a scientific level. And on a subconscious level, customers expect to be rewarded, both physically and emotionally, for their obedient investments.

V

The women interviewed seemed, in general, to believe that being seen as an authority was positive. Customer-

consent does make their job much easier. But just as the medical community worried about cosmetologist-based skin care in the 1920's, I wondered if this authority might ever negatively affect the health of customers. As the women told stories about customer expectations, I began to realize that detrimental effects do occur as some customers allow these workers to make health, social, and personal decisions for them.

I will begin by acknowledging that day-spa employees seemed quite responsible about their sense of authority. Despite producing brochures which heavy-handedly suggest medical expertise, two interviewees discussed their caution in not stepping over medical boundaries. One woman said she often encourages acne sufferers to see a dermatologist, citing this as painful since she wanted so desperately to help all of her clients. Another aesthetician said, "if someone has a problem or we see something suspicious, we refer them on," explaining that such referrals have, on several occasions, resulted in early detection of skin cancers.

But the cosmetics counter and tanning salon employees I interviewed offered an aura of authority which could go too far, undermining self-image and good health. Women who feel uneducated on health and beauty issues, as well as women who are uncomfortable making decisions in general, can find themselves in situations of complete

powerlessness. One cosmetics worker spoke candidly of her "high and mighty" attitude and the ways that she imposed her beliefs on customers. She attributed her authoritarian stance behind the counter not only to the cosmetics company's training, but to the attitude of customers. She said, "I really did [feel like an authority], but what really enforced that was the customers because customers would tell me, 'Well, I wanted to come talk to you before I talked to my dermatologist.'" As Milgram's theory suggests, this woman's "perceived position" is far more important than her knowledge level (Milgram 139). This young woman would work at two makeup counters before realizing that her authoritarian attitude was misleading and, in some cases, culturally inappropriate. She described her attitude towards women of Asian descent, saying:

> I got high and mighty, especially with Orientals. In Japan, the very white face holds a lot of attraction, whereas here it's "be dark and be tanned." Asians want the lightest foundation, but they're dark, and so they would want a porcelain when they should really be a beige. I wouldn't let them have the porcelain. I would make them buy the beige because it matched.

She went on to describe her current feelings of guilt

regarding those actions, saying that she now feels people should be allowed to buy whatever makes them feel good.

This woman's story further illustrates Milgram's theory of overarching ideology. As a perceived medical authority, this cosmetics worker achieved cultural authority status. Her role allowed her to dictate the concept of American beauty to young women who held alternative cultural beliefs. These customers were not receiving what they wanted, yet they consented to her demands because they interpreted her as a legitimate authority. As Miller et al. state, "People become vulnerable to the dictates of illegitimate authority because they are habituated to presume legitimacy and are unpracticed in the act of defying authority when this is the appropriate response." These women of Asian descent are perhaps more pronounced examples of what happens to many customers. Personal concepts of beauty and health can be ignored as women bow to authority figures, expecting society's blessing in return.

Tanning salons can insinuate too much authority as well, as evidenced by the tanning nurse I mentioned. Workers shared numerous stories which illustrated the health expertise attributed to them. As our "heavens no" worker put it, "It's amazing what people will assume by your standing behind a counter." This worker detailed the numerous skin rashes she saw. Tanners would show her the

rash and ask if this was normal. Customers were confident that she could diagnose the skin disorder and make the appropriate recommendations.

In perhaps the most interesting illustration of authority, two tanning workers stated that they were faced with pregnant customers who asked their permission to tan. One salon worker said:

> Some women have come in pregnant and asked me if I think they should tan. I tell them they should talk to their doctor before they tan.

These would-be tanners assume there are risks associated with tanning during pregnancy, as evidenced by their inquiry. But the urge to tan can be great, even ritualistic, as we will see later. By asking permission, these expectant women are transforming a health risk into an obedience issue. The approval of a salon worker carries significant weight with these women, even when they intuit possible risks to fetal health.

But with the information dispensed by some tanning salons, it should be no surprise that many women see tanning as harmless, even helpful, to their overall health. During my interview with one salon worker, I was told,

> Studies have been done and they have found that it [tanning] increases your vitamin D, it helps with your immune system, it helps with circulation, your respiratory system . . . it

> helps certain skin disorders like psoriasis and acne. . . We have some people with SAD, and lots of psychiatrists and psychologists prescribe tanning for them.

Receiving this information in a clinical atmosphere could easily diminish concern for skin cancer. Surely these myriad benefits outweigh the risk of one tiny disease. Acceptance of this information could certainly be categorized as an escape from freedom. In this situation, the salon worker's authority frees customers from the necessities of critical thinking, of weighing possible advantages against possible disadvantages.

VI

The clinical atmosphere can provide customers with a feeling of safety and confidence, as we have seen through these stories. But many of the interviewees felt that the clinical setting actually serves as a stumbling block, preventing women from feeling comfortable, safe, or a part of beauty culture. To these employees, the clinical environment must be constantly overcome. Of the five cosmetics workers I interviewed, four said that the counter is often "intimidating" to women. The fifth worker said many women are "hesitant" to approach, but all five were clearly concerned that sales are lost due to the up-scale attitude of the counters. Four of the women said customers

initially perceive cosmetics ladies as "snotty" or "snooty" or "bitchy." One described her counter's typical worker: "[the company] likes to hire pretty people who are thin because they look better, and women who have nice skin because that's the industry. And so I think that women who had really bad acne or were overweight felt very intimidated about coming to the counter." Two saleswomen said that they themselves had never approached a counter before being hired by one. One of these women explained that she had avoided cosmetics workers because she was "always intimidated by their beauty." The other said, "I saw all these girls and I was like, they are going to be conceited, and I don't want to deal with them." All five women claimed that friendly rapport successfully breaks the intimidation barrier and assures customers that they will be respected and listened to.

Two of the cosmetics workers felt the clinical atmosphere's aura of elevated knowledge could be an ordeal too difficult to overcome. While both women considered themselves experts and enjoyed working at the counters, they both stated that customers assume they know more than they do, putting them in sometimes awkward situations. As one woman put it:

> I think they definitely think we know more. I think they almost feel like they are in a doctor's office. . . . They expect a lot. A lot

> of times, I think they expect more than I can offer them.

Spa workers experience similar "problems" owing to the lab atmosphere. One aesthetician said that customers sometimes describe her white, instrument-laden lab as reminding them of a dentist's office. Another aesthetician/salon owner said, "I purposefully do not wear a lab coat because I want people to be comfortable with me." She went on, however, to say:

> But everyone who works for me, the aestheticians, I make them wear lab coats so people will identify them as someone in authority . . . they know what they're doing.

These quotations show the dual nature of the lab coat. While it can create an uncomfortable atmosphere, it also, just like the traditional doctor's office, offers reassurances of training and authority. This last aesthetician had achieved a harmonious balance for herself by having lab-coated, clinical workers circulating while she herself worked in casual clothing.

Most tanning salon workers found the clinical atmosphere to be more positive. Almost everyone said that the clinical atmosphere reiterated cleanliness, which is a major concern of many tanners. But one woman who worked in a health club styled atmosphere said that the clinical atmosphere in tanning promotes feelings of "obligation,"

encouraging people to sign long-term contracts. Most workers would not see this sense of obligation as a negative effect. But as a former tanner, in the name of research, I can attest to my own feelings of obligation, particularly related to product purchase. If the worker said I needed something, I would eventually buy it because she was an authority and I, frankly, felt on the spot and a bit pressured.

While the chic scientist look may convey product authority, it apparently keeps many would-be customers at bay. But for those who do venture into these sites, this initial intimidation seems to result in an elevated respect for the worker's authority. While numerous salesladies and aestheticians saw the intimidation factor as a negative effect of the clinical atmosphere, it seems to be a positive economic factor. All of us have been intimidated into a purchase, whether it be moisturizer, a car, or term life insurance. In each situation, we believe that our actions, although the result of another's insistence, will bring about a positive result. At the cosmetics counter, women consent not merely to purchase products, but to accept society's proposed feminine ideal. Acceptance of this ideal marks the consumer as part of the overarching beauty culture. Cosmetics counters and their employees are justified not because they create the beauty ideal, but because they help women achieve that established ideal.

And as Milgram explains in his discussion of overarching ideology, "Ideological justification is vital in obtaining *willing* obedience, for it permits the person to see his behavior as serving a desirable end" (142). While workers may struggle to overcome the intimidation factor, the science and beauty market strategy is nonetheless profitable. This is nowhere more apparent than with our aesthetician/salon owner who forces employees to wear a lab coat while she herself refuses. She profits from their struggle.

VII

As I probed these issues of authority and intimidation, I was confused by clinical beauty culture's popularity. But when I asked the women about their favorite part of this work, their stories offered new insight. These women overwhelmingly stated that they most value the opportunity to help others and the personal relationships forged through their work. Their stories suggest that the clinical setting offers women something that the medical community has not, explaining why clinical beauty is chosen so often over the traditional medical setting, or, in the case of tanning salons, why women perceive the salon as a place where they can receive scientific information.

When I asked each woman, "What is your favorite part

of working in beauty culture?" most began by saying, "I like working with people." But after the cliché response, many women offered stories that illustrated how their lives were enriched through encounters with customers. They believe they are helping other women feel good about themselves, and this, in turn, gives them a strong sense of accomplishment. They also saw working in beauty culture as a way of connecting with women on an even more personal level. One tanning salon worker said that older customers had been helpful to her, giving advice after her baby was born. A day spa worker said providing massages is a safe way of satisfying her intense need to help others, keeping her out of codependent relationships that she might otherwise seek. And many women spoke of friendships they have forged with customers and coworkers alike. One cosmetics lady said:

> The one thing I really like is that I've actually made friends with my customers. I enjoy seeing the people I know that I've met [while] working here. We don't just talk about makeup. We talk about all kinds of things. I really feel like we are friends.

I know this woman's sincerity from personal experience. Our interview was pleasant, and we realized we had a great deal in common, including the fact that we each have a border collie. Less than a week later, she called me at

home to ask advice on how to help her younger brother with a writing assignment. I have since stopped by her counter several times to talk not about my project, but about our dogs.

A tanning employee saw the salon as a way of networking with other women in beauty and fashion, explaining that she meets women who perform services such as permanent cosmetics and laser hair removal. In exchange for free advertising at the tanning salon, the laser technician agreed to provide salon employees with free hair removal. A purse designer showcases her work in the lobby and has given purses to the employees. Social and business relationships merge at this salon as women share their talents and abilities with others.

