Fitting In: Young British Women’s Reported Experiences of Body Modification

Abigail Tazzyman

PhD

University of York
Women’s Studies

September 2014
Abstract

This thesis investigates female cultures of body modification in contemporary Britain. I begin from the premise that women in current UK society are concerned about their appearance and subjected to significant media pressures to engage in body modification. By body modification I mean the methods which women use in order to alter their physical body and appearance. All methods (invasive or non-invasive; self-administered or other-administered; permanent or temporary) are considered, provided the intention of their use is primarily to alter the user’s physical appearance. Based on qualitative life-history interviews with thirty university-educated British women aged between eighteen and twenty-five my research investigates the choices of, motives for, influences on and relationships of women to their practices of body modification.

The analysis chapters of this thesis deal with three key stages in my participants’ development during which body modification emerged as important. These are the point when my participants went to school, their years at university and their entry into the world of work. The analysis chapters focus on these three stages. The first one explores participants’ initial engagement with and experience of body modification during the school years. The second centres on their use of body modification while at university, and the final analysis chapter explores their engagement with these practices in the world of work. I also discuss my participants’ expectation of their future engagement with body modification.

Unlike third-wave feminist discourse, which frequently refers to body modification in terms of freedom and choice, my findings offer a completely different understanding of women’s engagement in these practices. In the life stages I focus on, sociality and taking cue from others emerged as the most important aspects of women’s body modification decisions.
# Table of Contents

Abstract .......................................................................................................................... 1
Table of Contents ........................................................................................................... 2
List of Figures ................................................................................................................ 5
List of Images .................................................................................................................. 6
Lists of Tables ................................................................................................................ 7
Acknowledgements ......................................................................................................... 8
Author’s Declaration ....................................................................................................... 10

## 1. Introduction

- Literature Review ...................................................................................................... 17
  - Empirical Research ................................................................................................. 17
  - Non-Feminist Work on Body Modification .............................................................. 24
  - Feminist Approaches ............................................................................................... 30
  - Conclusion ................................................................................................................ 54

## 2. Methodology

- My Research Perspective .......................................................................................... 56
- Research Design ......................................................................................................... 58
  - Why interviews? ....................................................................................................... 58
  - Research Sample ...................................................................................................... 60
  - Recruiting Participants ............................................................................................ 61
- Research Ethics .......................................................................................................... 65
- Writing Auto-Ethnographically as a Pilot ................................................................. 67
- The Interview Process ............................................................................................... 70
  - Interview Preparation .............................................................................................. 70
  - Conducting the Interviews ...................................................................................... 72
  - Interviewer/ Interviewee Relationships ................................................................... 77
  - Bodies in the Interview Process .............................................................................. 79
  - Being an Insider/ Outsider: Interviewer Positionality ............................................. 81
  - Issues Raised During the Interview Process ........................................................... 86
  - Transcribing and Analysis ....................................................................................... 89
  - Conclusion ................................................................................................................ 95

## 3. Learning to Follow: First and Early Experiences of Body Modification

... 96
4. Adapting to New Environments: University and Young Adulthood ................. 146
   Rhetorics of Change .................................................................................. 149
   New Environments and Changing Identities ............................................. 152
   Communal Living ..................................................................................... 168
   Relationships ........................................................................................... 173
   Classed Appearance ................................................................................ 175
   Weight and Identity ................................................................................ 178
   Dressing Up ............................................................................................. 185
   Internalisation and Self-Regulation .......................................................... 189
   Conclusion ............................................................................................... 191

5. Changing Expectations: The World of Work and Beyond ......................... 194
   The Professional Image ............................................................................ 197
   Class and Professionalism ........................................................................ 203
   Image Differences Between Job Sectors .................................................. 207
   Dressing to Impress and Looking the Part ................................................. 208
   Gender and the Professional Image ........................................................... 219
   Life Trajectory and Body Modification ..................................................... 221
   Ageing Bodies ......................................................................................... 230
   Conclusion ............................................................................................... 241

6. Conclusions ............................................................................................ 244
   Key Debates ............................................................................................. 244
   My Findings and Contributions to Knowledge .......................................... 247
   Conclusion ............................................................................................... 260

Appendix A: Call for Participants .................................................................. 264
Appendix B: Consent Form ................................................................. 265
Appendix C: Participant Information Sheet ........................................ 266
Appendix D: Support Contacts and Information for Participants .......... 268
Appendix E: Interview Schedule .......................................................... 269
Appendix F: Body Modification Methods Categorisation .................... 271
Appendix G: Participants’ Demographic Details ................................. 275
Bibliography ....................................................................................... 279
List of Figures

Figure 1. Feedback loop diagram
List of Images

Image 1. Screen shot from Pinterest
Image 2. Elle magazine online work wear article ‘Elle’s Working Wardrobe’.
Image 4. Times Style Magazine work wear article ‘New Work Wear Rules’.
Image 5. Times Style Magazine work wear article ‘Work it Out’.
Image 6. Cosmopolitan online work wear article ‘What to Wear to Work’.
Image 7. Marie Claire online work wear article ‘What to Wear to Work’.
Lists of Tables

Table 1. Practices Engaged in by Participants
Table 2. Researchers Relationship to Participants
Table 3. Assumed Relationship of Researcher to Participants After the Interview
Table 4. Analysis Themes
Table 5. Practices Engaged in During the School Years by Participants
Table 6. Practices Engaged in During University by Participants
Table 7. Practices Engaged in by Participants in the Work Environment
Table 8. Participant Employment Status at the Point of Interview, 2012
Table 9. Acceptable and Unacceptable Appearance Adjectives
Acknowledgements

Thank you firstly to my participants. Without them and the rich data they provided me with this research could not have taken place. I am indebted to their generosity in the time they gave and the histories they shared with me.

I cannot thank enough my wonderful supervisor, Gabriele Griffin, who provided unwavering support, encouragement and guidance throughout the PhD process. You helped me both to keep on track and to venture down new roads to develop myself as an academic. I am incredibly grateful for all the help you have given me.

I would also like to express my gratitude to Stevi Jackson and Ann Kaloski-Naylor, for the thought-provoking insights and guidance they gave as my Thesis Advisory Panel members and for the opportunities they and the Centre for Women’s Studies provided, enabling me to develop as a researcher, teacher and scholar. Also a huge thank you to Harriet Badger for your help and support in the multitude of projects I have undertaken while a member of the Centre for Women’s Studies at the University of York: so many of these could not have taken place without you.

Amy Godoy-Pressland (University of East Anglia): thank you for all your advice and encouragement as a mentor and the opportunities you have given me to disseminate my research further afield. Thank you to Prof Ruth Holliday from the University of Leeds for the ideas and the inspiration you offered for my PhD research and the future.

To my co-organiser of so many projects and conferences, Bridget Lockyer: you have been an inspirational friend and colleague and I am grateful to have had the opportunity to work with you, and hope to continue to do so. My friends and colleagues at the Centre for Women’s Studies provided me with a supportive and stimulating environment throughout my PhD and I truly appreciate this.

I am incredibly grateful to my family who have given me constant support over the last three years. The stories of my Grandma Olive inspired my desire to listen to women’s voices and her support enabled me to do so. My twin brother Seb asked
questions like no one else and put life back into perspective with such humour; I thank him for always being there. I would also like to thank my partner Ash for everything, for helping me in whatever way I needed throughout this process, be it proof reading, listening to yet another conference paper, or simply reassuring me that I could do it. You gave me the encouragement to always keep striving for the best and the support to get there.

Finally, thank you to mum and dad. Without the two of you this PhD would not have been possible. You have continuously supported me, patiently listened, persistently shown interest in my work and always inspired me. You instilled in me the importance of questioning the taken-for-granted and in doing so led me to my research and my feminism.

With thanks to Funds for Women Graduates (FFWG) for funding me through the final year of this PhD.
Author’s Declaration

I certify that all the research and writing presented in this thesis is original and my own. No part of this thesis has been submitted for another award.
1. Introduction

Taught from infancy that beauty is woman’s sceptre, the mind shapes itself to the body, and roaming round its gilt cage, only seeks to adorn its prison (Wollstonecraft 1792 [2004]: 47).

What do contemporary young British women say about why they engage in body modification? Beginning from this research question my thesis focuses on female cultures of body modification in contemporary Britain. I investigate the choices of, motives for, influences on and relationships of women to their practices of body modification and how they articulate these. By body modification I mean the methods which women use to alter their physical body and appearance. Thirty women took part in this project, aged between eighteen and twenty-five, whom I interviewed in 2012. I approach this topic from a life course perspective. Given that my research participants were relatively young (18-25), when I speak of a life course perspective I do not mean to suggest that this research covers an interviewee’s entire life course. Instead, it mainly looks back over the life of my participants up until the point of the interview and focuses on the life stages which in their interviews emerged as critical in the development of their body modification regimes: school, university and the work place. My thesis is organised accordingly.

For this research I was open to discuss all possible methods of body modification (e.g. invasive or non-invasive; self-administered or other-administered; permanent or temporary). In reality the practices discussed by my participants were very limited; no one, for example, had engaged in cosmetic surgery or envisaged doing so in the near future, and little invasive modification had been undertaken. The most permanent methods disclosed were tattoos and piercings, though these were limited in the extent of their use. The practices my participants reported engaging in and identified as body modification during the interviews are documented in Table 1.
**Table 1. Practices Engaged in by Participants**

<table>
<thead>
<tr>
<th>Practices engaged in and identified as body modification by participants in alphabetical order</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control underwear/ shapewear</td>
</tr>
<tr>
<td>Dieting</td>
</tr>
<tr>
<td>Dress</td>
</tr>
<tr>
<td>Ear piercing</td>
</tr>
<tr>
<td>Eating disorder</td>
</tr>
<tr>
<td>Exercise</td>
</tr>
<tr>
<td>Fake tan</td>
</tr>
<tr>
<td>False nails</td>
</tr>
<tr>
<td>Hair dying</td>
</tr>
<tr>
<td>Hair removal</td>
</tr>
<tr>
<td>Hair straightening</td>
</tr>
<tr>
<td>Hair styling</td>
</tr>
<tr>
<td>Heels</td>
</tr>
<tr>
<td>Makeup</td>
</tr>
<tr>
<td>Nails (paint/ file/ decorate)</td>
</tr>
<tr>
<td>Other piercings</td>
</tr>
<tr>
<td>Plucking/waxing eyebrows</td>
</tr>
<tr>
<td>Self-harm</td>
</tr>
<tr>
<td>Skin regimes (cleanse, tone, moisturise)</td>
</tr>
<tr>
<td>Tattoo</td>
</tr>
<tr>
<td>Teeth whitening</td>
</tr>
<tr>
<td>Tinting eyebrows and lashes</td>
</tr>
</tbody>
</table>

Source: Interview Data.

While the popular media portray methods such as cosmetic surgery and Botox injections as seemingly commonplace, when one thinks of one’s own practices, certain parameters exist as to what one is and feels able to engage with. This means that on the whole, invasive, permanent and ‘extreme’ methods rarely feature, if at all, in the mundane daily practices of women’s beauty regimes. This was the reality for my participants and the overwhelming majority of women I encountered throughout this research. A discrepancy thus exists between certain popular media discourses on female body modification and women’s lived experiences of these practices, a discrepancy which this thesis in part seeks to investigate.

Two alternative ways one may think about more extreme forms of body modification are eating disorders and self-harm. At the time of the interview three of my participants had or had previously had an eating disorder and two had self-harmed. In addition to these women, eight of my participants spoke about eating disorders as a
form of body modification and one woman included self-harm in the category. Given the association of eating disorders and self-harm with complex social issues, some may question whether they can be talked about in the same way as practices such as hair removal or makeup for example. However I treat them in the same way here because, in so far as they were mentioned, this is how they were articulated by my participants.

My participants’ experiences of body modification highlight the significance and pervasiveness of these practices in the female life course and their importance for individual identity. The contemporary west is a culture where it is almost impossible to avoid being a constant witness to images of modified bodies and body modification methods. Women (and to a lesser degree men) are endlessly assailed by exhortations to manipulate their bodies to fit in with certain body norms. We are besieged by cultural imperatives to constantly think about the body and to see it as a project to work on. A simple Google search makes this clear: typing in ‘Body Modification’ produces 17,900,000 hits, ‘Female Body Modification’ provides 2,440,000 results, ‘Cosmetic Surgery’ 30,700,000, ‘Weight Loss’ 420,000,000, ‘Cosmetics’ 181,000,000, and ‘Shaving’ 83,400,000.\(^1\) The vast majority of these hits are for adverts and advice. This emphasis on bodily appearance is overt in the popular media and highly gendered. TV shows such as *Secret Eaters*\(^2\) (2014) and *How to Look Good Naked*\(^3\) (2008) are dedicated to the topic. Women’s appearance is inspected and critiqued (Denham 2014; O’Carroll 2014; Rose 2014); women’s magazines overwhelmingly dedicate their pages to practices of body modification\(^4\) and despite the economic climate, the cosmetic/beauty/fitness industries are growing (King 2013; The Leisure Database Company 2013; Mintel 2013; Delineo 2014). The high visibility of issues surrounding body modification is indicative of the

---

\(^1\) Google search undertaken on the 6\(^{th}\) May 2014.
\(^2\) *Secret Eaters* is a British documentary television series about overeating which scrutinises the eating habits of families considered overweight by putting them under 24-hour camera surveillance. Broadcast by Channel 4, May 2012 – 2014, 8pm weekday evening (three series).
\(^3\) *How to Look Good Naked* is a British television show in which fashion stylist Gok Wan encourages women and men who are insecure about their bodies to strip nude for the camera, and teaches them to dress ‘better’ for their body shape. Broadcast on Channel Four, June 2006-April 2008, weekday evenings (four series).
\(^4\) *Vogue, Elle, Look, Glamour, Instyle, Women’s Health Magazine* and *Marie Claire* for example all give a large proportion of their pages over to body modification.
importance it holds in contemporary western culture and the extent to which its enactment permeates society.

Body modification then is a highly normative gendered practice which for the most part goes unquestioned. It acts as the tool of necessity for women’s attempts to reach a certain feminine ideal propagated in a capitalist patriarchal society. That feminine ideal is represented by those women in the public eye who are celebrated for their appearance and attractiveness, such as Beyoncé, Scarlett Johansson, Michelle Keegan and Kate Upton. These women all feature highly in public rating lists of attractiveness such as *FHM*’s ‘The Official 100 Sexiest Women in the World 2014’. They are slim, well-toned, have curvaceous figures, clear skin and shiny hair. When a woman in the public eye fails to meet this ideal negative reactions are frequent. For example as I revise my thesis (May 2014), there is a debate in the British media about the treatment of a young female opera singer who was criticised for being overweight. The woman in question was subjected to a large volume of negative criticism for her appearance by opera critics in the press. Phrases such as ‘a chubby bundle of puppy-fat’ (Clark 2014) and ‘unsightly and unappealing’ (Morrison 2014) dominated reviews, while little was said of her actual performance (though when mentioned her singing was highly praised). This sparked off a public debate about the sexism of these comments, the importance given to female appearance above all other attributes, in this case an opera singer’s ability to sing, and the body shaming of women who are in the public eye (Dammann 2014; Lowe 2014; Rayner 2014). This incident illustrates the importance of women’s looks for how they are judged. Women in the public eye are constructed as role models and as illustrators of socially acceptable and unacceptable femininity through the public discussion of their looks. This informs other women’s (and men’s) understanding of ideals of feminine looks in contemporary British culture.

---

3 Beyoncé is a highly internationally successful American singer and actor.
4 Scarlett Johansson is an American actor, model, and singer
5 Michelle Keegan is a British actor.
6 Kate Upton is an American model and actor, known for her appearances in the *Sports Illustrated* Swimsuit Issue.
7 *FHM* is a British monthly men's lifestyle magazine. Each of *FHM*’s international editions publishes yearly rankings of the sexiest women alive based on public and editorial voting through the magazine's website.
The importance of appearance in the contemporary west is a crucial aspect of this study. In the popular imagination appearance is equated with identity, which has been acknowledged from a variety of perspectives (Goffman 1963; Lindemann 1997; Lawler 2008; Jackson and Scott 2010). The association of appearance with identity is noticeably gendered. It has been repeatedly highlighted that in the contemporary west the attribute viewed as the most important aspect of a woman is her appearance (Wolf 1991; Bordo 1993 [2004]; Jeffreys 2005). For men appearance holds less prominence in terms of cultural perceptions of its value. Instead a wide range of attributes and abilities contribute to the judgements of men’s worth (Burton, Netemeyer and Lichtenstein 1995; Davis 2002; Norman 2011). While it has been acknowledged that men now face more pressure in relation to their appearance, particularly in masculinity studies, this pressure has been understood as both less and different from that faced by women (Davis 2002; Wright, O’Flynn and Macdonald 2006; Norman 2011). As appearance is culturally so important for women’s identity and perceived value, it is important to understand their decisions and practices in shaping it.

This thesis is concerned with women’s body modification as a taken-for-granted aspect of the social regulation of women’s bodies within a narrow definition of what constitutes an acceptable feminine appearance. Though rarely explicitly defined, this appearance is body and facial hair free, slim, toned, pore and blemish free (wearing makeup), and dressed appropriately for any context. This appearance is reinforced through the celebration of certain women’s appearance and the derision of others in the public eye, as discussed above. In my thesis I therefore seek to understand how women negotiate societal expectations of acceptable feminine appearance in their everyday lives. To do this I analyse young women’s articulations of their motivations to engage in body modification across their life course. Their relationship to these practices and the level of agency which they think they have in these actions will be analysed specifically for the school years, university and their entry into the world of work.

My thesis is divided into six chapters. In the rest of this introduction I examine the existing literature on body modification, providing a historical perspective on non-feminist and feminist work on this topic. I shall assess where the literature
understands women to get their body modification ideas from and perceptions of how women are influenced in this. I will highlight how my research fits into the existing scholarly discussions and outline the gaps which it fills. Following this the methodology chapter will explain my approach to conducting the empirical research for this study and the methods I used. This shall include reflections on my personal relation to this topic and its influence on the research.

The chronological analysis of my empirical data is split into three chapters which are structured across three consecutive life phases. These are: ‘Learning to Follow: First and Early Experiences of Body Modification’, ‘Adapting to New Environments: University and Young Adulthood’ and ‘Changing Expectations: The World of Work and Beyond’. I will analyse how and why body modification is begun and altered across time, linking body modification to the development of women’s gendered identity.

In Chapter 3, ‘Learning to Follow: First and Early Experiences of Body Modification’, I analyse my participants’ initial engagement with body modification and the development of these practices through the school years until university. In Chapter 4, ‘Adapting to New Environments: University and Young Adulthood’, I focus on the impact of university life on my participants’ practices. Changes as well as continuities in methods and motivations are examined. In Chapter 5, ‘Changing Expectations: The World of Work and Beyond’, I look at the role of body modification in the lives of my participants as they entered their careers and the influence of this environment on their practices. This chapter also considers participants’ expectations of body modification in their future life, both in the near future as well as during later life. In the conclusion I draw together the findings of my empirical research. I demonstrate the importance of lifecycle and social context to body modification development and the crucial and gendered relationship of these practices and appearance to women’s identity. I shall also consider the findings of my research in comparison to the stance previous literature has taken on where women get their ideas and motivations for body modification from. In my participants’ narratives their motives for engaging in practices of body modification are complex and contradictory. They to some extent contradict third-wave feminism’s notions of choice and agency. Certain factors influenced women’s
reasons for undertaking body modification at each of the three life stages. These factors challenge some of the dominant ways that body modification has been understood, especially by third-wave feminism.

**Literature Review**

In this section I assess the existing literature on body modification and the place of my research within it. I begin with a brief assessment of empirical research on women’s body modification. Following this I give an overview of the current literature on body modification written from a non-feminist perspective; this will include texts from popular culture, the medical sciences and work on consumption as well as child development studies. Next I contemplate the position of the body in feminism. Following on from this I give a brief historical overview of feminist engagement with body modification. Most critical and gender-aware engagement with body modification has come from feminist scholars and a feminist perspective. This is the perspective which I personally and theoretically take and so it is crucial for my own work to be contextualised within this field. Finally I will discuss the gaps in the current research on body modification and how my work fits into these.

**Empirical Research**

I begin this literature review with a brief discussion of recent empirical literature on body modification. While the majority of the literature I discuss in this chapter as a whole is based on empirical research, in this section I will specifically assess what is already known about women’s actual body modification practices. Given the age of my participants (18-25) and the year in which I carried out my research (2012), I shall be focusing on literature published from 2000 onwards. This focus ensures that the body modifications discussed are relevant and comparable in timeframe to my participants’ own engagement in such practices.

Empirical research on body modification from 2000 onwards has focused predominantly on practices that are – in popular culture - considered extreme, invasive or damaging to one’s health. Practices such as cosmetic surgery, extreme
dieting or exercise, eating disorders and tanning have received the most attention (Bolton, Pruzinsky, Cash et al 2003; Didie and Sarwer 2003; Bränström, Ullén and Brandberg 2004, Sawer and Crerand 2004; Henderson-King, Henderson-King 2005; Soest, Kvalem, Roald, et al 2009; Cho, Lee, Wilson 2010). Reflecting this, in assessing what is known about women’s body modification practices this section does not discuss all possible practices but instead highlights the dominant picture that emerges in the existing research.

A significant percentage of research addressing the question of what is known about women’s actual body modification comes from a medical perspective. Knowledge on the prevalence of practices in a given population is often from this field of research, providing particular statistics with a national or international scope. Medical research into body modification is focused on those practices considered risks or damaging to health such as eating disorders or cosmetic surgery, with an aim to inform medical guidelines and policy. Press releases from The British Association of Aesthetic Plastic Surgeons (BAAPS) are a good and frequently cited example of this. Based on statistics which represent the vast majority of NHS-trained Consultant Plastic Surgeons in private practice these releases usually document cosmetic surgery trends in the UK on a yearly basis. This research shows that in 2013 50,122 cosmetic surgery procedures were undertaken in the UK. Of those, women accounted for 45,365 of the procedures (nine in ten) which was an increase of 16.5% on 2012. Of the cosmetic surgery undergone by women in the UK in 2013, breast augmentation\footnote{Breast augmentation is the surgical enlargement of the breast.} was the most popular with 11,123 procedures being undertaken (up 13\% on 2012), followed by blepharoplasty\footnote{Blepharoplasty is the surgical repair or reconstruction of an eyelid.} with 6,921 (up 14\%), then face and neck lifts at 6,016 (up 13\%), 4,680 breast reductions (up 11\%), 3,841 rhinoplasty\footnote{Rhinoplasty is surgery to reshape the nose.} procedures (up 19\%), 3,772 liposuction procedures\footnote{Liposuction is a technique used to remove fat from under the skin by suction.} (up 43\%), 3,343 abdominoplasty\footnote{Abdominoplasty is the removal of excess skin and fat from the middle and lower abdomen in order to tighten the muscle of the abdominal wall making the abdomen more firm and thinner.} operations (up 16\%), 3,037 fat transfer procedures (up 15\%), 1962 brow lifts (up 18\%) and finally 670 procedures otoplasty\footnote{Otoplasty is the surgical reshaping or reconstruction of the outer ear.} (up 19\%) (British Association of Aesthetic Plastic Surgeons 2014). The demographic breakdown of women who have cosmetic surgery
reveals that teenagers are usually ‘preoccupied with unsightly moles, breast reduction or rhinoplasty, those in the middle bracket - 25 to 45 - generally ask for body/trunk surgery (liposuction, abdominoplasty), and older patients want facial rejuvenation’ (British Association of Aesthetic Plastic Surgeons 2005). In contrast to media portrayals, which are directly challenged by these findings, this research also demonstrates that the percentage of teenagers (those eighteen and younger) having cosmetic surgery has not increased and remains low (British Association of Aesthetic Plastic Surgeons 2005, 2008).

Women’s motivations to undertake cosmetic surgery, their experiences of this practice and the after-effects of surgery have also been investigated. Negative ‘body image’, a high investment in physical appearance and the gendered nature of appearance value and expectations are repeatedly identified as the dominant factors in women’s decisions to engage in cosmetic surgery (Bolton, Pruzinsky and Cash et al 2003; Didie and Sarwer2003; Sarwer, LaRossa, Bartlett et al 2003; Frederick, Lever and Peplau 2007; Markey and Markey 2009).

Prevalence figures about eating disorders, disordered eating, and extreme dieting and exercise, particularly at a national level, also predominantly come from research from a medical perspective. Eating disorders are known to be on this increase in the UK and western countries more generally (Adams, Sargent, Thompson, et al 2000; Hoek 2002; Cervera, Lahortiga, Angel Martínez-González, et al 2003; Gilbert and Meyer 2005; Micali, Hagberg, Petersen, et al 2013; Kelly, Vimalakanthan and Carter 2014). The most reliable recent sources on eating disorder prevalence in the UK found that in the general population aged over sixteen 6.4% of adults have an eating disorder (Bebbington, Brugha, Coid, et al 2009). Women were more likely (9.2%) than men (3.5%) to screen positive for an eating disorder (Bebbington, Brugha, Coid, et al 2009). Age has also been shown to be a significant demographic factor in eating disorder prevalence, with one woman in five aged 16-24 screening positively, compared with one woman in a hundred aged 75 and over (Bebbington, Brugha, Coid, et al 2009). Similarly Micali, Hagberg, Petersen, et al (2013) found adolescent girls aged fifteen to nineteen to have the highest incidence of eating disorders while Micali, Ploubidis, Stavola, et al (2014) reported that in their study of 7,082 adolescents aged 13 years 63.2% of girls were afraid of gaining weight or getting fat
and that a further 11.5% were extremely afraid or terrified of gaining weight or becoming fat. In addition food restriction at a high level was reported by 2.4% of girls, a high-level exercise for weight loss by 3.8% of girls and purging (self-induced vomiting and use of laxatives for weight loss) by 0.23% (Micali, Ploubidis, Stavola, et al 2014). Low self-esteem and low self-compassion were repeatedly indicated in this research as characteristics positively correlated with the likelihood of women having eating disorders or disordered eating (Gilbert and Meyer 2005; Kelly, Vimalakanthan and Carter 2014).

Other practices considered damaging to health or extreme have also received a notable amount of attention, in particular the use of sunbeds, and piercing and tattoos. Sunbed use has increased in Europe, Australia and the USA since 2000 and teenage girls and young women in their twenties are those most likely to engage in this practice (Geller, Colditz, Oliveria, et al 2002; Demko, Borawski, Debanne, et al 2003; Lazovich, Forster, Sorensen, et al 2004; Køster, Thorgaard, Clemmensen, et al 2009; Mowen, Longoria and Sallee 2009; Diehl, Litaker, Greinert, et al 2010). While in some cases a lack of knowledge on the dangers of sunbed use has been found to contribute to women’s engagement in this practice, the majority of research suggests that most women engaging in this practice are aware of the associated risks but prioritise the appearance of tanned skin and following norms in peer behaviour over health (Dennis, Lowe and Snetselaar 2009; Dodd, Forshaw and Williams 2013; Lee, Macherianakis and Roberts 2013).

Women’s engagement in piercings and tattoos has been predominantly researched simultaneously with the increase in both practices (Mayers and Chiffriller 2002; Mayers, Judelson, Moriarty 2002; Armstrong, Roberts and Owen 2004; Bone, Ncube, Nicholas, et al 2008). Piercing is more common than tattoos, particularly among women who are more likely than men to engage in this practice (Mayers and Chiffriller 2002; Mayers, Judelson, Moriarty 2002; Armstrong, Roberts and Owen 2004). Younger women are the most likely to have body piercings, as exemplified by Bone, Ncube, Nicholas, et al (2008) who analysed the prevalence of piercing at sites other than the earlobe, where nearly half of women aged 16-24 reported having a piercing. The motivation to engage in both of these practices appears to be focused on fashionable appearance and identity (Atkinson and Young 2001; Armstrong,
Roberts and Owen 2004). Women’s choice of tattoos has been found to be based on gendered norms, with women predominantly choosing tattoos culturally understood as conforming to a feminine identity in western countries (Atkinson 2002).

Empirical research on mundane and everyday practices such as makeup and hair removal has been undertaken, but not to the same degree as research focusing on the more extreme practices previously discussed in this section. Figures regarding the prevalence of women’s use of this category of body modification are therefore not very readily available. The exception is commercial market research providing sales figures of certain products used in body modification. Hair removal is known to be a normative practice engaged in by a large majority of women in western countries such as the UK, Australia and the USA (Tiggemann and Lewis 2004; Toerien and Wilkinson 2004; Toerien, Wilkinson and Choi 2005; Tiggemann and Hodgson 2009). Tiggemann and Hodgson (2009) found that 96% of Australian female undergraduate students in their study (235 participants) engaged in body hair removal regularly, giving similar results as a previous study of Australian undergraduate students where 98% of women were found to regularly remove body hair (Tiggemann and Lewis 2004). In a larger study in the UK Toerien, Wilkinson and Choi (2005) found that over 99% removed some body hair. Looking at a wide range of body hair removal practices of both women and men in New Zealand, Braun and Terry (2013) also found female body hair removal to be a highly normative practice and discovered that the vast majority of their participants (89%) deemed it unacceptable for a women to leave body hair in its natural state (Braun and Terry 2013). The dominate reasons reported as key motivational factors in women’s decision to remove body hair were social norms and attractiveness, with only 5% suggesting that hair removal was done out of personal preference (Braun and Terry 2013). Similarly Braun, Tricklebank and Clarke’s (2013) investigation into the removal of pubic hair removal found it be a normative and gendered practice. More pressure was reported as existing on women to regularly remove pubic hair to be attractive and to keep their pubic hair invisible (visible pubic hair was reported as being socially unacceptable) than for men (Braun, Tricklebank and Clarke 2013). While the rhetoric of choice was frequently used by participants describing women’s decisions to engage in body modification, this choice featured as one limited by feminine norms and heterosexual gender expectations. Avoidance of hostility and
stigma were the predominant motivations for women who carry out this practice on a regular basis (Toerien and Wilkinson 2004; Hodgson and Tiggemann 2008; Fahs 2011; Smolak and Murnen 2011; Braun and Terry 2013; Braun, Tricklebank and Clarke 2013). Body hair removal is a highly gendered practice necessary for a woman to meet feminine norms.

Makeup, like hair removal, is a mundane, everyday and pervasive practice of body modification engaged in by women. Despite this, very little research has been conducted prior to and since 2000 on the prevalence of women’s engagement in this practice or their motivations for doing so. Market research on the consumption of makeup and cosmetics does however demonstrate how prevalent this practice is within the UK. In 2012, 546 million pounds were spent on facial makeup which accounted for 39% of cosmetics sales. Eye makeup represented the second-largest subsector, accounting for 32.5% of the cosmetics sector, followed by lip products (16.5%) and nail products (12%) (Delino 2014). The small amount of empirical research available demonstrates that while makeup use can be pleasurable, many women who use it view these items as essential everyday products (Cahill 2003; Korichi, Pelle-De-Queral, Gazano, et al 2007; Delino 2014). The use of makeup has also been found to be significant in adolescent girls’ perceptions of transitions from childhood to adulthood (Gentina, Palan and Fosse-Gomez 2012). It is a practice continued throughout women’s lives into old age (Clarke and Griffin 2007).

Motivations to engage in this practice are reportedly based on dominant femininity norms and understandings that doing so will result in positive perceptions of attractiveness and capability from others (Cahill 2003; Korichi, Pelle-De-Queral, Gazano, et al 2007).

Hair styling and colouring are also mundane and everyday practices that women are known to begin usually at a young age (Weitz 2001; Clarke and Griffin 2007). Motivations to engage in these forms of body modification are reported as similar to those around eye make-up, being based on perceptions of normative femininity and/or identity presentation (Weitz 2001; Clarke and Griffin 2007).

Closely tied in with makeup and hair styling are fashion choices women make in relation to both their dress and foot wear. This is a form of body modification is
found throughout women’s lives and once again is determined by how women want to be perceived (Piacentini and Mailer 2004; Croghan, Griffin, Hunter, et al 2006; Clarke and Griffin 2007; Raby 2010; Hockey, Dilley, Robinson, et al 2013). As in the case of the other practices, the amount of empirical research carried out on these forms of body modification is limited. The research which has investigated women’s fashion has identified however that clothing and footwear are used by women to fulfil multiple purposes, often based on the belief that clothing decisions will be read as statements of identity. Guy and Banim (2000) for example discovered that their participants used clothing to achieve satisfying images of themselves, identifying their choices as creating, revealing or concealing aspects of their identity. Social constraints on the clothing decisions they made were evident in women’s accounts, as were attempts to subvert or challenge these constraints. In research on body image the clothing women wear and the degree to which it meets their needs in a given context has been found to impact on women’s experiences of their body (Tiggemann and Lacey 2009; Tiggemann and Andrew 2012). Peluchette, Karl, Rust (2006) found that their participants used work attire to ‘manage the impressions of others’ and believed doing so had ‘a positive impact on workplace outcomes and self-perceptions’ (58). They suggest that women undertake more ‘appearance labour’ than men. Age and body size are often factors influencing women’s sartorial choices, and across life course (Frith and Gleeson 2008; Clarke, Griffin and Maliha 2009).

The participants in the work of Clarke, Griffin and Maliha’s study (2009), for example, aged between seventy-one and ninety-three, argued that older women should refrain from wearing bright colours and revealing or overly suggestive styles. Clothing was reported as being used to mask changes in the body that were seen to move it away from feminine ideals, such as weight gain, wrinkles, flabby skin and shape change. Clothing styles were also used to ‘compensate for and conceal age-related health issues’ (Clarke, Griffin and Maliha 2009: 718). Research into women’s sartorial decisions makes evident that if a woman is perceived to have made ‘style mistake’ through wearing clothes deemed inappropriate for her identity or social setting, this can lead to stigma and negative reactions (Croghan, Griffin, Hunter, et al 2006).

Empirical research on women’s body modification illustrates the gendered nature of these practices and the increasing engagement of women with them. A clear disparity
exists however between those practices of body modification which receive most attention in the form of empirical research and the practices most prevalent in the majority of women’s body modification regimes, as my own research demonstrates. This is a disparity that my research addresses.

**Non-Feminist Work on Body Modification**

A plethora of literature exists on the subject of body modification. This forms an expansive field of research that has developed over time, changing with the technological development and popularisation of methods of bodily intervention, such as Botox in 2002, and new cultural, medical and academic perspectives. As I have begun to mention, body modification has a very prominent presence in popular and mainstream culture, and this presence is gendered. Adverts for the tools, treatments and products of body modification are almost unavoidable on television, in magazines, on billboards, and on the side bars of Facebook and email accounts. A large percentage of pages in women’s magazines are dedicated to body modification (Harbers 2013: 160; Tibbits 2013: 163; Turner 2013: 16-20; Elle 2014: 1-26, 29-31, 132-134, 284, 323-325; Beresiner 2014: 290; Lotringen 2014: 143-150). Articles on and adverts for body modification also make regular appearances in both broadsheet and tabloid newspapers. Television is equally inundated with programmes specifically dedicated to the topic of body modification (for example: *SuperSize vs SuperSkinny* (2014); Secret Eaters (2014); Snog Marry Avoid (2014); *How to Look Good Naked* (2008)). The majority of television coverage of this topic in all its forms is aimed at and features women. If a woman does not undertake certain types of conventional body modification such as body and facial hair removal the vitriolic reactions make evident the infrequency of this occurrence and popular attitudes towards the image of an unmodified woman.

16 Facebook is an online social networking service.
17 *SuperSize vs SuperSkinny* is a British documentary television series in which two extreme eaters, one overweight and the other underweight, swap diets. Broadcast by Channel 4, Jan 2008 – March 2014, 8pm weekday evenings (seven series).
18 *Snog, Marry, Avoid* is a British reality television show that ‘makes under’ those seen to engage in too much body modification and wear too much makeup/too little clothing, making their appearance more acceptably feminine. Broadcast on BBC Three, June 2008-2014, weekday evenings (seven series).
19 Following an appearance with hairy armpits on the red carpet at the 1999 London premiere of *Notting Hill* Julia Roberts received well documented criticism (Winterman 2007) as did British singer Pixie Lott when she appeared at the 2012 London premiere of *The Dark Knight Rises* with unshaven
A sense of moral panic about the rise in the use of body modification and the perceived decrease in age of those that engage with it surrounds this topic in the public imagination. Carpenter (2013), commenting on young women’s engagement with plastic surgery, for example exclaims: ‘I can’t help being appalled at this. Perhaps I am just getting old but I knew nobody in my twenties who’d “tinkered” or had surgery and I barely know many now in my forties’ (27). This is particularly apparent in magazine and news articles where young girls’ seemingly increased use of body modification, especially invasive or potentially harmful methods such as plastic surgery or eating disorders, are lamented and positioned as a cultural problem (Carpenter 2012; Turner 2013; Buchanan 2014; Gibbons 2014). The UK government has discussed and debated issues surrounding body modification, beginning a body image campaign in 2010 (Government Equalities Office 2013a; Government Equalities Office 2013b), creating an All Party Parliamentary Group on Body Image to carry out an inquiry on the subject (Central YMCA 2012; Featherstone 2012) and holding a conference on body image on 30th September 2013. This group launched a teaching pack for primary schools and a companion pack for parents on the subject of body image (Media Smart 2011). On the whole government and policy interest has focused on the female body, not the male, and in particular the young female body. The sense of a need to protect girls from pressures which cause them to engage in body modification and feel dissatisfied with their appearance is also echoed in the Girl Guides’ decision to introduce a badge which is attained through a course on body image (Girlguiding 2013). The Girlguiding organisation has, in addition, conducted research into and run a campaign against body image dissatisfaction in young girls (Girlguiding 2013). The 2013 Poly Implant Prothèse (PIP) scandal also resulted in the UK government increasing the attention it gives to body modification and saw the subject feature in the ‘serious’ news (BBC News Health 2013; BBC News Europe 2014; Chrisafis 2013a; Chrisafis 2013b).

20 The 2013 Poly Implant Prothèse (PIP) scandal also resulted in the UK government increasing the attention it gives to body modification and saw the subject feature in the ‘serious’ news (BBC News Health 2013; BBC News Europe 2014; Chrisafis 2013a; Chrisafis 2013b).

21 The Girl Guides is a movement in scouting originally, and still largely, for girls (http://www.girlguiding.org.uk/home.aspx). Badges are collected as medals or rewards for carrying out certain activities or achieving a task.

20 PIP had used unapproved in-house manufactured industrial-grade silicone instead of medical-grade silicone in the majority of its implants and an unusually high number of rupture rates were reported. This led to a flood of legal complaints and the company's bankruptcy. In many countries women with these implants were advised to have them removed.
Economic evidence highlights the pervasive presence of body modification in contemporary Britain. Despite the recession and current economic climate, the body modification industry in its various categories has on the whole continued to grow (British Association of Aesthetic Plastic Surgeons 2014). Reports also suggest that despite the vast majority of people being economically worse off as a result of the recession (women it should be noted are proportionally hit harder by the recession (Women’s Budget Group 2013)), the percentage of income spent on body modification has increased (Cosmetics Europe 2012; Key Note Publications 2013; Mintel 2013). In the consumption of body modification practices, tools and products, women are the majority consumers (Key Note Publications 2013).

Beyond popular culture, much of the literature which focuses on body modification from non-feminist perspectives approaches the topic from a medical angle. This literature centres on finding causes or behaviour characteristics which might be responsible for the engagement in these practices. The literature, because of its medical perspective, is on the whole only interested in practices or procedures with medical implications, usually cosmetic surgery, some forms of eating disorder or tanning for example (Sarwer, Wadden, Pertschuk, et al 1998; Bränström, Ullén and Brandberg 2004; Sarwer and Crerand 2004; Henderson-King and Henderson-King 2005; Soest, Kvalem, Roald, et al 2009; Cho, Lee and Wilson 2010). The practices discussed in this literature are positioned as a medical concern, illness or disorder (McCabe and Vincent 2002; Fairburn and Brownell 2002; Allen, Byrne, Oddy, et al 2014). The everyday mundane practices of most women’s beauty regimes are rarely acknowledged and practices are predominantly considered singly, not as part of a regime alongside other forms of body modification. The medical literature tends to have a focus on the individual and her problems that lead her to undertaking body modification. The individual is pathologised. This pathologisation is founded in the assumption that there is a ‘normal’ body and self-perception external to society and its influence (Kater, Rohwer and Levine 2000; Grogan 2006; Liimakka 2014). The other dominant strand of work on body modification and its causes, especially of those methods thought to be health risks, focuses on the concept of body image (Thompson and Stice 2001; Levine and Piran 2004; Bessenoff and Snow 2006; Jarry and Kossert 2007). While women’s self-perception is still seen as one reason for body modification, the cause of negative or distorted body images is understood, in
part, as the effect of socio-cultural influences on an individual. Images of ‘ideal’
women and bodies are seen as particularly problematic (Durkin and Paxton 2002;
Hargreaves and Tiggemann 2004). As investigations into what makes an individual
vulnerable to negative or distorted body modification illustrate though, it is still the
individual who is regarded as the locus of any ‘problem’, with the ‘cure’ focused on
fixing the individual rather than societal expectations (Yamamiya, Cash, Melynk et
al. 2005; Roberts and Good 2010; Halliwell 2013).

The subject of these texts is on the whole female. Men’s presence within this
literature has slowly increased over time, especially within the last ten years. Men are
still however in the minority as the focus for this literature. When they do feature
they tend to be treated as anomalies or different from women. Male interest and
concern with body modification and body image is often presented as a new and
growing phenomenon (Grogan and Richards 2002; Frith and Gleeson 2004;
Frederick, Lever, Peplau 2007; Hargreaves and Tiggemann 2009; Vandenbosch and
Eggermont 2013). This is contrasted with the constant expectation of women’s
concern with the body, both in the past and present. This expectation in part feeds the
assumption of women’s vulnerability to body modification and engagement in
harmful practices. Male concern is, however, more problematised even when the
practices that are carried out are not perceived as harmful or unhealthy.

In the search to understand who engages in what, and why they do so, race
occasionally receives attention. Race features predominantly through the comparison
of different ethnic groups’ resistance or vulnerability to external pressure (Kaw 1993;
Klesges, Elliott, and Robinson 1997; Furnham and Husain 1999; Striegel-Moore,
Schreiber, Lo, et al 2000; Ball and Kenardy 2002; Talleyrand 2012; Watson, Ancis,
White, et al 2013). There is a strong tendency, both explicit and implicit, to treat
western culture as the reference point for anyone undergoing body modification,
especially surgery and weight loss practices (Kaw 1997; Rathner 2001; Spickard and
Rondilla 2007). This assumption has been challenged by some academics which I
shall discuss later in this chapter (Holliday and Elfving-Hwang 2012).

Another identity variable frequently discussed is age. Age features as a topic most
prominently in relation to age appropriateness and fears around young women’s
engagement with body modification in particular. Consideration of age centres on a belief that specific age groups (usually young girls) are more at risk from disorders relating to body modification, such as anorexia, than others (Hoek 2002; Dohnt and Tiggemann 2005; Baker, Thornton, Lichtenstein, et al 2012). Concern about young girls engagement in body modification often come out of understandings that certain practices are only appropriate for certain age groups. Though the subject of research is usually specifically identified, as most of this research is quantitative or survey-based, there is little of the participants’ own voice within it or in-depth explanations of their context. As a result, this literature is often blind to class and socio-economic positioning and the intersectional nature of identity. The concept of embodiment also rarely features in the medical literature. Body modification is positioned as something done to the body rather than an embodied event, and is discussed very much in terms of mind/body duality.

Inseparable from almost all body modification discussion is consumption. To engage in nearly all practices of body modification a product or service of one type or another must be purchased. Consequently, a large volume of research has been undertaken and literature produced on consumption and body modification (Fung 2002; Murray 2002; Starr 2004; Croghan, Griffin, Hunter and Phoenix 2006; Mowen, Longoria and Sallee 2009; Marion and Nairn 2011; Workman and Lee 2011; Yang 2011). This literature, often from a business perspective, predominantly focuses on what is being purchased, by whom, and why. From a more sociological perspective, some work does focus on identity and consumerism however (Mowen, Longoria and Sallee 2009; Narayan, Rao and Saunders 2011; Yang 2011). Most of this research is quantitative and based on statistics, as knowledge about who buys what and why is sought on a scale useful for marketing and predictions of consumption patterns. A considerable amount of attention is also given to the neo-liberal context of the west (and its spread beyond the west) and its role in consumption practices, particularly in relation to identity formation (Murray 2002; Edmonds 2007; Xu and Feiner 2007; Doyle and Karl 2008; Sherman 2008; Leve, Rubin and Pusic 2012; Workman and Lee 2011; Luo 2013). Changes to consumption practices in western countries are discussed, as are those of countries where consumption has been severely restricted or state regulated in the past such as in China and Russia (Hopkins 2007).
Often touching on issues of race and consumption, child development studies has produced a considerable volume of work on body modification (Adams, Sargent, Thompson, et al 2000; O’Dea and Caputi 2001; Gillison, Standage and Skevington 2006; McSharry 2009). Here a gender perspective is frequently taken, but unlike in the two aforementioned fields of research, this is not limited to who engages in what practices. Within child development studies the impact of gendered development on body modification practices is a substantial field of research. The focus of this literature is usually on young and teenage girls, though increasingly boys’ engagement with body modification features (Grogan 1999; Galilee 2002; Grogan and Richards 2002; Lowry, Galuska, Fulton, et al 2005; McArdle and Hill 2007).

What practices children engage in as they develop, their motivations, and the impact of this engagement on their lives is the predominant investigative focus of this work (Herbozo, Tantleff-Dun, Gokee-Larose, et al 2004; Wills 2005; McSharry 2009; Karupiah 2013). A discussion of why (usually assumed as a fact) girls engage in body modification at a younger age and in greater volume than in previous generations runs constantly through this literature. Practices which are regarded as problematic, such as eating disorders, dominate the discussion (Kotler, Cohen, Davies, et al 2001; McCabe and Vincent 2002; Martin 2007). Girls are presented as at heightened vulnerability to external pressures compared to other groups (both of gender and age) and, as a result of the combination of their age and gender, at risk of engaging in dangerous practices (Fombonne 1995; Wertheim, Paxton, Schutz, et al 1997; Grogan 1999; Bloustien 2003; Lipkin 2009). Brumberg (1997) for example argues that ‘girls today make the body into an all-consuming project in ways young women of the past did not’ (xvii) and that ‘adolescent girls today are more vulnerable than boys of the same age to eating disorders’ (xxiii). Martin (2007) contends that in the contemporary west we ‘live in a time when getting an eating disorder, or having an obsession over weight at the very least is a rite of passage for girls’ (1). The concept of agency is given little thought in these arguments. Practices which are seen as unproblematic or highly normative are also neglected.

In all of this there is little, if any, acknowledgement of work on body modification in the social sciences, humanities or feminism. Despite the great volume of work produced in the latter three fields, medical, consumption and child development research is rarely interdisciplinary in its approach to this topic. As a result their
analyses are limited and non-holistic. Throughout these fields of research people specialise in particular methods and usually a specific event or context. This contrasts with my own research. My aim is to look at a wide range of practices and widen the gaze of how body modification is investigated. What the literature discussed so far has in common is that the practices it considers are all either highly invasive or highly modificatory of the body. But this is not necessarily the experience of most people in the mundane day to day context, and that is what I am interested in.