As I heard these stories, I became more and more convinced that perhaps clinical beauty culture's strength is not product and procedural services as much as personal communication. While I have been critical of the product and procedural information shared at some of these sites, women are interacting on a significant level. This personal interaction demands more careful analysis. As I studied these interviews, I came to see beauty culture as not merely medical, but as psycho-therapeutic. Indeed, one of the most interesting issues in this study revolves around the intersection of authority and social interaction at these clinical sites. As women become comfortable with

the authority figures, as they move past intimidation or, at least, become accustomed to it, they build relationships which often are based not simply on medical authority, but psychological authority. While the tanning salon environment fostered networking relationships, the other sites seemed to foster an atmosphere where clients became comfortable discussing not simply beauty or day to day issues, but also intimate details from their lives.

The environments of spa salons and cosmetics counters foster psychological relationships through the hands-on attention they provide. Tanning remains a solitary act, despite the attention provided at the front desk. But spa and cosmetics employees occupy a very personal space while helping customers. Women are touched, analyzed, cleansed, pampered, and caressed at these sites. Through this contact, women can begin to see the employee as an authority and a listener, allowing the employee to occupy a space reserved most often for confidants and therapists. This listening quality, coupled with the medical authority associated with employees, creates the illusion of psychotherapy.

Spa salons provide customers with sometimes long periods of undivided attention. A hairstyle, massage, or facial can last as long as an hour, and customers often fill that space with discussion. One hairdresser talked at length about her rapport with customers, describing

herself, interestingly, as occupying a space often occupied by a physician:

> There is only a handful of people who come into their lives who get into that two-inch space. One is a doctor, the other is a spouse or family member, and the third is a hairdresser. Because I am playing with their hair, touching their shoulders, in that two-inch space that people don't like to be invaded in. . . . I think that's why people trust me and tell me more things. People will just tell me everything.

Part of this need to talk may be related to the time at which women often schedule hair appointments. According to this stylist, some customers come very rarely, usually after a particularly traumatic period. While some come merely for hair maintenance, for others, the hairdo is a cathartic experience, a time to start over:

> Some people want to feel better about themselves, to come out feeling like a different person. Typically, when people are going through big changes in their life -- like a divorce, having babies, any crisis -- they'll come in, and they think that the answer to their problem is to change their hair.

This hairdresser is so conscious of the authority she occupies that she goes on to describe herself as a

counselor to customers' needs:

> We're psychologists here, to a certain degree. And I can tell you so many times, people come in with a question or a problem. And I can help them out because I see so many people. I might be able to give them a connection or a tip on a recipe. . . . What they want is somebody to console them. That's what I'm there for. That's what I do.

While several tanning salon workers discussed the networking they encounter at the salon, this spa worker sees herself as an instrument by which customers network with each other. Her intimate knowledge of women from various walks of life allows her a pseudo-expertise in various fields. She sees part of her job as listening to women and performing the work of a psychologist. But she also weaves together disparate pieces of information, creating a database of information for women. Her chair is a place where information and connections to information may be obtained.

The massage therapist/hair dresser shared the same experiences regarding hair clients, saying, "When you do someone's hair, you are trying to make them feel better about themselves." She also spoke candidly about the psychological aspects of her massage work, explaining that she actually studies psychology at massage school due to

the strong ties between body and mind. She explained that customers seek massage for emotional as well as physical reasons:

> People have a tendency to come and get a massage when they need help the most. It's physical, psychological, emotional . . . If you are tense, that could be emotionally bound, so on the physical level, we may be working with the muscles, but along with those muscles is the emotions tied to that, psychological issues tied to that.

This worker also stressed issues of trust, saying her clients "trust me with everything." She also focused on issues of touch, stressing that both of her services require that she touch a person's entire body:

> People open up to their hair stylists so easily . . . and I think the reason is contact. . . . In a lot of ways, massage clients open up to me even more than my hair clients do because I've been touching them nonstop, nonconnected for an hour. . . . There's a bond that comes with touch.

Through my interviews with day spa employees, it seems evident that women seek their services in times of psychological and emotional need. Some testimony from cosmetics counters suggests similar reasons for customer

visits, as with the fifty-five year old customer whose make-over "really gave her a charge when she was feeling down." One cosmetics worker spoke at length about the emotional issues discussed by makeup customers, offering several plausible theories for this outpouring of personal information. She compared her situation to that of a hair salon, which she regarded as an obvious site of intimate discussion, then explained why both sites may be provide women with a safe forum for self-expression:

> I think people feel like you're a counselor to their needs, personal needs. I don't know if they feel at ease because we are women and they are already talking about their problems as far as their face, which is an important thing to them . . . or if they don't have anyone else to talk to maybe. And they come to the mall, and they're lonely, so they talk to us.

Important issues emerge in this information. Female-operated beauty sites provide one of the only times when women can address personal fears in a women-only environment. Perhaps women with health needs, both physical and psychological, seek out beauty workers due, above all, to their gender.

A woman's need to discuss health issues with another woman has gone largely ignored. Even at the beginning of the twenty-first century, physicians, even those who

specialize in the female body, remain overwhelmingly male. As Chapter One points out, women repeatedly have had poor experiences with traditional medicine as their complaints have been judged often as psychological in nature, rendering both physical and emotional problems as highly suspect and unworthy of attention. Or, as seen with acne, a woman's illness may be used as an excuse to judge her sexual activity. While past issues may seem unrelated, Chapter One points out the lengthy period necessary for any medical fallacy to disappear.

The medical issue of concern for today's women is communication, an issue created by the years of female fear taught and encouraged by the medical community. Studies show that many women experience poor communication with physicians despite their willingness to ask questions. In 1972, a study conducted by Korsch and Negrete followed 800 mothers on trips to the pediatrician. The study found that "When they left the pediatrician, almost half of the mothers were still wondering what had caused the child's illness" (Wallen 137).

A 1979 study looked specifically at the gender differences in doctor-patient communication. Using questionnaires and tape-recordings of physician-patient interviews, Wallen et al. probed the exchanges of 34 male doctors with 184 male and 130 female patients. Interestingly, physicians were chosen at random without

regard to gender. With women making up approximately seven percent of physicians in the late 1970's, none were present in the random selection. This study focused on patient questions, physician explanations, interview time, and the technicality level of the physician's information. Their findings indicate that women and their doctors often appear to be operating on "different wavelengths" (142). Women asked more questions than men, but they did not receive more information:

> Women appeared to experience considerable frustration in their encounters with the physician. The amount of time the women spent asking questions was disproportionate to the amount of additional explaining time they received from the physician. . . . The doctors frequently responded to women's questions with a response that was less technical than the question. (145)

Doctors' questionnaire responses also revealed that they rated the psychological component of illness as higher for women than for men. Wallen et al. believe that physician stereotypes of female patients are responsible for this communication inequality. Here again the historical significance of female body fear comes into play. The out-of-control female, a stereotype which for so long informed even medical training, seems to play a critical role in the

medical interview and the physician's ability, or willingness, to communicate clearly with women:

> Perceptions compatible with women as not quite well, as dependent upon the medical profession, and as prone to minor complaints could interfere with a physician's ability to attune himself to his female patients' questions and could encourage a tendency to see the female patient's requests for information as expressions of psychological distress or dependency rather than as expressions of informed concern. (143)

Finally, we have a logical explanation for the woman who gave a privileged position to the opinion of her cosmetics saleslady over that of the dermatologist. Regardless of the skill or accuracy of beauty culture information, the information is clear and comprehensible. Beauty culture employees are trained in the art of communication, creating a sense of dependability and friendship. These women occupy a unique space. Discussing fears and flaws with them is acceptable, even encouraged. Gender and beauty bond these women together, even if on a business level.

One cosmetics worker explained how her company creates a communicative space. Through social interaction, a counseling session emerges:

> Our cosmetics line always tells us, "you need to make 'we-space'." That's where you're getting

> in contact with your customer, sitting them down talking to them. They want us to sit almost everybody down if we have time, so that opens people up, too. If they are sitting down and comfortable, I think they think about stuff and want to talk about it.

By seating a customer, the standing saleslady, in many ways, reiterates her authority. Just as the doctor examines a seated patient, the saleslady observes skin tones, assesses skin damage, and prescribes a daily treatment. But the term "we-space" implies that women are finding common ground, that salesladies are not simply prescribing but are listening. It is the act of listening which encourages women to share their stresses as well as their skin concerns. Apparently, discussions of real-life problems can emerge very early in the business relationship, even during the first consultation. This cosmetics workers shared one specific we-space experience:

> I had this one lady come in and tell me about having problems getting child support from her ex-husband, and she was having to move. She went into detail the first time I'd ever seen her.

This customer saw the cosmetics worker as a woman concerned with her welfare, be it skin health or domestic security. Through their consultation, she became

comfortable enough to share what was surely a traumatic event in her life. Perhaps she had no one else to talk to. Perhaps she needed a stranger, feeling uncomfortable sharing these details with her friends and relatives. Whatever the case, her trip to the cosmetics counter involved physical and emotional concerns. Ironically, it is this emotional factor which defines the attention given to women at physician's offices and beauty culture sites alike. Physicians seem to distance themselves from women due to the perceived emotional connections to their healthcare concerns. By capitalizing on the connection between mind and body, beauty culture has created a space where women can comfortably ask questions and receive information.

I began this inquiry with the assumption that the clinical strategy began, and continues, as an attempt to legitimize beauty practices by associating them with the medical community. Certainly, these workers act with and, in many cases, demand the authority associated with medical doctors. This is potentially harmful, as evidenced by those who feel that a cosmetics counter can substitute for a dermatologist. And certainly, women should not privilege the positive aspects of tanning above the potentially harmful effects of that practice. However, I have seen that emotional well-being and positive female relationships are commonly born through these sites because they perform

important functions largely ignored by the medical community. And while their marketing strategy profits from this interpretation, we must remember that traditional medicine is itself a profitable enterprise. The evidence of history and interviews suggests that clinical beauty culture is a space which is both important and trivial, but it should be neither celebrated nor feared. Women strive to be responsible consumers, making individual decisions based on their own needs and health concerns. Understanding the connections and distinctions between these fields can certainly help women think critically about those needs and concerns.

Chapter 3

The Invisible Burn: A Cultural Analysis of Female Collegiate Tanning

I

Behind the Tan Curtain

As mentioned in the Introduction, my interest in salon tanning prompted this dissertation on beauty culture in general. And while the preceding chapter analyzes clinical beauty sites including tanning salons, I think it fitting to probe more deeply the environment of salon tanning. As my research in the preceding chapter shows, salon tanning is, moreso than most beauty practices, potentially hurtful to women. Because it can increase the risk of skin cancer, a careful analysis of the practice and the women who participate is particularly appropriate. Here I want to examine the culture of salon tanning in an attempt to understand why young females are initially attracted to the practice and why, for so many, this attraction leads to a tanning obsession.

My first experience with a tanning salon came about seven years ago when I accompanied a friend to a small, shack-of-a-place near our university in Louisiana. I sat in the waiting area while she disappeared behind a shower curtain; I had been separated from the tanning community,

left in ignorance of the magnificent, glowing machine. When my friend returned, I asked her about this shadowy experience, only to learn she had sanitized her machine with a bottle of pink fluid provided in the curtained cubicle. She was unwilling to share any additional information. My interest re-emerged in the spring of 1996 after two of my brightest and most outspoken female students at the University of Oklahoma began to glow. Because I had taught these women for two consecutive semesters, I was comfortable asking them about their tans; they, likewise, appeared comfortable discussing the subject. They informed me that a tanning salon was located across the street from their dormitory. Describing the process as convenient, affordable, and rewarding, these girls made a strong case for the positive nature of salon tanning. In the coming semester, more and more tanners filled my classes. My questions about the practice multiplied, but my new students seemed rather uncomfortable talking about this topic; hence they answered my inquiries with quick, nonspecific answers. Although their skin tones gave them away, these students seemed to regard tanning as a discrete practice which should not be discussed with a casual or business acquaintance. There is a social art to this darkness; the tanner is comfortable physically signifying darkness but s/he is not so comfortable with verbal recognition of how that darkness came about.

I determined that questionnaires were my best opportunity for eliciting detailed answers which explain why tanners are drawn to tanning salons. But since my ignorance of this entire practice prevented my formulating effective questions and prompts, my first step in this project was actually to participate in salon tanning. I chose a well-known salon in Norman, which advertised on television year-round, due to their summer special: one month of unlimited tanning for $29. I now realized that tanning was indeed an affordable hobby for college students. But I was reluctant to venture behind the tan curtain. After a few days of planning and procrastinating, I made my way to the salon. Located in a strip mall on Norman's Main Street, it was a stark contrast to my first salon experience. Devoid of shower curtains, this sterile environment in many ways resembles a medical waiting room. Upon entering, you must sign in, giving your name and machine preference (horizontal bed or standing capsule). On my first day, I filled out a card which asked a few questions about my health including any medications I might be taking. A tanning assistant looked over this card, sized up my paleness, and stated, "Since you're so fair, we should start you out on ten minutes. You should work up gradually from there." While waiting for a bed, I glanced around the waiting area, noticing that everyone appeared between the ages of seventeen and thirty-five. A few men

dotted the area, but for the most part, young women sat quietly, tanning lotion in hand. These women appeared to be from varying social classes; several wore college sorority shirts, some wore plain tees with shorts, and one wore her Golden Coral waitress uniform. A television, elevated in a corner, provided a low, static-filled hum. A few magazines were scattered across the straight chairs, but no one seemed to be looking at those either. Tanners-in-waiting either sat in a semi-meditative state, merely waiting to hear their names called, or they gazed at the many posters of the extremely tanned which were displayed on practically every inch of wall space. These posters represent the extraordinarily successful tanner, encouraging beginning tanners to continue in their pursuit of the darkest possible skin. I stared at these portraits in absolute awe, immediately aware of my fluorescent white legs. Here I saw a new way of controlling my body, of representing femininity. Forgetting my research goals, I suddenly desired the tropical tan. I wanted to master this art, to exist comfortably in the tanned community.

When my name was finally called, I was told, "You'll be in Bermuda today." I walked down a long, door-lined corridor, each door marked by the name of a tropical locale. As I walked into Bermuda, I found a walk-in closet sized room equipped with a large bed, goggles, clean towel, clock radio, and oscillating fan. The tanning bed is

programmed from the sign-in desk to begin in five minutes, thereby giving the tanner ample time to disrobe and apply lotions before the rays begin. A timer on the wall indicated that I had four minutes remaining before the bed was activated, so I quickly prepared. The bed itself was rather eerie in form; one cannot help but compare it to a coffin. The bed consists of two parts: a flat surface on which the tanner lies accompanied by a hinged lid. The goggled tanner climbs inside the bed, then pulls the top towards his or her body in order to be fully enveloped by light. As the bed came on, I was reminded of death narratives which describe a tunnel of welcoming light. The rays were extremely bright, but the bed remained cool and comfortable, given the salon's temperature combined with the floor fan. Salon tanning, from this brief encounter, seemed to be a very peaceful, relaxing experience. While the idea of lying in a coffin-like capsule does not appeal to me, the setting did, in many ways, replicate the fantasy of lying on a deserted island. Ironically, the tanning salon seemed a good place to cogitate on the issues I hoped to write about. Before leaving, I asked the assistant when I should return. She replied that many tanners come on a daily basis, which was quite appealing to me at this point.

After returning home, I understood why salon tanning occupies such an air of mystery. Initially, I had blamed this on tanners' reluctance to discuss the situation with

nontanners. But now I realized that the aura of privacy, coupled with the pleasurable sensations of salon tanning, render the act difficult to articulate. After returning home, I also felt ridiculous. I did not want to be obscenely tanned like the models displayed on the salon wall, yet there was something relaxing and quite alluring about this practice. Another short tanning session appeared necessary, in order to make further observations, of course. The following day, the assistant suggested a twelve minute stay. Reminding myself that this was, after all, in the name of research, I headed for Cozumel. After about eight minutes, my stomach began to tingle. Perhaps I was not ready to exceed ten minutes. Today's tan would have to be cut short. I reached outside the machine and pushed the manual off button. That night, my stomach red and sore, I realized I had been burned, something I (and, as we will later see, my respondents) did not expect from a salon tan. Suddenly, the bed no longer symbolized relaxation. I was now reminded of Naomi Wolf's image of the Iron Maiden:

> The original Iron Maiden was a medieval German instrument of torture, a body shaped casket painted with the limbs and features of a lovely, smiling young woman. The unlucky victim was slowly enclosed inside her; the lid fell shut to immobilize the victim, who died either of

> starvation or, less cruelly, of the metal spikes embedded in her interior. (17)

Wolf goes on to use this device as a metaphor for society's attempts to force women into stereotypical notions of beauty. Ironically, I had been enclosed in a casket-like bed which represented beauty, yet damaged by body. This casket differed from the Iron Maiden only in that mine penetrated with rays rather than spikes. I had experienced the contemporary Iron Maiden in both actual and metaphoric terms.

Despite the skin damage, my visits to the salon were beneficial in several ways. I now understood the physical pleasures (and pains) of the salon. I began to feel that I could credibly critique this practice from a more objective standpoint. But, more importantly, the experience versed me in the tanning discourse community, helping me to formulate questions for other tanners. Likewise, by being temporarily captivated by the tanning experience, I was more prepared to interpret their answers.

While constructing my questionnaire, I kept in mind my own tanning experience, as well as the nonspecific answers I had received in the past. I began with a statement assuring respondents that these questions were designed to understand salon tanning rather than to condemn or encourage it. I then asked respondents to comment on twenty-three questions, focusing on how they perceived

themselves when tanned and to contrast that with how they felt when pale. Respondents were asked about other issues such as safety of salon versus sun tanning, the amount of time they spend at the salon per week, the age at which they first went, and the overall importance of being tan.

Finally, I informed my University of Oklahoma composition classes of my project, asking for volunteers to fill out my questionnaire. A number of students volunteered, and several took extra copies back to their dorms and sorority houses so that their friends could participate. While I had initially planned to focus on both female and male tanners, the willingness of females to participate as opposed to the rather reserved responses I received from my male students prompted me to turn my attentions entirely to the female tanners. While I was initially disturbed by this change of focus, it has been a blessing in disguise. I believe my findings confirm the importance of gender specific research in this area. As the questionnaire responses of these thirty-eight young women will show, female tanners are reacting to a range of societal pressures which do not necessarily affect male tanners, and these issues warrant special attention.

II

Questionnaire Responses

In addition to sex, age, and ethnicity, I asked, "How old were you when you first went to a tanning salon?" I was not prepared for ten or twelve or thirteen or even fourteen. But my group's average age for initial tanning was sixteen years old. Several of my respondents had been tanning for seven to eight years, one for ten years. When I asked "Do you feel salon tans are safe?" only 27% of those who answered the question said yes. When I asked them to explain their responses, one said "Yes, as safe as the sun." So at least 73% of my students thought they were harming themselves at the salon, yet they continued the practice. I then asked students to explain their concerns about the salon. 32% of the students stated skin cancer as a major concern. Another 13% said they worried about their skin's health (mentioning sun damage, wrinkles, and leatheriness but not mentioning cancer). Three young women were concerned only about hygiene at the salon, worrying that the beds were not cleaned well after each use. One of them said her only concern was "Crabs." The following are some interesting replies from those with concerns:

--"I feel it is unsafe and expensive"

--"I don't want to harm my skin"

--"I am slightly concerned about skin cancer"

--"I don't want to become leather"

--"the rays scare me"

Keep in mind all of these answers came from students who still go to salons. From the students who said that they had no concerns about going to the salon, I got these rather contradictory answers:

--"I heard it is bad for you, but what isn't?"

--"I heard it can affect reproduction"

--"No, because I don't go very often"

Interestingly, the students who had concerns went to the salon just as frequently as those who claimed to have no worries at all. Numerous respondents who are worried about skin cancer still tan three to four times per week.

So if pretty much everyone knows or at least has "heard it is bad for you," why are these women going and why so often? The request "Write a short paragraph explaining how you feel about yourself when you are tan" gives several answers, all tied to issues of vanity and wavering self-confidence. Most respondents offered at least three reasons for tanning, and the same issues appeared again and again. 29% said tans make them feel more attractive, 29% said they actually feel better when tanned, and another 29% believe they look healthier. 26% said they feel thinner while 18% feel more confident. Another 16% said tans improve their complexion. Two girls said they felt their cellulite was less noticeable, three cited

happiness with not having to wear make-up, and four said their clothes looked better on them.

When I asked them to write a paragraph which discusses how they feel when pale, only 14% said they were comfortable with their bodies. The remaining responses insinuate not only discomfort with, but also, and too often, repulsion by a pale appearance. 22% described themselves as either fatter or larger with another 22% describing themselves as either unhealthy looking or sickly. 8% used the words "ugly" or "disgusting", 8% described themselves as generally less attractive, and another 8% said they have little energy. Two girls actually described themselves as "gross." Other descriptions include: don't like myself, self-conscious, have more skin problems, hesitant to wear shorts and other summer clothes, dull, and uncomfortable. One Caucasian student said that without a tan, she felt "white."

These females feel a general discomfort with their natural bodies. And why wouldn't they? Women are continually bombarded with information which encourages them to scrutinize their appearance. Through cultural urgings to fight cellulite and "Flash 'em a Coppertone tan," young women have come to see the tanned body as a healthier, more attractive body.

I will now look at three issues which are central to the popularity of salon tanning. Through these issues, we

come to see not only what initially attracted these young women to the salons, but also what has sustained their obsessions with tanned skin, prompting many to make tanning a part of their general routines.