Feminist Approaches

The Body in Question

Before I consider feminist engagement with body modification directly, I am going to begin this section by reviewing the position of the body in feminist literature. This includes both how the body is conceptualised and whose bodies are the subject of discussion. How the body is conceptualised is intrinsic to how practices of body modification are understood, for these practices are inextricably tied to the body itself. The position of the body, and the volume and type of focus it has received in feminism and related disciplines, has altered considerably over time. I am not able to give a comprehensive and inclusive history of this change but instead will provide a context to the position of the body, in particular the female body, in feminist literature, as this relates to my research.

In the 1990s a new field of studies of the body appeared which was often highly theoretical, such as the work of Grosz (1990), Shildrick (1996), Martin (1987 [1989]) and Davis (1995). A proportion of this work came out of philosophical considerations about how we think about the body and corporeality, but it did not on the whole engage with body modification directly or consider how women alter their bodies to fit in with societal expectations. Instead this literature was concerned with the body as a bounded object and the relation between the body and identity. This marked a conceptual split away from feminist approaches in the 1970s where the focus had been on female bodily specificity and the difference between the male and female body. This new field of studies instead centred on the question of how we
think about the body as an entity. This work was characterised by the rise of theory which questioned fixed identity and an engagement with the ways the body had been constructed as a function of the sciences’ ways of articulating the body. Two dominant strands emerged, one concerned with questioning traditional philosophical discourses on the body (Grosz 1990; Shildrick 1996) and the other with rethinking the medicalisation of the body (Martin 1987 [1989]; Davis 1995; Oudshoorn 1990). Both of these strands aimed to re-think the female body but neither dealt with female appearance. This latter concern would develop out of work predominantly on eating disorders (which I discuss later in this chapter).

This new field of work can be seen as coming about in part because of two main developments. Firstly, as a reaction to new and developing biological technology, resulting in the rethinking of the female body and its possibilities (Martin 1987 [1989], 1991, 1992, 1994, 1999; Davis 1995, 1997, 1999) and how scientific discourse and practices effect how we think about the body; secondly, this new field of studies was in part an answer to what was happening in mainstream sociology in relation to the conceptualisation of the body at the time. From the 1990s a trend towards bringing the body back into mainstream sociology had occurred. This has been called the corporeal turn and saw increased attention given to the body itself with an emphasis on the materiality or corporeality of the body (Featherstone, Hepworth and Turner 1991; Shilling 1993; Crossley 1995a, 1995b).

Feminists began to critique certain discourses of embodiment, arguing that science produces particular ways of constructing the body, and illustrating the connection of scientific knowledge to social and cultural elite groups. Focusing on embodied experience, the anthropologist Emily Martin (1987 [1989], 1991, 1992, 1994, 1999) approached the subject of the body from this perspective. Martin’s work explored how cultural perceptions and representations of knowledge of the body and certain bodily processes effect women’s bodily experience. In The Woman in the Body (1987 [1989] Martin, for example, argues that biomedical discourses on female embodiment – in particular menstruation, childbirth and menopause – give a medicalised and scientised account, informed by industrial capitalist modes of production. She argues that the metaphor of labour used for child birth dehumanises the experience, the woman not being taken into account as a human but only as the
uterus, acknowledged as a tool to provide doctors with a new product. Martin suggests that as forms of social organisation vary, so do scientific and biomedical explanations and images of the body. She illustrates in other work (1991) how stereotypes of gender inform biological knowledge, in particular utilising the example of the passive egg and the active sperm. Martin claims that ‘becoming aware of when we are projecting cultural imagery onto what we study, will improve our ability to understand nature … [and] rob them of their power to naturalise our social conventions about gender’ (501). She shows that current scientific literature is gender-biased and disadvantageous to women, disconnecting them from their bodies through mind/body dualistic metaphors. Martin’s work on the body came in the midst of a rise in the development of biotechnology, in particular reproductive technologies such as sonograms and in vitro fertilisation (IVF)\textsuperscript{22}, and can be seen as a reaction to these. These biotechnological developments placed greater emphasis on the biology of women’s bodies and increasingly compartmentalised the body into parts. In contrast, Martin sought to highlight the importance of the social for embodied experience and knowledge.

Davis (1995, 1997, 2003), one of the only feminists engaging in this new field of studies to directly discuss forms of body modification, also addressed the issue of embodiment in relation to technological developments, most notably cosmetic surgery. Davis (1995) considers the embodied experience of those who undergo cosmetic surgery, acknowledging the new possibilities that such biotechnology offer to women. Davis discusses cosmetic surgery as a dilemma, existing as part of patriarchal medicalised conceptions of beauty, but providing women with an at times welcome intervention in their identity. Davis argues that cosmetic surgery offers women ‘different starting points’ and can ‘open up the possibility to renegotiate her relationship to her body and construct a different sense of self’ (113). Extending women’s realities beyond the biologically given, she sees such technologies as ‘a strategy for becoming an embodied subject’ (1995: 96). Through looking at different possibilities for embodiment Davis (1997) also highlights mainstream sociology’s male-centric approach to understanding the body at the time. In particular she noted

\textsuperscript{22} The first successful birth of a child conceived by IVF occurred in 1978.
the treatment of bodies as generic, with the male body situated as the natural body to which all others were compared.

As technological developments were occurring, so were developments in sociological understandings of the body outside of feminism. The corporeal turn in sociology brought with it certain dilemmas for feminist academics. From a feminist perspective, the critique of mainstream sociology centred on the difficulty of acknowledging the embodied corporeal body without compromising the social construction of gender. As Anne Witz (2000) argues, ‘Women have been under socialised and overwhelmingly corporealised in accounts of the social. The woman in the body served as the foil against which a masculine ontology of the social was constructed’ (Witz 2000: 2). Elizabeth Grosz (1990, 1994, 1995) sought to address this problem through the creation of a model of corporeality where boundaries are dissolved and where women’s experience is not reduced to the other, but instead specificity and difference are acknowledged. In the creation of this model she engaged with and in the debate over what constitutes a body, and crucially how to acknowledge women’s corporeality without biological determinism. Grosz views gender as a redundant category (1995) on the grounds that it is based on a body/consciousness dualism. She was part of a feminist movement trying to reclaim the body through making women’s experiences visible within sociological enquiry without reducing women’s experience to the body, and particularly biology.

Margrit Shildrick (1996, 1997, 1999, 2002) similarly attempted to reclaim the female body through destabilising masculinist perspectives on the body. Shildrick argued for a conception of the body as fluid:

Both sociological and biological bodies are not given, but exist only in the constant process of historical transformation … there are only hybrid bodies, restless bodies, becoming-bodies, cyborg bodies; bodies, in other words, that always resist definition… My argument is that boundaries are fluid and permeable, not that they cease to exist altogether (Shildrick 1996: 9).
Shildrick uses bioethics as an example to contend that ‘material’ entities and linguistic concepts are discursive constructions and in turn that biomedicine not merely restores the body but constitutes it. The body for her is not a constant given entity with stable boundaries but a fabrication, an ever-changing reality formed by multiple discourses, a ‘leaky body’ (1997). She demonstrates how new technologies aid the maintenance of the notion of a fixed material body through exploring how the way technology is used is reliant upon and helps confirm social norms. Shildrick highlighted the importance of the social in constructing perceived bodily realities.

Nelly Oudshoorn (1990, 2003) was another feminist at the time to argue this through her work on the male pill. Oudshoorn (1990) examined the development of sex hormones in laboratories, and cultural, scientific and policy work around the male pill from the 1960s to the 1990s (2003). In both cases Oudshoorn argued the importance of recognising science as part of the social, determined by social realities and, significantly for feminism, social gender bias. She argues that because ‘the subject of women and reproduction has been institutionalised in a medical speciality, whereas the same processes in men have not been institutionalised, gender bias is at the centre of the life sciences’ (1990: 25). Her discussion of the male pill illustrates the gender bias in technological development, suggesting for example that this contraceptive has not been introduced because of particular ideas about reproductive responsibility. For Oudshoorn biotechnologies are not outside of the social. Their development and use is defined by social priorities and understood possibilities.

It is important to know how the body is/was conceptualised in feminism to fully understand feminist relations to practices of body modification, for they sit as practices inseparable from both bodily materiality and the social. In this literature in the 1990s the body is treated to a large extent as a depersonalised entity, almost as an object, and the person that inhabits the body as a shadow figure in the background. The body is seen as an object one writes about, but it is unclear in this literature how the body relates to other bodies, if it does at all. This literature is concerned with medical progress in relation to the body or philosophical histories of thinking about the body, rather than the body as a social entity. As I will show however, the latter dimension is crucial to women’s everyday experience. For my interviewees the relation of their bodies to others defined their embodied experience; the body was always discussed as a social entity.
Feminism and Body Modification

Within feminist literature, commentary on body modification and beautification goes back a long way. In 1792 Mary Wollstonecraft wrote one of the first direct critiques of the gendered nature of body modification practices in *A Vindication of the Rights of Woman*, from which the opening quote to this thesis is taken. Wollstonecraft argues that women are encouraged to focus primarily on their appearance and that this attribute is given most weight in how they are judged. She suggests that the cultural emphasis on women’s appearance is detrimental to women, exacerbating perceived gender differences and holding women back in regard to education, health and employment. She maintains that women ‘spend many of the first years of their lives in acquiring a smattering of accomplishments; meanwhile strength of body and mind are sacrificed to libertine notions of beauty’ (Wollstonecraft 1972 [2004]: 6). Wollstonecraft set the stage for future critiques and engagement with body modification for feminist movements to come.

The feminist perspective on body modification has changed across time and produced conflicting views. For first-wave feminism body modification was not often an area of emphasis. Instead concern about the body focused on contraception and bodily autonomy. Body modification was not however totally ignored. Elizabeth Smith Miller, Amelia Bloomer and the clothing reformers critiqued the attention placed on female appearance and the practices it entailed as did the Rational Dress Society, offering less restrictive and health-damaging clothing options (Cunningham 2003; Kesselman 1991). In 1914 the first feminist meeting in America demanded ‘The right to ignore fashion’ (Bordo 1994 [2004]: 18). While not a central concern of first-wave feminism, the impact of body modification on women was still acknowledged and the cultural norms which surrounded these practices questioned.

The importance and attention given to the body and body modification by feminism started to increase in the late 1960s and 70s. In 1963 Betty Friedan published *The Feminine Mystique*. While not directly related to body modification and beautification, Friedan argued that traditional views and constructions of femininity in society were restrictive and oppressive forces in women’s lives. This critique of culturally normative gendered expectations was to become typical of the feminist
literature on body modification which would follow and informed feminist activism of the time. It is notable that the first public act of feminist protest in 1968 was the ‘No More Miss America’ demonstration (Bordo 1994 [2004]: 19). The early 1970s saw the body come more into focus in the feminist movement, but appearance was still not central. The influential *Our Bodies, Ourselves* (Boston Women’s Health Book Collective, 1971 [1984]) for example was wholly dedicated to the body, yet only one of the seven chapters, ‘Taking Care of Ourselves’, features a section on appearance which is entitled ‘Body Image’. Health and consciousness-raising were the dominant focus. This was a time in feminism when debates around women’s bodily autonomy in relation to the medical profession in particular were prevalent. The way in which the body is discussed in *Our Bodies, Ourselves* reflects the concern at the time to promote women’s need to understand their own bodies and a desire to de-medicalise the female body. This type of literature was part of feminist activism which aimed to enable ‘sisters’ to ‘do it for themselves’.

By the mid-1970s body modification and female appearance began to take more centre stage. The critique of the normative construct of femininity developed into a discussion of the objectification of the female body which increasingly became a political issue, one that was openly acknowledged as maintaining gender domination. The cultural paraphernalia of conventional femininity, of pleasing visually and sexually through body modification, were viewed as a critical aspect in this domination. Body modification and the culture of beauty were predominantly perceived as oppressive by feminists of the time (Dworkin 1974; Orbach 1978 [2006]; Hope 1982; Chernin 1983; Orbach 1986; Chapkis 1986 [1988]; Bordo 1989). Andrea Dworkin’s (1974) *Woman Hating* is an influential and well known text which came out during this period. For Dworkin beauty standards defined the relationship a woman had to her body:

They define precisely the dimensions of her physical freedom…In our culture, not one part of a woman’s body is left untouched, unaltered. No feature or extremity is spared the art, or pain, of improvement…From head to toe, every feature of a woman’s face, every section of her body, is subject to modification (Dworkin 1974: 113-114).
For Dworkin, and in the work of many of her contemporaries, body modification, understood as the histories and practices of containment and control, shaped the physiology and morphology of the body. The body itself was a site of political struggle. Towards the end of the 1970s, weight became one central focus of this perspective. Orbach’s (1978 [2006]) *Fat is a Feminist Issue* brought to the foreground the impact of cultural perceptions of weight, specifically fatness, for women’s experiences of their bodies. This marked the beginning of continuous feminist attention to weight and size expectations and the management of the female body.

In the 1980s the notion of the ‘cultural dupe’ came to the fore. Women were, on the whole, positioned as having little or no agency in their engagement with body modification practices (Chernin 1983; Orbach 1986; Chapkis 1986 [1988]; Bordo 1989). This perspective reflects feminism’s political agenda, to change women’s position in society at this time. Weight management and the ‘tyranny of slenderness’ were the main focus of this literature and argument. Orbach’s influential (1986) *Hunger Strike* epitomised feminist engagement with the slender ideal. In this book Orbach asserted that in western society women are stigmatised for not being slim and as a result go on to internalise this stigma and become dissatisfied with their body shape and weight. Contemporary western cultures’ reverence for slenderness and its gender bias were similarly critiqued by Chernin (1983) who argued that it pressurised women into body modification and influenced how they experienced their bodies.

Out of this focus on weight and slenderness a new set of research on eating disorders emerged (Boskind-Lodahl 1976; Bruch 1978; Wooley, Wooley and Dyrenforth 1979; Orbach 1986; Chapkis 1986; Brumberg 1988; Hesse-Biber 1991; Lester 1997). The uptake of the term ‘eating disorder’ illustrates the medicalisation of weight issues and eating patterns that was taking place. In defining these practices as disorders, a discourse of illness appeared. Contemporary culture and society was in part situated as responsible for eating disorders. This removed individual responsibility for the associated actions and the accusation of vanity, giving legitimacy to women’s weight concerns. It also led to the pathologising of individuals who suffer from eating disorders. The notion of self-management, which
is typically associated with body modification, especially dieting, was removed and replaced by the understanding that eating disorders were an inscription of cultural pressures and control of the female body, an outward expression of oppression. In this view little space was left for women’s agency. The self-discipline required by those engaging in such extreme dietary practices as a result was ignored. This medicalisation opened up a field of literature focused on intervention, proliferating the possibility of treatments. Controversially and in reaction against the denial of agency a small number of feminists presented anorexia as a form of active resistance against patriarchal oppression (Chernin 1981; Steiner-Adair 1986) while others saw it as a form of unconscious protest (Orbach 1978 [2006], 1986). Such claims however for the most part were dismissed as celebrations of dangerous and damaging behaviours.

In the 1980s a common theoretical approach to body modification in much feminist literature positioned women as passive victims. Chapkis (1986 [1988]), for example, argued that women are the oppressed victims of patriarchal capitalism, placing culture’s gendered conception of beauty as a central feature of this oppression. This oppression, she states, is reinforced by the cosmetics industry, media and popular culture. Methods of intervention that had previously been given little attention such as cosmetic surgery, in addition began to be brought into the discussion (Chernin 1983; Chapkis 1986 [1988]).

More flexible and less homogenous critiques of the role of culture on body modification practices also developed. Susan Bordo (1989) did this in *The Body and the Reproduction of Femininity*. She placed the nexus of intersecting cultural discourses on control, femininity and mind-body dualism, the ‘fashion beauty complex’, at the pinnacle of cultural influence on women’s body modification practices. The body was presented as a locus of on-going political struggle with individual beauty practices linked to the broader context of power and gender hierarchies. Bordo voiced suspicion of the possibility of discovering an authentic self, instead understanding women as embedded in a notion of cultural feminine inferiority, the latter being the basis for body-modification related problems. This was a conscious removal of blame from women. Though politically beneficial in highlighting patriarchal power structures and enabling their exposure to contribute to
a common political aim, there are clear limitations to this antithesis. Women’s experiences of their modification practices are not considered, they are only ever passive victims.

Attempts to address the limitations of the ‘cultural dupe’ theory alongside a revision of the concept of agency gained ground in the 1990s, particularly by what is understood as third-wave feminism. In its most extreme incarnation body modification, and in particular cosmetic surgery, were envisaged as a direct expression of women’s agency, a means by which women could control their bodies and take action to improve their situation (Davis 1991). Women were thus positioned as actively involved in the practices they undertook and as contributors to the cultural messages which surrounded them. Kathy Davis (1991) in ‘Remaking the She Devil’ for example presents women as making informed decisions to engage in cosmetic surgery. Body modification is here an act of agency. While Davis does criticise beauty ideologies (1991: 25-28), she validates cosmetic surgery as a possible solution to the problems these patriarchal beauty ideologies create for women. Gendered beauty standards are still understood as oppressive but women are positioned as aware of this. Their utilisation of body modification methods are uncritically seen as beneficial tools, enabling material gain, emotional happiness and pleasure. Reinforcing this argument, in a later work Davis (1999) employs the example of Dr Suzanne Noel, a surgeon from the first half of the 19th century, to demonstrate how cosmetic surgeons themselves could be feminists. Her appraisal of Noel is centred on the surgeon’s acknowledgement of individual circumstance. She is presented as having perceived each patient as unique, aiding their specific needs through surgery. While it is the acknowledgement of individual circumstance that Davis praises in Noel’s conduct as a surgeon, she herself fails to acknowledge the reality of women’s individual circumstances. By presenting cosmetic surgery as a tool for the democratisation of beauty, she fails to consider the impact of socio-economic situations which remove surgery from the reach of many women and thus limit any democratising potential.

Many less extreme critiques of the ‘cultural dupe’ theory were also produced at this time. The influence and pressure from societal ideals was still acknowledged and body modification was not seen itself as a sign of agency. Simultaneously however,
the possible pleasure women can experience and the power they can gain from their engagement in these practices was acknowledged (Skeggs 1993; Crane 1999). Women’s awareness of cultural expectations and media savviness were highlighted in attempts to present women as not simply passive unquestioning individuals who uncritically accept the cultural messages they encounter. Bev Skeggs (1993), in ‘A Good Time For Women Only’, suggests for example that women in their teens and twenties view hegemonic femininity differently compared to middle-aged women. Instead of perceiving images of hegemonic femininity as signs of weakness and passivity she argues that young women interpret them as indicators of being in control of one’s sexuality. Madonna’s expression of her sexuality was used as an example of this. Crane (1999) also discussed women’s responses to popular culture, in particular fashion images and advertisements in Vogue magazines. She argued that women do not necessarily read images in magazines uncritically or passively take their message as positive and to be followed. Crane viewed the assumption that fashion photographs generate enormous dissatisfaction among women, as a result of the unrealistic images they present, as outdated. She suggests instead that women respond critically to images, reinforcing her argument by demonstrating her participants to have viewed images in Vogue magazines as undesirable. Crane stated that the ‘taboos concerning appropriate gender behaviour for women led them to reject exaggerated expressions of sexuality, both heterosexual and androgynous, and images that implied gender ambiguity’ (Crane 1999: 560). She found that her participants did not see themselves in the images they saw in the magazines nor related to them. Instead Crane asserts that women viewing these images had a strong sense of personal identity and as a result were not influenced by images to which they could not relate. Others, while acknowledging the possible pleasure available and women’s active engagement in body modification practices, were also keen to highlight the limitations of women’s possible pleasure and agency gained from body modification. These limitations were argued to be the result of the lack of control women have over how they are perceived by others (Cahill 2003).

Part of the move to acknowledge women’s agency in their body modification practices was tied to a call within feminism for the recognition of individuality. Within the feminist movement more broadly there was increasingly a critique of the homogenisation of women. Black feminist activists in particular had brought to
attention the often very white and middle-class makeup of mainstream and academic feminism and perspectives (Crenshaw 1989). Deconstructionists, while sympathising with the oppression model, took issue with what they saw as its essentialisation of the conceptualisation of women for example. A seemingly contradictory stance emerged. Assumptions of women as oppressed were heavily criticised but the role of cultural influence was increasingly emphasised. A Foucauldian conception of power was frequently the theoretical basis for this literature where the dilemma of oppression and agency was deliberated. Power was understood as a relation or interaction in which people are positioned (Foucault 1977 [1991]) rather than something possessed. A less dichotomous and more flexible understanding of women’s relation to their body modification was the result.

The debate and discussion around agency and oppression produced some of the most famous and iconic feminist texts on body modification to date. Naomi Wolf’s seminal *The Beauty Myth* (1991) is an important example. Wolf presented beauty as a strategy used by those who hold power and privilege to prevent women from gaining more equality, independence and social standing (Wolf 1991: 10). ‘The Beauty Myth’, as Wolf (1991) puts it, is the belief that ‘the quality called “beauty” objectively and universally exists. Women must want to embody it and men must want to possess women who embody it. This embodiment is an imperative for women and not for men’ (12). Wolf argues that this myth is a lie; beauty is not universal or changeless but a currency system. For Wolf, as women gained in legal standing and material independence, the beauty myth intensified to hold them back. This accounts for the seeming contemporary rise of the beauty myth and its impact on women. For those who do not comply, she illustrates that cultural sanctions are in place to enforce submission.

Bordo (1993 [2004]) takes a less homogenous approach to the debate of agency in *Unbearable Weight*. Taking a Foucauldian perspective and considering how power structures work, Bordo discusses women’s agency in body modification practices, interrogating the concept of mind/body dualism, highlighting its gendered nature. She argues that women are cast in the role of the body ‘weighed down’, in Simone de Beauvoir’s words, ‘by everything peculiar to it’. Men in contrast are identified with the mind, occupying the culturally higher position. Bordo demonstrates that,
irrespective of the context of dualism, the body is always conceptualised as lower. As women are understood to be the gender affiliated to the body, its associated negativity is attached to them (Bordo 1993 [2004]: 5). The body is treated as a text ‘saturated with gendered symbols’ and meaning (Bordo 1993 [2004]: 24), but also as an active agent. According to Bordo, self-surveillance ensures that prevailing forms of selfhood and subjectivity are maintained. This compliance makes possible the ‘normalisation’ of gendered and racial beliefs. While this text considers a wide range of body modification, its title and content both give precedence to weight. This fits with the move to a focus on eating disorders in body modification literature, which I will discuss later in this chapter. Anorexia is used as an example to illustrate cultural readings of slenderness (Bordo 1993 [2004]: 185-212).

Popular culture and the media feature as key contributors to the maintenance of gendered expectations of appearance. Women, it is argued, are ‘continuously bombarded with advertisements and commercials for weight loss products and programs’ (Bordo 1993 [2004]: 99). The anorexic is explained as an extreme of the cultural approval of the slender body, an exaggeration of stereotypical feminine traits. Changes in beauty practices and an increase in their application are catalogued. Bordo views engagement in these practices as attempts to meet ‘an ever changing, homogenising, elusive ideal of femininity’ (Bordo 1993 [2004]: 166). Body modification, she argues drains women and is detrimental to their lives. Bordo’s assertion that the necessity for women to focus on beauty detracts from the time they can give to work and politics, and leaves them more vulnerable, aligns with Wolf’s (1991) main hypothesis. Bordo states that female forces and energies are ‘habituated to external regulation, subjection, transformation, improvement … Rendered less socially orientated and more centripetally focused on self-modification’ (Bordo 1993 [2004]: 166). Pleasure can be gained from these practices, but these positives are limited because the cultural stances behind their existence are ultimately detrimental to women.

In conjunction with the growth of literature debating agency and cultural oppression, a new emphasis on thinking about more invasive forms of body modification, in particular cosmetic surgery, emerged. The growth in cosmetic surgery and other invasive practices such as Botox (after 2002) reflects the procedures’ increasing
affordability, technological advances and normalisation in popular culture. Invasive procedures were becoming a realistic financial option for a growing number of women and conceptually were more normalised due to increased popular discourse about them. Morgan (1991) links these different streams of thought in ‘Women and the Knife’. She argues that the rising popularity of invasive surgery is the result of the conceptual reduction of women to body and body parts. Morgan calls for a feminist analysis, framing the topic within the question of ‘why actual, live women are reduced and reduce themselves to “potential women” and choose to participate in anatomising and fetishizing their bodies as they buy “contoured bodies,” “restored youth,” and “permanent beauty”’ (28). She suggests that the technologising of women’s bodies in western culture contributes to normalising elective cosmetic surgery (Morgan 1991: 35-38). Morgan argues that the language that promotes body modification is one of gaining access to achievement, liberation, power and transcedence. Dull and West (1991) pose a similar argument in ‘Accounting for Cosmetic Surgery’. They explore patient rationales for their choice of cosmetic surgery and surgeons’ perceptions of these. They argue that cosmetic surgery is constructed as a normal and natural extension of women’s assumed desire to improve their appearance, but not so for men. They found that surgeons view ‘good candidates’ as ‘those who think it will increase their self-esteem and improve their self-image, not those who think it will help them attract a younger lover or maintain their spouse’s attention’ (Dull and West 1991: 61). The improvement of self is here constructed as a satisfactory motive for surgery. A cultural hierarchal distinction, between those perceived to be ‘doing it for themselves’ and those doing it for others, is evident in this. This hierarchy is founded on certain cultural understandings of agency and oppression. Those ‘doing it for themselves’ are perceived positively because they are understood to act with agency. In contrast, undertaking plastic surgery for others is viewed negatively because the individuals for whom this is the motivation are regarded as lacking agency.

This understanding of agency in the popular imagination mirrors third-wave feminism’s stance on women’s engagement in body modification. Choice and agency are treated in an over-simplistic manner, taken to mean a lack of overt force or obvious external pressure. Dull and West (1991) argue that women’s desire for cosmetic surgery is culturally understood as natural and a demonstration of
acceptable levels of concern for their appearance. It is a part of their gender accomplishment. In contrast, for men this concern is perceived as unnatural and unnecessary. However, this perception of men’s engagement with plastic surgery and body image has changed over time. We have seen a gradual acknowledgment of the growing appearance-based pressures facing men and the increased normalisation of male engagement with cosmetic surgery (Pertschuk, Sarwer, Wadden, et al 1998; Frederick, Lever and Peplau 2007; Atkinson 2008). The reduction of the body to parts and their subsequent problematisation is linked to certain forms of its medicalisation. This is influential in promoting cosmetic surgery. Cosmetic surgery in turn is understood as institutional support for ‘doing gender’ (Dull and West 1991: 67).

The switch of focus in research to externally administered invasive forms of body modification resulted in a significant reduction in the attention given to normative everyday practices. In addition, within this literature, women’s bodies are constructed as something acted upon in the implementation of body modification, rather than active.

The impact on and role of culture on body modification became a defining element of much feminist literature on the body moving into the 21st century (Sharp 2000; Negrin 2002; Toerien and Wilkinson 2003; Vagra 2005). Cultural conceptions of the body, in particular the gendered body, became viewed as vital in determining women’s body modification practices (Negrin 2002; Fraser 2003; Ghodsee 2007). The commodification of the body in western culture was foregrounded in this discussion. The way in which the body and women are perceived by a given culture at any given time was understood to determine the degree to which the body is commodified. Sharp (2000) argues that women are targets of this commodification, their bodies colonised by beauty practices. In ‘The Commodification of the Body and Its Parts’ for example, Sharp suggests that the rhetoric of free choice used to describe cosmetic surgery mystifies the commodification of bodies (often female ones) and the realities of eugenistic thinking. Expanding the discussion on cosmetic surgery, Sharp goes on to contemplate different perspectives and possibilities for agency. In particular she discusses discourses surrounding transsexual surgery, illustrating the
wider array of plausible interpretations of this practice, and demonstrating the possibility of surgery being a liberatory practice.

Another strand of thought at the time linked the commodification of the body in culture to identity. For example, Negrin (2002) argued that under the conditions of modernity the body has become a self-reflexive project, integral to our sense of who we are. The commodification of the body in western society is regarded as a consequence of the body being understood as a source of identity. Cosmetic surgery, from this perspective, reinforces dominant ideologies of the imbrication of body and identity by seemingly offering women a solution to problems of self-identity. This does not challenge the social and political parameters of the beauty system (Sharp 2000: 25).

This renewed emphasis on societal expectations built on earlier feminist literature on body modification in which women’s decisions were understood as the result of this factor rather than individual choice. While ‘agency’ and ‘oppression’ had been written about in a non-oppositional way in earlier literature (Bordo 1989; Davis 1991, 1995) post 2000, the presentation of agency and oppression on a sliding scale in the discussion of cultural influence gained ground. Cahill (2003), for example, investigates the possibility of beautification as a feminist practice. While highlighting the pleasure women often experience when engaging in body modification she acknowledges the limitations of this pleasure in a male-centric society and the importance of context (51). A strong distinction is made between the process and products of body modification. Engaging in body modification is understood to enable the solidification of subjectivity and to be an act of agency. The experience of being viewed is presented as the point at which this possible agency is lost. Women, Cahill argues, are subjected to a host of meanings that are ‘grounded in a dismissal of that subjectivity’ (Cahill 2003: 61). Cahill views the time dedicated to body modification as demonstrative of the degree to which the feminine body is experienced as deficient in its natural, unmodified state. Unusually for the literature of this time, Cahill also acknowledges the impact of women’s socio-economic and material realities in defining body modification possibilities for individual women. Similarly, Tyner and Ogle (2007), when looking at dress-related meanings in Ms. Magazine, argue that dress and its related discourse are simultaneously oppressive
and unpleasant and/or empowering and pleasant. Ms. provides a critique of cultural discourses offering prescriptive fashion advice, promoting modification or control of the natural body and linking women’s appearance to their value or success. At the same time the magazine also constructs dress and appearance management choices as opportunities for personal empowerment, pleasure and self-actualisation. Using Ms. *Magazine* as a case study, Tyner and Ogle (2007) suggests that empowerment and personal satisfaction can be achieved either by accommodation or resistance to the cultural norms of female beauty. Cultural context and individual situations are foregrounded as determining how any given practice is experienced.

The debate about the impact of culture on women’s body modification is most dominant in feminist literature on eating disorders (Malson 1998; Crossley 2005; Hesse-Biber, Leavy, Quinn, et.al 2006; Malson 2008; Chen, Fox and Haase 2010). Eating disorders in the UK and the west more generally are rising and have been for several decades. This increase has been presented in popular culture as an epidemic (Rainey 2013; Buchanan 2014; Gibbons 2014). Unsurprisingly then, though undertaken from a much earlier point (Bruch 1974, 1978; Brumberg 1988), attempts to locate the cause of eating disorders and the reason for their apparent increase grew in feminist literature on the body, particularly from 2000 onwards. Haworth-Hoeppner’s (2000) article, ‘The Critical Shapes of Body Image’ did exactly this. Based on interviews with white middle-class women, Haworth-Hoeppner (2000) argues that the family acts as a cultural mediator and so is key to whether or not an individual will develop an eating disorder. In fitting with social stereotypes, it is white middle-class women that are believed to be most vulnerable.

As more attention was given to the topic of eating disorders, a medicalised view that sufferers need psychiatric intervention, which came particularly from experimental psychology, became prominent. This coincided with the development of the literature on body image. Body image in popular culture is taken as the determining factor in women’s experience of and relation to their body (Lennon and Rudd 2000; Davis 2003; Blood 2005). Many feminist academics such as Hesse-Biber et al (2006) and Blood (2005) wrote specifically to challenge this view and asserted that eating disorders are symptomatic of a social problem. Blood (2005) denies that there is an objectively knowable body which can be perceived more or less accurately by the
more or less rational mind. She refutes the existence of hypothetical ‘real’ cognitive structures, which are conceived as the site of inaccurate perception, whose output can be measured. Blood argues that the concept of ‘body image’ and its disturbance is a specific socio-historic production. The emphasis on physical appearance contributes, according to Blood, to the idea of women’s bodies/subjectivities as primarily and essentially aesthetic. The final critique Blood launches on this work comes from the Foucauldian concept of the Panopticon. She asserts that body image investigations are disciplining and normalising practices, as body image discourse relies on the concept of a ‘natural’ body that exists outside of social meaning. Similarly, Hesse-Biber et al (2006) present eating disorders and disordered eating as culturally induced diseases, promoted partly by economic and social institutions that profit from the ‘cult of thinness’ (208). Culture, specifically American in this case, is understood to send the message to women that only the beautiful and thin are valued and loved. Thinness represents the height of success. Thus the partnership of capitalist interests and patriarchal perspectives influence women’s bodies through socio-cultural pressure on women to be thin (212). This argument ties in with earlier feminist works by situating this pressure as a backlash against women’s increasing equality in major societal institutions. The construction and circulation of this body ideal is seen to foster body obsession with eating disorders as ‘the logical conclusion of extreme self-imposed body control to attain a cultural ideal of ultra-thinness’ (Hesse-Biber, Leavy, Quinn, et al 2006: 212). Capitalist and patriarchal interests here are allied to convince women that independence means they are responsible for maintaining the ultra-slender body ideal through self-improvement and self-control, which by design or effect, results in the widespread control of women – their minds, bodies, time, energy and money. Whilst agency is not denied to exist, the article highlights the difficulty of detaching body modifications from power interests; they are practices which articulate those interests.

Attempts to align women’s positive and negative experiences of body modification, simultaneously addressing pressure and agency, became more frequent as this literature developed. The role of an individual’s position culturally and socially was increasingly emphasised. The most consistent theme throughout all feminist literature on body modification is the recognition of the gendered nature of these practices and of beauty conceptions. Body modification is presented, for the most
part, as a female burden (Dworkin 1974; Chapkis 1986 [1988]; Bordo 1989, 1993 [2004]; Wolf 1991; Jefferys 2005; Fahs 2011). Women are those whom the ‘beauty myth’ is aimed at and detrimental for, because culturally, appearance has more weight in the judgement of women than of men. Imperfection is frequently argued as inevitable for twenty-first century western women and women’s relationships with each other are perceived as shaped around an imaginary masculine desire (Blum 2005: 109). How this gendered relationship to body modification works, and the relationship women have to these practices, what it means to be a woman in a capitalist patriarchal society, became increasingly interrogated. As Blum states:

Deified or subordinated, woman is always the outside term, dislocated from the scene of political power and agency. In having our bodies split off from our subjectivity, our bodies can be idealised at the same time that we are disempowered as subjects. This splitting of body and subjectivity leads to a further splitting of idealised and ‘real’ bodies of women. If the feminine ‘condition’ is to be beautiful, it is notable that individual women are always stranded on the other side of beauty. The innovations in cosmetic surgery promise us appeasement of this impossible desire, by allowing us, so they claim, to alter anything we choose. Cosmetic surgery, in other words, holds out a technological and economic solution (if you have the money, the technology is there) to the very dilemma posed by the way capitalism manages femininity by simultaneously commodifying it, idealising it, and insisting on its native defects (Blum 2005: 110).

Women’s and men’s approaches to body modification are implied to be different in both method and motivation (McCabe and James 2009). This is a result of the different positions and conception of men and women culturally. Concerns with appearance continue to be culturally perceived as normal for women, even when the practices used are invasive and permanent such as cosmetic surgery, but as unnatural for men (Fraser 2003: 75). Even when men are directly the subjects of discussion (which is rare but increasing), body modification is still predominantly associated with the feminine (McNeil and Douglas 2011) and understood to be culturally read in this way. Holliday and Cairnie (2007) have highlighted this deficit of attention given
to male body modification, its strong association with the feminine and the
differentiation between male and female bodies in feminist literature. This difference
of association is regarded as key to determining the degree to which men and women
as categories engage in these practices on a general level.

In contrast to the understanding of body modification as feminised, the discourse
used to discuss and often sell body modification and its products has been argued by
feminists to utilise language traditionally associated with the masculine (Weber and
Steffens 2010), a finding which was very evident in my own research and
experiences. For example, an article in *InStyle* (Dean 2014) about exercise for weight
loss, specifically high-intensity interval training (HIIT), uses phrases such as ‘I need
to be knocked into shape by someone with SAS-style approach’, and tells the reader
that the work out ‘is not for sissies’ and that it is about ‘how hard you push yourself’
(175). This discourse culturally associated with the masculine is supposedly
employed in order to create an ideology and mantra of choice and agency.
Celebrations of individualism, competition, and physical sacrifice create, according
to Weber and Steffens (2010), a ‘testosterone tale’ (863), in programmes such as *The
Swan*. Attaining the ideal appearance, or in Blum’s words, becoming the ‘Other
Woman’ (Blum 2005), is, in this discourse not an irrational unachievable dream, but
rational and plausible through determination and science. The discourse about body
modification and women’s relation to these practices is presented as changed. The
old rhetoric of ‘I can’t go out without my lippy’ has been rebranded to denote choice
and self-appreciation, perfectly embodied by the well-known slogan of the cosmetics
brand L’Oreal.23 This redirection of discourse has been interpreted as a tactic by
advertisers to utilise third-wave feminist discourse in a post-feminist society
(Johnston and Taylor 2008). Key to this discourse is the emphasis on the individual,
her value and her decision, her agency. In line with third-wave perspectives, body
modification is presented as a meaningful source of empowerment (Davis 1995;
Holliiday and Sanchez Taylor 2006). Body modification and beautification are seen
as enactments of acceptable gender strategies in the literature which critiques
corporations’ use of emancipatory ideals (in this case third-wave feminist ideals) in

---

23 L’Oreal is the largest cosmetic company in the world. L’Oreal’s famous advertising slogan
‘Because I’m worth it’ was replaced in the early 2000s by ‘Because you’re worth it’ and in 2009 with
‘Because we’re worth it’.
their marketing campaigns. The degree of meaningful empowerment attainable through these practices is questioned, as is an individual’s ability to choose freely to consume any product or engage in any practice. This stance aligns much of this literature closely (and contentiously) with the concept to the cultural dupe.

The attention given to the advertisement of body modification went together with an interest in the role of consumerism (Ghodsee 2007; Elliot 2009). As a contributory factor in women’s body modification decisions, consumerism was linked to identity formation. Consumption is understood as a method used by individuals to situate themselves socially. The changing characteristics of the global economy feature prominently in the feminist literature of which this is a focus. Elliot (2009) considers, for example, the rise of cosmetic surgery against the backdrop of celebrity culture and the consumer industries. This article contends that surgical culture has become increasingly interwoven with major institutional changes in the global electronic economy. Personal vulnerabilities in the workplace and the wider new economy are explored in the context of people seeking to reinvent themselves and improve their life prospects through cosmetic surgery. This is a way to compete against others in the workplace. It is argued that the fluidity of contemporary employment means individuals can no longer be defined through their career, so instead they define themselves through reinvention. Similar arguments are put forward when the contemporary neo-liberal context is discussed.

The link between consumerism and self-presentation usually features as part of discussions about the global spread of western culture and ideals (Johansson 2001; Ghodsee 2007). Feminist literature on this topic typically argues that this spread has and is having a homogenising effect on global standards of beauty and self-identity, though this has been challenged (Holliday and Elfving-Hwang 2012). Ghodsee (2007) for example examines the recent history of the consumption of perfumery and cosmetics in urban Bulgaria during the communist and post-communist period. Ghodsee argues that, while consumption was heavily gendered in both periods, after 1989 the production, distribution and marketing of goods changed significantly (Ghodsee 2007: 27). The article looks at shifting ideals of femininity and consumerism, alongside the preference of post-socialist Bulgarians to spend on cosmetic products more than on any other form of goods. The author argues that,
rather than giving women greater access to a wider variety of products, advertisers have created new and impossible beauty standards that many women now feel they must strive to live up to if they want to succeed in the new capitalist economy. The influence from the west, both in products and advertising, coincides with the need for girls to make sense of changing identities in a newly hyper-commodified society. Consumption practices supersede employment as the primary shaper of individual subjectivity. Western ideals of femininity and womanhood are in addition shown to have begun to replace communist dogmas regarding equalities of the sexes (Ghodsee 2007: 31). Fashion and beauty are argued to have become the two most important markers of femininity in post-socialist countries that previously defined women as workers and mothers (producers), without an emphasis on physical beauty. For women in these environments, the article ultimately suggests, the new beauty standards are a way to get ahead in a competitive labour market.

Holliday and Elfving-Hwang (2012) have directly challenged the belief that the global spread of western ideals is having a homogenising effect on global standards of beauty and self-identity. Using South Korea as a case study they argue that feminist explanations of cosmetic surgery which suggest that it is ‘pertinent only to female and non-western bodies found lacking by patriarchal and racist/imperialist economies, miss important cultural influences’ (58). Holliday and Elfving-Hwang (2012) explain that the focus on western cultural hegemony misses the influence of national identity discourses and traditional Korean beliefs and practices such as physiognomy. They also critique the notion of the ideal ‘western body’ as more unobtainable for non-western women through arguing that this body has in reality little in common with actual western women’s bodies and ‘more in common with a globalised image, embodying idealised elements from many different cultures’ (Holliday and Elfving-Hwang 2012: 58).

Alongside discussions as to why women engage in body modification and the debate over agency, a renewed emphasis on the actual methods of body modification occurred post 2000. Procedures which are a health risk are given particular attention, with cosmetic surgery and tanning dominating the discussion as well as extreme dieting and exercise regimes (Davis 2003, Fraser 2003; Blair and Shalmon 2005; Gimlin 2007). The exploration of the growing popularity of cosmetic surgery
features frequently (Fraser 2003; Blair and Shalmon 2005). Blair and Shalmon (2005), for example, state that teenagers are now more likely to have cosmetic surgery than ever before (14). The growth of cosmetic surgery is linked to the spread of race science that links physical appearance with one’s temperament, character and intelligence (Blair and Shalmon 2005: 15). Early cosmetic surgery is presented as giving the promise of curing one’s inner condition by transforming one’s outer appearance. The authors argue that present-day advertising uses a similar notion, presenting cosmetic surgery as improving self-esteem and quality of life. The improvement of physical appearance or the acquisition of a desired physical appearance is the measure of success or the defining factor in an individual’s sense of self-worth.

In other contexts however cosmetic surgery acts as a tool which can be used to resist ideals and normalised expectations. This is demonstrated as possible through the utilisation of these procedures and products to create an appearance which strongly contrasts with traditional notions of beauty. In particular, the French artist Orlan and her work *La Réincarnation de Sainte Orlan* (1990) is cited. Western society is seen as the culprit promoting unhealthy or risky practices and damaging ideologies of beauty. Cosmetic surgery as an isolated practice is not viewed as negative or problematic. Rather, the context in which it exists, what it means in this context and how it is used, are constructed as the problem.

Occasionally the focus on those practices viewed as extreme is broken and attention is given instead to non-invasive everyday ‘mundane’ practices which are part of most women’s daily beauty regimes. These texts aim to demonstrate the gendered normativity of body modification practices and the degree of control their perceived cultural necessity has over women and their bodies. Hair removal has been given noticeable attention in this context (Toerien and Wilkinson 2003; Fahs 2011). In these examples, the removal of body hair is shown to be highly pervasive and cultural sanctions for not adhering to it are made apparent.

In the overriding majority of literature on body modification, the west and western women are treated as a homogenised group. When this homogenising view is challenged the difference acknowledged usually focuses on nationality or race. Rice (2002), Kaw (1993) and Holliday and Elfving-Hwang (2012), for example,
acknowledge the disparity possible in women’s experience of body modification and critique generalisations and homogenising views of women and their experiences. They call for the recognition of social position and personal heritage as contributing to individuals’ interactions with cultural messages of beauty and body modification. This perspective has been most notable in the increased attention given to the impact of race and racial ideologies on women’s body modification decisions and experiences (Rice 2002). A good example of this is Kaw’s (1993) ‘The Medicalisation of Racial Features’. Kaw investigates Asian American women’s decisions to undergo cosmetic surgery with the aim of making their appearance more Caucasian. Kaw explores the racial and gender ideologies which promote this type of surgery. Kaw highlights how Asian features are medicalised as abnormal and situates these decisions as motivated not by vanity but rather as a means to avoid racial prejudice. This engagement with racial difference in feminist literature expanded with investigations into whether racial identity is an influential factor in women’s body modification decisions. In ‘Does Race Matter’ Frisby (2004) directly addresses the impact of race. Beginning from the premise that being witness to advertisements featuring unrealistically beautiful models reduces women’s body esteem, Frisby investigates if there is a different effect on African American women’s body image depending upon the race of the model they are exposed to. Frisby (2004) suggests that African American women are not affected by images of Caucasian women, because they do not see themselves as portrayed by or related to them, but are affected by exposure to African American models (Frisby 2004: 341). This literature does not however address the impact of the relative lack of visual counterparts for African-Americans. This line of enquiry has however been raised in other feminist literature.

Similarly, some researchers have looked at the role of nationality and cultural/state structures in relation to women’s body modification. Gimlin (2007), for example, argues that variations in explanations of their reasons for undergoing cosmetic surgery between women from the USA and the UK are a result of differences in their cultural ‘toolkits’ (Gimlin 2007: 42). Davis’s (2003) argument that a country’s healthcare system both determines who may undergo cosmetic surgery and fosters distinct discourses for understanding and expressing the practice’s controversial aspects is utilised here. It is argued that while cosmetic surgery is conceptualised as a
beauty practice, it is ultimately a medical intervention. The differences between the British and American health care systems are said to be hugely influential. In the USA values of self-reliance, pragmatism and atomism inform the healthcare culture around notions of individual autonomy and choice, active intervention and procedural prowess. Within the UK a more conservative approach is prevalent. British respondents felt a necessity to emphasise their ‘need’ for the surgery; this need was often medically conceptualised. Physical or emotional pain, exclusion from activities that are unexceptional for others, or traumatising past experiences were frequently offered as justification. For the American women a willingness to take control of their bodies was expressed. This contrasted with British women who tried to distance themselves from any suggestion of ‘vanity’. Even though the British women employed more strategies to distance themselves from vanity through emphasising their need for the surgery, they were less able than their American counterparts to distance themselves from suggestions of narcissism and self-indulgence. This article is unusual in its demonstration of the western trend toward increasing bodily intervention as not seamless and unidirectional.

**Conclusion**

The body and body modification are a topic which has, as this literature review makes evident, received extensive and varied amounts of attention. It is a topic which features frequently in popular culture and media, and which has been prominent in a variety of guises in feminist research. This large volume of research however has a multitude of gaps which I think need addressing.