III

Discourse, Fragmentation, and Ritual

One way of explaining repetitious tanning, even by those concerned about potential dangers, is to analyze the discourse community of salon tanning and the trust which customers put in salon employees. While it's true that tanning beds can be found even in the backs of bait stands, most salons in Norman, Oklahoma, a nice suburban college area, are rather plush. When a new tanner first goes to my chosen salon, she feels as if she were on a holiday. After all, the salon workers don't just send you to a room; they give you an oversized ticket to a tropical isle. The staff of these established, clinical settings are young women who seem very knowledgeable about tanning practices and products. And of course, the waiting area is fraught with very dark models, infinite reiterations of beauty. Here at the salon, myth and reality, fantasy and possibility, collide.

Salons generally stress that their tanning method allows you a nice base tan which will prevent dangerous burns in the real sun. I received this information during

sign-up. Of course, my experience in the burning bed refutes this claim. Of my 27% of respondents who felt that salons are safer than the real thing, most said the safety was due to these timed stays, which supposedly prevent burning. The clinical setting also lends more credibility to the displayed tanning products, which can be purchased at often exorbitant prices. At my salon, the poster models (and the salon workers, we assume) were supposedly users of Heliotherapy, a multi-stepped tanning system which helps you over your "plateau" in order to achieve the optimum tan. The salon worker tried to sell me a bottle of this miracle tonic, but I resisted. On my second visit, in the heat of my tanning excitement, I was persuaded to buy a bottle of Quad Action Tropical Island Heat, a lotion distributed by MOST Prducts of Kalamazoo, Michigan. The label proclaimed this to be a "Unique . . . formula enriched with alphahydroxy acids!" Reading through the product information, I learned that my lotion is "ideal for professional tanners who have reached their 'tanning plateau.' There is no 'tanning plateau' with Island Heat." These statements reassure beginning tanners that they too can attain the extreme tan of the poster models; they can attain beauty to the fullest degree rather than settling for a non-professional, less beautiful tone.

The salon promises both beauty and safety. By using timed stays combined with "quality" products, young women

are assured that tanning is an overall positive experience. Perhaps these girls have never burned at the salon; but what the salons aren't telling them is that burning alone is not responsible for skin damage. A recent *Glamour* article on tanning cites an also recent study where after six weeks of low dose UV rays (a "dose significantly lower than that allowed in tanning salons"), subjects who had no signs of burning still showed skin damage "consistent with premature aging" (144). An American Cancer Society pamphlet titled "What You Should Know About Tanning Beds and Booths" (which is, by the way, on display at the University of Oklahoma Goddard Health Center) concurs, saying "there is no safe ultraviolet radiation." New tanners are also commonly told that tanning provides an excellent source of Vitamin D, which is true. But according to that same *Glamour* article, a few minutes of sun "with just a few square inches of your skin" exposed provides enough Vitamin D for days (146). Indeed tanners receive a variety of questionable facts from their salons. One girl who had been "educated" on the healthful aspects of salon tanning relayed to me that her salon proclaimed health benefits for the chronically depressed and for AIDS patients. She seemed genuinely moved by the humanitarian efforts of this salon.

For young women who are ashamed of their bodies, the salon can be a comforting environment. Understandably,

they often overlook the scientific facts in favor of the local Tanfastic's pseudo-science. It's easier to believe the girl who passes out goggles at the salon; she is a tanning authority, a young woman, herself quite tan, who hourly sees the results of the magic tan machines. The tan discourse community also includes the friends of our questionnaire respondents. I asked "How many of your friends use tanning salons?" giving the choices all, most, some, very few, and none. 30% said "some" of their friends go while a whopping 49% responded "most" go. For the girls who answered "most," it would be particularly difficult to think critically about the emotional need to tan, not to mention the health issues involved. While many women, myself included, are influenced by posters in salon waiting rooms and magazine photos, the dark skin of a friend could easily serve as an even greater incentive to tanning.

Undoubtedly, the most significant reason for my respondents' devotion to tanning lies in the self dichotomy that beauty culture has created for them. 84% of respondents described their tanned and pale states as perfectly dichotomous situations. Tan was attractive, thin, and confident while pale was ugly, gross, and fat. But how does one come to view her "natural" state as the mere antithesis of her preferred artificial form? The constant societal threat of "original ugliness" answers this question. This term, orginally used by Dean and

Juliet Flower MacCannell and later adopted by Alice E. Adams, offers insight into almost any female body alteration. Young women are groomed for a life of body altering exercises. Health clubs, beauty salons, and make-up counters are constant reminders that women must improve their bodies in order to be acceptable to society. Regular magazine and television ads argue that colored contacts improve the appearance of all who try them. The foundation of the cosmetics industry is, of course, the inferior nature of original skin. Just as African-American women were encouraged to bleach their skin in past decades, light skinned women are now encouraged to darken theirs. Encouragements regarding skin tone are particularly effective since they cause women to feel negatively about their entire bodies.

Alice E. Adams' discussion of women's plastic surgeries is particularly relevant to the tanning question. In her article, "Molding Women's Bodies," Adams discusses how women often do not question their motivations for seeking surgery, assuming that female improvement is always necessary. Members of the medical community itself act as if the female body is generally in need of repair, publishing, "in precise detail . . . the size, position, nipple placement, and proportion of the perfect breast." This attitude constitutes an "agreement of surgeon and female patient that her body suffers from an inherent

pathology preventing it from achieving 'natural' beauty" (73).

Our culture provides young women with a plethora of signs indicating their bodies' unacceptability. This is Naomi Wolf's beauty myth. As discussed in Chapter 1, Wolf argues that society "uses images of female beauty as a political weapon against women's advancement" (10). By encouraging women to work continually on their appearance, by demanding that they obsess over body shape and skin tone, patriarchal institutions can rest assured that females will never gain complete equality. The beauty myth causes women great physical and emotional pain as they strive to destroy ugliness. And as Adams points out, "If ugliness is women's original, hence 'natural,' state, it is equally natural for them to attempt to merge with the ideal" (73). This exhausting attempt to merge the original self with the ideal self results, all too often, in female fragmentation.

Lester Faigley's discussion of Guy Debord's *Society of the Spectacle* is useful in understanding this fragmentation. Faigley explains that "the desire to consume is predicated on the lack of a stable identity," which correlates interestingly with our respondents, young women who are overwhelmingly disturbed by the original color of their own skin. Faigley further explains:

> What is consumed in contemporary Western

> societies is not so much objects but images of objects, through which consumers imagine themselves as consuming subjects. Acts of consumption thus close the gap between subject and object, but open the gap within the subject. (12-13)

As the tanners consume the UV rays, they feel they are adopting a new identity; they are becoming this more attractive counterpart. However, the attractive characteristics of this new tan serve to remind our previously pale subjects of their natural shortcoming. They fear that nature will seep through their skin, revealing their ugly, untanned counterpart, revealing that they are not the dark women they purport to be. Despite diligent attempts at beauty, these women cannot escape the "original ugliness" underneath. Faigley explains that, "Because living consumers can never be self-identical with the imaginary consuming subject, the desires of the consuming subject are never completely fulfilled" (13).

This lack of fulfillment keeps the tanners coming back for more. Many go three to four times per week which, according to my salon assistant, provides one with the most effective UV exposure. In this diligent attempt to become the tanned image, to assert control over one's skin, to destroy the ugly original, they come to detest the forces of nature. In this fragmentation, some tanners do, in

fact, appear to adopt tanned as a natural characteristic. On one questionnaire, a respondent actually described herself when tanned as follows:

> My skin seems to clear up--better complexion. I don't wear as much make-up foundation, so I feel "naturally" more attractive or feel more "natural" looking.

By adopting tan as a natural characteristic, this respondent has been almost successful in suppressing her original, untanned self. While most other respondents pointed out dichotomy, she was able to disregard almost thoroughly her original state. Her quotation marks around the words naturally and natural indicate a deep-seeded knowledge of her present artificiality. Nonetheless, she is able to, on some level, equate her original state with tanness.

This false sense of the natural appears to be an effect of ritualized tanning. While some tanners go to the salon for only a few weeks of the year, ritual tanners have made this part of their year-round routine, viewing the practice as a basic beauty habit much like hair and teeth brushing. In her discussion of "The Ritual Body," Catherine Bell explains the circular nature of ritual; while the body creates its own rituals, it is still "molded" by these rituals, thereby considering the ritualized self as the natural self:

> By virtue of this circularity, space and time are redefined through the physical movements of bodies projecting organizing schemes on the space-time environments on the one hand while reabsorbing these schemes as the nature of reality on the other. (99)

The ritual tanner, a young woman who has wholly adopted tanned skin as "the nature of [her] reality," is certainly the most fragmented of our subjects. She is also in the greatest position of danger. If one could come to ignore the possibilities of paleness, certainly, one could ignore her initial concerns about the safety of this practice.

My study of these tanners indicates that perpetuating their perceived beauty is a priority at this interpretive moment. In an attempt to "occupy an imagined identity," they have become hooked on the consumption of UV rays. They are high on the self-esteem and positive attention they receive from having tanned skin; but because this can never be a fulfilling process, there is no place to come down. One of my final questions was, "At what age do you plan to discontinue use of tanning salons?" 55% either left the question blank, drew a question mark, or stated that they had not thought about that yet. Two girls stated that they would quit when they decide to have children. One said she would quit, "After I'm married." A few respondents gave specific ages, such as twenty-one, twenty-

five, thirty, or forty. One answered "50 to 60," while one nineteen year old said, "I haven't ever thought about it, maybe 60." Two others, ages nineteen and twenty, stated "never." Nonetheless, there were some hopeful responses to that question. One respondent said that she would quit "soon." Another who had described herself as concerned about skin cancer said that she planned to quit right now.

These responses articulate the importance of focusing tanning studies according to gender. The societal pressures which these young women face vary greatly from those faced by young college males. As this study drew to a close, I spent more and more time attempting to understand why tanned skin has so easily become a symbol of health and thinness for these women. But I have since realized the futility of that question. Skin tone is not of issue here; improvement through difference and self-control is of issue. The beauty myth, by its very nature, is irrational, "a modern hallucination" (Wolf 17). These young women, whether aspiring to blondness, muscle firmness, or tanned skin, believe their original bodies to be of inferior quality. They believe that asserting control over their bodies can help them to attain beauty. But unlike peroxide and aerobics, tanning salons are causing irreparable damage to these young women. Eating disorders continue to be researched in the name of saving lives. But tanning salons have been largely overlooked.

Certainly, we must engage our students and daughters in a dialectic which exposes fear and destabilizes myth. I hope that answering this questionnaire prompted some of these girls to think twice about tanning. Certainly, I do not expect a sudden change of mindset from those ritual tanners. But, at least, each of these women has asked herself, "At what age should I discontinue tanning?" Perhaps that question will echo each time they lower the coffin-like lid.

Chapter 4

Fictional Fears: Body Obsessions at the End of the Twentieth Century

Several years before Naomi Wolf's discussion of women's magazines, Janice Radway published *Reading the Romance*. In an attempt to understand the popularity of romance reading, Radway conducted a lengthy ethnographic study of one particular reading community. At the study's beginning, Radway knew that publishers of these novels claim "married women between the ages of twenty-five and fifty" as a majority of their readership (55). But her study delved far more deeply than age and marital status, probing these women's backgrounds, education, and reading habits. Through questionnaires and interviews, Radway sought to understand the group's attraction to reading, their ideas of "ideal and failed versions" of romances, and why they found the act of romance reading pleasurable (10-11). Her research asked very important questions about not only the women's desire for the genre, but also the genre's constant reproduction of that desire.

While Radway's arguments are quite complex, I want to condense, as much as possible, the core of her findings. Radway's readers saw romances as a form of personal recreation, a way of gaining experience which is itself

"different from ordinary experience" (61). Her readers were not, however, pleased with the sense of fiction as an escape. They had very particular expectations and "placed heavy emphasis on the importance of *development* [author's italics] in the romance's portrayal of love" (65). Indeed, these readers expected a happy ending for each couple (65). Radway describes the happy ending as the readers' way of identifying with their culture's principal form of female achievement:

> the story permits the reader to identify with the heroine at the moment of her greatest success, that is, when she secures the attention and recognition of her culture's most powerful and essential representative, a man. (84)

Women also respond to the nurturing role ascribed to the heroes of romance novels. The happy ending occurs as the heroine becomes the center of the hero's universe:

> by emphasizing the intensity of the hero's uninterrupted gaze and the tenderness of his caress at the moment he encompasses his beloved in his still always "masculine" arms, the fantasy also evokes the memory of a period in the reader's life when she was the center of a profoundly nurturant individual's attention. (84)

For Radway's readers, romances create a world they

enjoy visiting, a world of positive outcomes, remote locations, and men who are strong yet loving. These women "insist that romance fiction is fantasy," acting as if it has no role or effect within their day-to-day lives. Most academics, Radway included, would disagree with this assertion. In the academic community, romance reading has long been regarded as a conservative act which constantly reiterates traditional female roles. For feminist scholars, romances are agents of the patriarchy. Radway wonders "how much of the romance's conservative ideology about the nature of womanhood is inadvertently 'learned' during the reading process and generalized as normal, natural, female development in the real world" (186). But because these readers are imagining a more inviting world, because they are dissatisfied with their "ordinary existence," Radway offers a hopeful conclusion and describes their reading as "protest." Her explanation is worth quoting at length:

> [B]ecause I suspect a demand for real change in power relations will occur only if women also come to understand that their need for romances is a function of their dependent status as women and of their acceptance of marriage as the only route to female fulfillment, I think we as feminists might help this change along by first learning to recognize that romance reading

originates in very real dissatisfaction and embodies a valid, if limited, protest. (220)

Radway hopes this call to scholars will help them connect with these romance readers. By joining forces, she asserts that women can do more than simply imagine different possibilities; women could "imagine a world whose subsequent creation would lead to the need for a new fantasy altogether" (220). Radway recognizes the power of this medium, a power not based merely upon sales and popularity. Within this power is the ability and the need to self-replicate. By contrast, the ideal romance seems static. Yet within the need for fantasy, there is room for new fantasy. There is room for a new notion of "female development in the real world."

In the following pages, I, like Wolf and Radway, will turn to written texts which --like magazines and romance novels -- offer notions of female development. Indeed, new stories have become necessary as today female readers between the ages of twenty-five and fifty are often unmarried working women who seek more than a strong, "masculine" husband. Contemporary young women's novels seem to provide a broader look at life, focusing on career, relationships, and "body" issues. And like magazines and romance novels, they are a powerful and popular medium, selling millions of copies while prompting copy-cats and movie deals. While these works give painfully accurate

descriptions of the fears so many women suffer, the question of agency again lingers. Are these works, which seek to expose female fears, encouraging and perpetuating those fears? Are these works, by highlighting the common occurrence of female fear, normalizing fear for women?

With this question in mind, I begin my analysis, looking specifically at how contemporary culture, in the form of fiction, explores the intersecting fears associated with control and the loss of femininity. I chose works that speak to and from American concepts of beauty though they are not necessarily American works. Each has, however, achieved popularity in the United States. These works are particularly popular with young readers, as each revolves around female characters who are either students or young working women. English writer Helen Fielding's *Bridget Jones's Diary* and its sequel, *Bridget Jones: The Edge of Reason,* suggest these criteria. A very popular fictional character, Bridget represents the young single woman searching for Mr. Right. Her life is a celebration of obsessions and guilt, and she bases much of her philosophy of life on what she learns from American publications. Fielding's fellow Britishwoman Jane Green, likewise, adopts similar themes with comparable ties to American concepts of beauty. Her *Jemima J* focuses on an overweight journalist whose life is drastically altered when she loses weight (nearly half her body weight) and

comes to America. Perhaps the most well-written of my examples is American Helen Ellis's *Eating the Cheshire Cat*. This novel portrays young womanhood in tradition-bound Alabama and follows three girls from high school through college.

Each of these works reflects Showalter's three-part structure. Each features a young woman seeking to understand her role as a "willing participant." Each reveals the cultural conditions under which the young woman lives, thinks, and grows. And in each story, we see the authorities who help to establish and validate those cultural conditions both within and outside of these texts. As a result of these conditions, readers see young women struggling to control their own lives, and, of equal importance, fearing the loss of that struggle. Readers are also brought face to face with the concept of femininity as understood by young women, a concept which seems inextricably tied to the conservative role reiterated in romance novels and to the projections of the body reiterated in magazines. For each of these texts, I will analyze the issues of control and femininity. I will then seek to understand the implicit message of each story. What do these works teach us about femininity at the end of the twentieth century? Are they informed by the happily-ever-after narratives so popular with the previous generation? How do they view beauty culture and its role

within the lives of young women? Are these works a mild form of protest against beauty culture, or are they merely an extension of it?

II

Bridget Jones is a young Britishwoman attempting to take control of her life. By keeping a diary, she plans to keep check on progress towards her new year's resolutions. While the resolutions range from reducing the size of her thighs to eating more fiber, they are, for the most part, reflective of her need to improve her life and relationships by taking charge. Bridget plans to stop smoking, begin saving money, exercise, read, "be more assertive," and "be more confident" (3). But *Bridget Jones's Diary* is not a catalogue of one young women's progress towards her goals. Rather, it is a catalogue of obsessions, as readers see Bridget worship beauty culture and loathe herself.

Bridget does not blindly follow the dictates of beauty culture. She knows that her obsession is illogical. In a weak moment, she writes, "Our culture is too obsessed with outward appearance, age and status. Love is what matters" (71). Bridget is, nonetheless, a product of her culture.

While Helen Fielding is a Britishwoman writing about the experiences of young, single British women, this book is appropriate to my study for several reasons. First, it

has been popular with American readers, prompting the idea that these issues are important to those same readers. The book should enjoy even wider popularity as it has been adapted for film and will be released in Spring 2001. Additionally, Bridget Jones sees herself and her own culture as part and product of American beauty culture. Naomi Wolf argued the power of women's magazines, and Fielding reinforces that notion as Bridget describes why she must spend hours preparing for a date:

> Wise people will say Daniel should like me just as I am, but I am a child of *Cosmopolitan* culture, have been traumatized by supermodels and too many quizzes and know that neither my personality nor my body is up to it if left to its own devices. (52)

Issues of control permeate this quotation as Bridget feels she is, in her natural state, inadequate. America victimizes Bridget even further as her boyfriend Daniel replaces her with an American girl. Daniel claims to resist American notions of beauty, telling Bridget that men want "a bottom they can park a bike in and balance a pint of beer on" (137). Daniel's true preference is soon revealed when Bridget discovers a naked woman on his roof:

> There, spread out on a sun bed, was a bronzed, long-limbed, blond-haired stark-naked woman. . . . "Honey," said the woman, in an American

accent, looking over my head at him. "I thought you said she was *thin*." (153)

Suki, Daniel's new love, serves as the body and voice of America. As America's stereotypical version of beauty, she voices Bridget's greatest insecurity. In her next diary entry, Bridget blames the entire situation not on Daniel and Suki, but on her own weight. She asks herself why such situations occur and concludes: "It is because I am too fat" (157). America has won her boyfriend and succeeded in convincing her that she is herself responsible. America has created a cultural environment through which Bridget becomes, even more so than before, an "unhappy, vulnerable patient" within beauty culture.

This relationship between an ideal of American beauty culture and this character's experiences leads me to the novel's accounts of her fear and attempts at control. Bridget's diary specifically details her attempts to project poise, control intake of calories, and become physically beautiful. Through the entries devoted to these topics, readers see the day-to-day workings of a woman obsessed with how she looks.

Projecting poise becomes a key goal for Bridget early in the novel. She reads about a late British writer, Kathleen Tynan, who was described as having "inner poise" (77). Bridget takes this phrase to heart, writing, "when things have risked ranging out of control, I have repeated

the phrase 'inner poise' and imagined myself wearing white linen and sitting at a table with flowers on it" (77). Bridget seeks to control her outward demeanor in a host of ways, and she sees reading as an additional means of guidance. Bridget and her friends do enjoy women's magazines, but they seek the majority of their relationship advice from self-help books. These young working women do not allow fate to promise them a happy ending as illustrated by romance novels. Taking a proactive approach to relationship problems, Bridget and her friends generally discuss which self-help books will help them react appropriately. On January fourth, she and her friends have already met such a crisis and developed the following plan of action:

> Eventually, the three of us worked out a strategy for Jude. She must stop beating herself over the head with *Women Who Love Too Much* and instead think more toward *Men Are from Mars, Women Are from Venus*, which will help her see Richard's behavior less as a sign that she is co-dependent and loving too much and more in the light of him being like a Martian rubber band which needs to stretch away in order to come back. (19)

Later, after wasting a weekend waiting for Daniel to call, Bridget decides, "Must center myself more. Will ask Jude

about appropriate self-help book, possible Eastern-religion-based" (24). Bridget is open to any attempts at self-control including the concept of Feng Shui (222).

While self-help books do not seem to offer her a needed focus, Bridget's attempts to document her life are a more surprising failure. A significant portion of the novel is devoted to Bridget's catalogue of daily shortcomings and (less often) successes. Each daily entry begins in the following manner:

> Sunday 1 January
>
> 129 lbs. (but post-Christmas), alcohol units 14 (but effectively covers 2 days as 4 hours of party was on New Year's Day), cigarettes 22, calories 5424. (7)

Bridget keeps painstaking records of all food, beverage, and cigarette intake. At times, she describes herself as a "perfect saint-style person" (193). Despite her attempts to maintain control, her year progresses in a similar state of self-indulgence:

> Friday 13 October
>
> 129 lbs. (but have temporarily turned into a wine bag), alcohol unit 0 (but feeding off wine bag), calories 0 (v.g.).**Actually might as well be honest here. Not really v.g. as only 0 because puked up 5876 calories immediately after eating. (214)

Bridget's documentation has little effect on her activities, yet she considers dieting very important to happiness and fulfillment, saying early in the novel, "It is proved by surveys that happiness does not come from love, wealth, or power but the pursuit of attainable goals: and what is a diet if not that?" (16).