While a wide range of practices has been investigated, this has tended to focus on new technological developments in body modification and particular practices. This has usually meant methods which are either invasive or viewed as culturally extreme. While some feminist literature has discussed, and at times investigated, the more mundane everyday practices of women’s body modification, none has considered the whole range of women’s body modification practices as part of a connected and developing everyday regime in the way which I intend to do in my research. How body modification changes over a woman’s life course, which I shall investigate, has
been neglected. Much of the feminist literature on body modification critiques
society and culture for the pervasive normative position of many of the less extreme
practices of body modification (such as shaving, makeup, fashion). The lack of
attention they receive however, reinforces their normative position if we understand
the unmarked or un-remarked upon as the norm. In understanding women’s relation
to body modification, missing out the practices that most women first begin to use
and are most likely to use across their life course means that an understanding of how
body modification regimes are begun and developed is lost. In addition, as Hope
(1982) has argued, ‘those behaviours which are most taken-for-granted in a culture
may well be the most important ones for revealing an understanding of that culture’
(93).

My research focus enables me to consider more effectively the issue of agency which
is so prominent in feminist literature on body modification. Unlike most of the
literature on this topic, which tends to be either quantitative, questionnaire based, or
focused on one specific form of body modification, my research is based on
qualitative semi-structured in-depth interviews and considers all the body
modification which was discussed by my participants in relation to key points in their
life course. I asked women about their individual motivations for engaging in these
practices across their life-course in order to gain more in-depth explanations of why
women do the practices they do. This approach allows for the impact of differences
in class, socio-economic position, context and race to be considered, ensuring that
the participants are not treated as a homogenous group. It also ensures that body
modification practices are considered in the context of individual women’s lives
rather than as isolated events. A gap clearly exists in the body modification literature
in giving context to women’s body modification practices as part of ongoing and
developing regimes and this is what my research will address.
2. Methodology

My Research Perspective

My research on body modification deals with in many ways unquestioned, highly normative and gendered practices many women undertake, and are expected to undertake, within contemporary western culture. The dominant theoretical and personal perspective from which I approached my research is feminist. This was motivated by the relevance of feminism to my research field. Feminism has a history of giving attention to women’s bodies, both in academia and activism, as Chapter 1 illustrated. Viewing women’s bodies as a site on which gendered norms and inequalities are written, feminist researchers have investigated women’s embodied experiences, which is also the focus of my own research.

Defining what is a feminist research method however is difficult. This has been acknowledged by many academics, as Sandra Harding’s (1987: 1) questioning ‘is there a distinctive feminist method of enquiry?’ and Hesse-Biber’s assertion (2007: 4) that ‘there is no single feminist epistemology or methodology’ make apparent. For me, feminist research is defined by two factors: the research topic and the conduct of the researcher. I think it firstly needs to attend to a topic which is relevant to women’s lives and revealing of their lived experiences. I also think that it requires that the researcher conducts all aspects of the research in an ethical, non-hierarchical and non-exploitative manner.

I have ensured that my research meets my definition of ‘feminist’ by drawing on feminist guidelines on methodology. For example, the initial discourse on feminist methodology originated from critiques of quantitative research and its limitations in representing the experiences of women: ‘we literally cannot see women through traditional science and theory’ (Du Bois 1983: 110). Rectifying this discrepancy by making the experiences of women visible is a key aspect of what makes research feminist and in part what makes my own work feminist. The focus of my work is on women. My research aim is to gain knowledge of women’s relation to their practices
of body modification, looking critically at how they articulate and manage their experiences of this. Feminists have argued that ‘traditional theories have been applied in ways that make it difficult to understand women’s participation in social life’ (Harding 1987: 3). Directly addressing this issue, my research is based on women’s articulations of their experiences of a gendered practice and its gendered meanings.

For its alignment with feminism, how my research is undertaken, my conduct as a researcher in the field and my representation of my data are all important. It has been argued that ‘feminist researchers emphasise the synergy and interlinkages between epistemology, methodology, and method and are interested in the different ways that a researcher’s perspective on reality interacts with, and influences, how she goes about collecting and analysing data’ (Brooks and Hesse-Biber 2007: 4) and that ‘what makes feminist research is less the method used, and more how it is used and what it is used for’ (Kelly, Burton and Regan 1992: 150). In addition therefore to my research focus being on women, I was reflexive throughout the research process, careful to ensure the reduction of the hierarchical power relations in the research process, and acknowledged the ‘relationship between the process and product of research’ and my ‘subjective involvement’ as researcher. These are all factors central to feminist research (DeVault 1996: 32-33; Letherby 2003: 5). I undertook my research always with these guidelines in mind.

Making clear my commitment to approaching research from a feminist perspective, in this chapter I explain my methodological decisions and conduct throughout the research process, analysing *inter alia* some of the issues I faced. I shall begin by discussing my research participants: who they were, why I chose this specific sample and how I recruited them. Following on from this I establish my choice of research methods and the theoretical considerations that accompanied the decisions I made. Next I address the ethical considerations which informed my research design and how I applied them. After this I go on to analyse my use of auto-ethnographic writing as a pilot. I then proceed to discuss the interview process itself. Here I shall consider the actualities of my field work and the issues I faced, evaluating the factors which impacted on my research, field work and the data I collected. Finally I shall discuss the transcribing of the interviews and the data analysis process.
Research Design

Why interviews?

Interviewing is rather like a marriage: everybody knows what it is, an awful lot of people do it, and yet behind each closed front door there is a world of secrets (Oakley 1981: 31).

Reinharz (1992: 19) argues that ‘[i]nterviewing offers researchers access to people’s ideas, thoughts, and memories in their own words, rather than in the words of the researcher. This asset is particularly important for the study of women because this way of learning from women is an antidote to centuries of ignoring women’s ideas altogether or having men speak for women’. This is the main reason why I chose interviewing as my research method. The aim of my research is to gain knowledge of women’s understanding of the practices of body modification in which they engage and their relationship to them. I therefore required explanations from women about their experiences, decisions and understanding of these practices. I needed their narratives. I chose interviewing because I anticipated that it would enable me to access ‘women’s unique experience and standpoint’, providing details of women’s perceptions which might have been overlooked in quantitative methods (Haraway 1991: 335). In addition, as interviewing allows participants to offer their own narratives, through using this method I sought to avoid making assumptions on their behalf. By using interviews I also expected to be able to ensure that I did not restrict the options of disclosure to my own predefined categories or distort my participants’ experiences and so silence their voices (Jayaratne and Stewart 2008: 44).

I decided that one-on-one, face-to-face, semi-structured in-depth interviews were the best means for me to ensure I gained rich data. The topic of female body modification required that I would be able to ask for clarification and expansion on points. Body modification is a normalised and taken-for-granted practice and so I anticipated that participants might overlook or forget many aspects of their regime or consider them not important enough to report. In addition, as I wanted to understand women’s experiences of these practices and their development better, having the
opportunity to ask for clarification and further explanation of any answers I was unsure about, would, I hoped, provide me with better data for this purpose and prevent me from merely making assumptions about what participants might have meant in their reply. In-depth interviews offered me the best means of ‘getting at the “subjective” understanding an individual brings to a given situation or set of circumstances’ (Hesse-Biber 2007: 118). As well as this my research aims were in part concerned with how women articulate their experiences of body modification and the discourses they utilise for this process. I therefore needed to have access to narratives where the interviewee had the space to digress and move beyond predetermined categories. In contrast, I thought that quantitative forms of data collection and survey questions, which do not allow for immediate interaction and probing, might limit my ability to attain this sort of data.

The topic of female body modification and its position in popular discourse and culture was also influential in my research design. I chose one-on-one interviews as practices of body modification exist at different levels of taboo, privateness and normality. While some practices, such as wearing makeup or high heels, have public and plentiful dialogues about them, others are not so much discussed; extreme dieting and exercise, self-harm and the removal of facial hair are all examples of this. In a group situation certain practices, for example body hair removal, might not be easy for participants to discuss openly in light of the privacy normally associated with this practice in contemporary British culture. While hair removal is visible in terms of adverts for shavers and waxing, women’s actual engagement with these practices and an acknowledgement of female body hair is rarely in public view. The dramatic and headline-making response to the presence of visible under-arm hair on the actress Julia Roberts as she walked the red carpet in 1999 exemplifies a certain public distaste of female body hair (Fricker 2008). A hairy female body is deemed culturally unacceptable (Toerien and Wilkinson 2003; Fahs 2011). The public distaste for female body hair means that women’s related labour in body and facial hair removal is often undisclosed because it would entail the acknowledgment of having body hair. In addition women may feel there is a lack of discourse for them to talk publicly about intimate areas of their body, and it is common for slang phrases and gestures to be used instead of more formal terminology. As body modification includes practices done to intimate areas of the body, such as pubic hair removal,
providing an environment where participants could use less formal language or non-verbal signals to denote areas that they felt uncomfortable vocalising was also a consideration. The capacity for intimacy and interaction I understood to be provided by face-to-face, one-to-one interviews therefore strongly contributed to my decision to utilise this research method for my data collection.

**Research Sample**

My interview sample consisted of thirty women, aged between eighteen and twenty-five, who were British and had been to or were attending university (see Appendix G for further details). I chose these women for several reasons. First, as a result of their position in their life cycle, this age group of women are likely to be at least partly independent but not yet settled in a long-term relationship, secure career or permanent geographical location. They were likely to be on both the ‘relationship’ and the ‘career market’, and adjusting to new environments. This large element of personal adjustment to new and varying environments and the phase of the life cycle these women occupied meant, I anticipated, that they would be proactively and possibly also reflexively engaged in body modification practices. The women were also likely to have some income of their own and the freedom to spend this as they chose, meaning they would be able to purchase products relevant to body modification. In addition all my participants were legally adult and so able to engage in all forms of legal body modification within the UK without needing the permission of a guardian. Given their age these women were also part of the generation that grew up during third-wave feminism. As third-wave feminism’s approach to body modification is something I wish to investigate, it seemed appropriate to engage with women who had lived with the possibility of its influence.

I decided that my participants would be British to ensure that all had been brought up within a broadly similar cultural context, limiting a number of possible environmental variants that would otherwise need to be considered. In addition, British women are relatively privileged materially in regards to their economic power, their political and cultural freedoms and their right to bodily autonomy. This, combined with the fact that all my participants had or were attending university, placed them as a group of women in a position of relative autonomy and freedom of
behaviour and expression. Thus from a wider cultural perspective my interviewees were women with a potentially large degree of agency in their own lives. This is an important factor because agency is one of the biggest points of contention within feminist discussions of female body modification, as has already been discussed in the Introduction. My sample is not representative of British women; since I intended to conduct qualitative research, I did not attempt to create a representative sample of interviewees. As a result of this my findings in this thesis are not generalisable. However, certain trends in my participants’ responses suggest common experiences and might warrant further research.

**Recruiting Participants**

Having decided on the parameters regarding the women I wanted to interview, I found my participants through a variety of methods. Recruiting participants through multiple means is useful for the researcher and contributes to variety in the research sample (MacDougall and Fudge 2001). To begin with in June 2012, I posted a call for participants on Facebook, and asked friends and relatives either to participate themselves or to ask their friends and colleagues. I shall discuss the implications of this below. I also utilised work networks and emailed university departments where I thought students might be willing to participate. This generated an initial response of thirteen interviews. Following this, I continued to utilise social and work networks. Posts were placed by research participants on university blogs and some snowball sampling began to take place as research participants I had already interviewed provided me with additional individuals to contact or passed my details around.24 My decision to use snowball sampling was informed in part by arguments that this method enables the researcher to recruit those who may not see themselves as fitting the researcher’s call for participants. Given that my definition of body modification is not in keeping with its depiction in popular culture, as I have discussed, this sampling method meant women who saw their practices as too mundane to be of interest were able to be recruited beyond my own immediate contacts (Browne 2005). Similarly, while this method is usually associated with the recruitment of hard-to-reach or hidden groups (Atkinson and Flint 2001; Noy 2008), it also gives

---

24 For further discussion on snowball sampling see Biernacki and Waldorf 1981; MacDougall and Fudge 2001; Browne 2005; Noy 2008; Hesse-Biber and Leavy 2011.
access to those groups not suffering from stigma or marginalisation, such as my participants, who may be ‘hidden by choice’ (Noy 2008). I found six of my participants with the help of previous participants and seven through friends, relatives or work colleagues, six of whom I had also interviewed. This process of finding research participants meant that there were a number of women within my sample whom I had previously known (the degree to which this was the case varied greatly) and other individuals with whom I had no prior contact. Some of the latter had connections to me through a friend, relative or colleague while others had none.

Overall I knew twelve participants prior to the interview to varying degrees. I had a connection through another person to fourteen of the participants (this connection was an effect of snowball sampling) but had never previously met them, and I had no connection and had never met four of my participants (three of these however lived together and invited me to their house to interview them all on the same day). Table 2 details my relation to each of my participants:

Table 2. Researcher’s Relationship to Participants

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colleague of researcher</td>
<td>1</td>
</tr>
<tr>
<td>Friend of researcher</td>
<td>11</td>
</tr>
<tr>
<td>Connected to the researcher through a friend</td>
<td>8</td>
</tr>
<tr>
<td>(friend, partner, colleague or relation)</td>
<td></td>
</tr>
<tr>
<td>Acquired through previous participant</td>
<td>6</td>
</tr>
<tr>
<td>No connection</td>
<td>4</td>
</tr>
</tbody>
</table>

Source: Interview data, 2012.

The type of relationships I had with the participants had some effects on my research which I shall discuss later in this chapter.

All of my participants met my initial demographic brief. In addition my sample consisted of heterosexual women only, though this was not by explicit design. I am heterosexual and so, while the sexuality of my interviewees could be purely a matter of chance, as I interviewed a lot of women whom I knew (and people tend to know
people like themselves), it could be an effect of my identity. Twenty-seven of my interviewees identified as white British, one as British Pakistani, one as British and French (this participant was initially raised in Italy but had lived predominantly in the UK), one as of white British-Italian heritage and one as of Black British Caribbean descent. In recruiting participants I had to turn away a number of individuals who were either outside of my age margins (usually older) or had not attended university. These women were interested in the subject and happy to be involved, often helping me to find other participants when they themselves could not participate.

The participant recruitment process was relatively easy for me, despite undertaking this aspect of my research after the university term had ended during the summer holiday. This meant that I had little access to undergraduate students. This ease seemed to be the result of two factors. The first is that I myself fitted into the required demographic and thus have a large number of friends and associates who fall into this demographic too. They offered to help me with my recruitment either by volunteering themselves or providing suitable friends, relatives or colleagues. Another significant factor was the participants’ interest in the topic of body modification. After I had found sufficient interviewees, many individuals still offered themselves for participation in this or future research, while participants often vocalised the importance to them personally of this topic. Nicola for instance said:

Yeah, I guess I do have a general point of view that I do think it is a huge issue in terms of, I think like, I would say I am quite body conscious and it is something that I think, every day I will think about it at some point, whether it’s to do with what I am eating or like you say, getting up in the morning and putting your makeup on. It forms part of your everyday life. I think that’s the same for lots of women and I do think it is a huge cultural thing in Britain and probably other places that there is this huge emphasis on appearance.

The interviews were conducted in a range of environments by agreement with the interviewee: university libraries, my home, the interviewee’s home, the home of a mutual friend, my partner’s house and a café. While none of the interview locations
appeared in any way detrimental to the data I collected, I was still mindful of the fact that ‘interview participants may offer different kinds of information, depending on where they are interviewed’ (Elwood and Martin 2000: 655; Sin 2003; Herzog 2005). As my interviewees chose where the interview was conducted, the apparent non-detrimental effect of all the locations could be because they decided on an environment in which they felt most comfortable, and this varied between individuals. I initiated the organisation of meetings for the interview but was as flexible as possible, allowing participants to determine the time, place and date of our meetings. My decision to allow my interviewees to determine where and when the interviews would be conducted was undertaken to help disrupt the power hierarchies at play in the interview situation, a key consideration and aim of feminist research (Falconer-Al Hindi 1997; Longhurst 2003; Herzog 2005). As Elwood and Martin (2000) argue, participants’ choices of interview location need to be considered for what they tell about them as well as how they impact on the interview experience and the data collected. The vast majority of participants wanted the interview to be conducted where I was based rather than in their own homes or wished for me to meet them elsewhere, usually a mutually convenient location. This was a surprise as in some cases it required my interviewees to undertake long journeys and took up their time, especially as I always said I was happy to travel to them. This preference may have been a result of the private and sometimes sensitive nature of the topic of body modification. While generally people were open and willing to discuss this topic with me, I think the importance of anonymity may have influenced their decision of interview location. Participants’ choices reflect and highlight the cultural position of body modification as a usually private practice and the secrecy and hidden labour women put into these practices (McDowell 1998). Fifteen participants opted to come to me, five asked to meet in a neutral location geographically convenient for both of us, and ten asked me to go to their home. Of these last ten I knew two well. Interviewing those I did not know in their own home brought with it issues of researcher safety, which I discuss in the following section of this chapter.
Research Ethics

Given the emphasis on ethics in feminist research, this was intrinsic to my research design. I submitted an ethics review form to the relevant committee of the University of York before commencing my research. The main ethical considerations for my research can be split into issues associated with its practical conduct and the moral dimensions of conducting research. The practical aspects involved acquiring informed consent from my participants, ensuring the anonymity and confidentiality of my participants, dealing with sensitive issues, my own safety while conducting field work and how to represent what my participants had told me. The moral dimensions concerned my understandings of what was necessary for ethical conduct and the interpersonal relation between my participants and myself. I shall first deal with the more tangible ethical considerations.

Informed consent was gained from all participants (Appendix B). At first contact with each participant I provided a clear explanation of my research and how the data collected would be used so that they could make an informed decision about whether to participate or not. On meeting the participants I explained my research again verbally and provided a typed information sheet which gave a clear explanation of this (Appendix C). I explained how I would ensure anonymity and that any personal details would be kept entirely confidential. I was the only person who listened to the interview recordings. Pseudonyms were assigned to each participant and used for all data stored. In addition, information which could make individuals identifiable was removed or altered in the transcriptions. I informed participants that they could withdraw from the interview at any point, were under no obligation to answer questions and that they could request any part of the transcript to be removed. After the interviews however no participant contacted me to view the transcriptions or request any change. I also informed participants that the data I collected would be used in my PhD thesis and possible future related publications. I then provided all participants with a consent form outlining all of this, which they signed before we commenced the interview (Appendix B).
My own safety was also an ethical concern, determined by where the interviews were conducted. To ensure my safety before each interview I informed a colleague where I was going, how long I intended to be and when I expected to return. In addition, a time was agreed for a colleague to contact me to check on my wellbeing, and who would contact the appropriate authorities if contact with me could not be made. The safety precautions I took are in accordance with research practice guides and advice (Jamieson 2000; Bullard 2003: 59-65; Gray 2009 [2004]: 94-95). As I knew a number of my interviewees and most others had been recommended to me through a friend or acquaintance, in combination with the fact that all my participants were female, this risk was usually relatively low.

The potentially sensitive nature of my research topic meant that I had to be prepared for negative or emotional reactions from my interviewees and be able to deal with disclosed information which might cause me concern for a participant’s wellbeing. In preparation for my interviews I therefore created an information sheet with the contact details of websites, NHS facilities and charities in the UK for those who suffer from problems such as eating disorders, likely to arise in the discussion of body modification (Appendix D). The information I collected for this resource focused on eating disorders and depression. Wherever I thought it appropriate I gave the participants one of these sheets explaining its content. While I always tried to leave my participants in a happy and stable state, if issues raised concern I gave advice about professional services which might provide appropriate support.

Another ethical issue that arose in my interviews was how I should engage with my interviewees. My dilemma centred on whether I should ‘merely’ ask questions or disclose information about myself. How should I respond to questions participants asked me either about their own body modifications or mine? In line with providing my participants with support and information on possible areas of sensitivity, I sought to adhere to the feminist position of active participation and information-providing to my interviewees to help minimise uneven power relations and avoid an exploitative situation. The disclosure of the researcher’s experiences and opinions has conventionally been discouraged as ‘the interview is about the respondent, not about the interviewer’ and it is thought that this input might cause bias (Weiss 1995: 79). However, ‘some feminists reject this stance because it assumes a distant and
hierarchical relationship between the interviewer and participant’ (Reinharz and Chase 2003: 79), something I sought to avoid. In addition it has been argued that ‘researcher self-disclosure during interviews is good feminist practise’ for it can aid in the ‘humanising and equalising’ of the research relationship and can ‘put the interviewee at ease, thus helping the participant to tell her story’ (Reinharz 1992: 32; Reinharz and Chase 2003: 79-80). In light of this I decided to answer interviewees’ questions. When and what to disclose is however difficult to decide and problems can arise when the researcher ‘assumes that their experiences or points of view are similar to those of the participants’ (Reinharz and Chase 2003: 80). I addressed this concern by telling participants prior to the interview that they could ask me questions at any point. And, indeed, the vast majority did. I always responded truthfully when asked any questions. These questions however mostly came after the interview had finished. I was almost always asked my own opinions on body modification, the patterns in the research data so far and whether the person I had just interviewed was like others in my research. I always answered these questions honestly and fully. In addition several participants asked me to provide them with information, articles or reading suggestions on certain topics, which I always did.

A final area of ethical consideration for me was the presentation of the data I obtained from my participants. Irrespective of what good ethical practice one may adhere to during the actual interview process, the ‘researcher still has the power to analyse and interpret respondents’ stories in a way that renders them with little or no voice in the process’ (Hesse-Biber 2007: 128). Representing the data accurately is critical to good research ethics. I always transcribed my interviews as accurately as possible (keeping stylistic and grammatical particulars, and typical speech effects) and kept a field diary to aid me. I shall discuss issues of transcription, my data representation and how I dealt with these later in this chapter when discussing the transcribing and my data analysis.

**Writing Auto-Ethnographically as a Pilot**

I began my interview process reflexively. Before formalising my interview questions, and following the suggestions of my supervisor, I wrote an
autobiographical account on the subject of my own practices and history of body modification. I began with my earliest recollections and ended with my current situation. This process enabled me to see certain patterns around my experience of body modification and possible issues that might arise in discussing this topic. Taboos around specific practices are very strong and my awareness that my thesis would be read by others and that I would be identifiable as its author influenced what I myself was prepared to reveal. The difficulty of the inclusion of autobiographical accounts in published research has been acknowledged. Even researchers who promote the importance and benefit of including the embodied experience of the researcher, such as Gimlin and Throsby (2010), who argue that ‘the exclusion of the embodied self of the researcher does an injustice, not only to social scientific understandings of female bodily experience, but also to research participants’, themselves follow ‘strategies of categorically not discussing [their] own bodies in [their] work’ (Gimlin and Throsby 2010: 107).

The writing of my auto-ethnographic account made me feel quite vulnerable. I found this piece difficult to write. This difficulty was based upon the emotions triggered by thinking in depth about my practices. While I was usually comfortable to announce what I did, disclosing honestly my motives for doing so was problematic. The contrast between my theoretical beliefs and ideology and my actual conduct contributed to this. For example, in principle I disagree with the practice of the removal of female body hair, yet I regularly carry out this practice. The difficulty of admitting and disclosing conflict between one’s theoretical beliefs and actual practices is not uncommon. Chapkis’ work (1986 [1988]) is a particularly relevant example due to its concern with body modification and feminist identification. Chapkis wrote of her own dilemma of feeling ugly because of facial hair and as a result having this removed. This contrasted with her feminist beliefs, thus making her feel a failure. Perfectly articulating this dilemma she wrote, ‘I am still filled with shame. I am a feminist. How humiliated I then feel. I am a woman. How ugly I have been made to feel. I have failed on both accounts’ (Chapkis 1986 [1988]: 2). Chapkis’ piece enabled me to write about my own struggle with my relation to my body and body modification. Admitting or even just articulating on paper this struggle was very difficult. My knowledge that the piece would be read by my
supervisor, an individual I would see again and again and have a close relationship with, made this all the more difficult. I also thought that there might be generational differences between her and I, and I assumed that the practices in which she engaged were substantially different from mine. This increased my fear of negative judgement. I wanted to be perceived as capable and a ‘good’ feminist by my supervisor and thought this would be compromised by a revelation of struggling with this aspect of my life. I thought that a failure or inability to cope well in one area of my life might be taken as a sign of my inability in other aspects of it. This combined with the fact that many of my practices are usually hidden and so I am unused to discussing and disclosing them.

In reality my supervisor was not judgemental, and was instead supportive when I voiced the difficulties I had faced in composing my personal account. When discussing the same issues of body modification face-to-face with my supervisor it proved easier and more comfortable. Being able to interact and see her response to what I said, removed much of the previous concern I had faced when writing the autobiographical piece. The process of revealing personal struggle was undoubtedly very difficult for me. Looking back and considering all my previous engagement with body modification was not always positive. It demonstrated that though many of the practices of body modification are normative and everyday, I should not assume that they are unproblematic or unattached to complicated feelings or memories. The process of writing my autobiographical account of my body modification practices showed me how difficult it can be to open up and discuss this. It enabled me to see what my interviewees might feel (especially those whom I knew and would see again) and how they might or might not respond to my questions. The level of vulnerability I felt in composing the piece reiterated the need for me to be open and honest with my participants about my own practices if they asked, to reduce any hierarchy in the process and increase their comfort.

This exercise was incredibly helpful in reinforcing to me the varying levels of difficulty around disclosure on the topic of body modification. The acknowledgement of practices you do not want people to know about is hard. The very personal and private nature of the autobiographical piece I wrote cemented my decision to use one-to-one interviews. This experience made me confident that this
method would provide the best possible environment to facilitate discussion on the
topic of body modification. It also made clear how easy it is to overlook practices of
and motives for body modification. I myself repeatedly had to go back to the piece to
add and edit what I had previously forgotten. It highlighted my need to be aware of
the likelihood of a space between what might be remembered and foregrounded by
participants and what might be missed.

My autobiographical piece also, as already indicated, raised questions of the
inclusion of myself within my research. The importance of the inclusion of the
embodied self of the researcher has been repeatedly discussed (Gimlin and Throsby
2010: 102; Engelsrud 2005), with an emphasis placed upon the need for
‘consideration of the ways in which the body itself impacts on the production of the
data’ (Throsby and Gimlin 2010: 108). This self-inclusion is not easy to achieve in
creating a balance between one’s own need for feeling comfortable and the issue of
what or how much to disclose. While I decided that I was happy to disclose my own
bodily practices to my participants, I was not prepared to include my
autobiographical account in my thesis. Unlike my participants I am not anonymous.
Feona Attwood (2010) has discussed the difficulties
researchers in revealing
their
position to a subject. In writing on the policing of speech and silences in academic
research on sexual representation, Attwood talks of the difficulty and fear associated
with putting one’s name to that which is culturally perceived as taboo or negative.
She notes that the lack of anonymity for a researcher disclosing information about
herself in a publication is possibly damaging for the researcher’s reputation or
uncomfortable. In my own case, I decided to be open in the interview about anything
asked of me, but not to be self-disclosing in my published work.

The Interview Process

Interview Preparation

Following the writing of my auto-ethnographic account and after carrying out the
required process to ensure ethical research, the design of my research schedule took
precedence in my preparation. One point that had emerged from my auto-
ethnography was the importance of life cycle for body modification. My practices were strongly determined by my life stage and appeared to change as I progressed through them. In addition the way I narrated my practices was structured by life stage. Identifying what I gave precedence to in my narrative and understanding how I had structured the history of my body modification helped me in turn to structure my interview schedule and questions. My decision to ask my participants for a life history of their practices before discussing their contemporary relationship to body modification was based on this. The contradictions apparent in my own piece between my actual practices and my theoretical beliefs in regards to body modification, for example my disagreement with female body hair removal but my own regular engagement in it, also informed my decision to include questions which investigated participants’ relationships to their practices and possible contradictions between practice and beliefs. Analysing my contradictions enabled me to consider my own possible agency and oppression in regards to body modification more easily and critically. As women’s agency and/or oppression in their decisions to engage in body modification were a key area of my research interest and a key debate in the field more widely, ensuring the interview could stimulate discussion of this topic from my participants was vital. The topics I sought to avoid in writing my autobiographical account, especially those that were absent in my initial writings of it, made me aware of possible taboos around the topic of body modification resulting in my development of questions and probes that would enable easier discussion of them. In addition the practices I had struggled to recall or forgot on my initial version of this piece helped me to develop probes to ensure they were not overlooked in the interviews with my participants.

Once the interview schedule was complete I tested my questions on a variety of women. I collected feedback from these trials and adjusted the schedule (Appendix E) accordingly to ensure the best possible structure for flow and to encourage and open up conversation. For example, instead of my initial intention to ask women directly if they engaged in body modification practices to avoid hostility or to please others, on the advice of those who previewed my questions, I changed this question to make it less direct and asked whether interviewees felt a woman would be treated with hostility for not carrying out certain practices instead. By making this question less directly personal or confrontational it enabled participants to consider external
pressures regarding body modification practices without having to ‘own’ these, something I myself had found difficult when writing in my own history of these practices.

**Conducting the Interviews**

I conducted my interviews between the 25 June 2012 and 20 September 2012. To record my interviews I used a dictaphone and always confirmed to my participants when this was recording. On average my interviews lasted one hour-ten minutes and six seconds. My experience of conducting the interviews reinforced my initial motivations to use this method for my data collection while simultaneously resulting in unexpected considerations and occurrences. In this section I shall firstly reflect on the former aspect of conducting my interviews before giving attention to two key concerns that emerged in the interview process.

As I had anticipated, participants overlooked numerous aspects of their body modification regimes during the interviews. Without prompt many practices would not have been acknowledged due to the invisibility they acquire through routine and the assumption of almost universal practice by British women, the normalcy of their conduct. This was also common when women discussed the possible practices they might engage in in the future, because they struggled to conceive of themselves as ageing. To overcome this problem I frequently had to ask about specific practices not referred to by participants, or re-ask questions in a different way. After being prompted participants often confirmed that they undertook the practices I asked directly about, with several explaining how habit and routine had caused them to overlook this part of their regime, as this example from Sara shows:

> I mean, the whole daily routine thing, I didn’t realise how like kind of robotic it was until I, until you asked me about it. Like, you know, get out of bed, getting ready. Like, I didn’t realise how stuck it had become until now and I think like tomorrow morning when I wake up it will be something like yeah, I am doing this you know.
To overcome this issue of practices not being referred to by participants, I asked questions based upon their visual appearance, raising topics they often forgot to mention or I had not included in my interview schedule. The visual cue of their appearance enabled me to know of my interviewees’ participation in some practices. One example of this is that I asked Kerry about her visible ear piercings which she had not mentioned. In response to the question she gave me an extensive description of both those and her other body piercings:

Abi: You have your ears pierced; do you have any other piercings?

Kerry: Yeah, I have got a belly button piercing. With the ears I remember I had my first ones done when I was like a toddler, my mum was classy like that and pierced my ears . . .

Face-to-face interviews were in that respect more effective than the use of Skype or similar technology for interviewing. While Skype does provide a visual interaction, it does not necessarily allow one to see great detail.

Those forms of body modification less visible in popular discussion were often least likely to be raised by the participants themselves and more difficult to stimulate discussion around. After asking all my participants about their daily routine for example I had to go on to ask twenty-four out of thirty about hair removal separately. All thirty of my participants engaged in this practice. Peggy exemplified the absence of this practice in participants’ initial narrations of their regimes when she answered my question whether she shaved with, ‘yeah, that is part of my everyday routine as well, yeah, I had forgot that one’. Intimate body hair removal, such as the removal of pubic hair, required even further prompting. It was clear that participants were unused to discussing this practice and either uncomfortable or ill equipped in terms of discourse when explaining their engagement in this. Gestures and metaphors were frequently utilised rather than the practice or body area being directly talked about. Jessica, for example, when talking about the removal of pubic hair, referred to the vagina as ‘down there’. The effective recording of participants’ explanations of such practices required the interviewer to be present in person and privacy for the participant to discuss practices which caused them embarrassment.
As the examples in this section make evident, many of the practices I included in my definition of body modification (see Appendix F) were not initially categorised as such, or talked about by the interviewees. The interview scenario allowed me to both document the absence of these practices in participants’ conceptions of what body modification is, while still providing me with the opportunity to ask my interviewees about these practices. I was able to see as a result how interviewees revealed themselves and their practices through discourse. This is an important dimension regarding people’s perception of body modification.

Because my interviewees had some freedom to structure their narratives, when similarities did occur I was able to draw particular conclusions from these. The similar way in which women described their daily routine, for example, indicated to me the routinisation of certain processes, as exemplified in the following excerpts from Monica, Gemma, Sally and Rose:

Monica: I would get up, normally have a shower in a morning, probably wash my hair. I wash my hair most days from exercise and things like that, so I usually wash it in the morning. I always straighten my hair and then I will get dressed and apply makeup.

Gemma: Get out of the shower, blow dry my hair, straighten my hair, erm makeup on, get dressed, jewellery. That is about it.

Sally: Yeah sure, so I get up and I have a shower, erm I normally wash my hair the night before, cos it takes ages to dry and straighten. So normally I just have like a body shower, then I will put my makeup on. Then normally I will straighten my hair, then full makeup.

Rose: Ok, I usually get up, shower and everything else. Dry hair, use product on that, straighten hair, put some back, all full face of makeup every day.
A shorthand for how the majority of my participants described the start of their day might be: get up, shower, hair, makeup. The similarity in these descriptions demonstrates the routinisation of daily body modification regimes.

My interviews enabled me to focus on my research topic, while still allowing enough space for individual narratives to be told and spontaneous conversation and discussion to unveil topics which I could not have foreseen. As Reinharz (1992: 18) notes, interviews allow ‘researchers to make full use of differences among people’, but they also enable them to identify similarities.

I found the intimate and private nature of the one-to-one interview productive in providing an environment in which participants felt able to open up and discuss sensitive issues, such as eating disorders and self-harm. The discussion of these topics proved, surprisingly, to be relatively easy. I attribute this to the interview environment and the possibility it gives the interviewer to show empathy and understanding to an interviewee disclosing such difficult topics. This seemed particularly evident in one participant’s decision to talk about her anorexia for the first time to me in the interview and by another two participants’ decisions to discuss previous eating disorders as well as the disclosure of self-harm by a further two others. The capacity for intimacy and interaction provided by the face-to-face interview enabled me to engage with and gain knowledge of the ‘attendant emotional landscape’ of what my participants said. By this I mean the emotions the participants expressed which were attached to their relation and perception of body modification. Participants talked of bullying, feeling isolated and of bodily self-consciousness to identify just a few of the emotional features that emerged. For Jessica for example, bullying had been frequent and highly influential in her relation to body modification: ‘growing up I was bullied, mainly primary school … I probably wouldn’t have been bothered if I wouldn’t have been bullied and no boys liked me’, while Anouk spoke of her isolation, ‘I couldn’t talk to the people around me about it, so that felt bad’.

Throughout the interview process I was required to adapt to differing circumstances and make alterations to the interviews accordingly. I was able to learn from each interview ways to improve my technique or interview schedule in order to help me in
the next. For example, following my first full interview I changed the order of my first two questions. I made my question on daily routine the first one because I discovered that it presented an easier starting point for my participants. The following excerpt from my first interview documents this:

Abi: First of all, would you mind telling me about your history of body modification and erm how that has developed?

Ellie: Erm I find that really hard to start with, can you give me an example?

Abi: Would you find it easier to start with saying your daily routine and then going back and seeing how that started?

Ellie: Yeah.

In changing the order of my questions after this experience I hoped to improve the flow of the interview and so the ease of discussion. This did occur.

While my ability to interact with participants proved vital for the success of my data collection, it must be acknowledged that the degree to which an interviewee talked without prompt had a substantial influence on the volume of data I acquired from each interview. Whether or not the interviewee had previously thought critically about the topic of body modification either in relation to themselves or to wider culture was one of the most influential factors for their comments. Individuals who had given the topic prior consideration could be split into two main groups. The first was women who self-identified as feminists and had thought about their own and wider societal practices through this lens. There were also a few participants who critiqued body modification from a religious perspective. They made clear that their religion dictated the possibilities of acceptable practices which they could engage in.

The second group of women who had given the topic of body modification prior consideration were those in a place of employment that required a professional image, but not usually a uniform. These women were articulate about their practices
of body modification and their motivations for engaging in these. As with the first group, they usually needed less prompting, and talked about a wide range of practices and influences. In addition, both these two groups of women tended to be most able and comfortable in offering critiques of their own practices. These women tended to give more thought to their answers, providing more nuanced explanations of their relation to body modification. Equally those who had previously suffered from either an eating disorder or self-harm appeared to have given much thought to the topic of body modification. This resulted in similar outcomes for the interview process. In contrast, those women who had not given prior critical thought to their body modification practices where less articulate in the interviews and usually found it harder to discuss the subject than those who had.

**Interviewer/ Interviewee Relationships**

Exploring the relations between participant and researcher contributes to addressing issues of power relations to expose how they impact on the process of data production (Brayton 1997). Prior to the research, doing interviews with women with whom I was friends concerned me a lot. Research in this area has highlighted the potential difficulties a prior friendship may create for an interview. On the one hand it can mean that participants feel more obliged to disclose and the rapport of friendship can lead to a false sense of security in the interview which may lead participants to reveal more than they intended. Alternatively, researchers may not ask enough or participants may not discuss subjects where prior knowledge is assumed (Cotterill 1992; Harris 2002). Friendships may be put at risk as ‘when there are high levels of trust and rapport, personal details may be revealed that may later prove uncomfortable for both the researcher and the respondent’ (Harris 2002: 46). My fear was that my prior friendship with participants might mean that they might be less likely to reveal certain information as a form of self-preservation. A more positive perspective is noted by Harris (2002: 51) who states that due to her relation as a friend of her participants, ‘power, though ultimately lying with the researcher, shifted more readily to the respondent’. A more equal distribution of power I would argue is a positive outcome for the research process. When I did not know an interviewee, I tried not to show what I thought about their practices. But with people I knew this was not an option, especially if I knew them well. The group of women with whom I
was good friends knew my position on the topic, my feminist background and my
own practices of body modification. However, our relationship as friends did not
appear to be detrimental in the interview and in addition to us already having rapport,
their knowledge of my research and our personal relationship meant that they often
had much to say on the subject as they had already thought about it. These women
also did not seem particularly worried that I would judge them.

A major concern I had around the issue of including friends as participants, as I have
already stated, was that our relationship meant I would see them again in social
situations after the interview. I was concerned that this might cause them to restrict
what they were prepared to reveal in the same manner I myself had done when
writing my autobiographical account of body modification. Table 3 indicates my
assumed likelihood of meeting the interviewees again after the interview.

### Table 3. Assumed Relationship of Researcher to Participants after the Interview

<table>
<thead>
<tr>
<th>Assumed Relationship After Interview</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely encounter again</td>
<td>13</td>
</tr>
<tr>
<td>Likely to encounter again</td>
<td>1</td>
</tr>
<tr>
<td>Unlikely to encounter again</td>
<td>16</td>
</tr>
</tbody>
</table>

Source: Interview data, 2012.

Although I worried that those whom I would meet again might censor what they told
me, this appeared not to be the case in the actual interviews. The vast majority of
women I knew revealed very personal facts about themselves that I had previously
been unaware of and that were often clearly sensitive and very private. The
reassurance of anonymity combined with their generosity in wanting to aid me
seemed to mean that they were prepared to reveal to me as an interviewer what they
would not necessarily discuss in our social interactions. This group of women had
generally given a good deal of thought to the topic prior to the interview, which
aided the interviews. One possibly negative factor with this group of women was that
I knew a lot about them. This I think resulted in them often missing out some
information on their body modification practices during the interviews. In response I
had to ask more directly about certain aspects they might have thought I would not
need to be told as I already knew the information. As I knew these women however,
I also felt more comfortable in asking them to re-answer questions, repeat what they had said and so on.

Those women whom I had a connection to through another person fell into two groups: women I was very unlikely to see again and those I was likely to re-encounter. Those I was unlikely to see again reacted very similarly to the women I had no previous connection to, being open and seemingly unworried about my possible opinion of them. Those whom I knew through another person and was likely to encounter again, especially an individual who was referred to me by a family member, seemed far more conscious of how they presented themselves to me, and tended to be the group who while open, reiterated both how un-judgemental they were of others or how they were not vain or fake. Their concern, as became apparent, was around negative perceptions of women who engage in what might be considered ‘too much’ body modification.

The groups of women I had no connection to were very open and had given much thought to the topic previously. I felt less demanding of this group of women as they had volunteered and answered the call for participants as they were interested in the subject. The prior thought about the topic by these women meant that they were a particularly articulate group. Several also stated that they themselves wanted to understand more about the academic research process and interviewing for their own benefits and saw this as a chance to witness it first-hand. The lack of previous connection I had with these women seemed to mean that they were unafraid to speak openly.

**Bodies in the Interview Process**

Prior to my interviews a concern I faced was my personal appearance. Given that I was interviewing on the subject of body modification, I assumed that my physical appearance would have an impact in the interview and be judged by my participants. This was partly a function of the topic I dealt with and partly related to my body consciousness which has accompanied me throughout my life. As a result of being conscious of my appearance I presented myself smartly, wearing visible makeup and adhering to an overall ‘groomed professional’ appearance. I did this for all the
interviews bar one where the interviewee turned up thirty minutes early. On this occasion I apologised for my appearance and stated that I was just putting on my makeup. I felt that as I was expecting people to talk about their own practices of body modification, they would feel more comfortable sharing details with someone whom they thought also engaged in such practices. Interestingly, in looking back at my interview process, it is clear that I assumed that all my participants engaged in such practices. I hoped that my presentation would create a sense of similarity and so a perception of understanding on my behalf. I hoped this would remove any fear of being judged (as I had felt in writing my own autobiographical account) in my participants and so encourage openness.

My assumption that this would create a sense of similarity is telling in itself. I already knew twelve of my participants who would have previously seen me in varying degrees of made-up-ness and so would already have a knowledge or view of my practices. The rest however I had never seen and so did not know their practices or appearances. My pitching of my appearance to suggest similarity is demonstrative of my assumptions around the appearance and practices of the women I interviewed. Several of my interviewees themselves before and after the interviews stated how much thought they had put into their own decisions on what to wear for the interview, especially those I had not known previously. It was on the whole assumed that I would make a judgement of the individual based upon her appearance as I assumed they would judge me on mine. Peggy for example specifically stated her concern about my judgement of her appearance:

"Yeah, I was really aware of how I was going to look and I did think about how I was going to come across to you … I was very aware of the amount of makeup I was putting on. I wanted to put on the same as normal but then I was aware of how much makeup I was putting on … I just felt like, not that you would judge me, but kind of assumptions would be made anyway about it."

Several women also apologised for their appearance, stating that they usually looked more ‘put together’ or smarter. This mirrored my own apology when I felt my appearance was not as it should have been. The need to apologise for one’s
appearance by women, myself and my participants included, strongly suggests a sense of a particular appearance that we think is required. My participants’ and my own reactions fit with arguments that suggest that women generally feel a need to apologise for their appearance because of a sense of inadequacy or lack. Women are culturally viewed as constantly lacking in some way, especially in regard to their appearance (Wolf 1991; Bordo 1993 [2004]). This combines with the reality that female celebrities in popular culture, for example, have a particular appearance as a result of air brushing and retouching that is not achievable for most women. The gap between these images and women’s everyday experiences of their own appearance therefore generates a sense of lack in this arena. This in turn makes women, at least within my sample, feel obliged to apologise for their appearance.

The impact of myself, that is my own positionality and bodily actuality, on the interviews was a constant source of consideration for me. I was aware that ‘an active subject behind the interviewer is also implicated in the production of knowledge’ (Gubrium and Holstein 2003: 14). As previously discussed I tried to come across as non-judgemental. This was especially relevant where views I disagreed with or found offensive were voiced. These ranged from some participants thinking that female body hair was unclean or unsightly, such as when Kerry exclaimed that ‘I think with body hair… people see it as unclean’, to more overt examples such as Cait’s statement that bulimia was ‘a bit of a cop out idea’. In positioning myself as similar and in agreement, my actions reinforced the assumption of shared understandings and viewpoints. I wanted the participants to feel relaxed and comfortable enough to discuss the topic honestly with me. In building rapport I also often joked and chatted about practices of body modification or interviewing itself with the participants. If I engaged in a practice they spoke about I often acknowledged this as I thought that people would be happier to talk to me about this subject if they knew I undertook the same forms of body modification as they. Such similarities had the effect of positioning me as an insider. I was not inevitably an insider however.

**Being an Insider/ Outsider: Interviewer Positionality**

Hesse-Biber (2007: 139) argues that the ‘acknowledging [of similarities and] differences between the interviewer and respondent allows the researcher to assess
the impact of [similarity and] difference on the interview situation’. I readily acknowledge that ‘researchers are never fully insiders or outsiders’ and that ‘boundaries between the two positions are not at all that clearly delineated’ (Hesse-Biber and Piatetti 2007: 499; Merriam, Johnson-Bailey, Lee, et al 2001: 405). However, within my research process I was almost always aware how I was positioned quite overtly by my participants. I myself leaned towards an assumption of my position as insider as a default unless I felt this was obviously in contrast to the participants’ perceptions. The shared demographics of my participants and myself meant that I assumed a shared cultural context which in turn shaped our practices of body modification. All but two of my participants situated me as an insider, as someone with shared experiences of body modification. The majority of the women directly stated that they assumed that I had experienced the same practices, pressures and negotiation processes as they themselves had, or at least understood what they were disclosing. Betty for example assumed I had gone through the same experience as her, illustrated through how she included me in her explanation of her previous practices: ‘you know when you are in high school and you have a select group of friends?’ Her use of ‘you know’ is inclusionary and gave the impression that she saw me as an insider. Similarly Amanda, when describing her experience, directly asked questions such as, ‘do you remember when GHDs became a big thing?’ This suggests that she thought I would have similar experiences and memories as her. Implicitly and explicitly, the interviewees often assumed similar life cycle experiences. DeVault (1990: 102) when writing of her own experience of being positioned as an insider noted participants responding to her with nearly identical phrasing to my own when similarity was assumed. In addition those women who already knew me were aware of our similarities of experience.

My self-presentation combined with the fact that I fitted in with the demographic of my sample, contributed to the sense of similarity my participants picked up on. This was helpful in building rapport and starting conversations. My position as insider aided the breakdown of barriers. Participants who assumed similarity between us came across as less worried that I would judge them and confident that I would understand their reasoning in their negotiation of body modification. This also aided discussing issues of sensitivity or taboo. For example, while not conventionally a topic of public conversation, unhealthy dieting and the use of shapewear seemed to
be made more discussable as participants assumed this was a practice I engaged in. Participants’ assumptions that I did the same or at least understood their actions appeared to reduce the taboo or worry surrounding the topic.

The advantages of being an insider have been debated. For me it usually seemed to provide an advantage. Reinharz and Chase (2003: 82) acknowledge that ‘conventional wisdom suggests that when interviewer and interviewee share similar social locations (such as sexual orientation and racial, ethnic, and class backgrounds) access, rapport and understanding are relatively easy to achieve’. For example Beoku-Betts (1994: 416) in researching Gullah women noted benefits in her insider status as a black woman, with one of her respondents even stating that ‘she preferred a black scholar’. Louise Archer (2002) found something similar in her study of British Muslim teenagers. In discussing the importance of the race and gender of the interviewer, the girls interviewed all stated a preference for a female interviewer, saying that they would not have spoken to a man. The issue of race (being white or Asian as the two options in this instance) provided less unified responses, with a preference for both being indicated by different participants on the basis of how they saw the pros and cons of each option. Both studies also highlighted the ‘instability of “insider” and “outsider” status’ (Reinharz and Chase 2003: 82), which is something I myself experienced. For me however the insider position provided an advantage.