Bridget's obsessive dieting is only one element in her attempt to gain beauty through control. Her comments about weight indicate that to be slim is to be lovable (44). She believes that she can make herself lovable through time-consuming beauty practices, but she acknowledges that such practices can only work when a woman gives them constant attention. Original ugliness is certainly at issue here as Bridget spends hours preparing for a date, hoping her boyfriend will always and only see her at her peak, artificial form. She writes:

> Being a woman is worse than being a farmer -- there is so much harvesting and crop spraying to be done: legs to be waxed, underarms shaved, eyebrows plucked . . . The whole performance is so highly tuned you only need to neglect it for a few days for the whole thing to go to seed. (27)

Bridget's use of farming and nature symbolizes the cyclical qualities of beauty culture. Each part of the body requires attention, and that attention involves an unending

cycle of repairs. Much like the farmer who must remove weeds from cotton stalks, women constantly remove hair that grows back within weeks. Women must tint, moisturize, slough, and pluck. The idea of reverting to nature brings fear of original ugliness, but more specifically, it brings the fear of resembling a man coupled with the fear of having no self-control. Bridget briefly considers avoiding these practices, but she immediately pictures herself in frightening terms:

> Sometimes I wonder what I would be like if left to revert to nature -- with a full beard and handlebar moustache on each shin, Dennis Healey eyebrows, face a graveyard of dead skin cells, spots erupting, long curly fingernails like Struwwelpeter, blind as bat and stupid runt of species as no contact lenses, flabby body flobbering around. Ugh, ugh. Is it any wonder girls have no confidence? (27)

Beauty culture, for Bridget, is as a way of staying in control of her gender as she believes that without hair removal, she would signify manhood with facial hair. But she suggests that beauty culture is also a part of basic hygiene. Without her usual products and activities, she would wear dead skin and erupting pustules, not to mention the germ-ridden fingernails. While she knows that care of every aspect of her body is time-consuming, obsessive, and

destructive, the only alternative she sees is a complete disregard for beauty culture, which would itself be destructive and unhealthy.

Epiphanal moments do occur near the novel's end. While talking with her friend Tom, Bridget explains that during dieting, she ordinarily attempts to eat one thousand calories per day but usually consumes closer to fifteen hundred calories. At this, her friend says, "A thousand? But I thought you needed two thousand just to survive." Bridget writes:

> I looked at him nonplussed. I realized that I have spent so many years being on a diet that the idea that you might actually need calories to survive has been completely wiped out of my consciousness. (224-25)

Because of her calorie obsession, Bridget knows the exact number of calories in everything from one black olive to an entire box of chocolates. Fearing food's effects, she sees it as an enemy. Although she recognizes her obsession, Bridget does not regard this as a cause for concern:

> Tom says that I am sick but I happen to know for a fact that I am normal and no different from everyone else, i.e., Sharon and Jude. (225)

With her best female friends sharing her views of dieting and food, Bridget feels safely within the boundaries of normal female behavior. In Chapter 3, I discussed how the

phenomenon of salon tanning is augmented by the tanning discourse community. Bridget's circle of friends serves as a similar community, offering approval and reinforcing the established pattern of behavior. Only a voice from outside this women's discourse community opens Bridget's eyes to the physical need for food.

Of course Bridget Jones's behavior is in no way affected by this epiphany. In the novel's sequel, *Bridget Jones: The Edge of Reason*, she seems even more obsessed. While this novel is generally weaker than the first, Bridget continues the same structure, offering a catalogue of daily consumption and weight. Her obsession with self-help has increased, and she actually becomes a guru of sorts, offering reading advice to others in need. Her theory is simply that self-help has become a "new form of religion" (60). But it is her obsession with physical beauty which renders Bridget ridiculous. In this book, Bridget and a friend vacation in Thailand. Drugs get planted in her baggage, resulting in her temporary imprisonment. Rather than suffering, Bridget sees the event in almost positive terms because of her extreme weight loss in the prison, describing it as the "triumphant culmination of [her] 18-year diet" (262).

Bridget's weight loss, like all aspects of fear in these two novels, is described in comic tones. Regardless of how much Bridget appears to be victimized by beauty

culture, readers are expected to see the light-hearted aspects of each fear. The first book's back cover itself says, "Bridget will have you helpless with laughter." Women are expected to agree laughingly with Bridget's assessment of beauty culture as a worthwhile endeavor which protects women from nature. Women are asked to see Bridget as a typical young woman in contemporary (western) culture. The "Praise for" page quotes the *New York Times*, saying this diary has made Bridget "the best friend of hundreds of thousands of women." This page even suggests that the diary will create a discourse community of its own, quoting *The Philadelphia Inquirer* as saying it will "cause readers to drop the book, grope frantically for the phone and read it out loud to their best girlfriends." Most disturbingly, women are asked to see themselves as Bridget. The back cover of *Bridget Jones's Diary* promises that, "like millions of readers the world round -- you'll find yourself shouting, 'Bridget Jones *is* me!'" In an online chat sponsored by The Literary Guild, Fielding supported this statement, saying, "A lot of girls come up to me telling me they are Bridget Jones."

Bridget does give a sense of community to many young women who may, of their own will, see themselves in this book. Her story shows those young women that they are not alone in feelings of inadequacy and lack of confidence. Perhaps many of those women will welcome the novel's comic

attitudes. Fielding herself finds this comic tone therapeutic, and she believes it is largely responsible for Bridget's popularity:

> I think the book touched a nerve which is something about the gap between how women feel they are expected to be and how they actually are. . . . It's a relief to laugh at your imperfections instead of secretly agonizing about them. ("Helen Fielding: The Making")

Despite Fielding's comic intentions, the ridiculous nature of Bridget's obsessions cannot be ignored. Far from comic in real life, obsessions with calories -- the idea that food is our enemy -- is, in fact, destructive. While Bridget acknowledges the fallacy of her thinking, she never sees the need for change.

Far worse than Bridget's indifference to her sickness is Helen Fielding's willingness to reward her for obsessive behavior. Throughout books one and two, Bridget is determined to find the man of her dreams and escape a dead-end job. Through the course of these books, she reads self-help books about relationships, works hysterically at grooming, and does little work at her actual job. Bridget has no work ethic, yet by the end of her second diary year, she is rewarded handsomely with Christmas miracles. At the end of *The Edge of Reason*, she has snagged a well-known civil rights attorney for whom she has pined; and she has

been offered a promotion at work, despite having quit a few weeks earlier.

These novels by Helen Fielding send a strong message to young women. While they point out the unfair aspects of obsessive beauty culture, there is no awakening. Bridget realizes the obsessive measures she takes to assert self-control and reify her femininity. Yet her stories teach us that laughter is the best way of dealing with hardship. Bridget makes no real attempts to change her life. And her happily-ever-after ending suggests that protest is unnecessary. By adhering to society's design, women will find happiness in the love of a man.

III

A similar attitude towards beauty and attainable goals occurs in *Jemima J.* Written by another Britishwoman, this novel seems to appropriate many characteristics of the Jones diaries in order to appeal to the same audience. The title character is a young, working Singleton. Like Bridget, Jemima is a journalist, though she holds the least glamorous of newspaper jobs. In the most striking similarity, readers learn that Jemima's last name is Jones. The novel begins with Jemima's saying, "God, I wish I were thin" (1). Jemima is on lunch break, having a double-decker sandwich while looking at magazine photographs. Like the novels by Helen Fielding, this work asserts a

strong correlation between American culture, magazines, and Britishwomen's body fears. Jemima is particularly affected by American culture as she loses over half her body weight for an American health club owner. Jemima goes so far as to move to California in search of her dream life, proving American beauty culture's global influence.

While Jemima eats multiple unhealthy meals per day, we quickly learn that she is forever planning a diet. She just never begins the diet. She feels out of control, yet we also learn later than being overweight has, in a sense, been her way of controlling her body and, consequently, her sexuality (330). Nonetheless, she daydreams about Ben, a handsome co-worker with whom she builds a friendship. Ben treats Jemima with great respect, but he has no sexual interest in her, acting much as if she is "one of the guys." Of course, Jemima never lets anyone know of her feelings for Ben. She has hidden her self, her interests, and her aspirations from friends and co-workers. It is, therefore, no surprise that she decides chat rooms are a valuable way of meeting men. She sees the internet as a way to take control of an uncontrollable situation:

> [U]nfortunately my size dictates my social life, and my size is the one thing I can't control. I know what you're thinking, go on a diet, but it's not as easy as that, I just can't stop the cravings when they come . . . I mean, this could

> open up a whole new life for me, a new life that doesn't care about looks, about weight, about expanses of flesh. (49)

Jemima embarks on a lie which will stretch many months and thousands of miles. She begins an electronic relationship with Brad, a Los Angeles health club owner, and fabricates most aspects of her life. But the greatest fabrication is the airbrushed photograph of her face which sits atop a magazine model's body (109-10). Once Brad sees this photo, he insists that they meet. This should bring an end to Jemima's deceit. Quite to the contrary, she determines, in an act of desperation, to become the woman in the photo. She runs to the nearest gym and joins (126).

Jemima is a woman fighting to control her image. She wants men to treat her not like a male friend, but like a woman worthy of love and attention. She realizes that losing weight is the only way to attain this goal. Of course, "what is dieting if not an attainable goal." She becomes a healthy eater, despite feeling guilty for eating at all, and visits the gym twice a day (141). While the narrator states that Jemima "has taken this dieting business to extremes," readers see a woman living well. Within a few months, she has gone from over two hundred pounds (136) to a thin one hundred twenty-one pounds (167). In thirty pages, Jemima is transformed. Her trainer fears she is anorexic. But as the narrator says, she is "merely

obsessed, which is definitely equally unhealthy, and possibly nearly as dangerous. We shall see" (182).