The fact that I am feminine in appearance, relatively slim and wore makeup, visually flagged up for my participants that I engage in many conventional body modification practices. They often read my appearance as a sign of what body modification and appearances I approved and disapproved of. Much of what was said about size for example was critical of those considered overweight or revealed participants’ fear and disgust at the prospect of becoming larger themselves. Monica for instance spoke of both a fear and dislike of gaining weight herself and of the unattractiveness of those who are overweight:

I think people do generally look better if they are fitter, which I think is just human nature, because it is, it’s like survival of the fittest isn’t it, people find slimmer people more attractive generally because that’s the way, like in our bodies, like back in the day you attracted to the type that
are more likely to survive. So if someone is obese or overweight, then they are not going to be, not that there is anything wrong with being obese (laughter), just saying like that is what I think that people, if you are fit and healthy the chances are that you are better, you do look more, you do look better really.

If I myself had been overweight I think these sorts of comments might have been reduced out of fear of offending me.

The appearance my participants had or aimed for was within the range of what one might describe as conventional acceptable femininity in British culture.25 This was often accompanied by claims of dislike for looks that were considered fake, over the top, tacky and unclassy. For example Monica and Betty both used the derogative phrase ‘tramp stamp’ to describe a tattoo at the base of a woman’s back, with Monica asserting that she did not ‘think they are very classy’. This image is strongly associated with working-class women in Britain and frequently derided in popular culture by the press. My participants cited numerous popular culture references reiterating this, such as *The Only Way is Essex* (2010)26, *Geordie Shore* (2011)27, and Jordan28. Jessica, when discussing appearances she disliked, for example, said: ‘I always laugh at the people on *Only Way is Essex*. I think what are you doing? Why are you doing that?’ Participants’ perceptions of my tastes as similar to their own I would argue made them feel more comfortable in discussing women’s tastes they regarded as other because they were confident they were not criticising my personal appearance or preferences.

I was positioned as an outsider in only two cases. Even in these instances assumptions of sameness were still made at certain times. The first of these

25 By acceptable femininity I mean an appearance which conforms to the ideal propagated in popular culture: slim, toned, body hair free, flawless skin (wearing makeup), smooth glossy hair and with most of the labour gone into its creation hidden.
26 *The Only Way Is Essex* (abbreviated as TOWIE) is a British 'scripted reality' television show based in Essex, England. Broadcast by ITV2 on Wednesdays and Sundays at 10pm, 10 October 2010-2014. Twelve series to date.
27 *Geordie Shore* is a British reality television series broadcast on MTV, based in Newcastle upon Tyne. Broadcast 24 May 2011 – 2014. The show is the British spin-off of the American show *Jersey Shore*.
28 Jordan is the pseudonym of Katie Price, a British television personality, former glamour model and business woman, famed for her surgically enhanced breasts and highly made up appearance.
concerned a woman, Sara, from a British Muslim community. She saw her religion and cultural setting as defining of the practices she engaged in and as separating her behaviour from women who were not Muslim, such as myself. Simultaneously however Sara also acknowledged that we shared similarities in many other ways. In the interview my dual position as both insider and outsider manifested itself in Sara assuming that I knew about practices and societal expectations in wider British culture, but anticipating me to be ignorant in regard to the norms and rules of her religion and cultural environment and the influence they had on her (and other Muslim women’s) body modification practices. As a result she always gave in-depth explanations of anything relating to the latter but not necessarily the former. In this instance my position as an outsider aided the interview as it prompted Sara to give greater detail and explanations of factors which might have been thought obvious by an insider (and so not requiring explanation). My position as outsider meant that Sara was very keen for me to understand fully the decisions she made around body modification because of the perceived differences between us. In this circumstance, though I was aware of some of the culturally specific information she told me, I actively maintained my outsider position because it encouraged Sara to provide greater detail.

Body size positioned me as an outsider in the second of these cases. As with my experience with Sara however, this position was fluid and in all other areas of the interview I was still positioned as an insider. The interviewee in question stated that her body size was and had been influential in her body modification practices and self-perception but was reluctant to discuss this topic. She described herself as being ‘big’ and my own body size, I felt, seemed to make the discussion of the topic more difficult as I was physically much slimmer than this woman. My interpretation of this dynamic was reinforced after the interview when this participant commented that I was ‘lucky’ to have what she perceived as a fast metabolism and suggested that perhaps I could not understand her situation on matters of body weight and size. In contrast, in nearly all the other interviews I conducted, there was an assumption that I would have had a similar experience of body weight and size management as my participants and had shared ideals and attitudes towards these practices. While most of my participants were ready to discuss this topic, this particular interviewee struggled and appeared embarrassed to share her experiences of this subject, at least
in part I think because of her view that I would not be able to understand or relate to her or the difficulties she had encountered. This factor restricted what she was prepared to discuss with me in the interview on this topic.

**Issues Raised During the Interview Process**

The interviews I conducted were generally unproblematic and went smoothly. Importantly I managed to gain rich and relevant data. Nonetheless, I faced several issues and difficulties in the process. These can be split into two categories: my performance as an interviewer, and issues raised by the interviewees. As a result of the frequent need for prompts and reiteration in the interview process, on occasion I got caught up in my interview script or missed what was being said by participants. In these instances I failed to follow up points raised by participants that could have potentially provided interesting data. This was at times the result of me being too question-bound in the interviews themselves, resulting in some interview transcripts seeming to be stilted. On reflection a main cause of this stilted feeling was my reply of ‘thank you’ to answers provided by participants, on occasion followed by me moving straight on to the next, sometimes closed question. The extract below shows this:

Anna: Yeah I just wanted to show off at school, plus at my school most people already had them [belly button piercing] done by my age. And cos to look, in a bikini it looks good, not that I wear that now but then I probably did.

Abi: Thank you. What forms of body modification do you currently engage in, so not just your daily routine but everything you do?

Anna: Erm I get my hair done but I have already said that, haven’t I?

Abi: Do you wear heels?

Anna: Yeah, but they kill my feet.
In this interview extract I move from point to point, using increasingly closed questions and as is evident, the answers become shorter. This, combined with the fact that saying ‘thank you’ to a reply is not something one would typically do in a natural conversation, highlighted that the exchange taking place was an interview. This usually occurred in interviews where I found it more challenging to get participants to open up. My own nerves and lack of experience (this was the first time I had conducted interviews as a research method) can also be attributed to this interview style.

Several other factors contributed to this problem. The speed of speech of the interviewee was on occasion difficult to follow. This was exacerbated by the fact that I did not want to be too demanding upon people who had already given me their time and so at times refrained from asking for clarification. In addition certain topics sometimes appeared to upset participants and occasionally the interviewees were simply unwilling to discuss specific issues. This style of interaction in the interview meant I missed some opportunities to follow up interesting comments made. It also possibly made the conversation feel more stilted and artificial. These factors affected and perhaps limited the data which I obtained.

Only one of my interviews raised an overtly problematic issue. In this case the interviewee disclosed that she had recently suffered from anorexia and was currently in recovery. Prior to the interview she had strongly insisted that she be interviewed at my house and before, during and after the interview she repeatedly checked that the interview was anonymous, a factor she seemed very anxious about. Literature on risk in the interview process and on researching sensitive topics asserts that the researcher should anticipate hearing previously untold and difficult stories because the interview situation can often be viewed by participants as a safe space to tell their stories (Dickson-Swift, James, Kippen et al 2007). This participant spoke of how she still felt vulnerable to the disorder and both in the interview and afterwards clearly found the issue difficult. The description she gave of her disorder and the isolation in which she had dealt with it caused me a great deal of concern for her welfare and was
distressing to hear. After the interview I spoke for a substantial amount of time to this participant to ensure she left me in a stable and positive frame of mind. I gave her my prepared sheet of help services around the disorder, encouraging her to utilise the professional help available. I talked about personal and friends’ experiences of similar issues and encouraged her to seek support both from the medical sector (doctor and counsellor) and if she felt able to, to disclose her disorder to a close friend or family member. I emphasised the importance of having support around her for recovery, and strongly suggested that secrecy was not helpful for her and that informing those whom she trusted and could rely on for support would be beneficial. Ensuring participant wellbeing, and ensuring no harm is done to them as a result of the interview and the topics it raises is an ethical necessity in the research process (Silverman 1993 [2006]; Gray 2009; Hesse-Biber and Leavy 2011). The degree to which an interviewer should intervene in order to help a participant or self-disclose for this purpose is often debated. I think that my actions in response to this participant’s distress were appropriate and necessary (Reinharz 1992; Dickenson-Swift, James, Kippen, et al 2007; Allmark, Boote, Chambers, et al 2009; Bahn and Weatherill 2012).

After the interview I received several messages from the participant. In one she informed me that she had gone for medical advice (following the interview) and was beginning a session of counselling. I felt incredibly responsible for the wellbeing of this interviewee. I had brought up a clearly distressing subject for discussion and also I was aware of the isolation in which she was dealing with her eating disorder. This was an individual with no connection to me previously who had seen my call for participants on a UK university blog. It appeared that she had volunteered in part to be able to talk in an environment she thought would be non-judgemental, safe and separate from her life. It was important for me to be assured that she left me in a stable and positive state, having received from me the best possible support I could give in the circumstances, and knowing she could contact me in the future.

---

29 Researcher distress is discussed as a common feature of sensitive topics, being recognised as a difficult emotional and mental health aspect of the interview process to manage, but also one that is important to acknowledge (Johnson and Macleod Clarke 2003; Bahn and Weatherill 2012).
Transcribing and Analysis

When I completed my interviews I transcribed them all to code and analyse my data. As Poland (2003: 267) states, this practice is ‘widespread in qualitative research’. The transcribing process is of paramount importance because through it the researcher constructs the data in the medium in which they will conduct their analysis. Thus it is implicated in what findings are produced. In the social sciences transcripts are traditionally understood to be ‘verbatim facsimiles of what was said in the interview’ (Poland 2003: 267). Increasingly however, a more explicit reflectivity ‘vis-à-vis the inherently representational and interpretive nature of the transcription’ is called for (Poland 2003: 267). Data is constructed by transcription through multiple decisions that are influenced by both theoretical and practical considerations (Oakley 1981; Lapadat and Lindsay 1999; Ramazonoglu and Holland 2002; Poland 2003; Hesse-Biber 2007). The transcript therefore needs to be understood as a construct that provides both a text and a reading of the interview data.

Poland (2003) identifies a series of problems that can occur during the transcription process. These are the incorrect use of punctuation, especially where this alters meaning, correcting the quality of the spoken language in order to make it more readable, a failure to acknowledge mimicking or paraphrasing, omissions, mistaking one word for another similar word, and the absence of the recording of non-verbal communication. I went to great lengths in my transcribing process to avoid most of these problems. I listened to each interview recording numerous times when transcribing to ensure that I had heard everything correctly and once typed up I went over each one again to ensure accuracy. This process was time-consuming but manageable due to my sample size of thirty. I transcribed exactly what I had heard, making no alterations to the participants’ words. I used standardised punctuation when transcribing but ensured the original meanings of utterances were retained. In the transcriptions I kept all stylistic and grammatical particulars, retaining typical speech effects such as incomplete sentences, repetition and also fill words. This means that I have not corrected any grammar or summarised on behalf of my participants. This is a practice I adhere to also when quoting participants in my thesis. In addition I kept a field diary to note down relevant details of the interviews.
to ensure I would not forget them. I also did this so that I would be able to recall the ‘feel’ of each interview and the impressions I had gained from each of my participants and our interaction. On the whole, however, I did not record non-verbal expressions, except very obvious ones such as laughter. I therefore did not make much use of that particular resource. My field diary however, helped me to fill in some the contextual details of the interviews.

Generally I did not face any problems during the transcription process. For both me and my participants, English was our first language and no one had an accent I could not, or found difficult to, understand. Those with strong accents were from the same region as myself, so while this could have proved problematic, my familiarity with their accent meant that it was not. There was only one occasion where I could not comprehend what a word was in a recording. This was as a result of the participant speaking very fast. I flagged this up in the transcript. Overall I aimed to produce as faithful a reproduction of the interview recordings as possible.

On completion of my transcriptions I moved on to analysis. Throughout this process I was very aware of the on-going discussion surrounding ethics of representation and balance of power in qualitative research. As Letherby (2003: 117) states: ‘the researcher has ultimate control over the material and authoritative resources’ for, in Stacey’s words:

> With very rare exceptions, it is the researcher who narrates, who ‘authors’ the ethnography. In the last instance [a research account] is a written document structured primarily by a researcher’s purpose, offering a researcher’s interpretations, registered in a researcher’s voice (1988: 23).

As a researcher I was aware that I undertook the selection, editing, interpretation and relaying of the data I had collected. The reality of this meant that in order for me to best represent my participants and ensure ethical conduct, it was necessary that ‘the processes involved in research procedures are clearly outlined’ and that I remained aware that ‘interpretation is [my] exercise of power’ (Ramazonglu and Holland 2002: 161; Letherby 2003: 118). I informed all participants that they could ask to see the
transcripts and would be able to remove anything if they wished, as previously mentioned. As I stated before, none did. I also informed participants that if they wished, they would be able to view the results of my research as well as my thesis when completed, and any publications based upon it. In addition I approached my analysis and writing-up process as reflexively as possible, acknowledging my views and relation to the topic and interview process.

I based my analysis on what has been called open coding or opening up data (Richards 2005 [2009]: 77-79; Gray 2009: 513). I approached my analysis thematically to begin with in order to enable me to categorise the themes and topics raised within the data in a manner which would allow for analysis and comparison between participants and other existing research. Thematic analysis has been identified as a flexible method which enables the researcher to go beyond just the descriptive, providing the means for sense to be made of what has been said and allowing for a conceptual account (Braun and Clarke 2006, 2013). The primary focus of this main part of my analysis was on ‘what’ was being said (Riessman 2008: 53-54). As I transcribed all my interviews I spent a large amount of time looking at and listening to data before I arrived at the stage of analysis. I was therefore already very familiar with my data when I began to analyse it and had made notes on my initial thoughts on the interviews. Gaining familiarity with one’s data and recording the initial ideas it prompts, is frequently advised for effective and reflexive analysis practices (Lapadat and Lindsey 1999; Richards 2005 [2009]: 77-80; Braun and Clarke 2006; Gray 2009: 513). Following this I undertook close readings of the transcripts as thematic analysis involves searching across the entire data set (Braun and Clarke 2006: 85).

On reading each transcript I recorded and coded the themes that appeared to me significant across my data. These themes were created in relation to each of my interview schedule sections. For each section and each theme within it I made word documents with corresponding quotes and line references to aid me when I wrote up my analysis chapters. I worked systematically through each transcript in order to code for the main themes that were evident in each of the four sections of my schedule. In coding I took what can be called a thematic analysis approach, generating themes across the data set (Huxely, Clarke and Halliwell 2011: 419). Out of the main themes
sub-themes were developed to ensure I had a sensitive enough picture of the data. Across the different interview areas many themes and sub-themes reoccurred. In coding in this manner I was able to see and understand patterns and differences across the interviews and allow for comparisons to be made (Richards 2005 [2009]: 94). This way of coding also allowed me to pick up on contradictions in participants’ narratives and see how answers were produced in relation to the different questions I asked. The themes I coded for (in alphabetical order) from my data can be seen in Table 4 alongside the section of my interview they were developed out of.

Table 4. Analysis Themes

<table>
<thead>
<tr>
<th>Interview Area</th>
<th>Themes</th>
<th>Subthemes</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of participants’ practices</td>
<td>Change in practices</td>
<td>Ageing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Class perceptions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>College/ sixth form</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Finance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Gendered expectations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identity</td>
</tr>
<tr>
<td>Experiences of practices</td>
<td>Ageing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>College/ sixth form</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consumption</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Daily regime</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gendered expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Invasive</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male gaze</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-invasive</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Occasional</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other-administered</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pain</td>
<td></td>
</tr>
<tr>
<td>Life cycle</td>
<td>Permanent</td>
<td></td>
</tr>
<tr>
<td>Motivation to begin body modification</td>
<td>Ageing</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>College/ sixth form</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Daily regime</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Finance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Motherhood</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ageing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bullying</td>
</tr>
<tr>
<td></td>
<td></td>
<td>College/ sixth form</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identity</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Life cycle</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mothers</td>
</tr>
<tr>
<td>Understanding of body modification</td>
<td>Identity</td>
<td>Ageing</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>----------</td>
<td>--------</td>
</tr>
<tr>
<td>Life-cycle</td>
<td></td>
<td>Ageing/age</td>
</tr>
<tr>
<td>Methods</td>
<td></td>
<td>Ageing/age</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influences</td>
<td>Identity</td>
<td>Ageing/age</td>
</tr>
<tr>
<td></td>
<td>Lifecycle</td>
<td>Ageing/age</td>
</tr>
<tr>
<td></td>
<td>Sociality</td>
<td>Ageing/age</td>
</tr>
<tr>
<td>Perceptions of practices not engaged with</td>
<td>Identity</td>
<td>Acceptability</td>
</tr>
<tr>
<td></td>
<td>Lifecycle</td>
<td>Ageing/age</td>
</tr>
</tbody>
</table>
My use of thematic analysis can be described as a ‘bottom up’ or inductive approach, being based on and directed by what my participants said in the interview (Braun and Clarke 2006: 83). This approach was important in my aim to ensure that I did not pre-impose categories and idea on my findings over listening to what the women actually said, and accurately and reflectively representing that. In addition to this approach however, to ensure I thoroughly analysed the data, I also incorporated a ‘top down’ theoretical stance or deductive approach for my explanatory framework (Braun and Clarke 2006: 84). Once I had determined my themes from the original data set I employed and developed existing theoretical frameworks to explain and analyse these. I used Lindemann’s (1997) theory on embodiment, Bourdieu’s notion of habitus and class distinction (1984 [2010]) and both Goffman’s theory of Stigma and his dramaturgical metaphor (Goffman 1959 [1990]; 1963). I was already aware of these works and following extensive reading of theories which addressed my findings, I determined these to be the most suitable theoretical stances. These were employed as tools to aid me in my investigation and interpretation of the data I had collected as well as my articulation my findings. The combined ‘bottom up’ and ‘top down’ approach I took (and specifically in that order) was crucial for me to be able to invoke ‘both a hermeneutics of empathy (the attempt to understand participants’ experiences on their own terms) and a hermeneutics of suspicion (using theoretical concepts — such as “heteronormativity”) — to make sense of participants’ experiences’ (Huxely, Clarke and Halliwell 2011: 418).

In addition to this thematic and theoretical approach I also addressed my data from a structural perspective, shifting attention from the “‘told” to the “telling”’ (Riessman 2008: 77). I regard interviews to be a process of knowledge making and so understood the significance of the way in which my participants vocalised and made sense of their life experiences of body modification as well as the immediate context of the interview (Wilkinson 2000; Gubrium and Holstein 2009). For example in Chapters 4 and 5 I discuss how participants drew on a linear progression narrative when describing their personal histories of body modification. By approaching my analysis from a structural perspective as well as a thematic one I was able to incorporate both the substantive and performativity aspects of my data (Gubrium and Holestein 2009: 17). In addition, as life-cycle structured the narratives of my
participants and was implicit in the developments of their personal body modification practices, I structured my chapters accordingly.

**Conclusion**

In this chapter I have discussed the methodological considerations that shaped my research. I considered the ethical dilemmas around undertaking my project and the implications of aiming to conduct feminist research. I have discussed why I chose interviewing as my method and the issues surrounding this method generally and specifically for my research. I have elaborated upon my sample and sampling techniques and the implications of these. I also reflexively considered my research process, and my positionality and relation to my participants. Finally in this chapter I gave consideration to issues of transcribing and analysis. This provides insight into the ways in which my data were produced and represented. In the following chapters I move on to the analysis of my data. In Chapter 3, I shall look at the initial engagement of my participants with body modification practices and their development through the school years. Following this, in Chapter 4, I investigate the reported experience of my participants’ relation to body modification while at university and in young adulthood. In Chapter 5, I explore the impact of the world of work on my participants’ practices and their expectations of their future engagement in body modification. I have structured my chapters according to life-cycle stages as this was both the dominant phasing for body modification and its development, and is reflective of the interviews narrative structure. Finally I shall draw my findings together in my conclusion.
3. Learning to Follow: First and Early Experiences of Body Modification

In this chapter I focus on my participants’ initial and early engagement with body modification up until the end of their school years. I take this life history approach, not least because a strong historicised sense of self, of a staged history, was apparent in my participants’ body modification narratives. They understood their practices as defined and developed by their context, a context which changed as they progressed through their life-course. Life stage was inextricably linked to the development of body modification routines. The school years were the life stage most clearly contoured by my participants in their narratives. This was a period marked by both the point of participants’ first engagement with body modification and the point of no return. After this stage not modifying one’s body was no longer understood as a valid option, and engagement with body modification became a constant feature of daily lives and practices of self.

Analysing initial engagement with, and early use of, body modification practices is important for it offers an explanation of why and how these practices were begun. It makes visible how my participants, initially as non-practitioners of body modification, understood these practices, and how they and others read their bodies and selves before and after they began to engage in body modification. Situating their historic selves in comparison to other stages of their lives, my participants’ narratives and their retrospective recollections of these experiences provide an insight into their understanding of their initiation into these practices. Research on body modification has suggested that the one’s early years have significance for women’s relationships to their bodies and the practices they do to alter them (Bordo 1993 [2004]; Frost 2005). Young women, in both academia and the media, are frequently positioned as at heightened vulnerability to pressures which result in body modification. Frost for example argues that ‘it is between fourteen and eighteen years that most, and the most extreme, forms of body-hatred are manifest, and mainly in girls, which indicates that the dimension “youth” may have significance’ (2005: 74). With this Frost also acknowledges that in most of the research that focuses upon young women
‘it is gender and gender relations that tend to be the major focus, rather than any particular significance of age or “life stage”’ (2005: 74). In contrast, in this chapter I shall directly address the specifics of this life stage.

I analyse participants’ reported motivations for commencing body modification. Two influences, peer and maternal, dominated their narratives. These operated in different ways but both performed a regulatory function. To begin with I want to briefly describe the body modification practices my participants reported engaging in during their time at school. Table 5 documents these practices. It shows the number of women who engaged in each practice and how frequently a prompt was required in the interview for a practice to be raised for discussion.

Table 5. Practices Engaged in During the School Years by Participants

<table>
<thead>
<tr>
<th>Practices in order discussed by participants</th>
<th>Number of participants who engaged in practice</th>
<th>Number of participants who mentioned practice without prompt</th>
<th>Number of participants who mentioned practice following prompt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Makeup</td>
<td>30</td>
<td>27</td>
<td>3</td>
</tr>
<tr>
<td>Hair removal</td>
<td>30 (Shaving 28; Waxing 2)</td>
<td>6</td>
<td>24</td>
</tr>
<tr>
<td>Ear piercing</td>
<td>27</td>
<td>6</td>
<td>21</td>
</tr>
<tr>
<td>Hair straightening</td>
<td>24</td>
<td>16</td>
<td>8</td>
</tr>
<tr>
<td>Plucking/waxing eyebrows</td>
<td>11</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Tinting eyebrows and lashes</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Hair Dying</td>
<td>10</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Other piercings</td>
<td>7</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Dieting</td>
<td>8</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>Exercise</td>
<td>13</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>Fake tan</td>
<td>4</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Tattoo</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: Interview Data.

As can be seen in Table 5 above, at this life stage the practices my participants engaged in were predominantly surface based and temporary. Makeup and hair straightening dominated discussion without a prompt being required. While all of my participants began hair removal at this time, it only featured in six narratives without
prompt, but was a topic extensively discussed following elicitation during the interviews. I discuss the reasons for this later in this chapter. As can be seen from Table 5, a large number of body modification practices were begun at this stage in my participants’ lives, making it a critical time for body modification beginnings and for understanding how and why women enter into these practices.

I shall now consider the impact and working of peer influence on my participants’ body modification practices, then move on to analyse the maternal role. Next I shall discuss the changes and developments that occurred at this life stage in my participants’ body modification regimes. I end this chapter by evaluating the impact of this life-cycle stage on their practices.

**Peer Influence**

My participants’ narratives of their experiences of body modification during their school years demonstrated striking similarities with each other. The degree of similarity in the underlying rationales, practices, commencement age and order as well as overall development was staggering. All of my participants without exception had begun body modification during this life-cycle stage. The average age of first engagement was around eleven or twelve, and almost always coincided with the start of secondary school. Though first engagement often occurred at the onset of puberty, as this age would suggest, the context of the secondary school actually overrode the latter bodily process. The onset of puberty and the teenage years have been seen as triggers for concern about body image in both the literature on body modification and in youth studies. For example Bloustien (2003) claimed that at:

> the age of 13 to 16, the gap between the idealised images of the body, the ‘appropriate’ limiting and constricting ways of behaving and their real life experiences, is particularly glaring . . . This is mainly because the pubescent body is changing and developing at a rapid rate and these changes are not usually under the control of the individual (2003: 69).
This concern with body image is understood to result in an increased and often problematic engagement with body modification (Bordo 1993 [2004]; Bloustein 2003; Frost 2001). While context is at times acknowledged in the literature which highlights this life stage as particularly problematic, corporeality is the factor given precedence in explanations of why this is the case. Even when the school context and the transition to secondary school is highlighted as significant in girls’ increased engagement and concern with these practices and their appearance, the pubescent body is still positioned as the key catalyst for the change, making this life stage so apparently volatile (Bloustein 2003). In my own data contrastingly it was not so much participants’ bodily realities that determined their body modification decisions as their social context.

The importance of context was most evident in participants’ motivations for commencing body modification. Without exception all pointed to their social situation as the main catalyst. When recalling why she initially began to wear makeup Charlotte for example stated that: ‘It wasn’t because I wanted to start wearing it, it was because I saw other people doing it and it’s like, oh why is she doing that, I want to do that’. Charlotte acknowledges that her personal preferences were not key. Her decision was defined by what she saw as normative in her social environment, informed by the actions and appearance of her peers, their preferences.

She argues that without this influence she would not have begun to wear makeup at this point. This importance placed on peer behaviour by Charlotte was not unique. Amanda in her narrative also highlighted this:

I think it was because my friends were quite into it and they were all buying makeup and stuff. I remember I used to have a really shiny nose in secondary school and my friend would put face powder on it every day and be like, your nose is quite shiny. And then I was like, yeah, my nose is quite shiny, I will buy some face powder. So it was my friends really . . . thinking about it, it wasn’t really my choice, I did it cos I thought I better, kind of thing.

Amanda here describes being repeatedly physically interfered with. Comments on her appearance were made and direct intervention (applying face powder) repeatedly
administered until Amanda gave in to the peer pressure that encouraged her to adopt this practice. A single friend was effective in influencing her. The context in which this friendship existed, which reinforced gendered norms and expectations, enabled the effectiveness of this influence. As Amanda said, her peers all engaged in this practice. In this instance the administration of face powder was meant to result in flawless, non-shiny skin, the kind of skin visible in images of popular culture. The consistent and continuous pressure from peers and social ideals made seeking to achieve this, inescapable for Amanda. The process both required a practice and consumption, the purchase of makeup. Amanda’s explanation thus reveals not just her socialisation into the practice of makeup but also her socialisation into consumption. The ease of her socialisation into this is the result of normative peer behaviour, as she notes that ‘all’ her peers were buying makeup. In this example, we begin to see the importance of consumption for body modification and the inseparability of the relationship between the two. This phenomenon, as will become apparent, continued and increased throughout my participants’ lives.

All my participants used makeup. As already suggested, the explanations for initial engagement with this practice were surprisingly similar. Peer behaviour and opinion acted as the dominant trigger. Using makeup was strongly associated with an attractive feminine appearance and seen as a means to acquire this. Peer judgements were key; they acted as a circle of reinforcement. Figure 1 illustrates how once entered into, it was not possible to leave this feedback loop:

Figure 1.

Source: The author.
This feedback loop illustrates the constant reinforcement my participants received from their peers to engage in body modification. Whether positive or negative, comments were continuously made about the appearance of others. These impacted on the decisions made by the receiver in regard to her own practices and opinions of appearance. The consistency of this feedback meant that once entered into, participants could not escape the cycle. Change could and did occur, but this was as a result of a change in who was giving feedback and the message they propagated. This pressure, in the form of feedback, occurred in a school context in which makeup was perceived firstly as normative and secondly as positive. It acted in a regulatory fashion, making practices necessary and setting a guideline for acceptable appearance. Both these aspects reinforced the necessity of body modification and its social benefits. My participants reported feeling at this time that makeup would aid in their attempt to fit in with their peers. The impact of feedback can be seen in Jessica’s decision to begin to dye her hair:

Yeah erm my mum had always said, your hair has got so many different colours in, don’t do it. And then as I started college I had my hair cut a little bit shorter and then my friends were like, oh you should dye your hair, so I bought like a temporary dye and then erm I had it done proper but by my friends and then I went crazy.

The commentary and suggestions given to Jessica by her peers in the new context of sixth form influenced her decision to dye her hair. She previously had not engaged in this practice because of her mother’s views against it. Following a change in the feedback Jessica received from her peers, where for the first time this act was encouraged, her decision and actions changed accordingly.

Makeup was not the only practice all my participants took up at this time. Hair removal was another particularly well remembered practice and one which most participants were extremely articulate about when recollecting their first engagement with it. Again, the specific social setting of the secondary school was paramount to the reasons reported for beginning hair removal. Ellie’s experience typifies the motivations articulated by my participants:
I remember I started shaving under my arms when I was like 11... I think it was like you know when you do PE and stuff like that and you don’t want to be, well when you are at school you don’t wanna have anything what sets you apart from anybody else, you kind end up doing everything.

Ellie’s recollected reasoning was based on fitting in with her peers. The reference to P.E. (physical education) highlights a significant point in my participants’ motivation to begin this practice. Bodily exposure to others, both of one’s own body and of oneself to others bodies, opened participants up to comparison and criticism in the school context. This occurred at a time when they were already becoming, or were aware, of gendered bodily expectations.

Anouk’s explanation was similar to Ellie’s, giving a very blatant picture of the impact of peer pressure on her experience:

Erm I started shaving my legs first when I was in year seven erm because when I was in the changing room with the other girls, they were allowed to shave and whether they could tell that I couldn’t shave or just knew that I wasn’t allowed to, they said that I had very hairy legs, so that is when I started doing that.

Again P.E. and the changing room setting were pin-pointed as significant. Seeing peers’ bodies allowed for bodily comparison, which was crucial. Not being perceived as following set expectations was problematic. Direct and negative comments about this difference were made, so that those commented upon were singled out. Direct commentary was not always necessary however, as Stephanie’s narrative demonstrates:

I played a lot of sport as well, so obviously you are always in and out of the changing rooms and people don’t say anything, but it is noticed, and you know that it is noticed so it became more of a big thing for me. And I didn’t tell my mum or dad, I just stole my mum’s razor and that was about it, but erm, it just felt like you had to do it in a way like it was
expected. They weren’t going to say anything if you didn’t, but it was frowned upon if you didn’t.

In Stephanie’s case, in contrast to the previous examples, nothing was said by her peers. Despite the lack of verbal commentary she still felt that she was being inspected. In other words, both visual cues and presumed views were sufficient as triggers to influence behaviour. Stephanie’s belief that her peers disapproved of body hair, illustrates the degree to which she had already internalised the idea of body hair removal as a necessary practice and female hairlessness as the ideal form. Disapproval did not need to be vocalised. The hairless female body was the expected norm and did not require vocalisation for the pressure to conform to be felt.

Internalised pressure is not the only silence referred to in the excerpt from Stephanie’s narrative. In this example, she also talks about the secrecy involved in stealing, undertaken to hide her consumption of razors, the necessary product for this practice, and aid in her attempts to avoid disclosing her engagement in shaving to her parents. There are a number of possibilities for this silence. Firstly, Stephanie may not have wanted to disclose that she was removing body hair because bodies are supposed to be ‘hairless’ without the related process being evident. Her secrecy could also have been because she desired a hairless body but did not want to admit this to her parents who, because of her age, appeared to disapprove of her engagement in this practice. This links to the question of parental engagement with daughters’ bodily practices which I shall discuss later in this chapter. It also relates to the question of a certain ideal of ‘natural’ beauty where women are expected to fit into a feminine body ideal that is meant to be achieved without the labour of the practices engaged in being evident. ‘Natural’ here functions in two ways: to suggest that something is part of ‘nature’, of how one is rather than what one has to work to achieve, and that something is a socio-cultural norm. The presentation of the hairless female body as ‘natural’ contributes to its normalisation and illustrates the pervasiveness of the pressure to engage in this practice.

The importance of social norms and heteronormative expectations upon women’s hair removal practices has been previously examined (Toerien and Wilkinson 2003; Fahs 2011). These studies made very evident, as did my participants’ early
encounters with hair removal, that social ramifications are faced by those who rebel against the norm of depilation. ‘Deviations from traditional body norms can greatly affect women, even if temporary’ (Fahs 2011: 468). For my participants, secondary school was the social environment in which they experienced significant pressure to modify their bodies for the first time. Even in the narrative of those who cited other social contexts as contributing to their decision to engage in body hair removal, the motivational traits in these replicated those of the school environment. Whatever the context, it was bodily exposure to peer eyes and critique, in conjunction with the bodies of peers being visible for comparison, that provided the trigger and resulted consistently in my participants’ decision to begin hair removal.

**Embodiment, Objectification and Sociality**

As peer critique and outside perceptions where so obviously influential in decisions to engage in body modification, the impact of the body being objectified in this manner needs to be further considered. Lindemann’s work on bodily distinction is a useful conceptual starting point for explaining the impact of the objectification of the body upon body modification decisions. In *The Body of Gender Difference* (1997) Lindemann discusses the importance of how distinction is conceptualised for the formation of gender and sexuality. For gender distinction the body is considered the ultimate point of reference. Gender is possibly the most important social distinction made in the western world for identity categorisation. Bodily materiality is key for this categorisation. In order to challenge biological reductionist approaches which take gender as biologically determined, Lindemann raises the question whether or not the material conditions of the body are to be comprehended entirely as a socially created reality. The hypothesis of Lindemann’s work is that ‘gender difference must be fundamentally understood as a social form, the local realisation of which is broken down by the inherent logic of that which is physical or sensory’ (1997: 73). This means that the concept of gender and the understanding of what constitutes the categories of male and female are social constructs. Gender-different bodies exist only within a framework of historically variable forms of gender difference. The material body and one’s embodied experience of it is where the distinction is realised and experienced. Lindemann highlights that male and female exist not as firm
entities, but relative to each other. It is as a result of the differentiation between them that a body is perceived and experienced as gendered.

Lindemann investigates how the gendered body is experienced and therefore stresses that, in order to analyse the logic of the body, it is necessary to avoid sweeping references to ‘the body’. Instead, she presents a three-fold differentiation of the body based on its phenomenology. The first level of the body is referred to as the objectified body, the body as a visible and concrete gestalt. Next is the experiencing body, the body which lives in sensory and practical reference to the environment, the modalities through which the body experiences environment. The third level is the experienced body, one’s own body distinguished to the extent that it is experienced. If the experienced and experiencing body cannot be distinguished or both are referred to, then the phrase ‘living body’ is used. Lindemann argues that in modern times, the objectified body and the living body have been assumed to have an increasingly reflexive relationship as the cultural formation of the living body is seen to orient itself more and more towards the construction of the objectified body (1997: 83). The visible and tangible gestalt of the objectified body thus determines how the living body is experienced. The objectified body becomes a prominent sign, modelling for the living body that it should act in a particular fashion. The body becomes a problem at the point when it becomes objectified. This objectification occurs both when others comment on it and when individuals come to see their own body in comparison to others.

Comparison is the start of objectification. The limit of Lindemann’s theory here becomes apparent. In her three-fold conception of the body there is no body of comparison which the objectified body is held up against. This dimension is absent. I would argue that, in addition to Lindemann’s three-fold distinction of bodily levels, there is a fourth external and objectified body, the ideal body, to which all others are compared and judged. The ideal body is taken from popular culture and from what is implied in popular forms and discourses on the body. This is a visible and manipulated body that is constructed as desirable. It is evident in advertisements, in the presentation of celebrities, in films and other popular cultural outputs. This body is visible and propagated by popular culture both through images of the ideal body and critiques of bodies which do not meet this standard. Though visible and
desirable, this body is unachievable for the vast majority of women, except through a process of serious and extensive body work and usually air brushing. The ideal body is then the most unnatural of bodies for it requires the most modification. For the celebrities who are perceived to have the ideal body, the fact that their bodies are their business is worth noting. They are able to and are required to dedicate extensive time and money necessary for the achievement of this ideal. Most other women, whose body is not their business, do not have the means to achieve this, nor are they so reliant upon their appearance for their own commodification. The four-fold distinction established here enables one to examine the impact of external influence and the objectification of the body, without this relationship being reduced in conception to mind/body dualism at the expense of embodied experience. This is important because, as we shall see, the objectified body and the ideal body are key to body modification. It is the point at which a person experiences her own body as objectified that her body modifications begin. This process of objectification is complex. Objectification occurs by the self and by others, of the self and of others. What is more, the objectified body is one that is engaged with critically in comparison to the unattainable ideal body. When the body is seen to fail to meet the ideal (which was usually the case for my participants) then body modification becomes the means to reduce this lack. How my participants saw and experienced the objectified female body, both their own and that of others, formed their decisions of body appearance and so their engagement with body modification.

Sociality is important here. The narratives of my participants demonstrated a blatant desire of their younger selves to do as and be like those around them. As their bodies became objectified, comparisons were made amongst peers and in relation to the general cultural portrayal of young female bodies. This demonstrates the sociality of the experience of the objectified body. Objectification is a social process. My participants did not want to be set apart from those around them; they wanted to be seen as ‘normal’. Bourdieu’s (1984 [2010]) notion of habitus is relevant here for understanding the importance of the concept of normality. Habitus refers to the values, tastes, dispositions and expectations of a particular social group that become normalised in the practices of the individual. Bourdieu argues that judgments of taste are related to one’s social positioning, that they are themselves acts of social positioning. Concepts of normative and acceptable body modification and appearance
were known through and defined for my participants by their social context, by the actions and appearance of their peers.

The practices my participants wanted to engage in and did engage in at this point in their lives were not diverse or random; they were specifically those their peers engaged in, perceived as a necessity and valued. Without exception my participantssituated themselves engaging in specific practices to fit with their peers. Literature on peer and group influence supports these findings. Evans, Oats and Schwab (1992) and Nakajima (2007) for example demonstrated in their research how peer behaviour informed individual behaviour and practices. Sherriff (2007) when looking at masculine identity argues for the importance of peer constructions and perceptions of an identity for individual behaviour and identity construction. Narayan, Rao and Saunders (2011), though not focusing on body modification, identified how peer evaluations and judgements of a given attribute informed individuals’ own regard of that same attribute. This is particularly relevant for the understanding of peer influence on body modification, as peer evaluations of appearance and body modification practices determined my participants’ perception of them and as a result their likelihood of engaging in these. What was conceptualised in their peer group as normal thus defined what they ‘chose’ to engage in and what seemed necessary and desirable to them. For example, the conditions of the school environment meant that my participants actively made decisions to engage in hair removal, but the choice not to engage in this practice was not equally weighted. While they would have been able to opt in or out of normative body modification, my participants would not receive equal treatment or peer acceptance for both choices, nor would their identity be read in the same way. In addition for many the ‘choice’ not to do certain things, such as hair removal, was often not made apparent in their social interactions. Anticipation and actual experience of negative reactions, ostracisation and perceptions of ‘otherness’ made the choice to opt out often conceptually unavailable or, when acknowledged, understood as a socially more difficult and problematic decision than to opt in.

My interviewees then on the whole conformed to the normalised peer image they encountered. They generally assimilated in their practices towards their closest group of friends. Among them a shared appearance and body modification regime was
understood to signify a shared identity and belonging to that group. When explaining why she had engaged in piercings, Samantha for example noted that it was ‘to be part of a specific group’.

**Stigma**

Those who did not conform to normative body modification experienced bullying and ostracisation, as other work on body modification has also demonstrated. In *Living Dolls* (2010) Natasha Walter documented that her interviewees who had not conformed to expected body modifications and self-presentation during their school years were bullied. In one case the bullying was so severe that the girl in question decided to be home-schooled. Walter’s participant Carly said that from the age of eleven, ‘All the girls were suddenly in short skirts and makeup and I was still in trousers and a shirt. Immediately, I started getting trouble from boys and girls’ (2010: 74). All my participants at this age were aware of the possibility of such social hostility and peer judgement. Social stigma became very evidently a consideration for my participants when they began to engage in body modification. Goffman’s theory of *Stigma* (1963) provides a useful tool for grasping the impact of stigma on body modification decisions. His focus upon the interactive processes which constitute stigma’s existence provides a way to conceptualise how physical appearance is able to result in what he terms, identity damage. Goffman defines the process of stigmatisation as ‘a special discrepancy between virtual and actual identity’ (1963: 3). He regards social context as defining what is viewed as normative and so in turn what is perceived as stigmatic. ‘Society establishes the means of categorising persons and the complement of attributes felt to be ordinary and natural for members of each of those categories’ (1963: 2). Frost (2005) utilised Goffman’s theory of stigma in her work to ‘explicate the complex set of dynamic relationships between physical appearance and the internalised experiences of discontent from this, and the impact this has on overall identity’ (79). Seeing stigma within a dynamic relational context makes clear how the impact of negative peer reactions affects the embodied experience of individuals and so in turn their decisions around body modification. This reinforces Lindemann’s and my own argument of the impact of the objectified body upon the living body. The objectification and categorisation of
the body, act to pressure people in relation to body modification, so that the gap between the ideal and objectified body can be reduced as a means of achieving social approbation.

Whether associated with stigma or not, my participants’ body modification at this stage was always socially defined. Hair straightening was a dominant trend during my participants’ school years. All had straightened their hair at some point and for all of them this practice started at school. Once straighteners became available as a product, having straight hair became a social ‘norm’. The socialisation of participants into viewing straight hair as normative and desirable constituted a form of submission to fashion. Anouk illustrated the impact of product availability on body appearance norms in her narrative of beginning this practice:

Our family has really curly and really frizzy hair, before the days of all the calming shampoos and serums that you have now it was just wild, there was nothing I could do erm so again in middle school, the second that I could have smooth or straighter hair, then that was ok, cos no one else in my class seemed to have curly hair and it was seen as more attractive to have straight hair.

As Anouk’s narrative makes evident, it is the existence of the product, of straighteners in this instance, which prompted the body modification to become necessary and normative. Normativity is important here for it was the issue of appearing different from her peers that was deemed problematic. Anouk wanted to engage in this practice in order to assimilate to the appearance of her peers. Striking in this excerpt is Anouk’s use of the passive voice. She does not state that straight hair was her preference or that she found it more attractive, only that ‘it was seen as more attractive’. These findings are supported by the literature on peer influence which demonstrates that peer preference informs consumption practices, particularly in the school context (Cotterel 2007; Narayan, Rao and Saunders 2011).
Consumption Practice

Hair straightening was a form of body modification where bodily appearance was not the limit of its appeal and social desirability. The owning of straighteners themselves was desirable and gave one kudos. Specific brands were more desirable than others and when speaking to me about this product many participants used a particular brand name instead of a generic description. Here too the connection between body modification and consumption is visible. In order for my participants to straighten their hair they had to have straighteners. But in this scenario the product itself had a certain value, and produced a particular positioning for my participants. The brand of straighteners that several participants referred to was fashionable and very expensive. They were also out of the financial reach for most at this age without significant financial aid from their parents, as they cost around one hundred pounds. This hefty price tag was part of the product’s appeal. As McRobbie has argued: ‘commercial values now occupy a critical place in the formation of the categories of youthful femininity’ (2008: 532), making clear the importance of products for this age group. Consumption and ownership of this product was reported as being as desirable as the appearance it provided by my participants, which the following excerpt from Amanda exemplifies:

Do you remember when GHDs became a big thing? I was really young when that happened but I was using all sorts of really bad straighteners cos I was I reckon sort of year eight, year nine . . . And then my mum was like, oh like, my brother was getting something or something and my mum was like, do you want GHDs or do you want money? I was like, yeah, I will get the GHDs, and they have lasted me ever since till now. But it was kind of then that people were like, ooh GHDs, and I got a bit obsessed with straightening my hair.

During this interaction, and many others on the topic, it was apparent that I was assumed to know the brand and understand its significance (I did). Amanda’s insertion of the brand name into her narrative was replicated time and again by other participants when recalling their first engagement with hair straightening. Her
previous ownership of another brand of straighteners did not provide the positive associations which accompanied the GHD brand. Amanda was specific in her consumption choices. This pattern of product awareness and identity attachment to consumption repeatedly found in girls at this life-cycle stage led McRobbie (2008) to suggest that when

magazines like Bliss and Sugar imagine a very young female consumer into being . . . [they] activate the subject by mobilising her as a consumer; she is called upon to play a key role in deciding what she likes and what suits her such that she participates ‘in the world of goods’ and comes to recognise herself and be recognised by others by means of this ‘political economy of subjectification’ (545).

As Amanda made clear, the importance of the brand for the trend of hair straightening initiated her into consumption. When product ownership is of social importance, one’s social status becomes linked to the products one owns. The perceived and embodied identity of an individual is altered by the consumption of certain products, because the products themselves are associated with certain identities. What is also illustrated here, which is so often ignored in research on body modification, is the impact of economic status on body modification practices. Even at this young age when one’s personal disposable income is likely to be small, displaying wealth still created a positive social image and provided status. A lack of spending power was limiting to an individual’s capacity to engage in body modification and therefore how socially acceptable individuals could make their appearance. Through her assertion that “(good) looks” are a form of “cultural capital” for young people, especially girls’ Frost argues that ‘the all-important group memberships of young people may increasingly be understood as predicated on the cultural capital and potential weapons of exclusion that “doing looks” can encompass’ (2005: 76). Frost quotes two studies which discuss the importance of consumption and product ownership which was displayed in my participants’ perceptions of GHDs as status symbols. The first of these was a study of boys attending London schools. In this a sizeable number of boys admitted to forming opinions of other boys based on the brand names of their clothes (Frosh, Pheonix and Pattman 2002: 97-80). Frost also quotes a recent Norwegian study which suggests
that ‘membership of groups was not to do with young people making choices between different but equal sub-groupings, but with the operations of hierarchical stratification based on power and exclusion. Whether you were considered a “nerd”, a “normal” or “cool” was based on appearance’ (Frost 2005: 79). One’s cultural capital was increased by the ownership of the ‘right’ products. This influenced one’s place in the school social hierarchy. As my participants’ experiences and the literature demonstrates, one’s consumption practices were assimilated to one’s identity. At this stage in their lives my participants were still financially reliant upon their parents however. The parental financial situation and parental willingness to fund body modification were factors that impacted on their opportunities to participate in these practices. Direct parental funding of body modification illustrates acceptance or approval of these practices. This is a point I shall expand upon in the coming section on parental influence.

The importance of consumption ability is further reinforced by the actions participants reported taking when parental funding was not available or was denied. Natasha, for example, revealed that while at primary school her parents refused to buy her makeup. This made her feel that she did ‘not have access to these secret materials that women use to make themselves beautiful’. Natasha’s attempt to remedy the situation illustrates just how important having access to a desired product was for her at this life stage:

I actually stole some money from a little pot that my granddad had on his dressing table . . . and I went to the local chemist and I bought some collection 2000 makeup one night after school . . . I knew they weren’t going to buy it for me and it seemed important that I have that because other girls had it and it was a signifier of maturity and I think that at the time I felt that if I bought it I would be beautiful.

Natasha’s subterfuge here, her decision to steal money in order to be able to purchase the desired makeup, is demonstrative of the secrecy and stealing that can be a feature of body modification. Her consumption of the product and engagement in the practice occurred in secret and rested upon having stolen money. The act of stealing heightened the illicit dimension of these practices. Interestingly, this illicitness is
something used in body modification advertising. Brand names such as *Victoria’s Secret*\textsuperscript{30} and product names such as *Benefit’s*\textsuperscript{31} products titled ‘Fakeup’\textsuperscript{32} and ‘They’re Real’\textsuperscript{33} play up the illicit element of body modification. Many adverts also utilise this theme such as that for *Clairol’s* ‘Nice ‘n’ Easy Colour Blending Foam’. In this television spot a husband laments ageing while noting his wife has not, stating that he does not know all her secrets, and accompanied by the slogan that with this product ‘all they see is you’.\textsuperscript{34} Secrecy in body modification engagement is assumed a desirable function in these adverts and marketing pitches.

What is implied in all of the latter examples is that the practices women engage in will be obscured and become a means to deceive others about one’s actual appearance. As these examples illustrate, deception is a key aspect of the popular discourse surrounding body modification. The concept and necessity of white lies is instilled through this discourse which contributes to the secrecy surrounding these practices. This in turn can be seen to lead into consumption practices that are founded upon secrecy, potentially setting women up to engage in illegal activity considering that most women cannot afford to engage in all of their desired practices\textsuperscript{35}. Access to socio-economic resources impacts upon an individual’s ability to consume and to be a consumer, a reality acknowledged by Griffin in her argument that ‘the subject position of the consuming girl is not equivalent relevance for all girls and young women: it is profoundly shaped by class, ethnicity, sexuality and disability’ (2004: 36). In constricting consumption ability, one’s social positioning and identity is affected. My participants frequently referred to ‘borrowing’ or ‘stealing’ mothers’ or elder siblings’ makeup and other body modification tools and products when they did not have the pecuniary means to acquire their own. Subterfuge was an accepted route of action for my participants. For those whose parents would finance their practices, achieving a desired image and ownership of products was more attainable. All these practices and trends required consumption. The acquisition of the product,

\textsuperscript{30} *Victoria’s Secret* is the largest American retailer of lingerie, famous for its Catwalk shows.
\textsuperscript{31} *Benefit* is a manufacturer of cosmetics founded and headquartered in San Francisco, California, selling at over 2,000 counters in more than 30 countries.
\textsuperscript{32} ‘Fakeup’ is a range of concealer products produced and sold by Benefit cosmetics.
\textsuperscript{33} ‘They’re Real’ is a mascara produced and sold by Benefit cosmetics.
\textsuperscript{34} *Clairol* is a personal-care-product division of Procter & Gamble which focuses on hair care and colouring products. ‘Nice ‘n’ easy is a shampoo-in permanent hair-colouring product for home use.
\textsuperscript{35} It is worth noting here that shop lifting is the most common crime committed by women in the UK (Ministry of Justice 2011).
engagement in the practice and the appearance produced, were all valued by my participants as constructing their place in the school social hierarchy. As Frost states, in the school environment, it would seem that ‘for youth then, the vital importance of “looks” for social acceptance is demonstrable’ (2005: 77). Although looks, the outcome, are emphasised here, it needs to be acknowledged that it was only through consumption that they could to be achieved.

**Peer Approval**

The importance of attaining a peer approved appearance that is so evident in the previous example, was reinforced throughout my participants’ narratives through reference to a wide range of practices. The power of popular trends, for example, was illustrated particularly well, and from a very young age, through the practice of piercings. Nearly all my participants had had their ears pierced, the vast majority having just one set in their ear lobes. Some had other piercings too, though these were usually acquired gradually and at a later stage in my participants’ life cycle. Initial ear lobe piercing usually occurred at a young age (8-12) and often before my participants had started to engage in any other form of body modification.

For my participants the popularity and frequency of ear piercings among their peers made it a desirable modification. The importance of peer behaviour was illustrated by Sally in her explanation of her engagement in this practice:

> Erm I was about ten. Everyone else had got them done so I wanted to get them done, but then I haven’t got anything else, any others.

Sally wanted her ears pierced because it was common among her peers. Nicole also reiterated this reasoning when she said:

> Erm I got my ears pierced, I can’t remember how old I was, I think that was year 6, year 7 as well and again it was kind of everyone was getting their ears pierced and it was sort of like a fashion trend.
As with Sally, those around Nicole triggered her desire to have her ears pierced. A trend for piercings present in fashion at the time was passed on to my participants through their engagement with popular culture and, as was the case with hair straighteners, it became widespread in school. The practice was conceived as normative and a means to acquire and display these identity characteristics to others.

At a slightly later age, but still during the school years, other additional piercings were often undertaken. Unlike the initial earlobe piercings these were not expected or assumed normative practices but instead understood as a means to signify individual identity and specific group affiliation. Betty’s discussion of her belly button piercing demonstrates the importance of group participation and perception of a given appearance:

I thought it was really cool, all my friends did it, it was when like Britney Spears and Beyoncé had it, erm it was quite funny cos when I got it done, it hurt so much, me and my sister got it done, and I never showed anyone, so it wasn’t like I was going to wear belly tops or whatever.

Betty was strongly influenced by fashion and celebrity culture as well as peer behaviours in her motivations for getting this piercing. Interestingly however, Betty did not actually show the piercing to anyone or make it visible.

Her refraining from showing this piercing to others is yet another example of the link between body modification and secrecy. In Betty’s narrative the piercing appears to have been detrimental in several ways almost immediately: Betty’s behaviour suggests her instant disapproval of it, it was painful and ultimately it was not ‘used’ as she never displayed it. The appeal of this practice and the fulfilment gained from it clearly came from the act of getting the piercing done itself rather than the outcome. Betty’s experience of this piercing strongly correlates with much of the literature on impulse buying. The pleasure gained is instant and short lived. Contemporary literature on impulse buying suggests that people engage in consumption in this manner for hedonic or affective purposes (Hausman 2000), that the act of shopping itself satisfies. The consequences and impact of impulse buying are not considered
and are of less importance to the individual than the act itself (Jones, Reynolds, Weunc, et al 2003). Mirroring this analysis, Betty’s belly button piercing would seem to be not just about image, but about the act itself which was desired and provided temporary fulfilment and group affiliation.

The importance of life-cycle and the context of school in body modification decisions and preferences is apparent in the life trajectory of the practice of belly button piercing. Most women who had this piercing while at secondary school later removed it, articulating changed perceptions of the practice which they later thought of as embarrassing and dated. Betty contrasted her original enthusiasm for the piercing when she was younger with her later feelings towards it when she recalled her thoughts on the scar the piercing had left once removed: ‘I have got a scar where it used to be, and I think oh god people know I have a belly button piercing’. She was very evidently embarrassed. When explaining her change of attitude towards the piercing the impact of those around her was integral. Betty explicitly stated that it was the changing attitudes of her peers from admiration to derision that changed her own attitude:

A lot of my group of friends did it, so it was cool and desirable but then I started to get to know more people and more people from different places and I remember once going to like a net ball trial and this one girl being like, oh my god you did not get that done, and I was like I was going to lie and be like, oh no, it is just like a scar from chicken pocks or something and I was like, oh no and I felt really embarrassed, you know obviously I still feel really embarrassed about it.

The important aspect here is the changing social context, as it is this which caused Betty to change her views regarding this practice. Betty’s basic disposition to be influenced by others persisted but as they and therefore the attitudes prevalent around her changed, so did her own. Her views and tastes were formed by her social context and the affirmation she received from that. Thinking back to the feedback circle, as the commentary received changed, Betty’s actions followed suit. The desire to be perceived positively by peers meant that my participants adapted their practices to the
normative ideals of whoever their peers were at a given point in time. Sociality is evidently a highly important dimension in body modification decisions. The importance of acceptance and approval by friendship groups in the formation of identity, and so in turn for practices of body modification has been previously contemplated in this research field, most relevantly by Frost who argued that:

\[\ldots \text{identity is not simply a matter of the individual and society, but is mediated within and through group affiliations \ldots} \]

Identification, appearance, consumerism and the group are theorised as symbiotically connected, and recent empirical research is also beginning to support the notion that group acceptance and identification may be dependent on what kind of image, including body image, a young person can construct (Frost 2005: 75).

In my own data the importance of acceptability was illustrated particularly well by a subject not usually directly associated with body modification. Several of my participants revealed that in the past they had self-harmed, seeing this in itself as a form of body modification. The methods chosen to implement this reflect cultural understandings of the acceptable, and made visible the extent of the impact these notions can have. Piercing was described by some of my participants as a method they had engaged in as a form of self-harm, because unlike cutting themselves, they would not be expected to explain this to others, nor would it visually hold the same negative associations as self-harm scars on arms, for example. Their practice was ‘acceptable’ and so its motive was unquestioned. Carla verbalised this in her explanation of her piercings as a form of self-harm:

I think my extra ear piercings, certainly some of them, I had a bit of a problem with self-harm when I was sort of sixteen, and I think some of them were a legitimate way of hurting myself because you know I have scars on my arms now but it is a lot more legitimate to pierce your ears than it is to cut yourself somehow.
Carla chose to inflict self-harm through this method because of its legitimacy as a normative and accepted practice. This meant that it went unquestioned and so Carla did not have to justify her self-harm to others.

The presence of self-harm in some of my participants’ narratives was a surprise to me. I had not previously considered the practice as a form of body modification. The disguise of self-harm in body modification practices raises the question of when participants who self-harmed began to link that practice to other forms of body modification, for not all people make that connection. Body modification practices are socially associated with the feminine. So too is self-harm, as Brickman (2004) has noted. Often discussed in similar terms to eating disorders, the practice (which tends to focus upon cutting), is very much medicalised and identified as an affliction of mainly adolescent girls in both popular culture and academic literature. This discourse perceives self-harm as an act done to the body. It is part of the objectification process that cannot be detached from body modification more generally because through this engagement the body is treated as an object, though for different ends. The use of piercings as a form of self-harm exemplifies this understanding of acceptability; cutting is seen as a non-legitimate practice while piercing is an unquestioned normative practice of female body modification. The use of a normally acceptable practice for the ends of self-harm demonstrates the way in which these practices provide opportunities for different meanings to be attached to them in a context where legitimacy and illegitimacy are inter-related. In this change of meaning secrecy is once again present. The meanings of practices are not static for those that engage in them. As an event of identity making and the result of objectification self-harm then fits the conception of body modification I utilise, much to my own surprise.

**Becoming a Woman**

My participants’ decisions around body modification, as mentioned above, were based on how they assumed the practice and the appearance it produced would be read by others. The school context was influential for it was where participants interacted with peers, learnt appearance norms, and encountered social sanctioning if
they wavered from the acceptable. In the early secondary school years body modification was all about conformity. What became evident across my participants’ narratives was that they interpreted this first engagement with body modification as a sign of becoming a woman, both themselves and in terms of others around them. Here I want to place the emphasis on the *becoming*. My data suggested that it was not age or stage of physical development that was the cultural barometer or defining factor of where along the line of transition from girl to woman my participants saw themselves as situated, but their engagement with specific forms of body modification. This was apparent on two levels in my participants’ narratives of this stage of their life cycle.

The first of these were my participants’ recollections of their conception of the body modification practices they began at this age. Participants recalled understanding body modification as part of growing up, as can be seen in the following excerpt from Peggy’s narrative:

> Do you know I actually do remember the first time I shaved my legs. I was really young I think, and erm I think it is because I knew my sister had done it, and I can remember it being like a really big deal at the time cos I think that’s like kind of the real transition between like a child and a woman. That’s something, I know it’s not the big thing, but I think it is a changing attitude in how you are going to portray yourself to people.

Peggy directly described her hair removal as expressive of her transition from girl to woman. It was not the presence of hair but its removal which signified the transition for her. The importance of the practice is how it portrays the doer to others. Engagement in this practice was assumed to be read specifically as a sign of womanhood. To be a woman in this view was to be perceived as one. It was the judgement of the viewer that had precedence in this identity categorisation. Body modification became the means to signal particular identities to others. Objectification of the self was given precedence.

Peggy was not the only participant to think in this way. Directly echoing her explanation Phoebe stated: ‘It is something you haven’t done before, it makes you
feel all grown up, so for me it was part of the growing up stage’ and Natasha said that it ‘seemed important that I have that [makeup] because other girls had it and it was a signifier of maturity’. It is clear that when younger these practices were understood to mean growing up. Similarly Kerry pointed to the ‘grown up’ perception of body modification as her primary motive:

I remember being really little and shaving my legs, like probably before I even had hair on my legs, like in the bath when I was really little. But that is because you see your mum doing it so you think that, that is like what being a grown up is, it is like walking around in high heels or something, so I remember doing that.

Even when the practice was not required (in this case Kerry did not have body hair) the association of the practice with becoming a woman was so strong that it was still desired. Kerry and many other of my participants wanted to be seen as mature, as women not girls and thus these practices were appealing, as their use promised to enable this identity transition.

My participants’ narratives make obvious that when younger they believed that body modification was necessary to be a woman. The identity of womanhood in their conception was not just about an appearance or bodily materiality but about actions. As Shelley Budgeon (2003) has argued, identity is an embodied event. The existence of normative perceptions of womanhood, of ‘regulatory ideals’, meant that initial and early body modification was experienced almost identically by all my participants. To have the identity of a woman and to be perceived as feminine was not just about a bodily appearance but also about the actions undertaken and the practices engaged in. Budgeon, when discussing the embodied identity of young women, argues that the body should not be seen:

. . . simply as a natural foundation or passive surface upon which meanings are inscribed by systems of signification, but that there is an irreducibility between the subject and object such that, in order to understand the ways in which young women actively live their embodied identities, we need to develop an approach which can envision a body
beyond the binary of materiality and representation – the body not as an object but as an event (Budgeon 2003: 36).

To take on or embody an identity involves more than merely looking ‘right’. Engagement in the normative practices associated with an identity is necessary for it to be embodied and for an individual to be perceived as embodying it. The problems and limitations of conceptualising the body in mind/body dualistic terms are apparent here. The body is not an object simply acted upon; it is inseparable from embodied experience. My four-fold differentiation of the body provides a conceptual tool which enables the contemplation of external influences and pressures on the body without reducing it to an object separate from embodied experience. People engage with and experience these differential bodily layers at the same time. While as categories they can be described in discreet terms, as lived realities they are not. In highlighting the differential bodily layers while still giving consideration to the reality that these will operate simultaneously (living body), the embodied experience of external influence is visible. For my participants both the act of specific forms of body modification and the image it provided were intrinsic to the feminine identity they wished to transition into. If hair removal is taken as an example here, both the image of hairlessness as an ideal body and the act of removing this hair, were held paramount to achieving an acceptable female identity. To be a woman and not engage in hair removal at this age was not reported to be regarded as an option by my participants. Viewed in comparison to the ideal body, the objectified body comes to impact on the experience of the lived body. For my participants the ideal of hairlessness was so intrinsic to the identity of womanhood and their embodiment of it that both the practice and the image were necessary.

Even less conventional forms of body modification, such as facial piercings, were often still motivated by the notion that visible body modification would make the individual appear older, and move them nearer on the spectrum to woman than girl in the eyes of others. This was clearly the case for Samantha, who attributed the piercings she had undertaken at this early stage of her life as partly due to her desire to be perceived as older:
even though I would never have admitted it then, we thought if we had like piercings and stuff that we would look older and I don’t know why but when you are fifteen and stuff, that seems important. You can go out and get served and stuff.

Samantha understood body modification, in this case specifically piercings, to be read as a sign of maturity. Her desire to look older was however not just for its own sake. Samantha wished to appear older because of what she believed it would enable her to do. Being perceived as older in this instance meant that she and her friends would be able to go out and drink (alcohol) while underage because their appearance would enable them to get served. The image Samantha desired was not just based on wanting a particular image but for the opportunities of the identity it signalled.

Maternal Influence

The importance and influence of external interpretations or readings of body modifications was not limited to peers. Parental, and particularly maternal, influences were also important. The manner in which participants’ parents and guardians reacted to and understood body modification reinforced the view of these practices as signs of womanhood and maturity. Parents’ reactions to their daughter’s engagement with body modification, while not consistent, were evidently based upon the assumption that these practices meant a girl was developing or transitioning into being a woman. In the narratives I encountered parental reactions fell into two camps: parents who discouraged body modification and parents who encouraged it. I shall discuss the former first.

Parental conceptions of body modification as a sign of development meant its prohibition was understood as a means to stop or slow down the transition of their daughters from girls to women. Natasha’s explanation of her parents’ reasoning for preventing her from wearing makeup clearly demonstrates this:

I remember that I was quite young when I decided that I wanted to wear makeup . . . I remember I was still at primary school and I wasn’t
allowed to wear it and I was told by my parents that I was too young to wear it, only older girls wear it . . . I remember my dad saying, you don’t need to be doing that, that’s you know, I think my dad had a lot of anxieties about erm me erm engaging in beautifying practices at too young an age . . . I think he was anxious that I would grow up too fast.

The issue of the age appropriateness of body modification practices was echoed in Kerry’s recollection of her grandparents’ reaction to her thinking about hair removal: ‘I remember my grandparents being like, no you are too young to shave, and made me grow it all back’. This grand/parental anxiety around daughters beginning to engage in body modification practices centred on the fear that they would grow up ‘too quickly’. While what exactly was meant by ‘growing up too quickly’ was not defined in either example, I take this phrase to denote sexual activity. Sexual activity is deemed not suitable for those at a young school age in both popular culture and in law\textsuperscript{36}. In popular thought, it is correlated with a loss of innocence and ‘childhood’ and often reported as something girls in particular need protection from. Preventing girls from engagement in these practices was conceptualised as a means of delaying their growing up, because engagement in them was seen as part of ‘becoming’ a woman.

In contrast to this reaction though still demonstrating an understanding of body modification as a sign of womanhood, some parents encouraged their daughters in this. This group of parents understood their daughters to be growing up and therefore deemed these practices necessary. Andrea’s description of her mother’s reaction to her developing body illustrates this:

When I was little I remember telling my mum I had started getting underarm hair and she just gave me a razor immediately and sort of just that was what was expected I think.

Andrea’s mother’s reaction to her revelation of the physical development she was experiencing projected the message that bodily development requires the use of body

\textsuperscript{36} Age of consent in Britain is sixteen.
modification. Her becoming ‘a woman’ necessitated that she engage in these specific and gendered practices. This was also evident in Sara’s narrative. When explaining how she first came to engage in body modification she said:

Erm, I think it is something my mum got me into, my mum told me to do and introduced me to different methods and stuff like that.

Sara’s mother’s input and instruction are very evident. It was her mother to whom she attributed instigating her engagement with these practices.

Those parents who encouraged body modification did so because they saw these practices as essential attributes of the identity their daughters were transitioning into. Certain social norms of adult femininity informed these parental views. Their encouragement was to ensure their daughters adapted to and fitted into the prescribed norms of this identity. Budgeon (2003) when considering body modification practices argues that ‘transformation in the meaning of embodiment can be effected through an engagement in processes and practices in ways that destabilise the subject/object binary’ (43). For this argument Budgeon (2003) used the work of Davis (1995) to highlight the act of becoming (Deleuze 1988) involved in embodied identity. It is in the doing of these practices, not just the appearance they provided, that girls were perceived to and experienced the beginning of their identity transition. The prevention or enforcement of these practices were seen as effective ways of determining my participants’ identities at this time because, as Budgeon argues, as embodied acts they were seen to not just alter appearance but to result in participants’ identity transitions from girls to women.

At this stage in their life-cycle their social interactions confirmed to my participants that to be a woman meant engaging in body modification. Interestingly as adults themselves (18-25) at the time of the interviews, which took place in 2012, many reiterated this message in their approval or disapproval of the age appropriateness of body modification. Those with younger siblings particularly articulated concerns of the latter growing up too fast. These concerns were based on younger siblings being perceived as having begun body modification before their older siblings felt it was appropriate. Much of this anxiety was related to sexuality, connecting body
modification to the transition into womanhood and this in turn to active sexuality. To begin body modification ‘too young’ was equated with too early sexual activity.

As already indicated, the narratives of my participants’ first engagement illustrate that in conjunction with peer influence, older close family members and parents were particularly influential throughout this lifecycle stage. Similar to peer influence, parents had a regulatory function in regard to body modification but also an inciting impact. While fathers were referred to as vocal in terms of approval or disapproval of practices and siblings as influential through what they themselves engaged in, mothers were situated as having the most impact upon their daughters’ body modification. This maternal influence was articulated through what mothers both practiced and preached. Mothers encouraged and discouraged, offered advice, taught daughters how to perform practices, suggested methods, demonstrated tastes and both enabled and restricted their daughters’ engagement in body modification. All my participants discussed their mothers when explaining their body modification history. In different ways mothers influenced how and when their daughters first engaged in body modification. What the mothers preached to their daughters in regard to body modification did not always coincide with their own practices and relation to these. Very often my participants talked of mixed and conflicting messages they received as a result of this.

When looking at the maternal influence a certain typology of mothers became apparent. Broadly speaking three main types of mothers could be identified through their attitudes to their daughter’s engagement with body modification. These were: mothers who encouraged body modification, mothers who discouraged body modification and mothers who lacked knowledge in relation to body modification. Mothers who encouraged their daughters to engage in body modification did this predominantly through the recommendation of practices, instructing how to engage in these and presenting certain practices as necessary. They themselves usually undertook a wide range of body modifications regularly and consistently. The message the participants with this type of mother recalled receiving suggested that body modification practices were necessary because of the importance for women to adhere to an appropriate feminine image. Maternal enforcement of practices at times
involved physical interference and the overriding of daughters’ preferences. Stephanie recalled for example:

I remember it was my mum who was like, you have to go and get your ears pierced, you’re a girl, come you have to go and get it done. And I remember thinking, it was really weird, I was like, why isn’t my brother getting it done, and she was like, he isn’t getting it done, it is not the thing.

Stephanie’s mother made her daughter pierce her ears, emphasising certain gendered norms. Stephanie’s preferences were not acknowledged and her response makes apparent her lack of understanding of the gendered norms at the time. Thus her mother effectively socialised her into certain gendered norms as she enforced their materiality upon her daughter.

Social norms impacted upon parental behaviour in regard to body modification. The perception of practices as feminine and normative influenced mothers’ decision towards implementing or enabling these. Maternal impact was important in relation to ear piercing as, while there is no UK legal age requirement for piercings without a guardian, most studios and jewellers have in place an age restriction of sixteen to eighteen, under which a guardian is required to be present.

Anna’s story of her mother’s influence on her practices is a good example of this. She repeatedly referred to her mother and her influence throughout the interview, discussing how her mother had suggested practices to her and enforced certain ones upon her when she was younger:

. . . my mum, she just would give me makeup and she wears fake tan and she goes to the gym . . . plucking my eye brows as well, that’s one, that’s my mum as well, one day she just said, my eye brows were too fuzzy, so hacked me with the tweezers, so you have to keep doing it then, don’t you.
In this account it is apparent that Anna had no obvious say in the body modification her mother acted out on her, in this instance plucking her eye brows. Her mother physically interfered with her, implementing the modification and instilling the message that it was necessary. Once this had been carried out on her, Anna stated that she had to continue with it. Following her initiation by her mother into a practice, she submitted to continuing with it.

Anna’s mother’s influence was not however limited to this direct form of intervention. Anna spoke frequently of her admiration for her mother’s appearance. This encouraged her to replicate her mother’s practices in an attempt to ensure she would age similarly:

People my age say that my mum could be my big sister cos she looks that young and I think that is a nice thing to hear when you are sort of forty odd. So I hope to be the same.

Here her mother’s desire to look younger and the social approval she received for achieving this reinforced in Anna’s mind that youth is a desirable appearance for women and encouraged her to engage in practices she believed would ensure this appearance later in life. Previous research on maternal influence on daughters’ body modification practices has predominantly focused on eating disorders and dieting practices (Pike and Rodin 1991; Hill and Franklin 1998; Ogden and Steward 2000; Ogle and Damhorst 2000; Benninghoven, Tetsch and Kunzendorf 2007; Cooley, Toray, Wang, et al 2007; Gavish, Shoham and Ruvio 2010). The general consensus appears to be that maternal attitudes towards body size and eating practices impact daughters and can lead to them imitating their mothers’ behaviours. It has also shown that this relationship is not uniform. Very little research has been conducted in regard to the maternal influence on other forms of body modification.

Stephanie also had a mother who was very vocal and encouraging in terms of body modification. She suggested practices (‘my mum dyes her hair so often and all the women in my mum’s side of the family do it and it just felt like, my mum was like, well you might want to try it, see what you think, try something different’) and also
Stephanie recalled that:

The main influence my mum had, she was just like concealer, concealer everywhere, just put it everywhere, just get it on. So like cos I don’t know she was always like, you really can’t let anyone see you have spots and things like that. She was really really big on hiding away anything like that, any sort of imperfection in a way. So that was my mum’s main comment to me when I was younger.

Stephanie talked of approaching much of her body modification from the very beginning with this notion of hiding ‘imperfections’, whether of weight, spots or any other conceivable ‘flaws’. Body modification had been instilled in her as a means of presenting an ideal version of her otherwise flawed self to the world, to cover and camouflage perceived imperfections, and furthermore that this coverage and disguise was necessary for a woman. Even when speaking of her current practices in 2012 this ideology crept through the narrative, still informing her approach to body modification.

The emphasis on hiding ‘flaws’ signifies the construction of women as lacking. The ‘lack’ attributed to the lived female body in comparison to the ideal is visible in this. Stephanie used body modification to rectify what she saw as distancing her from the ideal of female beauty. The discourse she employed situated body modification practices in relation to secrecy. In hiding what she saw as imperfections and presenting her modified self as her ‘natural self’, Stephanie obliterated the labour put into her body modifications but also her ‘natural’, here meaning ‘unaltered’, body that by definition became flawed. Her mother first presented this message to her daughter through her focus on concealing ‘flaws’ from others. The emphasis of her advice was on the importance of others’ perception of one’s appearance. Deception and secrecy were necessary in order for Stephanie to present herself as being as ‘naturally’ close to the ideal body as possible.

Directly contrasting with the mothers who encouraged body modification and taught the importance of others’ opinions of one’s appearance were the mothers who
discouraged body modification in their daughters. This discouragement occurred irrespective of the mothers’ own practices and was based on two dominant reasons. The first of these reasons was the previously mentioned wish to delay daughters’ growing up, the second was a desire to minimise or delay the burden of body modification combined with an aim to instil the belief that their daughters did not need body modification. The latter motivation however was also strongly related to taste and a preference for a ‘natural look’.

The belief that body modification is a burden and cannot be stopped once started was evident in the reported reasoning of many of these mothers. When explaining her discussions when younger with her mother, Amanda for example stated that:

I asked my mum if I could start shaving my legs and she just said no. Like I just blurted it out like, can I shave my legs, and she was like no, you don’t need to, they are still like really light or she tried to explain to me like that the later you leave it the better, cos otherwise they are going to come back thicker and you are going to be stuck with shaving them for much longer.

Amanda took her mother’s opinion as authoritative on the subject, her experience as a woman already engaging in these practices was evidently valued. Shaving was articulated as a burden and one that once started must be maintained. Her mother’s discouragement was based on her desire to minimise the time her daughter had to endure this practice. This emphasis on body modification being a burden was articulated by mothers who did not want their daughters to feel that they had to alter their appearance and who encouraged a ‘natural’ or minimal approach. Joan’s narrative of her mother’s influence illustrates this:

My mum always encouraged me when I was younger never to sort of go to town on the makeup. She always sort of said, you will grow into it, so never do more than cover up your spots really when I was younger and I think I took that on board and I didn’t. So she kind of encouraged me not to go out you know with a foundation line around your jaw line and (laughter) too much lipstick on and stuff like that. I think you know I
respect my mum’s opinions and views and I took that on board and didn’t and I guess the level I have got to I have just sort of grown into and never gone any further from being 13, 14 when I started wearing makeup. So erm so I think she influenced me a lot in the way I have chosen to wear makeup.

While on the one hand Joan’s mother de-emphasised the necessity of body modification, what is apparent more strongly is the taste judgement she instilled in her daughter and Joan’s unquestioning acceptance of her mother’s views and taste. Her mother asserted that obvious makeup was in bad taste and should be avoided. With this however also came the message that covering spots (flaws) was necessary and that practices and their required labour should not be evident. Again body modification was used as a means of hiding imperfections.

Joan had also spoken of peer influence in her narrative, citing it as her reason for first engaging in hair removal. Interestingly her mother had disapproved of this practice due to the age at which she began. In this instance peer influence overrode her mother’s. Peer influence impacted on Joan’s body modification in a more immediate manner than her mother’s, but the latter had a longer-lasting effect. The relative dominance of peer over maternal influence was frequently present in participants’ narratives. The two influences often co-existed but also clashed. For Carla it was not just her mother’s advice but also her approach to body modification that reinforced her discouragement of her daughter’s engagement with them. She recalled that:

In terms of makeup and hair and things I guess I took influence from my mum who very rarely wears makeup and has very natural hair, she has got grey hair and doesn’t dye it now.

Again it is taste judgements that Carla’s mother passed on. Mothers whose discouragement was echoed in their own practices provided an alternative example of body modification from peer and celebrity culture. Their actions gave the option of another identity of womanhood from those where body modification seemed more intrinsic and necessary. Maternal impact was influential regarding daughters’ long-term tastes and approaches to body modification, especially after the school years.
In many ways the maternal influence on daughters’ body modification practices tended to be most evident in regard to what participants did not engage in. These decisions were sometimes politically based, reinforcing the argument that daughters took on their mothers’ value judgements. Ellie in particular spoke of her mother’s feminism and how her discouragement had been based upon this. When discussing her mother’s disapproval of Ellie’s engagement in body hair removal she said, ‘my parents weren’t that keen on it cos they’re not really, they’re quite kind of old hippies and my mum is a big feminist and she wasn’t that keen on it’. When mothers discouraged a practice, an explanation was always deemed necessary, something not present in the narratives of mothers who encouraged engagement in body modification.

The desire of mothers to emphasise to their daughters that body modification was not necessary, was heightened strongly when other influences tried to encourage engagement in varying practices. External influence and commentary that suggested their daughter’s appearance was lacking and needed to be modified was particularly strongly reacted against. Carla for example broke her nose as a child and was asked by doctors and encouraged by her father (who told her she would look ‘prettier’ if her nose was straight) to get it ‘fixed’. Looking prettier was set up to Carla by these parties as of paramount importance. In contrast her mother discouraged a surgical procedure and reinforced to Carla that such a procedure was not necessary. Similarly Betty’s mother, for example, demonstrated outrage at the suggestion that her daughter undergo a surgical procedure to remove a mole:

When I was ten I went to the doctors about, I had an ear infection, and the doctor said, oh you know, he sorted me out and then said, oh do you want to get rid of your birth mark. Like I have a birth mark on my neck, and I looked at my mum and I was like what? And my mum said, you can’t ask her these questions and he said, well if you want you can get it taken off, it’s a cosmetic procedure, he might not have said cosmetic but he said it was a procedure. And I was thinking to myself, oh my god I didn’t think it was a problem. And my mum took a long time talking to me about it, being like, it is not an issue, it is not a problem, erm and I decided not to venture down that path. I don’t want to, it’s not cancerous,
it is part of me and I think if I deleted it, if I got rid of it, I feel like I am deleting, I am saying to myself, you know you’re editing yourself, and I am not going to do that, for anyone.

These mothers’ interventions demonstrate their attempts to reduce the pressure they believed their daughters to be under to engage in body modification by instilling the message that these practices were not necessary. Significantly, and exemplified by the latter two examples, resistance to pressure to engage in body modification during the school years only occurred following the encouragement of participants’ mothers. None of my participants reported resisting pressure to engage in body modification at the life stage without maternal encouragement to do so.

The legitimacy people feel to comment on and critique the appearance of women and the importance placed upon female appearance for identity is very apparent in these examples. In both cases the girls’ appearance was seen as going against normative and desirable femininity in some way, but there was nothing physically or medically wrong. Despite this, in both instances the perception of their appearance as ‘lacking’ was enough to motivate others to encourage them to undertake a medical procedure to ‘fix it’. The message projected by these external reactions was that appearance is such an important attribute for a woman that everything should be done to move a woman closer to the ideal body. The concept of ideal and attractive femininity at play here is clearly narrow, one that does not include non-symmetrical facial features or birth marks. It was only the mothers’ persistent suggestion to their daughters that their appearance was not problematic or lacking and that they did not need to modify themselves, in contradiction to other external input, that ensured both did not undertake the procedures. In both narratives the confirmation that my participants received from their mothers was paramount for this decision. The decision not to engage in the suggested practices was not individual and isolated but based upon maternal reassurance. External confirmation of appearance was still needed but this was an instance where the maternal opinion overrode other external influences.

The final category of mothers I shall discuss in this chapter is those who lacked knowledge about body modification practices. These mothers did not engage in many such practices themselves and came from contexts in which these practices were not
prominent. When talking about these mothers, emphasising their lack of knowledge about body modification highlighted the limited advice they had been able to provide for their daughters. My participants spoke of feeling that their mothers’ lack of knowledge placed them at a disadvantage as the mothers were unable to pass on the skill set and knowledge the participants deemed necessary for a woman. Natasha particularly spoke of the conflict between the social expectation that her mother would pass on this form of knowledge and her own experience as a young girl with a mother unaware of and unskilled in body modification:

Erm the first thing that sprung to mind when you asked that is my mum, cos I think oh influences you know, who taught me to do the things that I do, but it wasn’t my mum really. Like she has never been, some people say oh I always remember my mum when she was younger, she used to have this beauty regime, she’d use this type of soap or I think a lot of advertising or some advertising has played on that, the kind of like Nivea, passing it down generation to generation but I never learned it from home. In fact it was something that was actively discouraged in the home environment.

Natasha was evidently aware of certain social norms of how women learn or are initiated into body modification. Mothers are expected both to engage in body modification and to pass this on. She illustrates how this discourse is utilised and reinforced by certain cosmetic advertising campaigns. There is an expectation that daughters will follow their mother’s footsteps in regard to their body modification choices and that adult women will be experienced and skilled in these practices. As Natasha makes clear however this was not the case for her. Her mother did not engage in much body modification, nor did she encourage her daughter to do so. Instead she actively discouraged her from such behaviour. Equally she was unable to offer her daughter advice on the topic for she knew very little about it. Her mother’s lack of engagement with body modification however did not dissuade Natasha from engaging in it herself. Her narrative demonstrates how peer behavioural norms and pressure dominated her decisions regarding body modification at the time, overriding maternal opinion and example. Her mother’s lack of knowledge and disapproval did make the acquisition of the required products of body modification more difficult.
Differentiating the influence of this type of mother from those who discouraged body modification but engaged in it and were knowledgeable about it, the lack of knowledge Natasha perceived her mother to have removed for her the value of her mother’s opinion on the subject and her example.

This gap in knowledge was further emphasised by greater differences of age than usual between mother and daughters, and by differences in race. Kerry raised this issue repeatedly, regarding her mother’s ‘old’ age as contributing to her feeling that she had no maternal support in relation to body modification at this early life-cycle stage. Situating her mother as older than other mothers, when explaining where she learnt her body modification practices from, Kerry said:

Erm not really from my mum cos she doesn’t really do anything . . . I know quite a lot of women get it from their mum telling them stuff, but I didn’t really have that cos like Dianne just doesn’t know anything and my gran just didn’t do anything, erm and I think that meant that I had to go through a lot more trial and error . . . I think cos I had, like, my grandma and then who was like in her eighties, and Dianne who has always been quite old, I had no one to tell me what you are supposed to wear who was at an age that understood what was fashionable and stuff.

Her mother’s and grandmother’s lack of knowledge was constructed as a disadvantage. It is clear that Kerry expected and wanted advice from her older female relatives. Her reference to trial and error is used to demonstrate the impact of the lack of guidance she received. Kerry attributed her body modification mistakes, which she believed those who received guidance from their mother made less of, to the absence of guidance given to herself. Kerry also raised the issue of racial difference in her experience of early body modification:

Well Dianne was really really, and my Grandma, were really really useless with my hair cos it is like big and curly and a bit afro. And when I was little, they cut it really really short to here (point to chin), so it was like a triangle, like ear length, so I always just hated my hair and it was always different to everyone else’s and like they would brush it, so you
know if you brush curly hair it is just like a big frizz ball, they used to send me to school with my hair like that. I think they just didn’t know what to do with it because they don’t come from a like an afro background.

Her reference to an afro background highlights how specific physicalities and practice require a particular set of knowledge and skills. Bodily practices are not universal. Not only are they socially specific but they are also specific to bodily materiality and appearance preference. Kerry’s narrative indicates her mother’s lack of knowledge about her daughter’s bodily materiality. Her hair which was ‘a bit afro’ is situated as non-normative. As afro hair is not the dominant body type in British popular culture, or in her or her mother’s social context, Kerry’s mother was unaware of the specific practices required to ‘manage’ it. The situating of Kerry’s hair as different reflects the dominant body type of Kerry’s school social context and also of popular culture. Her mother’s unfamiliarity with afro hair further emphasised the difference Kerry associated with it. Kerry was expected to reproduce what was dominant even if this was physically difficult for her.

Undoubtedly mothers impacted on their daughters’ early experience of body modification. This influence varied according to which type of mother they were. Maternal influence was exercised through the messages and advice they vocalised, the money or material access they provided for certain practices and through the example they themselves set. Mothers influenced participants’ ideologies and approaches to body modification from the beginning and throughout their lives. This influence was not isolated; it co-existed with that of school peers and popular culture, which often presented opposing messages. Mothers’ discouragement from unquestioned and normative body modification practices such as makeup and hair removal often went unheeded by my participants at this young age. The immediate peer pressure of the school context had a more powerful influence in this initial engagement. This was not however the end of maternal influence. It proved to be a continuous presence, something which I shall expand upon in my subsequent chapters.
Change

So far in this chapter I have focused on the impact of peer and maternal influence on women’s initial engagement with body modification. Within the time frame of this chapter’s focus however, my participants’ body modification developed well beyond initiation, and change in regimes frequently occurred. The topic of change was inseparable from distinctions made between the past and the present self. Self was a project undergoing continuous revisions. It was in the discussion of change that the importance of social context was particularly pronounced.

In exploring change during this life stage in my participants’ narratives I shall begin by considering what change actually occurred and the trends that were apparent. Change accompanied movement in social context. I found that my participants’ initial engagement with body modification was described as primarily motivated by an aim to ensure that they fitted in with their peers and were perceived as ‘normal’. The importance of social and group acceptance during this life stage has been explored extensively in child development studies (Evans, Oats, Schwab 1992; Pellegrini 1999; Ryan 2001; Cotterell 2007; Sherriff 2007; Veenstra, Lindenberg, Munniksma, et al 2010). The desire for sameness in appearance and practices changed only with participants’ advancing years and context. As my participants moved out of their earlier school environment and into the sixth form, the initial disposition to be ‘the same’ was replaced by a preference for socially acceptable uniqueness, being the same but different. My participants still very much wanted to fit in, to be perceived as socially acceptable and part of the ‘gang’, but in addition they also wanted to be seen as ‘unique’. This trope was reiterated by almost all. The practices participants engaged in once at sixth form were still very much used to make their appearance and behaviour appropriate for the context. It was just that now the social context required them to display individuality of some sort. This idea of being an individual was strongly linked to an idea of maturity, of no longer needing to follow the crowd, even though in wanting to be perceived as different they were indeed following a peer convention. In this social context ‘difference’ (though in an acceptable form) was valued more highly than sameness and so this is what was aimed at by most. My participants’ relation to body modification and their practices
altered, as Ellie illustrates: ‘I guess it changed from like not wanting to be left out to then, like having a bit of fun and erm now I have gone a bit more toned down cos I’m a bit more boring’. Body modification was not a static regime or experience. To embody a more mature identity and detach themselves from their school identity participants aimed to be viewed as an individual. This represented an assumed increased independence from peer pressure and the desire to be the same which was now looked down upon. This ‘individuality’ was in reality severely limited as the desire for it was the shared disposition, its uptake was to fit and gain peer approval and the possibilities of appearance were still required to be perceived as acceptable.

Paramount to the idea of a historicised self and a developing regime of body modification was the participants’ gradual acquisition of knowledge and skills about these practices. Participants emphasised that body modification skills were not innate but gradually learnt. This contrasts somewhat with popular understandings of body modification as a ‘natural’ part of female identity, not a learnt practice. My interviewees positioned their younger selves as unskilled and still in the process of learning, illuminated by stories of past mistakes. A practice which illustrated this well was the use of makeup. While a constant in participants’ body modification regimes following their first engagement with it, it was a practice that saw much change as my participants’ life developed. This change included style, products, frequency and aim. In this my participants made evident the contrast between their initial engagement with this practice and their subsequent, as well as the changes in their situation. A clear distancing of their contemporary persona from their younger selves was apparent as change was highlighted. This is illustrated in Ellie’s description of her younger self:

I remember experimenting with it and looking quite hideous. Sometimes I used to go like blue eye shadow and er you know really pink lip gloss and also cos my mum didn’t wear much makeup I never knew how to do it properly.

Ellie’s use of the past tense ensures that the mistakes she discusses are distanced from her contemporary practices. Taste is what she primarily situates as at fault in this narrative. Cait echoed this when she said: ‘What you used to think looked good
is actually horrific’. Competence in carrying out body modification practices and ‘good’ taste were an asset and developing these a signifier of maturity in becoming a woman. A narrative of progress frequently featured, which demonstrated the participants’ developing skill and seemingly improving tastes.

Changing taste was a prominent feature in my data. The younger self was always positioned as having poor and inappropriate taste as the previous two examples illustrated. Rather than following this suggested linear progression however, change was usually described in the form of an alteration of peer group. Each social context had a specific image and conception of acceptable forms of body modification. As the participants’ context altered so did what was perceived as desirable and appropriate. This is clearly demonstrated in Betty’s description of her changing feelings towards her tattoo which she attributed to her changing context:

I have also got a tattoo which I hate. Well I don’t hate it, I can’t see it, it’s on my lower back. But the whole thing of like having a tramp stamp like really makes me think, I shouldn’t, I don’t like disclose it, I wouldn’t like openly disclose it . . .

As the practices my participants already undertook became less socially reinforced, their desire to engage in them lessened. Betty, whose body modification was permanent, experienced anxieties because she was unable to erase the signs of a prior practice that she now saw as undesirable. She did not ‘disclose’ her tattoo, because she was embarrassed by it and wanted to hide it. The connotations of ‘cool’ and sexy that she associated with this style of tattoo when at school had now been replaced by a fear of stigma as Betty moved out of a context in which it had been positively received into one in which this same practice was interpreted negatively to the point of an association with ‘stigma’. This returns us to Goffman’s (1963) concept of stigma and of an appraising system and an appraised subject. The negative social reactions to the tattoo outside of the original context in which she had had it done greatly influenced Betty’s own feelings towards it. Her objectified body impacted on her lived body experience (Lindemann 1997). As she herself stated, her feelings towards her tattoo had essentially reversed.
Body modification practices and the appearance they produce are not statically interpreted and received but subject to the changing tastes and opinions of those who view them. The overriding majority of body modification undertaken by my participants at school age was non-permanent and not invasive. Most could be erased with ease on a daily basis. Participants on the whole could as a result easily alter their practices. As Betty’s tattoo example makes evident it was engagement in permanent practices at this life stage which caused most problems later in life because they could not be altered.

A knowledge at this stage of the likelihood of change was apparent in participants’ narratives through their own reluctance and cautiousness around permanent practices and often parental discouragement and advice of caution around them. Louise described this regarding her decisions around piercing and tattoos:

Yeah, I have always wanted my nose done. I went through a phase of wanting my belly button done when I was about thirteen, but that was probably again cos kids at school had it done. So my mum turned round and said, when you are sixteen you can choose for yourself, but right now you are not. I am really chuffed that she said that cos when I got to sixteen I was passed wanting it and I could have had a big hole in my tummy. My nose I just, I have always kind of wanted it done and I left it, erm, I was about eighteen when I first started wanting it done and I left it right up until I came to uni to make sure and my mum is very much a believer of leave it two or three years and if you still want it done, have it done, if not then don’t. That is why I don’t have any tattoos or anything.

Louise and her mother approached permanent practices with caution. They were thought to require more consideration than non-permanent forms of body modification. Being of an age perceived as capable of making an informed decision and giving oneself time to ponder were both regarded as necessary. Change in taste was clearly expected.

Not all practices however were articulated as being so changeable despite changes in context. Body hair removal, unlike other practices, stayed as a constant throughout
the women’s lives. Many stated that once they had begun this practice they consistently continued with it. The changes that did occur concerned the method used, such as waxing and shaving, and these were usually based on income. Change in aim, desired appearance and motivation for the practice did not usually alter. The only substantial development in body hair removal during this life stage after initial uptake was the beginning of pubic hair removal. This usually began at a later date than other body hair removal and was very much related to sexual activity. Pubic hair removal was usually situated as a separate practice from the hair removal of other body parts by my participants. It very rarely featured as part of their daily or regular body hair removal regime, instead being engaged in as a separate practice at difference times and frequencies. Pubic hair removal was a practice nonetheless frequently discussed among peers at school. This dialogue made my participants aware of the practice, situating it as normal and through this encouraged engagement with it. Susanna pointed out the prominence of the practice in peer discussions:

Especially for young girls I think that what your pubic hair looks like is quite important erm and like girls will go into great detail about what it should look like, I think that is a big one for a lot of girls.

Much of the discourse encountered among peers and within popular culture on the topic presented this practice as part of an active heteronormative female sexuality. Most of my participants began it when they became or intended to become sexually active. This was usually based on the belief that hairlessness or neat pubic hair was the appearance men would prefer and expect. Some partners of participants had directly instructed them to remove their pubic hair at this time, reinforcing the women’s assumptions of male expectations. Carla for example described her first boyfriend’s opinion and instructions on pubic hair removal as the reason she first practiced it:

[I] didn’t really think anything of it until I had my first boyfriend erm and it was him, rather unhealthily, he was a lot older than me, and it was him who rather unhealthily, I think, suggested that I erm shave my pubic area. That was the first time that I had even considered doing that, and err
did, I shaved all my pubic hair off to quite hilarious effect. I just thought I looked ridiculous.