The narrator's comments concerning Jemima's extreme dieting and dangerous obsession imply that Jemima will learn a valuable lesson concerning bodily obsessions. But if readers are waiting for Jemima to change directions, they will be waiting for quite a while. As a result of her weight loss, Jemima travels to the United States and lives with Brad. In California, she is surprised to learn that everyone is not beautiful (196). And in an ironic twist, she learns that Brad is secretly involved with his overweight assistant (316). As a result of this heartbreak, Jemima does realize that she is obsessed with her body. She even vows never to use food -- either too much or too little -- as a way of controlling her life (331). Despite this epiphany, Jemima is suddenly reunited with Ben, who has not seen her since before her diet began. He does not recognize her and begins to flirt (354). Once he realizes this is indeed his old friend, they become re-acquainted:

> The longer Ben sits in this restaurant with this beautiful woman, the less she becomes a gorgeous blond, and the more she becomes Jemima Jones, for Ben looks past the legs, the dress, the hair, and he sees his old friend, a friend, he suddenly realizes, he never wants to walk out on

again. (355)

Ben hardly looks past Jemima's looks. He is physically attracted to her, and because of this new sexuality, he recognizes her as both feminine and worthy of his physical attention. They retreat to his hotel room and, after a comedy-of-errors separation, are reunited for the last time. The novel closes with an epilogue which stresses their happily-ever-after existence. The final sentence offers:

> But fairy tales can come true, and just like Jemima Jones, or Mrs. Ben Williams as she's known outside of the glossy magazine where she now works, if we trust in ourselves, embrace our faults, and brazen it out with courage, strength, bravery, and truth, fate may just smile upon us too. (373)

Because she lost almost ninety pounds, Jemima is rewarded with the man and the job of her dreams. Weight loss gave her the physical ability to attain Ben; additionally, it gave her the confidence to pursue the job for which she had previously felt inadequate.

A close reading of this passage demonstrates the novel's fundamental view. Ending with a motivational speech, the novel reiterates that all things are possible, an honorable objective. But does this passage accurately portray Jemima? Readers are urged to commend her, and they

are encouraged to emulate her, because of her tenacity, bravery, courage, and truth. Indeed, Jemima proves that she possesses a strong will. But I would not characterize her as brave. Her entire life, from overeating to overdieting, is blamed upon fears and insecurities. While she does, at the end, determine to avoid using food as a crutch, readers never really see her act upon a new sense of strength. Jemima is, needless to say, a poor example of truth. Her entire weight-loss plan is instigated by her willingness to lie to a stranger. She continues an internet romance with Brad for months, all the while fabricating her life and body. Brad's acts of deception are ironic and just punishment. But Jemima never realizes that Brad's acts are warranted; she never accepts her complicity in this deceptive relationship because she is immediately rewarded with Ben.

The final motivational speech forces readers to ignore the novel's various remarks concerning obsession and danger. While readers are prepared for events which will awaken Jemima to the dangers she faces, the negative aspects of weight loss are quickly offset by the powerful fairy tale ending. Although the novel suggests itself as a protest against bodily obsessions, it cannot escape the compulsion towards happiness. Good things happen to Jemima J as a result of rapid, obsessive weight loss. And as the epilogue stresses, if other women work as hard as Jemima,

"fate may just smile upon [them] too" (373). Green's novel champions the importance of meeting society's perceived notion of beauty by showing a miserable, overweight woman whose life is made infinitely better as a result of obsession. Once fat and alone, the new Jemima will spend a glorious eternity with a man -- "her culture's most powerful and essential representative" -- who values her physicality over her intellect.

IV

While the first three texts indicate the far-reaching influence of American beauty culture, this fourth text speaks specifically of how American beauty culture is replicated from generation to generation. Helen Ellis's novel probes how mothers and social hierarchies perpetuate body fear in American culture. *Eating the Cheshire Cat* revolves around three young women in Alabama, following them from their early teen years through their sophomore year of college. The story's central focus is the friendship between Sarina Summers and Nicole Hicks. This friendship is constantly affected by pressures applied by Mrs. Summers and Mrs. Hicks. Each life is forever changed as a result of these beauty-obsessed mothers and the sorority they shared.

Eating the Cheshire Cat opens with a startling though

confusing scene: a drunken Sarina Summers is rushed to the hospital with two broken pinkies. A doctor tries to determine the cause of Sarina's injuries but gets no information from either the girl or her mother. Mrs. Summers seems unbothered by her daughter's inebriation, wanting only to have the bones set. Readers soon learn the fingers are broken as a direct result of beauty culture. After the bones are set, Sarina's mother inspects the two splints, saying, "'They're going to be beautiful!'" (17). Following this remark, readers learn Sarina's breaks are the result of a plan to perfect her crooked pinkies, which bent inward due to a recessive gene. On Sarina's sixteenth birthday, her mother spiked the punch and, according to a plan agreed upon by both, destroyed the evidence of imperfection:

> In front of her, Sarina saw her arms outstretched, her wrists duct-taped to a cinder block. Except for her pinkies, her fingers were curled into fists and taped. Her pinkies laid out and taped. The cinder block taped to the table. Her mother standing before it all. "Oh," cried Sarina. She was too drunk to speak. "Be a good girl," Mrs. Summers said as she picked up the ax. She lifted it, blade backwards, over her shoulder. "Keep your eyes closed." Sarina did as she was told. (21)

Sarina's mother will accept nothing less than physical perfection from her daughter. And Sarina is always willing to participate in her mother's plans, from perfecting pinkies to snagging a wealthy beau. She learns to value the power of manipulation and, more importantly, the power of physical beauty.

Sarina's best friend never learns these lessons. Despite her own mother's attempts to change her, Nicole Hicks values friendship and love above beauty culture. But Nicole is not without her own problems. She is fixated upon Sarina, wanting nothing more than to keep Sarina happy. Nicole, at times, seems to be in love with Sarina, implying that she is a lesbian. But as the story unfolds, Nicole appears, more and more, to be obsessed with Sarina. Indeed, Nicole appears mentally unbalanced as she values Sarina's happiness above her own. To insure Sarina's happiness, Nicole makes sure her friend is always the more beautiful. So that Sarina can be comfortable with her own appearance, Nicole presents herself as very plain (66).

Nicole's natural look is unsettling to her mother, a former sorority girl. Mrs. Hicks is always eager to do her daughter's make-up, saying that with Clinique, "I could bring out your color" (65). She argues that artificial beauty is far better than natural beauty because, in their culture, artificial is expected. She tells Nicole's father, "She is a teenager and this is the South. We roll

our hair and we wear lip gloss" (66). Just as Mrs. Summers' act of violence reveals her devotion to beauty, so does this statement by Mrs. Hicks. In Mrs. Hicks' world, cultural beauty codes should not be violated. They are to be accepted, especially by young members of the community who will insure the code's perpetuation. Her use of "we" is also revealing as it implies that Mrs. Hicks still identifies with teenaged women. Throughout the novel, this youthful obsession becomes more and more apparent as Mrs. Hicks insists that Nicole follow in her footsteps, thereby allowing Mrs. Hicks to relive her own youth.

Nicole may portray the natural look, but like Sarina she, too, uses her body as a canvas. Rather than participate in beauty culture, Nicole participates in bodily mutilation. Because of emotional instability, compounded by tensions between herself and her mother, Nicole begins to cut her arms and hands. Her self-mutilation is not taken seriously by her family as they blame Sarina for Nicole's problems. But Nicole is lashing out at her mother. Rather than verbalize her discomfort with beauty and tradition, she writes her pain upon her arms and hands, choosing to wear that pain rather than hide it.

Sarina and Nicole do not remain best friends as Nicole's behavior renders her a hindrance to Sarina's life of popularity. But they are reunited by their mothers'

shared love. Both mothers were members of Delta Delta Delta as college students. For Sarina, this prestigious sorority provides access to glamour, attention, and power. For Nicole, tri-delt is a way of pleasing her demanding mother while being near Sarina. But the sorority is a stressful environment, especially for the fragile Nicole, and pledgeship occupies far too much time and energy. As she approaches initiation, her mother's need to relive her own initiation is revealed. Mrs. Hicks asks Nicole to wear her old initiation dress during the ceremony. Nicole admires the dress but immediately says, "but you're so much smaller than me." Her mother replies:

> "Nicole, you're not overweight. We're just talking ten pounds." She pulled a package of over-the-counter diet pills from a shoe box on the top shelf of her closet. She handed them to her daughter. She said, "It would mean so much to me. . . . You've only got a week left. Do this for me. Do it for yourself." (166-67)

And so Nicole Hicks lives on grapefruit, salad, and diet pills for one week in order to embody her mother's dream (167). She succeeds, and her mother is proud. But because Nicole is already a fragile young woman, a week on speed leaves her an emotional and physical wreck. She shows up for initiation sweaty, nervous, and ill. After initiation, she begs to be taken home, but Sarina ignores her pleas,

insisting that she attend the post-initiation party. Eventually, Nicole loses control and, in a sorority house bathroom, slashes her hands and arms until fainting (169-70). Nicole's public act embarrasses her mother and sets off a chain of event which result in her physically attacking her mother and, finally, in her murdering Sarina.

Sarina and Nicole are examples of how differently young women can be affected by beauty culture. Each young woman is dominated by a beauty-obsessed mother. Sarina, like her mother, recognizes the advantages offered by beauty; therefore, she is willing to participate in beauty activities, regardless of the pain. But Nicole is unmoved by her mother's encouragement, and she rebels by disfiguring the very body her mother sought to perfect.

Ellis's novel illustrates the complex relationship between young women and beauty culture. The novel is itself far more complex than the previous works because it offers no easy answers, no happy endings. While Sarina is the ultimate victim in this novel, her story, for the most part, reiterates that young women enjoy success as a result of beauty. Until her death, Sarina got whatever she wanted. Nicole, in a sense, serves as a powerful warning to young women who may rebel against the existing social conditions. She is an outcast, alone and deranged. She has humiliated her family and killed her friend, all results of uncontrollable rage. At the same time, Nicole

is the novel's greatest victim, and she reminds readers that forced conformity can be the most dangerous action of all.

Other aspects of this novel reveal rather contradictory messages about beauty. While the novel often seems to critique sorority life and its acts of conformity, the plot reiterates the importance of social acceptance. Nicole never merits that acceptance; therefore, she is left murderous, miserable, and alone. And while the disadvantages of weight obsession appear to be highlighted, Nicole is the only person who suffers as a result of that crash diet. Her mother and her sorority sisters never accept their complicity in this situation. Only Nicole is faulted for this loss of control.

Eating the Cheshire Cat reminds young women that their mother's institutions should be respected while pointing out the often contradictory missions of these institutions. This book associates women who do not participate in beauty culture with uncontrollable and often destructive urges. But those who do participate in beauty culture are even more frightening as they put beauty before family, friends, and personal fulfillment. Beauty may itself be destructive, but no viable alternative exists as women negotiate the delicate balance between personal goals and social codes.

V

While these works share a common theme, their methods of dealing with the theme are alarmingly similar. Each of these works vividly portrays a young woman who, due to discomfort with her own body, works extremely hard to combat what she sees as responsible for that discomfort. Whether it be fat or crooked fingers, each young woman is willing to sacrifice in order to accomplish comfort with her body. Bridget Jones sacrifices time while Sarina Summers sacrifices her hands. Jemima Jones sacrifices her body and truth. Individually, each work stands as a reminder of the extreme body fear which young women endure. But collectively, these are themselves a frightening body of works. Together, they reiterate not simply the state of female fear, but the importance of perpetuating and braving that fear. Through body fear, young women achieve selfhood and their ultimate goals. Control and femininity are, after all, attainable goals, gateways to fulfillment.