Carla’s motivation for this practice was to be visually pleasing to her partner, who clearly felt he had the right to dictate his own preferences to her. The importance of pleasing the male gaze was frequent, and substantial in explanations given for taking up this practice.

Some, usually those who identified as feminist, distanced their contemporary selves from their younger behaviour in regards to hair removal. A common narrative trope of progression to a new, less rigid attitude towards this practice emerged. Participants presented their contemporary selves as no longer thinking that it was necessary or as recognising the social pressure which influenced their decision to engage in it. This change in practice and attitude was evident in Carla’s narrative. As her previous quote makes clear Carla’s past pubic hair removal had been at the request of her boyfriend. In her contemporary narrative she used the word ‘unhealthy’ to describe his influence. Her ex-partner’s influence was constructed as negative and inappropriate. Carla’s description of her current pubic hair removal contrasted with this:

But now I am, it depends how I feel about it, and if I am busy as well I can just leave it and not think about it. And I quite like, I quite like changing things, I am not really bothered which way I go.

External influence was no longer mentioned as a direct regulatory impact on her decisions. Instead personal preference was highlighted for the first time as a motive for change. She presented her new approach as less rigid, though she still engaged in pubic hair removal. The change Carla narrated was more about the motivation and influence that impacted on her practice than the actual practice itself. Being influenced strongly by others and engaging in body modification to please others was now viewed as negative and as associated with a younger self who did not know better. This is not to say that Carla’s present-day practices were not influenced by her context but it did not make the same appearance in her narrative.
Pubic hair removal was viewed differently from other kinds of body hair removal. The change that is evident in the above quote was not present in narratives on general body hair removal. Hair removal, almost without exception, was described as so normative that it was almost always done without question and when not, the hairy female body was hidden. As Toerien and Wilkinson argue: ‘the hairlessness norm is [a] taken-for-granted social practice. Strongly normative, and unquestioned across a range of contexts, women’s hair removal symbolically demarcates the feminine from the masculine, reflecting and constructing a “tamed” notion of femininity’ (2003: 342). As shown above, this lack of change around hair removal is in stark contrast with other practices of body modification engaged with at this school age.

**Conclusion**

In this chapter I have focused on women’s first and early engagement with body modification. This analysis has revealed four main and original points: the importance of context and sociality in determining individuals’ engagement with body modification, the main sources of influence at this life stage, the role of the objectified body for the impact of the social, and the meanings of body modification in this context.

The dominant motivation of my participants to begin body modification was peer behaviour and gendered norms. The actions of peers were assimilated to in order to ensure participants fitted in within the school context and avoided negative social ramifications and ostracisation. Direct intervention and comments were frequently made regarding participants’ appearance and practices which regulated what they did. Presiding over this desire to fit in and avoidance of a negative social reception was the meaning attributed to body modification and its importance for gender normativity. Participants’ narratives illustrated that their interpretation of body modification practices at this stage in their life was a sign of womanhood and the means of transition from girl to woman. The forms of body modification begun at this stage were, unsurprisingly given this, highly gendered and normative. Participants’ narratives showed that in this period they believed that in order to be a woman they needed to engage in these very specific forms of body modification.
Body modification was inseparable from the identity of acceptable adult femininity. The main influences which formed this opinion and regulated my participants’ practices during their school years were those of peers and mothers. Each worked in slightly different ways but both had a regulatory effect and the possibility to incite action or inaction. School peer influence was contextually based and as it changed, so did participants’ practices. Bourdieu’s (1984 [2010]) notion of habitus was utilised here to demonstrate how concepts of normativity become known and internalised by a given social group as part of its identity. Maternal influence was also a constant in my participants’ lives, beginning before they started to carry out practices themselves. These two main factors worked concurrently though not always in harmony in a culture which on top of these pressures reinforced to participants the need to engage in body modification and its importance to their identity through popular cultural representations and advertisements.

The importance of the objectified body on body modification practices and identity was striking throughout this chapter. I utilised Lindemann’s (1997) three-fold bodily distinction, expanding it to a four-fold one with the inclusion of the ideal body to demonstrate this while avoiding the problematic conception of mind/body duality. In illustrating that gender is fundamentally a social form experienced as embodied, Lindemann offered a three-fold differentiation of the body based on its phenomenology: the objectified body, the experiencing body and the experienced body. I added the ideal body to this, the unattainable beauty ideal to which all other bodies are compared.

Comparison was the critical aspect of the experience of the objectified body which triggered feelings of lack in one’s own body and initiation into body modification. The embodied experience of objectification was explored through Budgeon’s (2003) conceptualisation of identity as an embodied event. This made visible how for instance engagement in body modification was experienced as a transition from girl to woman by my participants. Body modification was not just something done to the body but something which a living body engaged in as an embodied practice. Identity was intrinsically linked to appearance and to the practices and consumption employed to achieve it. At a young age where identity and acceptance was sought, body modification practices were a way of composing an identity and embodying it.
The attachment of identity to appearance and body modification was illustrated when discussing stigma via Goffman (1963). How practices and appearance were read was socially defined and those deemed negative and unacceptable were damaging to the perception of an individual’s identity. The fact that a lack of, or unacceptable body modification or appearance, was associated with stigma highlights the impact of others’ views on lived experience. While body modification is situated as a practice of self, it is very evident that these practices were not undertaken in an isolated manner, but as a reaction to those who surrounded my participants and the normative ideals they projected. Sociality was the key to participants’ motivations.

These findings contrast with third-wave feminist perceptions of body modification. Writers such as Crane (1999), Davis (1991 and 1999), Skeggs (1993), and Stoller (1999) discuss the notion of ‘choice’ in regard to women engaging with body modification and of women ‘doing it for themselves’. Body modification here is understood as an act of individual agency. Younger women in particular are often presented as being particularly able to deconstruct and be uninfluenced by social pressures of acceptable femininity. Duits and van Zoonen (2006) in ‘Head Scarves and Porno-Chic’ for example argue that the young women and girls in their study made active and free choices to engage in body modification and present their physical appearance. Gill’s (2007) response to this article suggests that this idea of free choice is unreflective of most women’s lived experience: ‘Girls and young women make choices, as Duits and van Zoonen point out, but they do not do so in conditions of their own making (to paraphrase Marx and Engels)’ (72). For third-wave feminism body modification was an act of self-enhancement. The reality for my participants contrasted with this logic. These practices were for covering flaws, the act of hiding was used as enhancement. The uniformity of women’s first engagement with body modification and its development reinforces the idea that endless possibility does not in reality exist for most women. The power and importance of normativity here is crucial, as is the school setting which provided the environment for certain ideas about femininity to be disseminated and enforced upon girls.

This life-cycle stage illustrates why body modification is first begun and highlights the gender normativity so crucial in social understandings of these practices. In their
differentiation of their present self from their younger selves participants created a historicised self defined by its specific social contexts. The specificity of the school environment and its impact upon body modification indicates the importance of investigating life-cycle in connection with the development of these practices. The next chapter will move chronologically along my participants’ life-cycle to consider how body modification was experienced in young adulthood and during the university years.
4. Adapting to New Environments: University and Young Adulthood

Moving on from first and early engagement in body modification, this chapter follows the life cycle development of my participants and focuses on their university experience and young adulthood. As a consequence of becoming teenagers and young adults, the circumstances and context of my participants’ lives changed. This development meant in many cases an exposure to a new and greater range of social settings and variety of experiences and with these, new and varied peers, norms and expectations. The change of context which occurred at this life stage was instrumental in the development of my participants’ practices and appearance aspirations at this time.

In contrast to their previous engagement in body modification, by the time my participants went to university they were already aware of and proficient in some of these practices. The practices they mentioned were similar to the school years but changes were apparent. The practices and themes which dominated discussion, particularly without prompt, had altered and certain practices began to be seen by many as inappropriate, particularly piercings and tattoos, while others gained new importance. These practices are detailed in Table 6 below in alphabetical order. As the focus of my research is on why women engage in body modification participants were not asked specifically to document all the practices they engaged in at this time. Table 6 represents instead the practices raised in my participants’ discussion of this life stage and their development.
Table 6. Practices Engaged in During the University Years by Participants

<table>
<thead>
<tr>
<th>Practices in alphabetical order</th>
<th>Number of participants who engaged in practice</th>
<th>Number of participants who mentioned practice without prompt</th>
<th>Number of participants who mentioned practice following prompt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control underwear/shapewear</td>
<td>9</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Dieting</td>
<td>24</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>Dress</td>
<td>30</td>
<td>23</td>
<td>7</td>
</tr>
<tr>
<td>Ear piercing</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Exercise</td>
<td>26</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td>Fake tan</td>
<td>15</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>False nails</td>
<td>5</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Hair dying</td>
<td>16</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>Hair removal</td>
<td>30</td>
<td>6</td>
<td>24</td>
</tr>
<tr>
<td>Hair straightening</td>
<td>22</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>Hair styling</td>
<td>25</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>Heels</td>
<td>25</td>
<td>7</td>
<td>28</td>
</tr>
<tr>
<td>Makeup</td>
<td>30</td>
<td>27</td>
<td>3</td>
</tr>
<tr>
<td>Nails (paint/file/decorate)</td>
<td>20</td>
<td>13</td>
<td>7</td>
</tr>
<tr>
<td>Other piercings</td>
<td>4</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Plucking/waxing eyebrows</td>
<td>19</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>Skin regimes (cleanse, tone, moisturise)</td>
<td>22</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>Tattoo</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Teeth whitening</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Tinting eyebrows and lashes</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: Interview Data.

As can be seen, on the whole what participants engaged in had not altered drastically, and while several new practices, such as skin regimes and teeth whitening, were for the first time discussed, the majority of the practices which had been started during the school years or in sixth form, were continued into the university years. The only practices to counter this were piercings. As most participants had already had their ears pierced, very few engaged in this practice at university, and both piercings and tattoos were situated as on the whole for a younger demographic minus a few exceptions, which I shall discuss later. A notable change in my participants’
discussion of this life stage was which practice featured most frequently and prominently in discussion. Dress for example was not discussed during my participants’ elaborations on their school years, but during explanations of this stage dress featured prominently, something which I expand upon in this chapter. On the other hand, practices which had previously been focused on in participants’ recollections such as makeup, while acknowledged to be engaged in, were usually mentioned in passing, such as Andrea’s reply to a discussion of her daily regime, ‘I put my makeup on in the morning’, with less attention being given to individual methods within this broad category. My participants’ practices had changed, but how they discussed their practices and which practices were given most importance had altered more drastically.

The university years and young adulthood were still a period when participants were actively trying to develop a sense of themselves and their identity and a time when their bodies were still developing. Tensions between old and new identities came into being as participants shifted back and forth between old familiar contexts (home) and the new, and between the parental home and independent living. In this new context my participants’ practices changed. Across their narratives, these changes tended to follow similar patterns, with specific explanatory tropes being used throughout. Sociality and the feedback loop were still the dominant determinants of their practices, but the specifics of this feedback, who it came from, and how it was disseminated had changed.

In this chapter I look at the changing attitudes and practices of my participants in relation to body modification. I begin by examining the impact of the university context. I then investigate the tensions between participants’ old and new identities. Moving on I consider the new areas of concern around body modification and body regimes that occurred, including consumption practices. Here I shall specifically look at practices around weight and dress. In discussing the latter I shall consider the role of dress as the most common and emphasised practice in the narratives at this time and its use as a means of taking control of one’s life. I shall finally investigate the change in how participants’ body modification practices were influenced in this context and how this differed from the previous life stage.


Rhetorics of Change

As demonstrated in the previous chapter, the main aim of body modification at school had been to fit in and look the same as one’s peers. My participants had started with little knowledge and expertise, and engaged with body modification because of social norms and gender identity expectations. These expectations and norms were often vocally expressed and those not adhering to them were frequently chastised verbally or faced ostracisation. There was undoubtedly a lack of tolerance for difference in the school context. On the surface this changed in the university context. Initial reactions to and explanations of body modification practices while at university given by the participants told of changes in appearance preference, the influences they felt and how they experienced these. These narratives spoke of a new individualistic approach to body modification. In reality however, the experiences described were not very different from those during their school years in participants’ investment in looking the same as their peers. There was very little in participants’ narratives to suggest that looking differently at this time was appealing.

The initial rhetoric of change brought by university implied less concern about appearance and in turn body modification, with a decrease in labour and in the desire to alter appearance. Nicola typified this in her narrative as she for example contrasted her lack of effort and casual appearance at university with the large amount of effort and care she had invested in body modification practices while at school:

At uni and that kind of thing, just going with what is comfortable, so just jeans and boots and like t-shirts and erm yeah just kind of comfort but also, I guess, like I’ve got skinny jeans on at the moment and they have been quite fashionable and that kind of stuff so that part of it . . . at school it was almost more of a priority to get up earlier in the morning to make sure I could have the full shower and blow dry my hair and all that sort of thing. But when you kind of, circumstances in your life change and you are doing a really intense course then appearance, it, I have a basic routine but it becomes a lot less important. It’s not a priority, so you do just try and do the bare minimum which makes you feel like you
are still presentable and you still feel like clean and everything but I guess it’s like the time I guess you have got to devote to things is, kind of changes your practices.

While Nicole makes clear that she still made herself ‘presentable’, she strongly asserted a decrease in the attention she gave to body modification activities. She describes her university attire as ‘just’ the ‘bare minimum’, implying that she could not do any less without her appearance being unacceptable for the environment. Contrastingly, the practices she engaged in at school were explained as having been her priority at the time. The change in Nicola’s context is articulated as the influence which brought about this alteration in her regime and attitude. The demands of university are viewed as more time-consuming than school, thus leaving less time for body modification which crucially becomes less important than Nicola’s academic activities. The management of time for the first time contributes to body modification decisions. In this case body modification is positioned as being relegated from the priority spot of time allocation. In line with her argument of giving less attention to body modification Nicola continued to state that ‘at uni and things everyone was a lot more accepting of just people being different and not everyone having to look the same’. In raising this issue Nicola implies that the more accepting environment of university allowed for less or non-conforming body modification. The pressure was reduced relative to the school context and so the need to engage in specific practices and look a certain way also decreased. Ultimately, acceptance by others was constructed as enabling this reduced approach to body modification. This explanation was echoed by other participants such as Monica, Peggy and Sally:

Peggy: When I was at uni I didn’t make any effort at all, it was just skinny jeans, hoody, pumps, walk to uni, leave, go back to bed.
Sally: Yeah I think like at university I would just roll out of bed and go to uni, like I wouldn’t really care what, I wouldn’t really care in the day what I look like.

Monica: You go to uni and it is just other students and they are all dressed like scruffs anyway (laughter) so you don’t feel like you have to make the effort for anyone really.
In all of these examples the participants presented their body modification regime as having declined whilst at university. University is spoken of as a more accepting place where people would not comment negatively on appearance or body modification practices. There seems to be less need to engage in body modification because there is less pressure to do so. The similarity of each participant’s description of the appearance deemed as expressive of ‘not caring’ is telling however and suggests that instead of a removal of pressure, what occurred instead was a change of expectations in what was deemed an acceptable appearance. This self-presentation is in itself a form of fitting in. Monica asserted that her peers ‘all dressed’ in this manner. To fit in was to look casual. Assimilation to peers still occurred.

My participants’ rhetoric of caring less about their appearance and body modification at this time, and of university being a more accepting environment thus proved to be problematic, and in more ways than one. The ‘university’ context they initially described was in fact only one specific circumstance in the wider environment of the university and young adulthood. The previous examples refer specifically to attending university lectures and seminars. They do not cover the other contexts in which my participants operated such as going out with friends, dates, clubbing, formal events, paid work or interviews for example, nor their approach to these other varied environments. Within the umbrella context of ‘university’ different peer groups impacted in different ways on participants’ body modification at different times within the multitude of environments they encountered. As they discussed these different environments, participants’ acute awareness of social norms and expectations became very evident. The continuity of the importance of sociality from school to university was obvious. They understood how their appearance would be read in each environment and adapted to that. Appearance was very much positioned as key to one’s identity and how one’s identity would be perceived. In circumstances which participants were unfamiliar with or which were new, the importance of appearance for first impressions was articulated as of increased significance. University, as a new experience and environment for my participants, repeatedly presented these circumstances to them.
New Environments and Changing Identities

It is in the discussion of new environments and first impressions that body modification adaptation and the association of appearance with identity started to become evident. Stephanie’s narrative demonstrates particularly well the importance attributed to appearance for first impressions. She noted:

When it is people you don’t know they, it’s too easy for people to judge you straightaway and I am very conscious of the fact that there is going to be loads of new people that I am going to meet and I don’t want them to be like, erm tubby Stephanie in the corner, sort of thing. So yeah I suppose I am more conscious with new people than with old . . . I think when you first, when I first went to uni for example it was very much, oh I need to look great every day because all these people are going to start forming an opinion of me and I want it to be like this and then after a couple of months you are like, well I am living with these people I can’t keep this up and it becomes more friendly and you will walk around in your pyjamas and not be as bothered.

Appearance is clearly what Stephanie perceived people to judge others on. In this instance Stephanie’s concern about her appearance was based on the fact that she was about to start her year abroad and so again move into an unknown context with peers she had never met. To make a good first impression she felt her appearance had to be appealing, and specifically not ‘tubby’. She associated weight with negative characteristics and clearly thought others would too. Familiarity and closeness were regarded as lessening the need for keeping up a desirable appearance. Another interviewee, Amanda, too thought that first judgements were based on appearance. She talked of changing her appearance for university in order to alter perceptions of her:

I am getting to a stage now where I want to look a bit more like a young lady than erm like a teenager. Having red hair I thought it looked really nice and then it was getting strained and then I thought, oh I am probably
getting a bit old to be dying it red all the time, which obviously not necessarily at all, like you meet people with pink hair who are like forty or whatever . . . I just want now, at this age, I just want to look a bit more approachable, a bit more professional. Yeah, I keep saying to my mum, a young lady, I just want to be a young lady now, I don’t want to be a teenager anymore. Yeah just for that basically, yeah I just want to look a bit more sharp I would say, sharp is probably the word.

Amanda evidently wished to distance her university self from her younger teenage self and it is through appearance and body modification that she attempted this shift. Taking on the identity of a ‘young lady’ and being perceived as one required in Amanda’s eyes that she look like how she believed a lady to appear. Her objectified body had to fit the mould of this specific ideal image.

Attempting to make a good impression was possible because participants had a sense of how appearance was categorised and the expectations of those they encountered. They had internalised these expectations. As a result they sought to tailor their appearance to their audience so to speak. An awareness of peer expectation was demonstrated by the difference in participants’ body modification depending upon the specifics of their university setting. Though most spoke of that setting in generic terms, the specific characteristics of each university environment did impact upon my participants’ body modification regimes.

Different universities cater to different audiences. Each university is made up of a somewhat different constituency and so the ‘norm’ peer image of each is specific to it and its context. The kind of people for example who attend Goldsmiths are likely to be different from those at Durham University. While all wished to assimilate to peer norms, what those norms were depended on the individual peer group. Phoebe made this particularly evident in her description of the impact the culture of her university had upon her own body modification and that of her friends and peers more widely:

I went to Loughborough University which is a notoriously sporty university. You cannot be on campus without seeing people running with
massive rucksacks of weight, it is crazy erm, everybody is super fit and everybody did something, so there was a massive pressure to erm to get involved . . . it was quite interesting how you didn’t feel that you couldn’t do something, I think for me I have been always well not sporty but I kept fit, but some of my friends that weren’t necessarily like that became more like that. So they joined the gym while they were there because everybody goes to the gym so it becomes a social thing as well . . . I think university when you leave, well for me anyway and conversations I have had with friends, that you don’t really know who you are when you leave for university and I think when you get there, you can feel quite vulnerable and you want people, not that you want people to like you but you want to fit in, you want to make friends, you are going to be there for the next four years so you can’t be on your own all the time so I think there is a pressure to erm to let it influence you.

Here the assumed university norm was presented as influencing individual practices. Phoebe viewed the uncertainty and vulnerability of individuals starting university as increasing the need to adapt to peer preferences. Emulating practices and appearance was a sign of belonging to that establishment. Exercising for her was not just about appearance but a way of demonstrating to peers that one had taken on the ethos of the university. As when at school, wanting to fit in and being accepted was still vitally important. The dominant response of individuals seemed to be to adapt to the norms of their new environment when establishing their place within it. In Phoebe’s case the normative practice of exercise was so dominant and the pressure to engage in this so strong that to not engage was not an option. There was no sense of free choice in this.

As I have begun to demonstrate, the specifics of each environment and its norms were extremely important in influencing body modification decisions. For my participants university was the place where they were exposed to and engaged in a variety of often unfamiliar environments simultaneously, that required the adaptation of one’s appearance. The reasoning for how and why practices were altered was strikingly similar across the board. All of my interviewees described being very aware of what was deemed to be acceptable and what appearance was expected.
They knew each environment’s ideal and ensured they fitted in through the
objectification of their own bodies and their peers by comparing each to the other
and in turn to their ideal. Participants understood the cultural link between the
objectified body and identity and so visually presented an identity they wished to be
perceived as having. For this to work it was clear that each appearance had a
stereotypical identity attached to it. To be perceived as having a particular identity
and to fully embody it required the adoption of its image norms. The objectified body
thus impacted upon the experience of the living body. When asked about her
practices at university Leah for example said:

Erm, it very much depends on the situation, if it is an everyday thing, erm
it’s doing it like a routine, sometimes if I have got something on during
the day that is going to make me nervous, say I have got an interview or
erm like a supervision that is going to be particularly scary I would
probably take a little bit more care with it, just to make myself feel a little
bit more, not so much confidence just more, a bit more ready as it were.
So yeah if I was doing that, I would definitely take more care, I’d take
care in what I was dressing in. So if I was going for an interview at a
particularly company who was, had a lively outlook, I would wear
something quite bright or whatever. Erm if I was going out to a club or
out on a date obviously it is just to try and look attractive, also the
confidence thing like I think . . . So it is just about, erm I don’t know, it is
a little bit self-protective as well. So it is about confidence and being self-
protective in that respect erm yeah . . . that has a massive effect on what I
do. If I was going out out, or for a posh dinner erm or clubbing I would
wear like twice as much makeup and spend twice as long getting ready
probably, erm than I would on a normal day . . . one of the trickiest
things is trying to do things, cos I am quite a keen sailor so things like
sailing or things like going climbing well not climbing but fell walking, I
used to do that quite a lot as well. It’s quite tricky cos it’s not practical
always to look to have perfect makeup, perfect hair, to be dressed like
erm an attractive way, certainly there would be no high heels. And that is
quite tricky balance cos actually sometimes you are with people you do
want to look good in front of, erm so I find that quite odd trying to
balance practicality with looking nice, in inverted commas, that is quite an issue sometimes.

Each situation here very clearly had a particular image. For Leah, fitting in was both a confidence booster and a form of protection. In trying to assure that her presentation and attire were appropriate Leah sought to lessen her chance of being perceived negatively by others and her identity being perceived differently from how she desired. She acknowledged that the balance of specific appearance and her personal preferences or desired impact was tricky to achieve. It required knowledge and skill, which while attained by her and other interviewees by this stage, was not infallible. It was a labour-intensive approach to body modification. The inescapable pressure faced by women to engage in body modification and the presence of continuous internalised feedback that informed decisions was demonstrated by the constant adjustment to appearance that seemed to be necessary. This was also evident in Stephanie’s narrative:

Setting does make a big difference. Going out to a pub as opposed to going out to a club as well makes a difference. It is like the different environments you are in make a difference in how much you do or how little you do and how much you want to do. And like you would feel out of place if you got dressed up to the nines to go to a pub, whereas if you got dressed up to the nines to go to a club it would be fine. Whereas if you were wearing what you would at home to go to a club you would be like the weirdest person, that sort of thing, yeah, so it does make a big difference . . . it’s like having dress codes to go to restaurants or dress codes to go to clubs sort of thing, there is that notion of what is or isn’t right and it. I think it is more something that you pick up as you are going out, as you are doing something, as you are with other people. Erm and like you will hear people say to people before a night out, do I look alright, do I look ok or should I change sort of thing and it is that idea that as a community you make a decision if something is or isn’t ok and then that is how you have got to do it from then on. And that’s how it stays sort of thing, so there is that other people making what is alright or what isn’t alright.
Stephanie suggested that an inappropriate appearance would impact on her in a negative manner. She had internalised the rules. Her own feeling of discomfort concerned her, not external intervention or commentary, but it was communal approval that she wanted. Stephanie talked of hearing others approve or praise one’s appearance as reassuring. She regarded the guidelines and expectations as communally set. These ‘rules’ are not spoken but taken up, as Stephanie noted, through interaction with others in a given setting. One is expected to know the rules but never taught them. External expectations determine practices in each circumstance but at university the pressure is delivered very differently. On one level people had internalised expectations, they knew what was required. On another level, while the pressure was mostly silent, people did discuss these expectations as Stephanie described in her narrative. As can be seen in this example, people actively sought advice by asking for verification of their appearance, checking it met the required demands. These individuals pro-actively sought approval and invited commentary. In contrast to the school environment where commentary was offered unbidden and often used to chastise, here it was not forced upon individuals and was supportive. In this environment a sense of ‘we’re all in it together’ was apparent. At school level body modification practices and judgements were intertwined with what practices individuals were learning and their ability to carry these out. At university the narratives became less about learning practices, participants were no longer specifically acquiring new skills in this domain. In the university setting these narratives show that what was being judged was not skill, but character.

Some participants were specific in asserting their friends and peers as responsible for their body modification decisions and changes. Susanna for example, like Stephanie, gave acceptance and approval as motives for altering her appearance for different environments, but specifically stated that she did so according to the friendship group she was interacting with:

I am thinking the most obvious one I have in my head is the way that I dress when I go out with my friends. Erm and like which group of friends I am going out with. If I am going out with the girls I know I will dress a certain way because everyone else is dressed in a certain way so you dress to fit in and I guess when I go out that affects my confidence. If I
go out and I am dressed up then I will be confident and flirty and whatever, and, I don’t know, if I am going out with the boys and it is a dress-down night, then it does affect the mood you are in and it affects your confidence and the way that you act, it affects everything basically.

What is most notable is that the change in Susanna’s appearance, the manner in which she presented herself, affected both her behaviour and her embodied experience. The objectified body impacted on the living body. Susanna knew how she should dress in a given setting and through this she aimed to appear like those around her, to fit in. Peer acceptance was still paramount at the university stage in my participants’ lives despite the initial trope of a more accepting environment and a suggestion of a less influenced self. The difference here was that the pressure had become more internalised, external commentary and corrections were no longer as direct, but my participants still felt the need to conform to certain social norms.

This internalisation can best be explained through Goffman’s ideas in The Presentation of Self in Everyday Life (1959 [1990]). Goffman used the dramaturgic metaphor of stage and performers to highlight the impact of the social upon individual self-presentation and understandings of social expectations. His work is an analysis of the structures of social encounters from the perspective of dramatic performance. The success of Goffman’s theorisation of this subject lies, as Lawler (2008) says, in his emphasis on ‘freedom, agency and the “micro” world of interaction’ while also acknowledging ‘individual actions and responses as part of a wider social order that permits some actions and disallows others’ (Lawler 2008: 104). Through his theatre metaphor Goffman uses the concept of regions, arguing that in the social world there is both a front stage and a back stage region and that individuals present themselves according to their location in these. In the front stage region individuals are said to be aware of their audience and so perform to them. Goffman highlights that the original meaning of the word ‘person’ was derived from persona – the masks worn by characters in Greek tragedies. He uses this to argue that to be a person is to wear a mask, to play a role. Goffman quotes the work of Robert Ezra Park to articulate this idea:
It is probably no mere historical accident that the word for person, in its first meaning, is a mask. It is rather a recognition of that fact that everyone is always and everywhere, more or less consciously, playing a role… It is in these roles that we know each other; it is in these roles that we know ourselves (Goffman 1959 [1990]: 30).

Goffman here argues that the roles people play are what make them a person. There is no self behind the mask, but instead the masks worn build the person we are. Lemert and Branaman (1997) and Lawler (2008) express this in different ways, asserting the idea of a copied imagined original:

copying an imagined original; knowing, more or less consciously, the repertoire of behaviours associated with our roles, we do these behaviours over and over again: they become second nature. We are constantly playing various parts, but what these parts add up to is ourselves (Lawler 2008: 106).

Appearance is important for Goffman because it makes up half of what he terms the personal front, the self which is presented to the social world consciously, a visual signal to others. The other half of this front consists of manner. Goffman argues that in social interaction “‘Appearance’ may be taken to refer to those stimuli which function at the time to tell us of the performer’s social statuses’ (Goffman 1959 [1990]: 34). Goffman here suggests that what is read by others from appearance is a person’s social status; this includes class, race, gender, occupation, personality. Not only this but he also states that appearance is expected to match context, to match the situation an individual is in. Expanding upon this Goffman highlights that roles have existing and established norms: ‘A given social front tends to become institutionalised in terms of the abstract stereotyped expectations to which it gives rise’ (Goffman 1959 [1990]: 37).

Individuals know the associated norms with roles and when they take on a role they tend to adhere to it, both to feel they fully embody it and as a signal to others that they identify with it. The context-specific nature of self-presentation is further emphasised in Goffman’s discussion on audience segregation and distance. Goffman
writes that: ‘By audience segregation the individual ensures that those before whom he plays one of his parts will not be the same individuals before whom he plays a different part in another setting’ (Goffman 1959 [1990]: 57).

To sustain the image one portrays in each context these different identities need to avoid conflation of audience. This is effectively impression management. Conflation results in the discrediting or weakening of claims to an identity. Segregation works to prevent this. Ultimately ‘in their capacity as performers, individuals will be concerned with maintaining the impression that they are living up to the many standards by which their products are judged’ (Goffman 1959 [1990]: 243). My participants knew the expectations they were objects of and thus altered for each context to fit the role they took within it. The internalisation of these ideals meant that all had ‘a capacity for deeply felt shame, leading (them) to minimise the chances [they] take of exposure’ (Goffman 1959 [1990]: 244). To have an inappropriate appearance was to expose oneself as ignorant of social etiquette, and made it difficult to fully embody the identity claimed.

The power and importance of my participants’ internalisation of acceptability notions was demonstrated by Joan who, despite her own discomfort with regard to a certain appearance and practices, still chose to engage in them in order to please her peers and meet their expectations:

We had the ball at uni last week and there is all that conversation of, oh what are you wearing and are you going out shopping and all that, and I suppose there is a specific way that you want to look and you do want to out your best, your best-dressed face on I suppose, so that the way that you look generally head to toe. Yeah, and I did feel like that evening I was being judged because, because it is not my usual attire. Yeah, I did go buy a dress cos I don’t own one that I could just wear at the drop of a hat and I did feel sort of under pressure to put across a certain sense of myself that I am not comfortable with to be honest. I don’t go out wearing heels and dressed up and that was quite uncomfortable but I felt I should because it was a special occasion, I mean I don’t know, I guess there are different things to achieve but you know I wouldn’t do that on a
regular basis at all. I felt like I had to make a special occasion, I have not been to a ball at university either as an undergrad or when I was doing an MA, that was the only ball I have ever been to, and I thought you know, I will make a special effort for these guys this time, and it was, it was almost a super-human effort you know, to go to that level of getting ready and wearing something I am not particularly comfortable with, but I felt like I should for those guys.

Joan’s discomfort levels evidently were less important than the idea of fitting in. She was an interviewee who generally engaged in less body modification than most, but also one who particularly felt the need to adapt to her settings. Interestingly, while so far participants suggested that they would be judged less by people they knew and so this would make them less concerned about appearance and less likely to conform to appearance norms, in this instance it was because Joan knew her peers that she decided to ‘make an effort’. Though her peers already knew her, Joan felt it important to meet the social expectations of the situation. The ‘special effort’ required was understood as reflective of the occasion and meeting this as a way of illustrating her appreciation and understanding of the event as special. To dress inappropriately it is implied would suggest she did not value the occasion or her peers whom she was to attend it with. Body modification acted as a sign of respect. Joan conformed to please others.

My participants’ need to adhere to circumstantially specific social conventions, which ultimately meant having an appropriate appearance, was further illustrated by narratives where participants failed to meet the expected criteria and found themselves inappropriately attired. In contrast to the earlier tales of university being an accepting environment, participants expressed a constant fear of getting it wrong, of being perceived as inappropriate, of giving off the wrong impression and the anticipated ramifications of this. For Jenny this was a major concern:

Yeah like I don’t want to be seen like the over-done, orange, going out, I don’t ever want to look OTT. I worry about situations of what to wear cos I never want to be over-dressed and OTT and people be like, oh god like, look at her. But then I hate being under-dressed, like going out to a
cocktail bar and I was in a cardigan and flats and I looked completely out
of place and uncomfortable but had I been in high heels and a little dress
I would have looked just as out of place. So that is my, I constantly worry
about being in the wrong clothes for the wrong place, definitely. In fact
that is my worst feature.

The continual pressure Jenny felt to meet expectations was very apparent. The idea
of failing was evidently something which caused her anxiety. The negative impact of
being perceived as inappropriate can be interpreted through Goffman’s theory of
shame, which was discussed in detail in the previous chapter (Goffman 1963). Social
context defines what is understood as normative and so what is seen as stigmatic.
Jenny’s expectation of a negative reaction to her if her image was incorrect for a
context, and so stigmatic, informed her body modification decisions as she tried to
avoid this. She also described this concern as her ‘worst feature’. Expressing concern
for and admitting to giving large amounts of attention and time to one’s appearance
was regarded as negative and associated with vanity. An oxymoronic situation exists
here in which it was deemed necessary for women to always look appropriate, which
requires time and effort, and yet there was also a cultural perception that a focus on
these tasks was a waste of time and the activity trivial. If women do not present
themselves in an approved manner they are judged negatively and often receive
hostility (Fahs 2011; Walter 2010; Bordo 1993 [2004]). In addition, they may
themselves feel uncomfortable and ashamed. Yet if they give time to body
modification they also feel guilty and shallow for doing so. This contradiction has
been highlighted in much of the research on body modification. Negra (2009) argued
that women are expected to ‘efface the signs of their own labour’ (126) while
Milestone and Meyer (2012) suggest that women who do not manage to do this, and
where the effort or procedure of beautification shows, are criticised. This critique of
visible attention given to body work can be seen in the way in which celebrities in
Hollywood are viewed as giving too much attention to appearance (Tasker 1998).
Though constant self-monitoring by participants was required to ensure they always
looked acceptable it was necessary for this labour to be hidden and their appearance
to be presented as effortless. As Goffman puts it: ‘We tend to conceal from our
audience all evidence of “dirty work”’ (Goffman 1959 [1990]: 53).
The objectified body is equated with one’s identity. Viewing this from the perspective of Goffman’s performativity, the importance of appearance for character assumptions lies in the fact that ‘the impressions that others give tend to be treated as claims and promises they have implicitly made, and claims and promises tend to have a moral character’ (Goffman 1959 [1990]: 242). What Goffman terms dramatic realisation is important here. We present ourselves so as to signal to others our identity and role. This impacts upon the embodied experience because,

to be a given kind of person, then, is not merely to possess the required attributes, but also to sustain the standards of conduct and appearance that one’s social grouping attaches thereto . . . A status, a position is not a material thing to be possessed and then displayed, it is a pattern of appropriate conduct, coherent, established and well articulated (Goffman 1959 [1990]: 81).

Individuals try to approximate the image they want to establish for themselves but there are limits to how much this can be controlled. Identity is subject to external judgement and affirmation. As Ann Branaman in her discussion of Goffman notes:

The sense of self arises as a result of publicly validated performances . . . even though individuals play an active role in fashioning these self-indicating performances, they are generally constrained to present images of themselves that can be socially supported in the context of a given status hierarchy. Thus, the self is a social production in the sense that it depends upon validation awarded and withheld in accordance with the norms of a stratified society (Branaman 1997: xlvi).

Identity is validated by external acknowledgment. An individual has limited control in determining this. Because identity assignment is reliant upon the perception of others, it is unsurprising that my interviewees’ concern for acceptance was focused on others’ perceptions of themselves. Betty reinforced the extent of this concern when she described her experience of being in a situation where she thought her appearance was inappropriate:
I remember once I wore red lipstick to university and I felt like an absolute idiot, and I felt so uncomfortable, sitting in a feminist class with red lipstick on and I remember thinking, oh you are such an idiot for doing this. I was really bored on the train and I found it in my pocket and just put it on, and I remember feeling really uncomfortable and you know what, the only person that made me feel uncomfortable was me. Nothing was said, it was me, cos I felt it was like, oh you are making yourself into a bit of an idiot here but it wasn’t. It wasn’t like that, that was about how I felt it was inappropriate, and I wear lipstick quite a lot anyway.

Though a practice she engaged in frequently in other situations, wearing lipstick in this setting made Betty feel uncomfortable and out of place. She acknowledges that nothing was said and that no one else made her feel uncomfortable or reacted negatively. It was Betty’s internalisation of a sense of appropriateness and preconceptions about the expectations and views of feminist academics on body modification that resulted in this feeling of discomfort. The negative feeling Betty experienced make clear why not conforming to expectations would be avoided by my participants more generally.

In developing their self-presentation to fit in with a variety of new environments participants were formulating multiple new identities. These new identities did not always correlate to or fit smoothly with their older home and school identities. The contrasts and tensions that existed between my participants’ home and university identities were heightened by frequent movement between the two contexts. For Ruth the move to university was the beginning of what she saw as finding her own style and identity. It provided her with the freedom and independent space necessary for her to develop her body image, something which very much contrasted with her home experience around this:

I think I am more, you know, getting your own style and things when you are at uni. I don’t know, it’s like when you are at home, it is just like home and you are used to being at home whereas when you go to uni it is like a whole new thing and sort of like reinventing. I didn’t really, but some of my friends from school really wanted to go to uni and reinvent
themselves, and I was like, I don’t particularly want to reinvent myself, but it is quite nice to be like ok, well, more glamorous, cos you are all independent and everything.

The familiarity of the home environment was related to a stagnating body modification development for Ruth. Her identity was established in that setting and so to change it seemed both unnecessary and likely to be questioned. At university the new environment allowed and motivated change precisely because an individual’s identity at the beginning was unknown and so she could represent herself in the manner she preferred in order to influence how she was perceived. With the existence of an old home identity and a new university identity came a sense of the necessity to keep these separate. This view was articulated in the narratives of many of my participants such as Jenny who explained the impact of moving between her separate friendship groups:

Oh yeah, and I think it is more apparent now I have got my friends at uni and my friends at home. I change, I don’t change, I know how I have to dress a certain way if I was seeing this friend compared to this friend and how I would be in [at uni] and if I was seeing my boyfriend. I think it all has an impact on me, definitely.

Jenny clearly felt compelled to alter her appearance to suit each location, home and university. The two identities were not experienced as mergeable. Instead she moved between the two as separate.

Secrecy once again featured strongly in participants’ experience of body modification. Jenny desired to keep each identity separate and not reveal her differing self-presentations to either party. This was an attempt by her to protect fostered impressions of herself. This separation, Goffman argues, is based upon the fact that:

The past life and current round of activity of a given performer typically contain at least a few facts which, if introduced during the performance, would discredit or at least weaken the claims about self that the
performer [is] attempting to project as part of the definition of the situation (Goffman 1959 [1990]: 204).

The need to keep differing identities separate was echoed in Stephanie’s narrative, who articulated a similar tale of secrecy and identity tension:

When I went to university I realised all I wanted to do really was lose weight and I was going to the gym and everything especially in the last couple of months at uni, cos I didn’t want to come back and my parents be like, oh, you have put on a few pounds now, haven’t you, cos I remember that being the case with my brother and I just didn’t want people to see me like that. and so I was swimming almost every day, going to the gym every day, doing like weird gym videos from YouTube in my room and things like that, so it was, yeah, especially in the last few weeks I was definitely trying to change how I looked, very conscious of how other people would see me if they haven’t seen me for a while sort of thing and my diet was just sort of meagre. I avoided eating big meals at all but that is sort of when you have got no money, what you do, isn’t it, but yeah, I definitely ate a lot less at university than I do at home. Whether that is just university I don’t know.

Stephanie’s body modification was associated with her worrying about the reception she would receive when she returned home from university. Weight was the dominant issue. Having witnessed her brother gain weight in the same situation and being called out on this, she wanted to avoid the same experience and return either at the same weight as her pre-university self or slimmer. Weight here or rather gaining weight was strongly associated with the negative, as something to avoid, as unwanted. Her body and experience of it was policed, notably by her family. It is interesting that weight gain did not appear problematic in the university environment. This could have been because of a lack of vocal commentary compared to the home environment or that Stephanie valued the opinion of her family more than her peers’.

At this life stage some participants had some difficulty in balancing these separate identities and moving between them. As Lawler has asserted, ‘varying and often
contradictory identities must be managed. No one has only one identity in the sense that everyone must, consciously or not, identify with more than one group, one identity’ (Lawler 2008: 3). This move and change was partly dictated by a certain self-appearance, which acted as a barometer of one’s identity. Body modification was the tool for this self-creation. The university environment created for my participants, for the first time, an acknowledged need to shift between varied identities and to do this discreetly, particularly in regard to home versus university. In investigating the identity construction and transition experience of non-traditional students Christie (2009) found a similar pattern, with students revealing different selves to different audiences. Harter, Bresnick, Bouchey, et al (1997) also argues, as I found, that as individuals enter adolescence and move into young adulthood the number of differentiated self-presentsions they require increases with the proliferation of roles and environments they engage in. In their study adolescents described themselves in each context differently and presented themselves differently for each. They argue that socialisation pressures lead to ‘different selves in different contexts’ (837). They also acknowledged that these different selves can be contradictory and the labour to negotiate their presentation is at times difficult. The dilemma and difficulty this posed was articulated particularly well by my interviewee Betty:

That is about me trying to marry all these identities . . . there is definite differences and sometimes I do feel caught. If I saw hypothetically, my boss out, my manager out, my [university] supervisor out and I was out in my dressing, get dressed up, outfit I think I would feel uncomfortable. I know I would feel uncomfortable with that because that presentation is different from the presentation they had seen before and the presentation I would want them to see. So yeah, it’s all a game.

Tensions existed for Betty, as they did for other participants, as she moved between different environments. The difficulty for her and others lay in marrying all these separate self-presentations. Because external approval or validation was a determining aspect of identity attribution, being seen by someone out of the environment in which one would normally encounter them, and so when one had presented oneself differently from the image one desired them to perceive, was problematic, for it revealed the existence of these multiple selves. Different settings made different
demands which could be contradictory. While all versions of the self in reality make up the self, popular perception of a ‘true’ self behind the mask means that information which contradicts the image aimed for is understood as a sign of inauthenticity. So while it is necessary to alter one’s appearance in order to present an appearance that meets the requirement of the role one inhabits in a given situation, the belief in a true inner self means this alteration on the whole needs to be hidden. Goffman’s (1959 [1990]) notion of audience segregation and image management provides the theoretical grounding for this argument.

Communal Living

External influence was not at this stage limited to participants’ adaptations to differing identities between home and university. Communal living with peers rather than family, and doing body modification in the presence of others was an experience normally new to the university context. Living in a communal house at university for example strongly influenced Anna’s practices:

Yeah, cos when I was at uni I lived with five girls so that competitive, looking the best on a night out, plus we were always sharing things together, so yeah, I probably did more things then. Now I live with a boy so I don’t have to make any effort.

Living in a communal and all-female environment had resulted in Anna ‘making more of an effort’. She tried to match what those around her did. The motivation for this was competitiveness, the need to be seen as not just attractive but more attractive than her peers. In this environment these practices were normative and shared. Part of Anna’s interactions with her house mates involved engaging in body modification as a shared activity.

In contrasting this experience with her situation at the time of the interview, when Anna lived with her partner (male), she went on to highlight the significance of the communal living situation at university in encouraging her practices. Living with just one other person, a man, reduced her exposure to these practices and so the
pressure in the intimate space of the home to engage in body modification. Significantly, in cohabiting with her partner Anna had started to relax her body modification regime. The extent of the impact of communal living was further elaborated by Anna when she spoke of the effect of living with a woman who had suffered from anorexia:

It definitely affected the way I ate at uni, living with someone who had been anorexic cos she still ate small meals compared to what I would usually eat. So I definitely ate less, and I looked at myself more in the mirror cos she was quite still quite aware of it and still spoke about it quite a lot . . . yeah cos before I went to uni I don’t think I had really thought about my weight that much compared to when I was there and now I am not that worried, I don’t think about it that much again. Though I do have some scales, but I barely ever stand on them.

Being in close proximity with an individual who was very concerned about body weight and size foregrounded these concerns and practices in Anna’s mind. They became more of a consideration in Anna’s body modification decisions. When not in this situation her concern around weight decreased.

Anna was not alone in taking on the preferences and practices of those she lived with while at university. Jenny’s experience of communal living was similar:

I think at this moment in time this is the most makeup, I have started wearing more makeup now than I ever have done before which is weird cos you get older and you kind of think you would wear less, but like, I have started making more of an effort now, but I think that is because of my house mates, they are all into makeup, so I am. So it is like, making me think like, why aren’t I doing that? . . . if my house mates have got something and they say it is good, that is how I would go and get it, definitely.

Constantly being in the presence of others doing these practices made Jenny, as it did Anna, feel that she should do the same. Close proximity allows for comparisons.
Comparison is the objectification of one’s own and the other’s body. The result of these comparisons demonstrated that fitting in continued to be important. What is specific about the communal living environment is that this is a private and intimate space and one in which individuals are likely to witness others’ practices and be aware of their regimes. Unlike in the outside world, in the home environment the degree of secrecy around these practices dropped.

While the communal living experience often resulted in an increase in participants’ modification practices, it sometimes offered a space where participants felt less pressure than in other situations of peer company. Being constantly in the presence of peers and sharing private spaces meant that secrecy around body modification practices could not be maintained. This made some feel more able and comfortable not to engage in body modification when in the communal living space.

Amanda: Now I have come to university, I think it is because you live with people and you see, like I have lived with last year with, there was six of us, so you can’t, I am not conscious enough to sort of do my makeup and then come downstairs. I think even in first year I was like right these people are going to see me at my worst so I have just like, since then I have dropped a lot.

In the shared home it would have been too difficult for Amanda to keep up the same body modification facade she would normally present to her peers. This context fits the notion of the backstage region of Goffman’s metaphor. As I have already noted, Goffman (1959 [1990]) argues through his dramaturgical metaphor that there are ‘front stage’ and ‘back stage’ regions in life as in theatre. The front stage is where we are aware of our audience and so perform to them. The actor knows she is being observed and so acts accordingly. The backstage region is where performers are present but the audience is not. The actor may slip out of character without disrupting their act. This is not however to be mistaken as the ‘true self” behind the mask.

Self itself does not derive from its possessor but from the whole scene of his action . . . The self, then, as a performed character, is not an organic
thing that has a specific location, whose fundamental fate is to be born, to mature, and to die; it is a dramatic effect arising diffusely from a scene that is presented. And the characteristic issue, the crucial concern, is whether it will be credited or discredited (Goffman 1959 [1990]: 244-245).

The back stage region then is ‘a place relative to a given performance where the impression fostered by the performance is knowingly contradicted as a matter of course’ (Goffman 1959 [1990]: 114). There is no self outside of the social world; the backstage merely offers a different social space where the aspects hidden or accentuated to maintain a desired image can be relaxed. The back stage is for ‘shaping the body’ (Goffman 1959 [1990]: 245) and in sharing a back stage space this shaping is made visible. Body modification practices in the UK are conducted at different levels of public visibility. Certain practices are common to see in public, such as makeup being applied on public transport. Others however are understood as not acceptable for public conduct, such as hair removal. These are the practices that people mostly do alone in the privacy of their bathrooms. This is not to be secretive but because of how we conduct these practices as a culture. The nature of where and how they are conducted removes much body modification from sight. In the communal living situation this invisibility is largely lifted. In a shared bathroom it is likely that the tools of body modification such as razors, hair removal cream and so on will be lying around. Hence both the process and the product of body modification practices are on display.

Within this communal environment collective participation in practices, ‘getting ready together’, was a mainly new experience of the body modification process for my participants and one that differed greatly from their previous lone engagement. As was Sally’s reported experience:

when I was at uni I lived in a house full of girls so you all got ready together and it would be a bit more of an event and we would all start drinking, where at home you tend to get ready by yourself and I think, I think it is more exciting when there is a few of you, like I don’t know if it
makes any difference on what you do, how you do the makeup, it probably takes twice as long cos you are all farting around, aren’t you.

Sally directly contrasts getting ready alone at home with the communal experience at university. Though the practices might not have changed, her experience of them did. She saw the communal experience as more positive, as fun and exciting, as an enjoyable activity in itself. Stephanie also discussed this:

I think it is that sort of that communal atmosphere makes you feel like part of the club again, like this is great, this is so fun, we are all together in this. Whereas when it is done separately it is kind of like, ergh I have really got to do this, I need to do that, otherwise people are going to think why have I not done that, so it is, yeah, so the thing with other people getting ready, clothes and all that sort of stuff makes a big difference . . . Yeah, it is almost like, oh, it is not just me that spent that long doing this, thank goodness for that, it is not just me that spends half an hour straightening my hair, good, I am not the only one. It is that I am not the only one, it is great to see other people’s practices and understand that you are part of something that is not just you, it is that feeling of community.

As she contrasts communal and lone body modification, it is evident that the former is experienced far more positively than the latter. In carrying out these practices in the presence of others who are also engaging in them an acceptance is immediately felt. Practices when carried out alone are presented as a chore. In the communal environment Stephanie was able to see what others did in comparison to her own practices. To view others putting in similar amounts of labour and engaging in similar practices was reassuring. This revelation made her feel part of a community. This form of communal engagement was one of the only times that Stephanie was privy to the practices of other women. Much of her enjoyment of the communal experience derived from the removal of the usual isolation which surrounds these practices.
Relationships

The new living circumstances which accompanied the move to university impacted on body modification in other ways. Living outside of the parental home gave participants new freedoms. This was particularly notable in regard to sexual activity and relationships. The independent living situation of the university experiences generally made it easier for participants to engage in sexual activity, bring sexual partners home and stay with partners. As a result participants’ sexual encounters often increased. This impacted on them in two main ways. For those who were single and/or engaged in one night stands or casual sex the possibility of the exposure of their body to a new partner meant their concern for body modification and their appearance increased when an encounter was being sought. This was particularly noticeable in regard to body hair, and especially pubic hair, which was almost always, as previously mentioned, discussed in relation to sexual activity. Anticipation or the intention of attracting a new partner was also stated by my participants as motivation to increase their practices and engage in them more frequently. Participants spoke of wanting to look attractive and saw body modification as necessary for this. Milestone and Meyer (2012), and Tincknell, Chambers, Van Loon, et al (2003) have all argued that in popular culture and teenage and women’s magazines the message peddled is that the time and effort put into beautification is worth it because of male approval: ‘getting a boyfriend or husband is the ultimate quest in life. Ultimately “looking good” is a case of “looking good for men”, which intricately connects physical appearance to romance’ (Milestone and Meyer 2012: 94).

This contrasted with the behaviour of those settled in relatively stable or long-term relationships. In these cases participants generally spoke of a reduction in their practices, both generally and in the presence of their partner. Hair removal was particularly affected by this. As Susanna said:

I never sort of felt like I needed to impress anyone when I was in a relationship because there was only one person that I needed to impress and I didn’t feel that I needed to do anything to the way that I looked in
order to impress him. Erm since becoming single I think I probably make more of an effort when going out or when meeting people that I don’t know that I like, I suppose before that wasn’t really an issue because well you weren’t flirting with anyone else . . .

Her partner’s approval of her appearance removed Susanna’s concern about it. Knowing that someone was already attracted to her reduced the need she felt to modify her appearance. Once this certainty was removed Susanna once again made more effort with her appearance in order to attract a partner. Female attractiveness is experienced as very much reliant upon appearance. Appearing attractive generally and also specifically to men (all my participants were heterosexual) was a motivating influence in my participants’ decisions on body modification. This meant that not all relationships had a liberating effect on participants’ body modification. If a partner disapproved of a participant’s appearance this could be very influential and restrictive, as in the case of Peggy:

I don’t have my lip piercings now, I took them out a year and a half ago. And that was, I was kind of pressured into doing that a little bit cos erm, I think that I had had them for four years and erm my boyfriend at the time, he really hated them and every day he would cover them up and just be like, you look so much better without them and I think that I just ended up thinking, like he just told me that every day and I just ended up thinking oh he is right, he is definitely right and at that time I think I had taken them both out and then I had got the one like the one I have got inside my ear and I think I got them to replace them cos I thought I don’t want to take them out and have nothing so I got one of those but now they are out completely now. But that was not, like I do kind of regret doing that a little bit, I miss them a bit, but I think it was the right thing to do as you get older, like I think those piercings are a bit related to like little emo kids (laughter) so I am glad I took them out but I didn’t take them out for the right reasons.

Peggy acknowledges that she removed her piercings in response to her partner. University provided more opportunities for partners to spend time together and for
relationships to develop into more serious commitments. As a result the impact of a partner on a woman’s body modification decision often becomes more influential. The desire to gain partner approval overrode Peggy’s own desires and preferences. Looking good for others was the priority in this decision process. All the examples provided in my participants’ narratives surrounding sexual activity highlight the importance of appearing attractive to men, in particular those men the participant themselves found attractive. The power of the male gaze and heteronormativity were very blatant in these narratives.

Classed Appearance

The necessity for one’s appearance to be appropriate for a given context ran consistently throughout the narratives of this life-cycle stage. What was deemed acceptable in any given setting was identifiable without it being vocalised. This need to be appropriate appeared as a constant consideration and became increasingly relevant and difficult during the university period, due to the increase in the number of circumstances participants now encountered. While it was very clear that participants altered their appearance to fit each specific circumstance, what was also apparent and consistent throughout all the narratives was a more general perception of an overall appropriate female image, a guideline which crossed circumstantial borders. Participants were vocal in describing appearances and practices they believed should always be avoided. A middle-class, less-is-more ‘natural’ appearance had become the desired and acceptable female image. In illustrating this, participants described as unacceptable those who contrasted with this ideal, those who appeared fake, where the labour put in was obvious, an image in the UK typically associated with working-class women. This image is often looked down upon and mocked, seen as common or unclassy. Reality television provides a very public demonstration of cultural judgements of class. The image of the Chav acts as a sort of ‘class pantomime’, a ‘grotesque representation of the undeserving poor’ (Tyler and Bennett 2010: 386). One of the identifying features of the celebrity chav figure is their ‘inability to perform femininity correctly’ (381). Appearance is held as a fundamental aspect of this. The ‘working class aesthetic’ which fails to meet correct femininity is venomously mocked and derided in popular culture as a result.
As Tyler and Bennett (2010) argue, ‘while the mockery and derision of many marginal and disadvantaged groups is widely considered to be in bad taste in mainstream public culture, such a caricature remains acceptable in British newspapers’ (382). Skeggs (2001) notes that ‘for working-class women femininity was never a given’ (297), they are the other against which femininity was and often still is defined. She goes on to argue that appearance was and still does act as the means by which women are ‘categorised, known and placed by other’ (297). This otherising of the appearance seen as working-class, acts to distance one from the negative associations of the female working class. As I also found in the language my participants used to discuss this issue, Skeggs (2005) when looking at women in hen-parties noted that a working-class appearance is a body that ‘signals class through moral euphemism, rarely naming it directly, hence relying on the process of interpretation to do the work’ (965).

Monica was a participant who was particularly forthcoming in describing the image she disliked and saw as unacceptable. She also engaged in more body modification than any other of my participants. The uncertain and tenuous nature of acceptability was for this reason exceptionally pronounced in Monica’s discussion of her own practices.

I don’t like spray tan that goes all orange obviously. Although I say I like to look natural, it is pretty obvious that I have a spray tan cos I haven’t been in Barbados for the last three weeks, but I like it to be a nice brownish colour if possible (laughter). And then eye lash extensions, I would go for natural looking ones rather than obviously fake eye lashes. And erm yeah usually, like I have in the past had nail extensions you know like, acrylic nails and gel, but I don’t know, I think that was a phase I went through, and they just ruined my nails so I wouldn’t do it again. So I do think it looks nicer when it is like natural. It is more of a look and like I do wear a lot of makeup but I try to make it look like I am not wearing a lot of makeup. So I won’t use like have like really heavy eye makeup and loads of lipstick at the same time kind of thing.
Avoiding looking like she had engaged in obvious body modification was clearly crucial. Despite all her modification, looking ‘natural’ was the desired aim. Dissimilation was a necessary part of her body modification engagement and self-presentation. Many other participants were also vocal about why they wanted to avoid the ‘fake’ look. Amanda is a good example of this:

It is something I would avoid and just because of the connotations of it. Like if you see a really pale girl with long hair you think, you can see people look smart, you get really smart girls with false nails on but they don’t give off that, you don’t see that straight away, they give off a connotation of being like sort of bitchy or whatever. So I think that is the image that everyone creates for themselves.

A woman’s intelligence was read in terms of her appearance. Stereotyping informed Amanda’s decision to avoid a certain look. The perceptions of a specific appearance acted as a regulatory force. Other aspects of an individual’s identity were also negatively associated with the ‘false’ image, as Phoebe explained:

I don’t want to look plastic . . . and you don’t want to look like you have tried too hard as well, like you want to look naturally pretty, I don’t want to look like yeah this took me six hours or a real made-up. I think if you are doing it erm, I think it attracts the wrong attention sometimes, I don’t want to be known as being super dolled up for a start and if I am trying to attract a boy I don’t want them to think that I am, not easy, but I think that it gives that impression that you’re, I don’t know, I don’t know, without sounding really awful. So I think that if you are wearing a lot of makeup, especially on a night out, I think it says that you are trying to attract attention erm and I prefer to get attention that I would get naturally not because, at the end of the day if it works out you are going to end up seeing them without. So I like somebody to meet me and like me for me, so if I am putting this stuff on I am doing it to make me feel more confident to talk to these people, not because I want them to instantly jump into bed with me. Because I don’t want that.
Phoebe here assumed that if she looked ‘super dolled up’ and so had an unnatural or fake appearance, she would receive unwanted attention from men, by which I take her to mean sexual attention, because they would assume she was ‘easy’ based on her appearance. The internalisation of the stereotyped characteristics of those with this unwanted ‘fake’ appearance meant Phoebe anticipated others’ perceptions of and behaviour towards that appearance which acted to regulate her own practices.

The university context promoted a definite preference for a middle-class ‘natural’ appearance and with it came identification with stereotypical middle-class behavioural traits. Bourdieu’s (1984 [2010]) work on the symbolic dimensions of class and habitus makes clear that class is constructed through ‘taste’, as discussed in the previous chapter. Taste is hierarchical and ‘good taste’ is equated with ‘classiness’ in the British context, that is with the middle class, or rather not the working class. The distaste articulated by participants of appearances associated with working-class women was an example of what Lawler terms ‘the many expressions of disgust at working-class existence within the media and other public forums’ (2008: 127). For Bourdieu taste is a social category, it is not static but the site of political struggle, a dynamic process whereby a class is formed through distinguishing itself from other classes. While as a general rule my participants did not talk about class directly, they did talk about different kinds of ‘look’. In their narratives the discourse of class was replaced with that of the fashion discourse of the ‘look’. Though different in terminology the implication was the same in its labelling of the cultural capital associated with a given appearance, and the socio-cultural positioning of those who display it. The ‘looks’ participants discussed are classed in popular thought. Phoebe presented herself as having a ‘natural’ look, the look of the middle class, by distancing herself from the ‘plastic look’, an appearance regarded as working-class. The preference for a middle-class image resulted in an alteration in the practices engaged in.

**Weight and Identity**

Weight and body shape became more of an issue during this life stage. The neoliberal context of the UK was an influential factor in participants’ appearance
preference here. The new focus upon weight that my participants experienced and the discourse they employed when discussing this reflects contemporary expectations of weight and the negative connotations attached to being overweight. Individuals who are overweight are typically judged to lack self-control, to be greedy and slovenly. Much has been written on the cultural perception of the fat body (Orbach 1986, 1978 [2006]; Sobal and Maurer 1999; Bordo 1993 [2004]). Degher and Hughes (1999) argue that ‘obese individuals possess a “spoiled identity”. They suffer both externally from discrimination based on negative stereotypes, and internally from negative self-concepts’ (12). Cordell and Ronai (1999) have highlighted the negative stereotypes associated with those who are deemed fat. The extensive list they document includes, but is not limited to, ‘lazy, sexless, ugly, self-indulgent and sloppy . . . less competent, less friendly, less popular, less likable, less happy, less self-confident, less feminine, less active, weaker, dirtier, and as having less self-discipline’ (29). In contrast, slimness seemed to indicate self-control and virtue. These character stereotypes are reiterated in popular culture. In their article ‘“It’s disgusting how much salt you eat!” Television discourses of obesity, health and morality’, Inthorn and Boyce (2010) argue that in prime time television, obesity is understood as a ‘matter of self-control’ (89). Overweight participants in popular shows of which fatness and obesity are the topic are depicted as lacking self-control. Articles in the popular press frequently feed into this rhetoric, a good example being ‘Obesity porn: Why is TV so obsessed with trying to make us feel sorry for fatties’ (Connell 2009). These stereotypes also appeared in participants’ narratives, as the following example from Kerry demonstrates:

I think the thinner someone is, the more attractive I think they are . . . If someone is a bit bigger, I immediately think, oh they are about the same size as me, but then someone who is smaller than that, I would be like, oh look how thin they are, and think of it as a positive thing. I don’t know whether I think if you are really slim as well, it shows that you are restrained and in control and like cope with things more, which isn’t true . . . there are a lot of people who are bigger who are really, really healthy, but you don’t know if someone is healthy or not, it is not like you look at someone and are like, they have got a body fat percentage of blah blah blah and they are going to live for so long. Cos what you see is what they
look like and that is the immediate impression you get of people, so I think people want to be a certain weight and look a certain weight cos that is what people see when they first look at them.

Kerry perceived the thin body as culturally preferable, noting its association with attractiveness and self-control. While Kerry acknowledges that body shape and size are in reality not expressive of individual characteristics or health status, she asserts that it is the visual body and shape that will be judged socially. The negative perceptions of the overweight are particularly evident in the discussion of whether those deemed overweight should be treated on the NHS that has reoccurred in the popular press and British media. One dominant stance taken in this debate argued that obese individuals are responsible for their health problems and so do not deserve state care. This discourse and debate is present both in British popular culture (e.g. Groves 2012; Platell 2009) and governmental official statements on the subject of obesity and the NHS. As Inthorn and Boyce (2010) highlight, ‘media in the west frame obesity as a national, sometimes global, epidemic, warning of a massive threat to world health and national economies and painting an apocalyptic scenario’ (84). The frequent discussion in articles and reports of the perils of being overweight reflect ‘underlying moral assumptions that fat people are irresponsible’ (Colls and Evans 2009: 1011). Obesity is situated as both self-inflicted and as a sign of poor character and moral flaws. The fire and rescue services decision in some regions of the UK to charge for assisting the severely obese to move and the proposal by the British Fertility Society that obese women should be barred from IVF all demonstrate the impact of this discourse. Monica’s discussion – she had been bullied when younger for being ‘overweight’- of perceptions of weight illustrate many of these negative conceptions:

How the media is, how it portrays it, about how it is more attractive to be slim . . . media in society makes it more acceptable to pick on people for being overweight . . . I used to say when I was younger, but this is probably because I was ignorant, that people who have got gastric bands or have had liposuction just needed to do something about it themselves and get off their backsides and do some exercise and diet. Cos I was like, anyone can lose weight if they want to and put their minds to it, like I do
think it is a bit of a cop out but I suppose it is everyone’s own decision, isn’t it, so long as it is not been done on the NHS unless it is proven. It is that whole argument, isn’t it, as to whether being overweight is an illness.

Monica assumes that people are fat because they cannot be bothered to be otherwise. She does not consider that an individual may have chosen to have such a body or would want one. She attributes cultural distaste towards fat bodies to their media portrayals. Her contemplation of NHS facilities during this discussion taps into the wider cultural discourse surrounding this topic in contemporary Britain (e.g. Campbell 2012; Palmer 2012). While the health status and lifestyle of those who are thin goes unquestioned, those perceived to be overweight are required to justify their bodies and make visible that they are making an effort to be ‘healthy’ or lose weight. This latter point was something participants repeatedly reported. Kerry is one example:

I feel like, you know, there is someone and they are really really thin and they are like skeletons and they say that they don’t do any exercise and everyone is like, oh you don’t need to, you are really, really thin and I feel like I am not there so I think that if, if someone thought that I ate loads and didn’t exercise, they would think, oh you really should put some more effort in, you are going to put on loads of weight or as if, like, I don’t care. Whereas if you are working really hard and people see that you are exercising and saying no to buns and stuff, they might think, be more likely to think that you have a good effort cos they see all the effort that you are putting in to it, so they might notice the good things rather than the bad things.

What is implicit in this excerpt is that women who are considered overweight are expected to want to lose weight. It is not acceptable not to want to and not to try. If one is seen to be making a concerted effort to alter one’s body so that it fits with what is deemed acceptable, this may compensate for one’s ‘lacking’ body, or rather one’s body being too big, as it demonstrates both that one is not ‘lazy’ or ‘greedy’ and that the aims of the individual are to fit in with the social norms even if they
have not achieved them. This display of effort in this instance acts almost as damage control in regard to image management.

The university experience was the context in which the negative connotations surrounding the fat body were being thoroughly cemented and internalised by most of my participants. This period was often the first time many gained weight. For some it was the first time in their narratives that they discussed giving serious attention and dedicated time and effort specifically to altering their own body weight and shape. This time frame is in contrast with much research which has found girls’ preoccupation with body weight begins at a much earlier stage (Grogah and Wainwright 1996; Frost 2001, 2005; Bordo 1993 [2004]; Walter 2010). While participants for the most part did not agree with the hostile and intolerant views towards those considered overweight that they reported being aware of, they did assume that these would be the views held by others and this added to their wish to avoid this appearance for themselves.

Anouk: Erm, I used to not really do much about my image in terms of my body for many years and then when I came to university, with drinking and eating lots and stress, I put on a lot of weight and then I suppose I wanted to get a grip on my studies and everything and I did lose a bit of weight and I did start changing my diet, then that went a bit bad. I restricted food a lot even though I knew it was, erm, not right with the daily recommendations and things, but I am fine with that now, (laughter), erm yeah I suppose I did that, that is modifying, isn’t it? Erm and exercise, I used to do a lot of swimming when I was in school but not really to change my body image so I suppose sometimes I go for walks to try and keep my legs toned cos I don’t like my thighs very much or if I have got the money I will go swimming to do overall so that is that, I suppose.

For Anouk the initial change of environment from home to university went with gaining weight. She viewed this weight gain as negative and sought to lose it. As she was at university and living independently, she was in control of her eating and exercise habits. Anouk’s reaction against weight gain was extreme and resulted in
her developing an eating disorder. Even when she had recovered from this her engagement in exercise was still very much focused on altering the aspects of her body she saw as too fat or untoned. Participants were either actively engaged in a variety of practices to ensure they did not gain weight or would lose weight or voiced beliefs that they should be doing so. For those whose bodies were socially acceptable or who were happy with their bodies and so did not ‘need’ to lose weight, there was still a guilt surrounding not engaging in these practices, and an implication that they should always be trying to improve their bodies. Many of my participants expressed this view in their narratives. While they were often sympathetic to those ‘overweight’ and the stigma attached to this, they all actively sought to ensure their own bodies remained as slim as was viable for them. Carla typified this when she asserted that she would always ‘sort of try and stay slim, I wouldn’t let myself put on a lot of weight’. Carla here describes the self-surveillance she exercised to ensure she did not put on weight. It is positioned as her responsibility, and something she can and should control. This is a self that needs to be reined in to prevent weight gain. The difficulty in reality of this constant self-surveillance was more openly discussed by Kerry who put a lot of time and effort into monitoring her weight: ‘So I either wish that I could do lots and I enjoyed it and it not to be a chore, or that you could get away with doing nothing’. It is clear that for Kerry the effort needed to remain ‘slim’ was considered a ‘chore’. The body modifications she engaged in were not enjoyed by or easy for her. They were practices she felt obliged to do. In contemplating solutions to this she never considered the option of not being slim.

This goal of the slim body was so important to attain that the means of getting there were presented as worth enduring. The goal was seen as worth it by participants because of their desire to avoid the negative stereotypes of those who are fat. Charlotte for example acknowledged this, saying: ‘I don’t want to be fat, fatter. I definitely, I think erm, to do with like stereotypes and how people are perceived, I think it is definitely something like engrained into you to want to look good and I don’t want to be the fat one, do you know what I mean?’ The issue of body size in this quote focuses on both the avoidance of negative stereotypes and the desire to ‘look good’. It is implied that looking good is important and cannot coincide with a woman being ‘fat’.
For my participants their body size was important to their identity because they saw it as being perceived as a sign of their characteristics and personality. All assumed that they would be judged negatively if they were ‘fat’. For those who had been bigger while younger, losing weight was often a part of reinventing oneself, reinforced by positive feedback. Those with conventionally slim and desirable bodies, and who exercised because of enjoyment, still felt that if they gained weight it would be a problem that they would seek to rectify. Susanna, who engaged in a lot of exercise and whose diet was based around ethical (vegan) and health choices, would conventionally be perceived as very slim and toned. Despite this during the holidays while she had been at home from university, her practices had been forced to alter and this had impacted upon her appearance. While she identified as engaging in exercise for enjoyment and fitness, when asked if she was out of shape would her practices be more focused on the aim of altering her appearance, she replied:

It does bother me, I have been out of the gym since uni and it bothers me that I have lost the definition on my abs and that is definitely an appearance thing. Even though I know that I am not horrifically overweight or anything, it bothers me that I don’t look like how I did when I was in the gym and at the peak of my fitness . . . when I go back to uni I know that I will go back to the gym and that I will prefer how I look when I am in the gym. So yeah, definitely.

Susanna’s bodily appearance had meant she did not need to consider appearance as an aim for she already had the ideal slim toned body. However, when she experienced the loss of this appearance, what had not before been, or ‘needed’ to be, a consideration now became one. Altering her appearance now became an aim of Susanna’s exercise.

On the other hand those who thought they did not have slim bodies saw the university context as the factor which was stopping them from attaining their desired bodily weight. Participants generally assumed that they would dedicate more time and money to this end when older. Thinness was for most then an aspiration. If not attained it was something all aspired to and most engaged in body modification to try and meet this goal. My participants had internalised the belief that as women
they should be attractive, that this was socially highly valued and to be attractive ultimately meant to be thin. The fear around being overweight was of others’ disgust at oneself, of being perceived as unattractive and predominantly for having one’s character judged negatively and as lacking. This was not on the whole a disgust at fat bodies per se, but a desire to avoid the negative connotations of having one. This internalisation marked the foundations of continuous weight monitoring. What was deemed ‘fat’ or ‘slim’, ‘toned’ or ‘untoned’ was never defined and so, irrespective of an individual’s body size or shape, they all aimed to ‘improve’ the appearance of their body.

**Dressing Up**

The increased focus upon the body at this time in conjunction with a concern about others’ judgement of one’s appearance brought with it another change. A shift occurred in the narratives from cosmetics dominating the activity to dressing. The attention given to outfits became much greater than that given to makeup or other similar practices. This is evident across the extracts from participants’ narratives that I have utilised in the chapter. As young adults the new practice was to take control of one’s dressing. Cox and Dittmar (1995) have argued that ‘adolescence is marked by a shift from buying clothes with parents to buying them independently’ (243). They argue that through their consumer decisions and dress practices, girls seek social validation and approval. In their desire for validation young women focus on ‘the symbolic expression of self in context of relationships with others’ (Cox and Dittmar 1995; 257). The move to university was a period of transition, ‘accompanied by the need for a variety of products or services to ease the transition’ (Gil, Kwon, Good, et al 2012: 1425). Dress met this need. In the move to university most participants gained more freedom in regard to dress. They were now more likely to purchase their own clothes and less likely to face restrictions from parents. The new dominance of this practice in the narratives and this change appear to have been the result of the growing importance of three factors. Firstly, a new emphasis on body weight; second, a gain in consumption capacity for participants; and thirdly and most importantly, the growing need to present oneself as acceptable in varying circumstances with different demands and expectations.
This emphasis on dress came at a time when the consumption capacity of my participants was much greater than before. In comparison to their school years participants now had much greater decision power over money. For the first time they also now had to manage money. This extended beyond minimal desires and extras and now included living expenses, household goods, food and so on. What this usually meant was that they could and did spend more on body modification. As Ruth said:

Well I think cos, like at school, at that, I never had that much money but now at uni, which sounds a bit weird, you just, I end up having my own money to spend on things and I went and bought a few things that I liked. It wasn’t that I wear more items, but I just bought ones that I really liked, like Clinique stuff.

This new spending power enabled participants to give priority to certain purchases, notably to do with body modification. In regard to concerns around weight, dress was used as a means to present one’s physical body in the best light. Participants repeatedly spoke of choosing flattering clothes, which implicitly meant those which made one’s body look closest to the ideal, slim and toned. This was also a way of demonstrating ‘taste’ and one’s sense of appropriateness. The alteration of dress was often the main component of presenting one’s self specifically for different circumstances. This change in focus represented a different set of signifiers. While makeup and hair may have been altered little, outfits were foregrounded when participants discussed how they made their appearance contextually appropriate. As Cox and Dittmar (1995) state: ‘clothes are consumed not only for their functional benefits, but also as signifiers of taste, lifestyle, and identity’ (238). The management of dress was the management of self-image, for this is what most thought they were likely to be judged upon.

This importance of dress in social interaction has been previously considered. The findings of this research are frequently similar to my participants’ reports of their use of this practice. For example, Soh (1992) argues that ‘clothes thus can function as a condensed symbol not only to reveal but also to create non-verbal statements about the self’ (375). Also, in looking at the diasporic identities of young British Muslim
women, Dwyer (2000) found that expectations of appropriate dress could act as restrictions of self-presentation but were also a means through which they could ‘negotiate their gendered identities’ (481). For example, in being covered these women asserted their selves as respectable Muslim women, but in doing this by wearing ‘western’ clothes they identified themselves as British, asserted their own religious authority and tried to challenge others’ perceptions of them as oppressed Asian women. As these young women moved to university this self-presentation was key in negotiating their identity as part of a Muslim community and as simultaneously a student. The perceived ease of changing one’s dress and the necessity of clothes for all social situations meant this was a practice seen as vital to get right. Tarlo (2010) had similar findings. Her research participants spoke of the difficulty of not wearing a hijab in a British Muslim community and the pressure and negative comments they faced but also the hostility and attention received in non-Muslim contexts if their appearance made them visibly Muslim (51). In discussing the behaviour of the university students within her study Tarlo argued that ‘these young women have become experts at impression management. They have learned to use their dress and knowledge of fashion as a visual and material means by which they can play-up or play-down their religious and ethnic attachments in different contexts’ (93). They presented the self which was most appropriate for a context, as my participants had described doing. Joan considered the impact of dress on others’ perceptions of herself, noting class distinctions and the hierarchy at play in appearance associations. When I asked what she thought women would receive hostility for, Joan included ‘bad dress sense or what is perceived to be bad dress sense’. The term ‘dress sense’ demonstrates that it is not the clothes but the individual and her poor taste that are being judged. Joan expanded upon this:

... when they had made an effort to show off their clothes and somebody considered them to be, I don’t know, maybe the wrong pattern, didn’t suit, too short, too much cleavage, erm clashing patterns, erm just not a nice quality of clothes, I think all those things can be picked up on by different people . . . it’s that how shorts too short and how much cleavage is too much cleavage, and erm, and I think it is a full persona . . . I think that erm, somebody in that position that I described would be looked down upon, would be treated with less respect.
The individual is expected to be able to assess the situation and pitch her appearance accordingly. Those who get it wrong, Joan believed, would be treated worse than those who were perceived as competent in this. This was not just about personal preference however. Noting the class associations of appearance and the stereotypes which come with them Joan deliberated how she would be perceived or treated by those who preferred the unacceptable non-middle class appearance in comparison to how those with that image would be treated or perceived by those who preferred a middle-class appearance. Her conclusion demonstrated how these were not equal but different appearances in social conception:

there must be somebody that finds that attractive so . . . would I be treated less well by the person that finds that sort of image attractive? Possibly, I don’t know . . . would they look down on me in that way that somebody who found my image more attractive would look down on them? I think I would be less looked down on than they would be looked down on, if you know what I mean. So two guys and girls who were attracted to those different images, I think those people would be more likely to look down on the opposite, at her end, than they would be at my end. Does that make sense? . . . I think treated less well, less respected and looked down upon, more likely to be patronised, I think.

To be perceived to be dressed inappropriately was understood by Joan as having very real social implications. It would affect not only how others perceived you but also how they treated you. Different looks are positioned as holding unequal cultural capital. It is not just about personal preference but the socio-cultural positioning of an image. Joan speaks of respect when discussing this inequality, the implication being that the value of a person is judged on their appearance and dress is a huge aspect of this. This message can be seen in reality television programmes which aim to ‘improve’ women’s appearance in order to improve their lives and relationships (McRobbie 2009).
Internalisation and Self-Regulation

In all that has so far been considered in this chapter, what has most dominated the specific experience of the university, and distanced it from that of school, was the change in how influence on body modification practices was administered and experienced. While the degree of coercion did not change, the means through which this influence was experienced did. Instead of verbal comment and ostracisation, it was the assumption of what others thought that dominated decisions of body modification. Participants had internalised what they believed social expectations to be and these perceptions were assumed to be the beliefs of all those they encountered. These assumptions were extremely powerful. Participants had learnt through school the etiquettes at play. Their assumption of others’ perceptions and the internalisation of social expectations acted as regulatory and coercive forces determining participants’ body modification decisions at this time. Participants contributed to and perpetuated these regulations through their participation in these practices. Foucault’s conception of power/knowledge (Foucault 1980) comes into play here. Rather than seeing knowledge as power he argues that part of how power works is through the production of ‘truths’. These truths become self-evident, obvious norms, on which social structure lays its foundations. Foucault argues that:

We should admit rather that power produces knowledge . . . that power and knowledge directly imply one another; that there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations (Foucault 1977 [1991]: 27).

For my participants the categorisation of appearances and the understanding of them as determining identity were known ‘truths’, accepted and authoritative. This was accompanied by their belief that it was expected and necessary for them to fulfil these normative ideals. This was less about body management than about promoting group cohesion. Foucault argues that, ‘Power must be analysed as something which circulates, or as something which only functions in the form of a chain . . . Power is employed and exercised through a net like organisation’ (Foucault 1980: 98). In his
analysis, Foucault examines the way in which power operates within everyday relations between people and institutions. Power is not something which can be owned, nor does it exist as a separate entity, but is instead conceptualised as a system of relationships woven throughout society and it is within the ‘place’ of the individual that power is enacted. For body modification I would argue that one needs to consider Bourdieu’s habitus in conjunction with this to see these power relations at work. As Lawler noted,

What gives habitus its particular force, in this context, is that power is conceptualised as working so that it is not what you do, or what you have, that is marked as wrong or right, normal or pathological, but who you are (Lawler 2008: 131).

The objectified body becomes the site of judgement of the whole self. Different appearances are hierarchically placed both depending upon the specific situation and more generally in regard to socio-cultural positioning and cultural capital. A ‘wrong’ presentation in a specific context or a broader social expectation (such as acceptable femininity) are negatively marked and so become the embodied site of inequality. This works as a regulatory force because of how power is enacted. Social expectations and the understanding that appearance will be judged as a reflection of character becomes internalised. Conformity occurs because of the expectation of external judgement and a belief that in all social situations one is judged on appearance. In Discipline and Punish (1977 [1991]) Foucault argues that there has been a change since the eighteenth century in power’s form and use. What he suggests, which is so pertinent to the idea of internalisation, is that there has been a move away from juridical power, that which dictates what one may do and is entitled to, to forms of regulatory and normalising power. This new form of power works not through external imposition but through categorisation and normalisation. Individuals self-discipline and regulate:

Regulatory power has come to saturate the social world: it is present in all appeals to self-fulfilment and self-improvement, whether of the mind or the body. In such appeals we are enjoined to be a particular type of person – happy, healthy, fulfilled and above all, autonomous. We are
enjoined to work on ourselves to make sure that we are this kind of person (Lawler 2008: 57).

In this way power works by offering options of being and experience. The body is disciplined by the self in order to occupy a categorisation of person. A body disciplined is what Foucault terms a docile body, ‘a body is docile that may be subjected, used, transformed and improved’ (Foucault 1977 [1991]: 136). This is the body modified, for it is through body modification that individuals transform, subject and try to improve their bodies, and they do this in order to meet social expectations. The normalised expectations they attempt to meet work to control the operations and positions of the body. In this way,

discipline is an art of rank, a technique for the transformation of arrangements. It individualises bodies by a location that does not give them a fixed position, but distributes them and circulates them in a network of relations (Foucault 1977 [1991]: 146).

It is the internalisation of categorisations of identity and appearance that renders the body docile. This is what regulated my participants’ body modification practices. This docile body was not the body as object of mind/body dualism, but the effect of the objectified bodies on the lived body. The ideal dictates the norm to which all are compared and they in turn are objectified in this comparison. The power of projection regarding others’ perceptions works well to regulate, precisely because one cannot escape internalised beliefs.

**Conclusion**

In this chapter I have focused on the impact of the university experience and transition into young adulthood on my participants’ practices of body modification. Sociality was the dominating factor in decisions made in regard to these practices as it had been for the previous life stage. University brought with it new and varied environments and as a result, participants were required to respond to a more divergent range of demands. They adapted their appearance to fit each context and to
ensure that they would be perceived as acceptable in it. While initial discussions of this period with my participants often began with the rhetoric of the university providing a more accepting environment, their narratives demonstrated that social norms and expectations still determined bodily presentation in a given circumstance and the necessity of adapting appearance to context. All my participants had by this stage a fully established understanding of the expectations of each setting and the cultural readings of specific appearances. ‘Getting it right’ was still a concern for all; as at school participants still wanted to fit in, they wanted the approval and acceptance of their peers. While practices and appearances might have changed, motivations had not.

In theorising the impact of context on body modification I utilised Goffman’s dramaturgical metaphor of the stage to highlight how individuals adapt their appearance to their situation and are judged on the appropriateness of it in a given setting. This is not to say there is a true self behind the mask, but to show how the self is built up from the different roles an individual engages in. To take on a role meant to ensure one took on its expected image. As appearance was read as identity or as its signifier the importance of presenting the right image was not just a case of demonstrating good taste but also character. Knowing how to present oneself was internalised by this life stage and expected to be so by others.Appearances were not only judged contextually but also classed. The cultural capital and hierarchical social position of an individual was read as a class judgement. Not all appearances were judged equally. The closer to the ideal of the slim attractive middle-class woman, the ‘better’ an individual was deemed. External vocal criticism was no longer the influencing force; internalised norms and commentary sought from peers now informed my participants’ decisions on body modification.

In addition to context-specific appearance decisions, new aspects of participants’ lives came to impact on their practices more consistently than before. Time and specifically time management meant that participants had to learn how to fit their body modification regime into a schedule which they had for the first time to self-manage. At this stage participants also found themselves in charge of their own budget. Budgeting now meant managing household and full living costs. These new responsibilities and consideration can be seen as part of the process of becoming an
adult and represented for my participants a changing sense of agency. This meant them taking control of new aspects of their lives and learning to prioritise within the parameters set by their university setting. Whilst socially approved appearances were the desired aim of body modification, in their decisions around this my participants, while freer in regard to parental control, now felt affected more by the need to consider these factors. Body modification decisions were not only defined by personal adaptations to social expectations but also confined by time and finance which impacted on how people dealt with their bodies.

By this stage my participants were skilled in most practices of body modification. This meant makeup, which had dominated the narratives of the school years, as a skill needing to be mastered, now became far less marked, while dress and weight management came to the fore. Dress and weight management were both aspects of my participants’ body modification regimes which being at university they usually had more control over. Weight management reflected the increased emphasis on body size my participants felt and their increased awareness of the negative connotations of being overweight. It also reflected the middle-class and neoliberal ideals of the university setting. Dress more than any other practice enabled participants to alter their appearance to fit into each new context they encountered. It was a way for them to show taste, identity and their knowledge of the expectations of settings. It highlighted the need to adapt for different contexts and the degree to which identity was read off appearance.

In the move to university and young adulthood my participants underwent a transition to different self-images. Their narratives illustrated changing expectations but also changing understandings of their own relationship to these practices. The context and constraints of this lifecycle stage brought with it new demands. What had not changed however was that sociality still determined the body modification practices and aims of my participants. The desire was still to fit in and be approved of. The next chapter will move chronologically along my participants’ life-cycle to consider how body modification was experienced as they moved into the world of work and adulthood.

Following the lifecycle development of my participants as they progressed out of university, this chapter focuses on their move into and experience of the work place and adulthood. Entering this phase saw participants, on the whole, begin the most independent stage of their lives, in new environments, with new sets of expectations in relation to body modification and appearance. The practices engaged in at this time and the extent of their use are shown in Table 7 below in alphabetical order.

This table includes only the responses of those participants in full-time employment (thirteen) or in postgraduate study (six) (specific demographics of participants’ employment status will follow later in the chapter).

Table 7. Practices Engaged in by Participants in the Work Environment

<table>
<thead>
<tr>
<th>Practices in alphabetical order</th>
<th>Number of participants who engaged in practice</th>
<th>Number of participants who mentioned practice without prompt</th>
<th>Number of participants who mentioned practice following prompt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control underwear/shapewear</td>
<td>3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Dieting</td>
<td>13</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Dress</td>
<td>19</td>
<td>16</td>
<td>3</td>
</tr>
<tr>
<td>Exercise</td>
<td>16</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>Fake tan</td>
<td>8</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>False nails</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Hair dying</td>
<td>7</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Hair removal</td>
<td>19</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td>Hair straightening</td>
<td>14</td>
<td>13</td>
<td>1</td>
</tr>
<tr>
<td>Hair styling</td>
<td>15</td>
<td>14</td>
<td>1</td>
</tr>
<tr>
<td>Heels</td>
<td>14</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Makeup</td>
<td>19</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>Nails (paint/file/decorate)</td>
<td>13</td>
<td>8</td>
<td>5</td>
</tr>
<tr>
<td>Plucking/waxing eyebrows</td>
<td>11</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Skin regimes (cleanse, tone, moisturise)</td>
<td>11</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Tattoo</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Teeth whitening</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

Source: Interview Data.
As Table 7 demonstrates, most of the practices that had been established at an earlier age continued to be engaged with. Only those that seemed inappropriate for the age group and work context, such as piercings or tattoos, were largely dropped. The forms of body modification engaged in by participants at this time had not altered greatly from their time at university but how their practices were discussed had. Fewer specifics were given about practices and the focus of discussion shifted to the overall look produced rather than the methods used to attain that look. I shall expand on this later in the chapter.

Although some participants had worked while at university and may have been required to dress in a specific way for this role, the working contexts they now began to enter were of a very different nature. Previous employment had been on the whole casual and part-time when participants were students.\(^\text{37}\) This new stage in contrast marked the transition from education to careers being the dominant focus of their lives. Participants moved permanently into the world of employment and into the kind of work that was more commensurate with their educational qualifications rather than casual labour. Table 8 shows my participants’ employment status at the time of the interview.

### Table 8. Participant Employment Status at the Point of Interview, 2012

<table>
<thead>
<tr>
<th>Participant</th>
<th>Attending University</th>
<th>Job</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda</td>
<td>YES</td>
<td>BA student - café/library assistant</td>
<td></td>
</tr>
<tr>
<td>Andrea</td>
<td>YES</td>
<td>MA student and child care worker</td>
<td></td>
</tr>
<tr>
<td>Anna</td>
<td>NO</td>
<td>Medical HR assistant</td>
<td></td>
</tr>
<tr>
<td>Anouk</td>
<td>YES</td>
<td>BA student - publishing internship</td>
<td></td>
</tr>
<tr>
<td>Betty</td>
<td>YES</td>
<td>MA student (previously domestic violence support worker)</td>
<td></td>
</tr>
<tr>
<td>Cait</td>
<td>NO</td>
<td>Paralegal</td>
<td></td>
</tr>
<tr>
<td>Carla</td>
<td>NO</td>
<td>Doctor</td>
<td></td>
</tr>
<tr>
<td>Charlotte</td>
<td>YES</td>
<td>Part-time MA student &amp; gallery attendant</td>
<td></td>
</tr>
</tbody>
</table>

\(^{37}\)The large percentage of my participants who had engaged in part-time work at university fits with the findings of research on student employment (Purcell and Elias 2010; Broadbridge and Swanson 2005) and the NUS Student Experience Report which found that 75% of students worked (National Union of Students 2008: 4).
As Table 8 shows, of the thirteen of my participants in full-time employment, eight had jobs that would be considered commensurate with their education, one was due to begin a funded PhD and one was undertaking a series of internships in a field that would be seen as commensurate with her education. Of the seventeen of my

---

38 The level of employment of my participants is slightly higher than current national averages for graduate employment. For further information on how this fits in with national statistics of employment see the Office for National Statistics report on graduate labour (Office for National Statistics, 2013).
participants who were students, six were studying at postgraduate level (5 MA, 1 PhD).

In this chapter I discuss what my participants said about the relationship between workplace, body modification and identity. I also investigate how they anticipated ageing would impact on their future practices. I begin by analysing how participants’ descriptions of body modification altered as they moved into the workplace. Following this, I examine the changing attitudes and practices of my participants as they entered the professional work environment. In this I shall focus particularly on dress, weight and classed appearances, as these were the issues which dominated their narratives. Finally I analyse how participants imagined their later body modification practices in the context of ageing, considering both the envisaged methods and the associated ideals.

The Professional Image

Just under half of my participants had left education and were working at the time of the interview. The strongest theme that emerged regarding body modification and their experience of this context was the new expectation of a ‘professional’ self-presentation. Even those still at university articulated knowledge of this professional image. For these individuals, meeting this image was a concern of the near future. In talking about their appearance in the world of work, my participants had very clear ideas of how they wanted to look. In this their narratives were outcome rather than process focused. When describing how they wanted to present themselves participants used nonspecific descriptors such as ‘professional’ or ‘groomed’. Detail by contrast was reserved for the specifics they sought to avoid, such as looking ‘orange’, ‘false lashes’ or ‘nails three inches long’. Indeed, to establish what they wanted to look like participants relied predominantly on highlighting what they wished to avoid. This was so throughout all of my participants’ narratives. Table 9 lists the adjectives, phrases and expressions used to distinguish a professional, acceptable appearance from the unacceptable one.
As Table 9 illustrates, there was a clear distinction between the ways in which an acceptable or unacceptable appearance was spoken of. For the former terms such as ‘groomed’, ‘smart’, ‘presentable’ and ‘professional’ were frequently used, but specifics were few and far between. In contrast the terms used to describe the appearance thought unacceptable specifically referenced effects such as ‘shocking makeup’, ‘nails three inches long’ and ‘massive extensions’. The vocabulary here was not just descriptive, but judgemental. The ‘unacceptable’ column of Table 9 portrays negative connotations. Terms such as ‘scruffy’, ‘shocking’, and ‘all over the place’ are heavily weighted in their judgemental function. Implications of excess were frequent, with phrases such as ‘massive’, ‘obese’, ‘big’ and ‘stick out’ being common features in participants’ descriptions. The lack of specificity in the participants’ descriptions of the appearance they wanted to create illustrates that while they knew what they wanted and what to avoid, in terms of fixed attributes the desired professional image was not immediately identifiable or describable. My
participants struggled to find a vocabulary for this image beyond vague attributes. When asked how she would present herself in a work or interview environment Ruth for example said: ‘wearing tiny tops, if I was going for a job interview, I just wouldn’t do anything like that’. Acceptability appeared as somewhat indefinable in the participants’ narratives.

Participants repeatedly utilised ‘the appearance to avoid’ to illustrate their perception of a professional image. Joan implemented this approach in her narrative as she explained what she believed to be appropriate for a woman in the work place:

On a basic level I would go back to being clean, being groomed, looking like you have had a wash and do take care of your appearance. But don’t come in looking orange with false eye lashes on (laughter) . . . I think professionally there is just the consideration, of erm, you know don’t have something that is too tight, don’t have something that is too low cut, and it is that kind of consideration.

The phrases Joan used to describe the acceptable were unspecific. The basic level of body modification she suggests is illustrated in a vague manner through clichéd adjectives such as ‘groomed’. The unacceptable is however specifically identified. These practices denote forms of body modification which are overt and the effects of the labour of which is easily recognisable for the viewer. This was an appearance that could be categorised as ‘unnatural’ or false, as ‘too much’. The use of the word ‘too’ here signals the excess associated with the image it describes. It is not that the acceptable appearance is actually natural (body modification was still a necessity) but instead it signified an appearance where the majority of the labour effects gone into creating it was hidden from the viewer. Acceptability was surrounded by a large degree of ambiguity and mutedness; the overt display of body-related ‘labour’ was considered vulgar.

The particulars of the unacceptable image at this life stage mirror the treatment of women’s appearance in popular culture, where it is continuously critiqued and featured as lacking through the highlighting of specific ‘mistakes’. This has been well documented. Milestone and Meyer (2012) for example illustrate how ‘women in
popular culture have always been closely associated and scrutinised in terms of their physical appearance’ (93). Many others (Bordo 1993 [2004]; Holmes 2005; Feasey 2008; Williamson 2010) have argued that the female body receives considerable and frequent critique in this genre, noting phenomena such as the ‘Circle of Shame’ in *Heat*, the ‘Dos & Don’t’ or similar features in *Grazia* (Almassi and Ricket 2014: 51), *Glamour* (2013: 319) and *Cosmopolitan* (Coopey, Lunt and Saxon 2014: 132), in addition to the frequent lambasting of women in the public eye who supposedly ‘get it wrong’ (Doughty 2013: 319).