While conformity is critiqued throughout these novels, conformity is always positive in relation to its alternative. The alternatives have, thus far, been presented as loneliness, depression, uncontrollability, and job dissatisfaction. In these works, women generally conform to societal notions of beauty. Their rewards are great: job success, a homecoming crown, and, the greatest reward of all, a man. The man-focused happy ending of

romance novels seems difficult for these writers to ignore. Only Ellis creates a story where no one wins; each of her characters is victimized by obsession and control. While her story offers a more detailed account of beauty's psychological impact, the main goal -- finding "the one" -- is never far from hand. Most of Ellis's characters share that goal, regardless of their failures.

Radway was able to interpret romance reading -- despite its insistence upon a happy, matrimonial ending -- as a protest against the ordinary, day-to-day life to which those readers had grown accustomed. I expected these contemporary novels, novels by a new generation of writers, to go beyond that mild protest. Wouldn't these women be offering a more realistic interpretation of the lives of working young women? Wouldn't they go beyond the mild protest of romances, imagining a better world that included more freedom for women? As I read these novels, I came to see most of them as simply a new generation of romance novels. Indeed, they are the popular reading material for a new generation. They have been, like romance novels, informed by cultural conditions that insist upon female conformity. These novels differ from traditional romances in their devotion to the issues contemporary to young women as they seek to expose them in various modes. They highlight these major concerns of women: issues of control, the body, and the constant production of a feminine self.

Yet these novels, like romances, do little to affect change. These novels allow women to share female fears while imagining eventual success in a world that already exists. The possibility of a new world does not exist. Jemima Jones would have never attained her goals as a fat woman. Readers know this, and that is why they applaud her at the novel's end.

These contemporary novels must be applauded for bringing female fear to the forefront of women's fiction. Their portrayals of beauty culture and its system of punishment and rewards are often powerful. But laughter is not the best approach. Fielding's belief that women must be able to laugh at their social predicament illustrates her view of women as powerless against beauty. Green's motivational speeches, like humor, urge women to make the best of the situation; by working hard and accepting your lot in life, good things will occur. Ellis showcases the ways that women are victimized by beauty culture. But Nicole's only recourse is violence. Only by disfiguring herself and her mother, and by murdering her best friend, does Nicole escape beauty culture. Violence is no more useful than humor, leaving readers to, once again, see beauty culture as an unstoppable phenomenon.

Radway worried about the educational qualities of romance novels. While her subjects proclaimed romances as mere fantasy, were not they absorbing ideas for how day-to-

day life should be lived? These contemporary novels, which avoid any notion of change, may themselves offer a dangerous education on female fear. Most disturbing to me is the didactic quality of *Jemima J* as it stresses the glorious rewards of obsessive weight loss. However, these novels share an over-arching philosophy of beauty culture. In each case, alleviating body fear is an all-or-nothing activity. The characters either embrace or refuse their role within beauty culture. This all-or-nothing positioning indicates that beauty culture, like a religion, must be adhered to above all other ideology. A woman cannot accept some beliefs while declining others. She must accept complete indoctrination.

This lack of middle ground is what I find so disturbing. My study has indicated that while beauty obsessions can certainly lead to destructive behavior, many women are able to participate moderately without becoming obsessed. By rewarding obviously obsessed women like Bridget and Jemima, these works attempt to diminish the dangers of bodily obsession. Perhaps women are, more often than not, punished for avoiding beauty culture. But that punishment must be weighed against the harsh brutalities of body obsession. Whether intentionally or not, these writers simultaneously describe and prescribe notions of the female body. Much like the rapper who proclaims his music as representative of real life, these authors are

dealing with their subject matter in a way that offers little hope for change.

These works result from the writers' own supportive cultural environments. The writers are responding to the various cultural elements under which they live, often the same elements affecting their characters. At the same time, these works are becoming a part of that cultural environment, reifying many of the notions with which these writers seemed so concerned. I argue that if women want to redirect any of the energies devoted to beauty culture, we need to give young women texts that help them make informed and independent decisions. These texts often critique beauty culture; but because no admirable character rises against beauty culture, they have not affected change. They have shown two ends of the spectrum while most of us are living somewhere in between.

Conclusion

As I approached this topic, I expected to write with rage, almost as if my emotion could itself make a difference in the lives of women. I expected to offer a fuller account of beauty culture, an account which could augment the ideas of theorists like Naomi Wolf. By showing women the sum total of body fear and its history, couldn't I affect change? Perhaps the greatest asset I brought to this project was not my emotion; it was simply my gender. As I delved more deeply into my topic, I began to respond to other theorists not simply as an academic, but as a woman. So when I re-read Naomi Wolf's work, I saw that more than historical positioning was missing; the voices of ordinary women were missing. As a critic, I could assess the body fears of women through various texts; but as a woman, I needed to confirm the theories of those texts through the lives of real women. What you hold is one woman's attempt to negotiate the intricate boundaries between body obsessions and cultural obligations. It is an analysis of beauty culture, its social rewards, and its personal punishments. But more than that, this work emphasizes the many element of agency within this self-perpetuating phenomenon.

A goal within this study has been to dismantle the theory which suggests that male-centered institutions, coupled with women who cannot read culture "in an informed way," are solely responsible for the beauty myth. My historical and field research have indicated that the cause has been far more complex. While the historical information illustrates why the female body has been so closely identified with fear, the analysis of authority figures within clinical beauty proves that these sites are a response to long-standing fears. Beauty culture cannot be attributed simply to capitalism and misinformation. Women are more comfortable with female-centered sites not because of tactics or gimmicks. On the contrary, they are responding to the open discourse communities found at these sites. They are responding to the female-centered rhetoric which celebrates women controlling their own bodies. My study suggests that the medical community, developing according to theories of the unruly female body, is itself one of the primary agents responsible for the creation of these sites. And while these businesses make extensive promises, women are responsible for their own ritualistic participation. A woman who tans excessively knows that such behavior is not healthy. I have continually assessed beauty culture according to these three elements. But I must reiterate that each is at fault for the existence of beauty culture, regardless of how hysterical or normal the

participation may seem.

The cycle of self-perpetuation seems unending, particularly in light of works purporting to inform women on the dangers of beauty culture. Wolf's thesis is compelling, but her voice rings with condescension. Women interested in fighting stereotypical notions of beauty might, like me, find themselves waging war not against beauty culture, but against Wolf's high-minded analysis of women and their lack of critical skills. Likewise, works of fiction which, on the surface, indicate a dissatisfaction with beauty culture all too often reiterate beauty culture's ability to combat primary body fears. If even these works are vain attempts at change, why should my arguments gain a different result?

As a woman who participates moderately in beauty culture, I have attempted to offer a balanced look at fear and the female body. My own position has not afforded me a privileged understanding of this fear. Indeed, research has been the key to that understanding. But my position has afforded me the inability to see beauty culture in black and white terms. As a critic, I see the destructive elements, but as a woman, I cannot deny my excitement during Lancôme Bonus Week. The antithetical elements of beauty culture are clear to me because I experience them. I am repulsed by women's magazines, yet I enjoy their health reports. I detest the glorification of youth, yet I

believe in anti-aging cream. I fear salon tanning, yet I believe tanning is a pleasurable activity.

The women writers discussed in Chapter Four obviously share this dichotomy of self. Each sees beauty culture as a topic worthy of discussion, yet each plot reinforces the cultural advantages of beauty culture. Perhaps writers cannot escape the cultural environments under which they write. But I would suggest that addressing this dichotomy is the first step in articulating an effective message for other young women.

In the Introduction, I argue that a fear cannot be diminished until it is understood. To that end, I have offered a detailed account of how these fears began and why beauty culture, while a retrograde force, is also a valuable tool in alleviating that fear. At the end of her first chapter, Wolf writes,

> If we are to free ourselves from the dead weight that has once again been made out of femaleness, it is not ballots or lobbyists or placards that women will need first; it is a new way to see. (19)

Once again, I disagree. Perhaps, more than anything, women --particularly female critics -- need a new way to listen. Just as Radway urged feminists to value the experiences of romance readers, I urge critics to value the voices of women who find beauty culture a positive experience. At

the same time, we must learn to differentiate between destructive and harmless beauty practices. Villifying beauty culture, as Wolf does, can only succeed in limiting the listening audience. Finding humor in obsession may gain a wide audience, but it will do little to affect change. I hope to have offered thoughtful approaches that may be used in future discussions of female fear. At the very least, I endeavored to listen.

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Appendix One: Anonymous Interviews Cited

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---. Personal interview. 11 February 2000.

---. Personal interview. 22 February 2000.

---. Personal interview. 26 February 2000.

---. Personal interview. 13 March 2000.

---. Personal interview. 14 March 2000.

---. Personal interview. 2 April 2000.

---. Personal interview. 4 April 2000.

---. Personal interview. 6 April 2000.

---. Personal interview. 13 April 2000.

Appendix Two:
Anonymous Tanning Questionnaire

1. Sex_____
2. Age_____
3. Ethnicity_____
4. At what age did you first go to a tanning salon?_____
5. How many times per week do you tan?_____

6. How dark do you attempt to get? Circle one:
   very dark dark moderately tan slightly tan

7. How many of your friends use tanning salons? Circle one: all most some very few none

8. Do you and friends compete to see who is darkest?_____

9. Do you feel that salon tans are safe?_____

10. Do you feel that salon tans are safer than sun tans?
    yes or no
    Explain:

11. Write a short paragraph explaining how you feel about yourself when you are tan.

12. Write a short paragraph explaining how you feel about yourself when you are pale.

13. Is being tan important to you? Explain:

14. List any organizations with which you are involved.

15. Describe the people who tan at your favorite salon: age, sex, social status

16. Do you consider tanning salons to be places where you might meet someone of the opposite sex? Why or why not?

17. Do you have concerns about using a tanning salon? Explain:

18. Do you ever feel that tanning is a necessity? If so, when?

19. At what age do you plan to discontinue salon tanning?

20. What body part is it most important to tan?

Which is least?

21. How much money do you spend per year on salon fees, oils, etc?

22. Why do you feel that tanning is important to so many people?

23. Do you have any tattoos or interesting piercings? If so, please describe?

Appendix Three: Interview Questions for Beauty Culture Employees

--Where do you work? What is your job title?

--Describe the training you received regarding your line of work?

--What type of training did you receive regarding the products you sell?

--Do you consider yourself an authority in your field?

--How would you describe the atmosphere of your workplace?

--How do customers regard you and your workplace?

--Do you feel that the clinical atmosphere affects the way women regard you, your products, your knowledge level?

--What do customers expect from you?

--What is their most common request?

--What is the oddest request or expectation you've heard?

--What kinds of body fears do you see among your clients?

--How do you address those fears?

--Do women seem to feel that your services/products help them deal with their fears? If so, how? Give some specific examples.

--Do your customers consider you an authority?

--What is your favorite part of working in the beauty industry?

--What is your least favorite part of working in the beauty industry?