The vague and clichéd phrases used by my participants to describe the professional image they saw as acceptable for the workplace too echoed the discourse of popular women’s magazines on the subject (Weir 2014: 36-37; Harper’s Bazaar 2010). On the whole, participants used the discourse easily available to them in popular culture in their narrative descriptions of body modification and its aims at this stage. Images 1, 2, 3, 4 and 5 illustrate popular cultural representations of the professional female image, the image I understand my participants to have aimed for:

**Image 1. Screenshot from Pinterest.**

![Image 1](https://example.com/image1)

**Source:** (Pinterest 2014).

---

39 Pinterest is an online visual discovery tool which allows users to save images and categorise them on different boards. Individuals can search for boards using a search term. For Image 1 I used the search term ‘work attire’.
Image 2. Elle Working Wardrobe

ELLE's Working Wardrobe
By Emma Sells Posted: Tuesday 14 June 2011

Carrie Gorman - ELLE.com
Editors
My summer working wardrobe doesn't alter that dramatically from my winter one - I just remove the tights and cardigan. This is my perfect look: neat, comfortable separates with very high heels (I commute in East, naturally) and some gold jewellery. Raoul, L’Art, Carven, Mare, Whistles and Sandro always do me proud.

Source: (Sells 2011).


Source: (Harper’s Bazaar 2010).
I have included these illustrations as illustrations of the image I understand my participants to have been describing and alluding to when they spoke of an ‘acceptable professional appearance’ for women. In addition to them meeting my own understanding of what my participants meant by an ‘acceptable professional appearance’, I selected these images on the basis that the discourse which
accompanies and describes them mirrors the one my participants used, they feature specific garments or styles of clothing referenced by my interviewees, and they come from magazines where professional women make up a notable percentage of their targeted readerships. I utilise images here, but not elsewhere, because of the lack of specificity which featured in my participants’ description of this particular image in comparison to their self-presentation in other contexts of their lives and the difficulty they had in articulating this image in a more defined way. The inclusion of these images also enables the reader to see how work attire features in popular culture, which constitutes the discourse and imagery my participants were influenced by and which they referenced in their interviews.

**Class and Professionalism**

Though not directly discussed in terms of class, the imagery and language used to construct the binary between the acceptable and unacceptable replicated popular cultural understandings and depictions of classed appearance, as images 1, 2, 3, 4 and 5 demonstrate. The image of a professional woman in both popular culture and my participants’ narratives was classed, gendered and dictated a certain dress, hair, makeup and weight. This judgement was not made on occupation, education, background or socio-economic status but on appearance as a signifier of taste, taste being the marker of class and a form of cultural and social capital (Bourdieu 1984 [2010]). Understanding the impact of class in relation to appearance requires class inequality to be considered, ‘not simply as a matter of economic inequality but also as circulating through symbolic and cultural forms – through, for example, the means by which people become judged as morally worthwhile, or as having the right kind of knowledge or “taste”’ (Lawler 2005a: 797). The appearance my participants tried to avoid (usually excessive in some way: too much makeup, too short skirt, too much cleavage) has working-class connotations. The characteristics my participants identified as needing to be avoided mirror the image singled out as inappropriate in popular women’s magazines, such as an article in *Style* which advised its readers that ‘sexually provocative dressing is a no . . . Tight skirts and plunging necklines will get you struck off the list for promotion’ (Weir 2014: 36). This image is culturally read as showing a ‘lack of taste’ and can be viewed as a signal of incompetence, moral
ineptitude, sexual excess and a signal of an inability and ineptitude to judge what is appropriate.

The classed associations of appearance and its implications have been critically discussed, most notably from a feminist perspective by Skeggs (1997; 2001; 2004; 2005). Skeggs (2004) situates class categorisation along with race as ‘an amalgam of features of a culture that are read onto bodies as personal dispositions’ (1). Those who lack taste are perceived as repositories of all the negative characteristics with which working-class women are associated (Skeggs 2004: 167). As Lawler (2005a) suggests, it is not the economic status of the working class which is marked as lacking but ‘their assumed lack of knowledge and taste’ (800). In popular culture this is especially evident in the discussion of female celebrities’ appearance, and has been investigated in particular in relation to reality television stars (Holmes 2005; Tyler and Bennett 2010; Williamson 2010; Skeggs and Wood 2011). My participants frequently used the names of women from shows such as *Geordie Shore*, *The Only Way is Essex* or famous glamour models such as Jordan or Jodie Marsh to illustrate the image they sought to avoid. Kerry when explaining why she avoided certain appearances for example stated that ‘with a lot of fake stuff it can make people look really dumb . . . that kind of Jordan look and you just think that they look common’.

The acceptable appearance, though vague and unspecified in description, relied on a discourse associated with a more middle-class image. For the most part however, it was sign-posted by that which it was not. As Bourdieu (1984 [2010]) states: ‘taste classifies, and it classifies the classifier’ (xxix). In distancing themselves from a working-class image participants situated themselves as middle class (Skeggs 2005; Tyler and Bennett 2010). The image which I describe as middle-class would conventionally be seen as modest (not too much cleavage or leg), not overtly sexual, hidden and discreet body modification, feminine and ‘classy’. It is an easily recognisable image (as images 1, 2, 3, 4 and 5 show) but one difficult to articulate. Women who adhered to such an image were perceived as having ‘good taste’ (Bourdieu 1984 [2010]; Lawler 2005a; Lawler 2005b; Skeggs 2004; Skeggs and Wood 2011).

As a result of the understanding that appearances are categorised into the acceptable (middle-class) and the unacceptable (working-class) and that these would be read as
demonstrations of capability and identity, participants often associated self-presentation with social or class mobility (though not using the discourse of class). Walkerdine (2003) discusses how appearance is crucial for successful and believable upward class mobility, with taste being a key element of the process of class identification. The younger self-presentation of many of my participants and their backgrounds were not typically middle-class. They were either lower-middle class or working class. The descriptions given of their school self in particular, which was usually in terms of appearance and body modification mistakes, often fit the description of that which they later sought to avoid. As participants moved from school, to university and into the work environment, most had gradually acquired a more ‘middle-class’ appearance. This was used to symbolise their upward mobility and personal development. This upward mobility was in tune with their life trajectory and education. The ‘improvement’ described was very much framed as a maturing process and as the result of a gain in knowledge and moving beyond the stage of experimentation of one’s younger years. The less educated, immature self was described in a similar manner to the working-class or unacceptable image. The associated ‘wrong’ appearance was only made allowance for in those who were young and inexperienced. Crucially this allowance was not made at the time, but in retrospect by those older and at a later life stage. In adults it signalled a lack of maturity, of knowledge and of socio-cultural intelligence. This reflects a certain normalisation of middle-class culture and taste (Lawler 2005a: 801). It is particularly evident in transformational television programs about appearance of self or home. The image to aim for is always associated with the middle class; a working-class image always needs to be improved (McRobbie 2004; Ringrose and Walkerdine 2008; Walkerdine 2011). Thus those whose appearance does not fit such expectations are viewed as lacking. Lawler (2005a) has argued that the lack of acknowledgement in these sorts of programs of a class-based judgement results in individuals being pathologised for their appearance. I would disagree with her identification of its effect as pathologisation and instead argue that what it does is label these individuals as socio-culturally incompetent. By socio-culturally incompetent I mean an inability to understand and meet social and cultural expectations and norms.

The positive attributions of an acceptable (middle-class) appearance and the assumption of socio-cultural incompetence in an unacceptable appearance were
implicit motivation factors in participants’ body modification aims. Participants thought that careers which had traditionally been associated with the middle class, cultural capital and higher education required a professional image which would be recognised as such. They desired the attributes of respectability and capability that are read onto the bodies of those who display this acceptable professional appearance. The look in question was ‘natural\textsuperscript{40}, slim, groomed and tailored, feminine but not overtly sexual; any body modification was subtle or hidden. Trethewey (1999) for example states that ‘women go to great lengths to avoid appearing out of control or undisciplined . . . women discipline their corporeal selves in the name of professionalism’ (445). Others have highlighted the restrictive reality of much attire and practices which are viewed as representing female moderation and professionalism (Jeffreys 2005; Ashwell and Langton 2011; Wolfendale and Kennett 2011). The middle-class image demonstrates one’s understanding of the professional environment and is a necessity to embody professionalism.

My participants’ self-presentation as middle-class professionals was informed by the nuanced expectations of each individual work environment and their specific job role. Participants made a clear distinction between middle and lower-middle class appearance in their narrative. This mirrored the images and discourse of popular women’s magazines aimed at this demographic. Participants aimed for the image associated stereotypically with the socio-cultural position of their job. Looking at the representation of working or career women in women’s magazines Swan (2012) notes that ‘women’s dress is fraught with difficulties, because of the classed connotations’ (199). She argues that professional women need to be visually recognisable as such and not present themselves as clerical or secretarial in order to maintain their classed distinction and the career advantage it brings (199). This classed professional look Swan describes as ‘muted and conservative . . . related to control, restraint and discipline’ (198) and one ‘without excess’ (200). This is the classed image of a ‘professional woman’ that she argues is articulated in contemporary women’s magazines, as does Entwistle (2000).

\textsuperscript{40}I understand a ‘natural look’ to mean the use of body modification in a way which is largely invisible; when appearance and products are blended so there is little gap between colourings. The emphasis is usually on enhancing and ‘improving’ basic attributes.
Image Differences Between Job Sectors

Job sector was a factor which brought difference to appearance norms and expectations. A distinction between the public and private sector was clearly observable and is visible in popular culture. The private sector when portrayed in popular culture is more overtly formal and requires business attire. Images 6 and 7 below demonstrate this appearance and its association to the private sector.


![Image 6](image.png)

Source: HerUni (2012).

This article is part of a larger piece giving advice on what to wear in a variety of job scenarios on the basis that all jobs require different attire. This particular article describes work wear for the finance sector. The image suggested is traditionally formal with tailoring foregrounded alongside the idea of ‘sensible and stylish’. Attire associated with less formal settings is described as a no-no. This image is easily recognisable as business-wear.
As with the previous image, Image 7 documents appropriate wear for a variety of work scenarios. Once again these are traditionally formal featuring mainly tailoring and suits and recognisable as business attire.

My participants who worked in the private sector such as Kerry, Monica and Phoebe, described attire that most closely fit the appearance portrayed in images 6 and 7. These women voiced the most need to present themselves formally and for there to be recognition of body modification engagement. Wearing high heeled shoes and a display of wealth was also more common in the narratives of participants working in the private sector. In contrast the public sector, particularly those in jobs with high socio-cultural value, featured in the narratives as less obviously formal and the norm was of less obvious signs of body modification than in the former. The specifics of each environment were vital and nuanced in presenting oneself appropriately.

**Dressing to Impress and Looking the Part**

My participants pitched their appearance to preconceived notions of what they believed those in their chosen or targeted career looked like. They thought that not achieving such an image would have a direct impact on their career development and employability because of how it would influence the way they were perceived by
others. These beliefs were well founded. Women’s magazines, fashion blogs and television frequently propagate the idea of dressing to impress and getting ahead in the work place (Awoyera 2012; Collings 2014), while in academia much research backs up this assumption (Wolf 1991; Trethewey 1999; Wellington and Bryson 2001; Hay and Middlemiss 2003; Granleese and Sayer 2006; Swanger 2006; Harwood 2007; Warhurst and Nickson 2007; Warhurst, Van den Broek, Hall, et al 2009; Jyrkinen and Mckie 2012; Jones 2013). Warhurst, Van den Broek, Hall, et al (2009) exemplified the argument of much of this research when they stated that ‘employee looks matter. Employers appear to discriminate in favour of people perceived to be better looking or who are perceived to have the “right look” and penalise those perceived as less physically attractive or having the “wrong look”’ (132), as Ruetzler, Taylor, Reynolds, et al (2012) found, asserting that ‘the most important indicators of professionalism are grooming and business dress attire’ (941). The consensus in both popular media and academe is that employers care about and judge employees and interviewees on appearance.

This was a factor contemplated by both participants in the work place and those still at university. When describing their anticipation of job interviews, the narratives of my participants still at university revealed an expectation that employers would react negatively to anybody who did not conform to the appearance deemed acceptable in the work environment. Ruth’s assessment of the importance of appearance in the work place is a typical example of my participants’ responses on the whole:

If I went to a job interview, then yeah, it would make a difference. I think if you turn up in a professional looking suit and a shirt, I think, than if you turned up just in a mini skirt, well I mean I think in some senses it depends on the job but even for like any job, you have got to show some professionalism. There are acceptable things to wear. And if you can’t do that for a job interview, then it kind of shows you might not understand sort of just how to act in a professional manner generally and so then people might treat you. But then I don’t think people should treat you particularly differently although they might not accept you for the job.
Ruth implied in this statement that appearance in an interview is a test of one’s understanding of the conventions of a professional environment. There is an assumption that one should know these conventions. Such knowledge is positioned as a necessary attribute sought by employers when they recruit. She explicitly stated that to get one’s image wrong would likely disadvantage, if not prevent, an individual’s chances of being successful in an interview situation.

Achieving the appropriate appearance for an interview was repeatedly described as important for one’s success. Many of the narratives focused on the need to achieve a certain level of formality, as a casual appearance was believed to be inappropriate:

Leah: I think people judge you quite differently on how you look. So if I turned up erm so really obviously examples, if I turned up to an interview in jeans rather than a suit it would automatically be like, well she has made no effort and she obviously doesn’t care about the job, erm she doesn’t understand how to dress for certain situations, she hasn’t got the social skills, whatever. I think that would just not go down very well.

Leah suggests that the wrong image would prevent an individual from being recruited. Achieving a professional image was understood as requiring more effort than the casual image Leah juxtaposed it with. The display of labour through body modification was seen as a visual sign of effort and commitment on behalf of the interviewee. However, as has been highlighted previously in this chapter, effort must be displayed in particular ways. A difficult balancing act is required of women entering the job market in regard to their appearance. Despite the uncertainty about an appropriate appearance, not to conform is seen as weakening one’s chances of attaining a job. The reality of this has been documented in both academic research and multiple legal cases such as one against the retail chain Abercrombie and Fitch in a London store for keeping an employee with a prosthetic arm out of customer-facing positions, and others against gendered dress codes, hair styles and headscarf wearing (Hay and Middlemiss 2003; Sarwer, Magee and Clark 2004: 34; Zakrzewski 2004; Rushton and Thomson 2009).
The fear of the negative impact of inappropriate self-presentation was substantial, regulating the options for my participants’ appearance, and so body modification, in the context of the work environment. Participants already in careers cemented this perspective in their descriptions of their experience of the work environment. Kerry, a solicitor, for example articulated this:

If I wore really shocking makeup or had bright pink hair or something, then people at work wouldn’t want to take me to a meeting because, although it is not that you have to blend into that background, it is that clients have to be comfortable around you and if you are too much outside of the image of what clients have of what their lawyer should look like, then they are not going to be happy with you being there . . . So if you were really really big, cos still people are quite put off by overly obese people and people feel a bit uncomfortable and if you had really shocking hair, or really shocking makeup or really odd nails people would or and at the same time, so if you had done that they would be like, oh that person is a bit odd, I don’t want to be around them. And it would mean that people like the partners wouldn’t want to like get a train journey with you so they probably wouldn’t invite you to a meeting in London or somewhere, cos they don’t want to be seen with you and you are representing the firm’s name. And then, but at the same time if you didn’t do anything and were scruffy, like if your hair was a mess and you had no makeup on you still, cos you are representing the firm that, you are still that image of someone that doesn’t care, so probably doesn’t care about their job and it kind of shows that you don’t have attention to detail so it would be like, why am I paying you to deal with my affairs or something.

Kerry here suggests that if she as a solicitor displayed an appearance which did not ‘fit’ what clients, her colleagues or employers associated with her occupation, they would feel uncomfortable in her presence and question her ability. She believes clients have a specific conception of what a solicitor should look like and because their comfort is a very important factor, an individual has to fit this. Not to conform is seen as damaging one’s career. Clients are assumed not to want to interact or work
with an individual who defies their conception of what an individual in that role should look like. More senior colleagues were also understood as likely not to want to spend time with an individual who did not conform in their appearance. As impressing and demonstrating ability to senior colleagues was viewed as important for career progression, a lack of conformity was regarded as limiting the opportunities that one would be offered.

This is about sociality, about meeting the norm of a context. Kerry anticipated being objectified and judged on her appearance, measured against the context ideal. How Kerry understood her objectified body to be read, informed her own body modification decisions. To have an appearance outside of the acceptable box marked one as ‘odd’. Kerry describes a lack of tolerance for difference in this environment. Certain aspects of one’s appearance which are not surface and not quickly alterable, such as obesity, were viewed as negative and off-putting to others. Again image was equated with capability and work ethic. This perception is visible in popular women’s magazine’s advice on dressing for work. Weir (2014) in an article for Style advises for example that ‘being physically fit comes a close second in the to do list. Looking as though you’re toned, or at least on terms with the gym displays resilience and determination’ (36). A lack of effort in appearance was perceived as likely to be read as laziness and a visual indicator of inability. In the UK fat individuals are stereotyped as lazy and less capable. The use of phrases such as ‘overweight’ highlight the judgment made even in a language where the purpose is descriptive (Orbach 1979 [2006]; Sobal and Maurer 1999; Cordell and Ronai 1999; Bordo 1993 [2004]). Obesity is regarded as individual failure, as Stephanie described:

If you see someone that is quite large you assume that, that is their fault, that they have eaten a lot, that they have done no exercise . . . from that you judge them and think, well, you are clearly not bothered, you are not putting in any effort.

Popular television shows such as Secret Eaters and Supersize vs Superskinny illustrate and perpetuate this belief. The individuals investigated in these programs have their behaviour scrutinised and are judged responsible for their size because of their lack of self-control. This judgment of inactiveness, laziness, a lack of
motivation and self-control in those with this body type is transferred to how an individual is believed to be in all aspects of her life, of which conduct and competence at work are one (Waring and Waring 2009).

Employers, clients and colleagues featured strongly in relation to managing one’s appearance. This was about pleasing others and conforming to their notions of acceptability. Those who did not conform were viewed as problematic rather than intolerance of different appearances being perceived as the problem, for example. This perspective is indicative of a neo-liberal working environment and job market. Betty reiterated this when describing a situation in which she thought her self-presentation had impacted negatively on her career:

\[\text{I used to have a job where I got clinical supervision, which is where you go and talk about your day. And I remember going in and I had a really, I am going to say it was nice, a really nice little dress on, it had birds on it, it was really cute. And she came in and I was talking to her, moaning. I was talking to her about how my work colleagues did not take me seriously. And she turned round to me and said, well, what do you expect when you dress like that? And I said, what do you mean? She said, you know if you wore a suit, it would be completely different.}\]

Here the lack of respect Betty experienced in her job from colleagues who she felt did not take her seriously, was put down to her choice of dress. While Betty stated that she presented herself professionally in terms of grooming, her dress was identified as problematic for the image she wished to portray. Femininity was situated as lacking authority.\(^{41}\) Above all other possible factors it was her appearance that was specified as the most likely problem because it did not fit the accepted image of a professional woman.

The importance participants believed employers would place on their appearance was contextualised in a broader understanding that an employee’s appearance would impact on a business or company. The individual was positioned as the

\(^{41}\) For a classic reading of this problem and how women deal with it see Joan Rivière (1929), \textit{Womanliness as Masquerade}. \hfill 213
representative of an employer (Waring and Waring, 2009). In order for their appearance to have a positive impact it was argued that an employee needed to ensure her image was in accordance with the image that an employer wished to propagate. Sara made this latter point when she discussed her aim to join the legal profession and the importance of self-presentation in that field of work:

I want to go into the legal field so dressing smart and looking the part is very important, to be presentable . . . But in terms of work environments I think you have to be presentable to an extent, especially working in the law field because you are representing clients, and you are advocating between, you have to look quite serious, you have to look the part and be confident within yourself.

Sara situates her appearance as not just about perceptions of herself but something on which a client or legal firm may be judged. She argues that one must ‘look the part’ implying that an expectation exists of what someone working in the legal field should look like. Not to look the part and so not to have the expected appearance was for Sara only negative. She saw the individual as in part responsible for managing the image of her employer. Stephanie did the same:

For work as well you are more conscious that you are representing something, you are the sort of face for that time. So you do, I tended to make more of an effort to look professional, do my hair nicely and things like that, try and make it seem that I had made a good effort and that I was really putting the time and effort into it.

Sara’s mention of confidence could also be understood to suggest that one may not feel able to fulfil a role if one does not have the image associated with it (Peluchette, Karl and Rust 2006). Here Sara objectifies her own body because she anticipates others will too (Lindemann 1997). Through her self-objectification Sara’s objectified body impacts and informs her living body, effecting her confidence and competence in a job.
As Sara had done, Stephanie also placed responsibility on the individual to create the acceptable image for her occupation. Stephanie highlights that in presenting a ‘professional’ image, part of the aim was to be recognised as doing so, to gain credit for what is understood as putting in the necessary body modification work to look appropriate for the work environment.

The importance of keeping up a professional image was often considered particularly relevant for those in a public-facing job, as Kirsty’s narrative demonstrates:

I think in the work place, with where I work, cos we have to wear smartish clothes cos we are dealing with the public and things. I definitely take a lot more time in deciding what I am going to wear and how I am going to do my hair and makeup and things . . . I do tend to go for, buy nicer clothes and things because I worry more. I think of what people think of my appearance and stuff. I think if I look nice and I look smart then I think people will take me more seriously, whereas if I was just to rock up in jeans, people wouldn’t have as much respect for me, I suppose.

For Kirsty, the concern about appearing professional centred on what others would think of her in the work place and how they would judge her competence. The crucial element of Kirsty’s decisions on self-presentation was the people factor, sociality. Kirsty was not alone in this concern. Anna’s adherence to what she understood as a professional dress code was about controlling how others perceived her capabilities:

Yeah, like, if you know you have got a meeting then you have to look presentable . . . we are the HR department so we are supposed to show the other staff how they should look . . . I think you need to be in the middle, not erm, there are some secretaries that come in in little tiny, well one secretary wore a dress to work last week that I wore out on Saturday night, and to me that is unacceptable. And she had a big pair of stilettos on for work . . . if I wear a shirt they take me seriously, if I wore a dress they think, dumb blonde.
The unacceptable image articulated by Anna was manifest in the figure of another woman wearing an outfit for work which she herself had worn for a night out, a very different context, with which she deliberately contrasts this. Anna’s decisions were informed by her expectation of external perceptions of herself. As with my other participants, Anna expected to be objectified by others and be judged on her appearance, a practice in which she too engaged. In thinking about dressing Anna draws on a particular clichéd image, the dumb blonde, to articulate her judgement of that colleague. In this we can see how colleagues’ appearances were objectified and judged. The stereotype of the dumb blonde links appearance to intelligence. That was what Anna was doing herself and what she believed others to do. Anna wanted to be taken seriously and treated with respect in her job, so she had to look appropriate for the environment. A good work performance in one’s occupation was not enough for a woman to be treated as capable and respected; she needed visually to embody what was socially understood as a professional appearance. Anna’s narrative indicated the belief that people are influenced in their appearance by those around them, particularly by those in a position of higher authority. It is notable that the term of derision Anna uses, ‘dumb blonde’, is gendered, and I shall expand upon the gendered nature of self-presentation in the workplace later in this chapter. As Anna worked in an HR department, typically associated with regulating conduct in the workplace, she understood part of her role to be modelling to other staff how they should present themselves and this in turn was understood as an effective means to influence others. Here the self is considered to be likely to be observed and objectified by others as a form of guidance in the same way that other participants used their colleagues’ appearances to guide their own. Sociality operates on a variety of levels (observations of colleagues and the anticipation of being observed by colleagues, clients, employers and the public) to determine appearance norms and expectations.

As in other environments and life stages, what was a desirable appearance was what was considered the norm and adhered to by the majority. The appearance of colleagues was frequently presented as the means by which participants negotiated their decisions on body modification in this context. Kerry for example identified the appearance of her colleagues as influential in her own decisions around her self-presentation at work:
What people around me do, so like say when I started working in my job, it would be what people wore to work and how they wore their hair and how much makeup they wore. And I kind of adjusted myself a bit to what they did. So at first with nail varnish it was, ooh I will wear really pale colours all the time cos I don’t know if it is the done thing to have really bright nails, is it professional enough. But then I saw everyone just wears whatever colour they want and stuff, so now I just wear what I want, it is acceptable, it is fine.

Kerry copied the style and presentation of her more established colleagues when beginning her career, using their appearance as a guide to her own. She observed her colleagues, a form of objectification, but did so in order to inform her own presentation, to learn from them. In this, Kerry’s colleagues’ bodies became objects of display and instruction. Kerry based her appearance on what she understood as acceptable which she deduced from the self-presentation of her colleagues collectively. While a more general notion of the ‘professional image’ appeared to be known and shared across all of my participants, the nuances of each environment dictated the norms of those specifically in that context. Joan also talked of altering her appearance to match her colleagues’ at any given time:

I guess ultimately the way I want to present myself on a daily basis in a professional environment is influenced by the other women whom I work with and how they present themselves. So I don’t want to sort of stick out like a sore thumb and look like I have made far too much effort if my colleagues haven’t done that, if you know what I mean. Equally if my colleagues make quite a lot of effort and sort of do their hair every day and wear a lot of makeup, then maybe I would be influenced to wear more.

Joan wanted to fit in, she wanted to look like those around her. While her idea of professionalism, like most of my participants’, was informed by an overarching notion of what a professional woman should look like, the influence of colleagues and context norms was very apparent. Sociality was thus key to determining the body modification practices my participants engaged in in the work environment.
The impact of not conforming to the professional image in the work place was not limited to others’ treatment and judgement. Many participants stated that if they felt inappropriately dressed for the work place it would impact on their performance by making them feel uncomfortable and less confident. Meeting the acceptable image of a professional working woman was a way to embody that role and meet its requirements. Participants had internalised the importance of appearance. Joan contemplated for example how she would feel if she was unable to present herself at work in a way she deemed appropriate:

I think it would knock my confidence generally to think well, she looks better turned out than me, sort of sat next to somebody in a meeting or something like that . . . cos it’s almost like making yourself up as an actor really, I think, when you are professional. So there is a lot of psychology involved in being able to act a part when you are at work. And I think if you are missing a part of that I don’t know, your props almost, then that affects the way that you perform, so I think it would affect me in that way and you do compare, well, I compare anyway, that I look shocking compared to X, Y and Z in the department on a certain day. So I would do that, so psychologically I think it would affect me.

For Joan the main problem was not meeting the standards of her colleagues. It was their appearance that she judged her own by. Comparison to others was how she evaluated her self-presentation. This highlights the critical role of comparison in this process (Lindemann 1997; Chapter 3). Joan believed that if her appearance was less professional than her colleagues’ she would feel uncomfortable and self-conscious. The body modification used to create her work image was positioned by her as a prop and part of her role as a teacher. This fits with Goffman’s previously discussed metaphor of the stage (Goffman 1959 [1990]). On the front stage Joan recognised that she presented herself as she wanted to be perceived. The professional image is part of the role taken on in the work environment, part of an individual’s tools which enable them to perform their job successfully. Its removal is thus argued to be detrimental to an individual’s capacity to perform the job. Appearance is positioned as integral to job performance.
Gender and the Professional Image

My participants discussed the importance of a professional image for success in the work environment and the regulatory expectations of an individual’s appearance as extremely gendered. While a professional image for men was mentioned, what was most overt in their narratives were the double standards surrounding this. Those who raised this subject said that, as women, they faced very different expectations from men, with a direct contrast being made to male colleagues’ experiences. It was not just that these expectations were different, but that the importance of appearance and its impact on how one was treated and perceived in the work place was far greater for women than for men. Similar to my findings Granleese and Sayer (2006) in their research on academia discovered that:

Women academics are much more likely to experience a triple jeopardy of experiencing sexism, ageism and ‘lookism’. They are judged on their gender, age, looks and demeanour having to manage these to fit into a male dominated environment where such qualities do not impact to the same extent or in the same manner as they do for their male counterparts (Granleese and Sayer 2006: 510).

This gendered difference has frequently been acknowledged in other research addressing a variety of work environments (Wolf 1991; Trethewey 1999). Kerry elaborated in detail on this point:

I think it is a lot more easy for men because with women there is so many variables. I think there are so many different things that you have to hit so you have to have this amount of makeup on but not too much and you have to have your hair in this style but not too much and it has to look like expensively styled or really natural but can’t kind of look like you have had it styled really cheaply and you have got massive extensions or something, that can look a bit crass sometimes . . . There are just so many variables. And as well the weight thing . . . but it is not an issue for men cos like loads of the partners are like quite big . . . if you are a fat man, it
doesn’t mean you are unsuccessful whereas if you are a fat woman people don’t associate that with success as much . . . Like even if she was really good at her job people would probably pay more attention to the fact that she didn’t do her hair or shave or something than the fact that she was really good at something else.

Kerry details the distinction between the expectations that women and men face in the work place. There are more demands on women and more elements upon which they are judged than for men; women face more possibilities of getting it wrong. She also raises the issue of appearance being of different and unequal importance in the judgements made about women and men in this context. Kerry highlights the double standards of gendered expectations of appearance, most specifically of weight. Using her own work environment as an example, she argues that, when a woman is viewed as overweight, she is perceived negatively and assumed to be unsuccessful. For men weight is presented as a non-issue. Fatness does not hold the same negative connotations for a man as for a woman (Tretheway 1999; Roehlingin 2002). A man is judged on the merit of his ability to perform the role his job requires. For a woman performing this role successfully is not enough and is deemed irrelevant if she does not display the expected appearance of a professional woman. Kerry argues that a woman’s appearance is integral to how she is judged in the work place irrespective of her ability.

This reflects wider social expectations and values placed on appearance in relation to gender. In the UK and the western world more broadly, appearance is positioned as a woman’s greatest attribute, as her most valuable asset (Wolf 1991; Bordo 1993 [2004]; Milestone and Meyer 2012). For a man, while still judged and valued, appearance is positioned as a secondary factor behind his abilities and socio-economic position. For a man appearance is an extra, for a woman it is a necessity. In her narrative Kerry demonstrated what many other participants also articulated, that expectations of appearance were far more regulatory for women and a greater burden. The pressure and regulation my participants faced and believed other women also faced in the work place was not just about peer acceptance and fitting into a social milieu. It was understood and experienced as having a material impact on
career prospects and trajectory and so in turn on a woman’s income and socio-economic status.

**Life Trajectory and Body Modification**

Understandings of the expectations and value placed on female appearance and the gendered nature of this informed my participants’ expectations of their future practices. Participants’ discussion of future practices tended to be split into two trains of thought: the near and more tangible future and middle to old age (the latter never actually defined). The former option was usually the consideration which came immediately when participants were asked what future practices they predicted themselves likely to engage in. The latter required more prompting as many found it difficult to conceive of themselves as ageing. Participants were ignorant of the material reality of the ageing body, social norms of older age groups regarding appearance and thus the practices they were likely to carry out, as can be seen in Andrea’s response to this enquiry:

> It is hard to tell because I only know as my age now and being younger but I wouldn’t know how I would behave later. I think more so now erm it is the norm to be more concentrated on how you look and therefore how you change the way you look is important and erm but I am not sure how that will see me when I am older.

I shall begin this section by considering participants’ expectations of the near future. My participants linked the predicted changes in practices of their near future to four main factors: an increased income, motherhood, a long-term relationship and an assumed increased resistance to external pressure. Almost all detailed a very similar and heteronormative life event trajectory which defined how they conceived their future lives and the body modification they would engage in throughout this. The impact of our ‘institutional organising structure’ (Ingraham 1994: 216) being heteronormative has been discussed by several feminist academics. Jackson and Scott (2010) for example state that it ‘defines not only a normative sexual practice but also a normal way of life’ (85). Notably, participants anticipated that it would be
the change of their context that would bring about most alterations in their body modification regimes, not changes in their bodies brought about by age. Different life-stages were understood to bring with them new contexts, changes to life priorities and material constraints. These were the factors participants predicted to be highly influential in determining their practices.

One of the most prominent life stage progressions, that was repeatedly articulated as likely to result in participants’ practices being changed, was an increase in disposable income. As many participants were still in education, in the intermediate period of training for a professional position or at the early stages in their career, the funds they had to devote to body modification and its tools were usually limited. Gaining a more substantial and regular income was anticipated to result in an alteration of practices and products used. There was an assumption that as they progressed through their life cycle, their income would increase and that as it did, they would increase the amount spent on body modification. Joan for example commented that as soon as she was financially able to do so she would up take up waxing as opposed to shaving and at the time of the interview only did not use this method because of the limits of her disposable income:

When I have got a proper wage I will have a regular bikini wax I think. I think going swimming on a weekly basis, it’s a lot of hassle otherwise, cos I wouldn’t like to show any hair when I go swimming. So I think just to have a regular bikini wax would take care of that so when I can afford it I think I will do that.

Waxing for Joan was her preferred method of pubic hair removal, but at the time of the interview her financial situation meant she was unable to afford to maintain this practice regularly. The aim to remove body hair and ensure none was visible when she went swimming was anticipated to remain constant. The desired change in practice was about her financial reality. In participants’ narratives, economic constraints repeatedly featured as a factor which they felt limited what body modification they were able to engage in or what products they could afford to purchase. Once financially better off most of my participants articulated that they would choose to engage in methods or purchase products that were preferable to
them, though the aim of the body modification was seldom thought likely to change. Ellie and Monica both articulated a desire to change to a preferred method for a set aim when financially able:

Ellie: If I had more money I might spend a bit more on like like I might buy nicer makeup but I wouldn’t make myself up more if that makes sense.

Monica: I do want my hair like chemically like, well it is called a Brazilian blow dry, it is like a keratin treatment and it like semi permanently straightens your hair for like three months. So if I could afford it I would get that done but erm my budget won’t stretch to that at the minute but I will hopefully get that done.

The impact of financial constraint articulated by participants for even relatively inexpensive forms of body modification contradicts the notion that all women can engage in any form of body modification they wish and that it is open to all. Body modification in much third-wave feminist literature has been championed as offering an opportunity for democratising appearance (Davis 1991). What my research clearly demonstrates is that the so-called levelling opportunities provided by body modification are in reality only open to those who can financially afford them. Those able to purchase any form of body modification they wish, whether that be costly, such as cosmetic surgery, expensive makeup and clothes or a personal trainer, or relatively inexpensive such as hair removal products, are given further advantage in society, given the importance placed on female appearance for social acceptance and career prospects. One might call this the ‘privilege dividend’, following Connell’s ‘patriarchal dividend’ (Connell 1977). Those women unable to afford certain body modifications can find themselves further disadvantaged and stigmatised. My participants met their aims of body modification as best as they could afford, not as they most desired. Finance limited the degree to which participants could employ body modification as a tool to improve their situation.

Income was not the only change participants thought was likely to alter their body modification practices following entry into the work place. Full-time employment
was expected to provide a more routinised and stable life. Those at university in particular strongly associated the commencement of a career with more routinised body modification practices, in particular skin regimes, exercise and dieting. Jessica, a student nurse, demonstrated this when she contemplated how moving into full-time employment after university would impact on her body modification:

“When I get a proper job I will get into that habit of just eating when I am supposed to eat and then on my days off I will get into that routine as well. And I think once I have got an income I will join a gym, but it is too expensive a’time to join with, and especially with university and placement, I wouldn’t be bothered to go cos it is just time and things like that.”

For Jessica the demands of the university were a hindrance to how she would like to maintain her diet and exercise regime. Conversely the context of work was expected to enable her to carry out practices closer to her ideal.

The working self in Jessica’s example and for all those in education was the future and older self. Frequently age was assumed to bring with it more self-control and ‘improvement’ in regard to how individuals went about body modification. Even those already in employment still associated the future self with more regulated behaviour than the present and the practices implicated were those situated as long-term investments rather than superficial alterations. Self-regulation was always regarded as a positive, as something to aim for and as beneficial, and this was often accompanied by moral judgement (Bordo 1993 [2004]: 15, 192-197; Evans 2006).

In the same way that job security was thought an inevitability in participants’ life trajectories and understood to impact on body modification, other life events were highlighted. These anticipated events followed a stereotypically heteronormative trajectory. The first of these was forming a relationship with a stable and long-term committed partner. As my participants were all heterosexual this partner was always pictured as male. This type of relationship was believed to provide reassurance of one’s attractiveness and appearance. The closeness expected between the self and a long-term partner also meant participants predicted their partners being witness to
their body modification practices. The majority of participants suggested that this situation would reduce the number of practices they felt it necessary to engage in, at least in their partner’s company, though usually also more generally. Phoebe, for example, contrasted how she predicted her body modification practices would develop if she was either married when older, or single:

If I am married I will probably do less body modification than if I am single, which I hope I won’t be when I am fifty.

Phoebe hoped she would have a long-term partner and thought that her future relationship status would impact on her body modification. To engage in less body modification was seen as a sign of comfort and confidence in one’s body and appearance and of resistance to external pressures. Jessica gave a similar answer:

That is what you hope for, isn’t it? That you find someone that you can be completely comfortable with and be completely yourself around. Cos it is common sense, everyone should know that gingers aren’t tanned and I don’t want to have to hide that when I am in a relationship where I am going to be getting married.

As someone who with her current partner continually engaged in body modification to disguise that she was ginger, Jessica still expected to find a partner for whom she would not have to disguise her colouring. Marriage was positioned as the ideal and most significant form of relationship. She attributed closeness and comfort to this type of relationship, which she understood as enabling women to be more comfortable with their bodies without body modification. Both Phoebe and Jessica expected and hoped for a long term-partner. They believed having one would positively impact on making them feel more comfortable and happy with their own bodies in front of such a partner and so in turn enable them to reduce the amount of body modification practices they felt it necessary to engage in.

The second event assumed by participants as likely to occur in their life and to have a major impact on body modification practices in the future was motherhood. Becoming a mother was predicted by participants to impact in two possible and
contradictory directions: to result in both an increase and a decrease in body modification practices. These options were not usually discussed as opposites but as occurring simultaneously, with participants’ narratives frequently contradictory in their predictions. Most thought that pregnancy itself would have a negative effect on a woman’s appearance and her body, particularly in regard to weight. It was repeatedly asserted that more attention to weight control would be needed to ‘rectify’ the gain assumed to accompany pregnancy and so participants often anticipated engaging in more exercise and dieting practices following its occurrence. Carla, for example, expected being more conscious of weight as a result of pregnancy and as a reaction to this likely to increase her exercise, or wear controlling underwear:

Erm I guess if I had children I would be conscious that I might gain weight naturally through the process of having a child so I would be, you know, keen to exercise to get back to how I was before . . . I guess I might buy magic pants if I was you know particularly conscious of loose skin after having a baby and wanted to wear a nice dress or something, that is always possible.

Carla assumed that in pregnancy she would gain weight and have loose skin. These two factors needed to be hidden or got rid of. She asserted that she would want to get back to how she was before getting pregnant. The pre-baby body was positioned as higher in value and desirability than the body post-baby (Dworking and Wachs 2004; Nash 2012; Gow, Lydecker, Lamanna, et al 2012; Nash 2013). This suggests that women will want to hide any physical signs of the process of pregnancy and childbirth. With this aim in mind other participants indicated that they might consider procedures they would not at the time of the interview and which they regarded as more extreme, such as surgery and more specifically tummy tucks and liposuction. Kerry for example also thought that pregnancy might lead to an increase in her weight and believed she would seek to restore her body to its pre-pregnancy size and shape: ‘If I had a kid and got really really fat I might have liposuction or something’. A need to rid the body of signs of pregnancy was very evident in both Carla and Kerry’s narratives and was present in many other participants’ narratives. These narratives predominantly focused on the effects (always negative) of pregnancy on the physical appearance of the body. Body modification featured as a reactive tool to
an event which participants believed would move the body away from the cultural feminine ideal. This was an ideal they clearly felt they would still be aiming for and adhering to in later life. Body modification was then a fix. The expectation that women would and should erase signs of pregnancy is a common feature in popular culture, women’s magazines, tabloids and newspapers (Dworkin and Wachs 2004; Tyler 2011). Celebrity mothers are frequently scrutinised for their ability to lose ‘baby weight’ and get back to their pre-pregnancy bodies (Nash 2012; Gow, Lydecker, Lamanna, et al 2012; Nash 2013; Pyne 2013). On the day Kate Middleton\textsuperscript{42} gave birth \textit{Ok!} ran with a front cover of ‘Kate’s post-baby weight loss regime’ (\textit{Ok!} 2013) while magazines such as \textit{Women’s Fitness} regularly feature articles on post-pregnancy weight loss (Pyne 2013).

Participants’ other and opposite expectation of the impact of pregnancy and motherhood was the assumption of a decrease in engagement with body modification practices. This perspective was based on participants’ beliefs that their priorities would alter when they became mothers and that they would face new time constraints. Nicola said:

I can imagine in ten years’ time if I have got kids and things like that, I am not going to have, even though now I don’t spend ages, I am not going to have time to sit there and do my makeup in the morning as much as I do now, or that you just have different priorities.

Nicola believed that if she became a mother she would not have the same time to dedicate to her appearance as she did at the time of the interview nor would it be as high a priority. Self-presentation was situated as less important than motherhood and caring for a child. The time needed for body modification was acknowledged here, and the constraint it placed on what an individual was able to do.

Many participants felt the role of motherhood would influence changes in their practices rather than the materiality of bodily changes caused by pregnancy. Frequently participants focused on how they would want to present themselves as

\textsuperscript{42} Kate Middleton is the Duchess of Cambridge, wife of Prince William, the grandson of the Queen of England.
parents and considered the impact of their appearance and practices on their prospective children. For some this meant fitting into what they deemed an appropriate image for a parent and specifically for a mother. Kirsty for example, who had multiple piercings and tattoos, distinguished between her appearance at the time of the interview and future practices and what she saw as unacceptable for a parent. In this discussion she focused particularly on tattoos as these where her own most prominent and permanent forms of body modification:

I have got the slightly traditional thoughts that if I become a parent or something then that is when you need to be more responsible for your child and stuff. So I think you should stop things like body modifications and things. I think it is something for when you are younger and you have the freedom and you know, your body is your own and you can do what you want to it. So yeah, I think when you get older and you get to a parental age, if you are older than thirty, thirty-five, I think you should kind of, I cringe when I see people in the street that are like in their fifties and stuff and you can tell that they have just recently got a tattoo, with men and their backs and stuff like that, I turn my nose up at it a bit. I think it is inappropriate when you reach thirty-five, forty and you are trying to set an example for your kids. It is like yes, I have tattoos and stuff now, but like I would go spare if my child got it done as young as I was when I got it done, like seventeen, eighteen I think. Yeah so think parental age, I suppose.

Though she had multiple tattoos herself, Kirsty voiced a strong disapproval of those who were parents or at a ‘parental age’ (which she set at thirty or above) who engaged in tattooing. She argued that this would not set a good example for a child. Though on the whole now far more accepted and mainstream, tattoos and in particular tattoos on women are still often linked to taboo (Swanger 2006). Kirsty’s narrative also suggests that once a mother, a woman’s body is no longer entirely her own. She implies that the decisions a woman makes regarding her body and appearance should consider her child first and not be based predominantly on her own image preferences and desires. This perspective is in line with popular conceptions of the mother role. Dworkin and Wachs (2004) argue that when women
are seen to have the ‘wrong’ post-baby body, culturally they are positioned as failing both motherhood and femininity. Tyler (2008, 2011) meanwhile illustrates the class-based judgement made about mothers and the vilification and shaming that occurs in popular culture mediums, such as reality television, of women deemed working-class or CHAVs. The treatment and discussion of celebrity mothers exemplifies this (Goc 2007). In contrast those mothers who are perceived to achieve an appropriate appearance of motherhood, such as Elle MacPherson, are given the title Yummy Mummy and praised for being good mothers based on their looks (Thistlethwaite 2014). The anticipation of motherhood influenced Kirsty’s decisions regarding her tattoos in the past and present. While she had multiple tattoos the majority were easily hidden by clothing. This was for her an intentional decision to allow her to present herself as ‘acceptable’ in the future for both work and as a mother. Tattooing is thus part of an image that contradicts professionalism and ‘good’ motherhood. Parental engagement in tattooing was viewed as encouragement for children to follow suit and for Kirsty this was negative. Just as there was an assumption that people copy and try to fit in with their social context throughout their life, children were thought to copy the norm of their home environment, including their parents’ appearance. Kirsty said she would actively discourage her children from engaging in tattooing until they were adults. For her the age appropriateness of the practice was very important at both ends of the age scale. Life stage clearly dictated what she saw as acceptable and when.

Participants frequently suggested that maternal body modification would impact on their children, and more specifically their daughters. This was something they said had impacted on their own practices in the past. Jessica, for example, feared that her own current relationship and engagement with body modification practices and dependence on them because of body insecurities would negatively impact on a daughter. In order to be what she saw as a good mother and in an attempt to protect her daughter from acquiring similar insecurities she therefore anticipated reducing her practices if she had a child:

---

43 Elle MacPherson is an Australian businesswoman, television host, model, and actress well known for her five cover appearances for the Sports Illustrated Swimsuit Issue beginning in the 1980s, leading to her nickname “The Body”

44 Yummy Mummy is a colloquial phrase meaning a mother who is conventionally attractive and stylish.
If I have children and they are ginger I don’t want them to think that is how they have got to be cos their mum is like that. Do you know what I mean? So I would rather be a role model for them. In that sense . . . if my little girl turned out to be ginger I wouldn’t want her to think that this is what she had to be doing to feel better about herself. But if that is what she wanted to do then fair enough, I wouldn’t stop her but I wouldn’t want her to look at her mum and think that is what she is doing and that is what makes her comfortable. I would want her to see me as like happy in how, in my natural self, so then it passes on to her.

Jessica understood her own practices as based on fixing insecurities about her appearance and trying to fit in, as a result of bullying. She believed if she continued with her current regime the message she would send to a daughter would be that those practices which disguised her hair and skin colourings in particular were necessary for her to be happy and accepted by others. She instead sought to propagate an image to a daughter that was of self-acceptance and happiness with one’s body and appearance, irrespective of external perspectives. In this scenario children are clearly understood to learn from parents’ actions and behaviours and in turn to copy these. The belief that daughters copy and are influenced by mothers was strongly supported in my participants’ narratives of the acquisition and engagement in body modification. The vast majority cited their mothers as influencing their past and current body modification regimes, as already discussed (Chapter 3).

**Ageing Bodies**

The idea of daughters following mothers’ footsteps was visible in participants’ narratives of their expectations of future practices. This was both in relation to physical developments and taste and preferences. The mother or other older close female relatives or friends were often cited as examples to follow, and alluded to as guidelines for their own expectations of body modification. Notions of genetics and the mother’s body being a projection of their future self were a strong and frequent theme running through my participants’ narratives. The maternal body was seen as a predictor of what they would need to consider and what options would be available...
to them. Phoebe made this evident when she discussed her mother’s anti-ageing practices, the restrictions she faced medically and the implications of this for herself in the future:

My mum is going through the menopause at the moment or contemplating the fact that she might be erm and we have like a strong line of breast cancer in the family . . . so erm things like HRT and erm contraception stuff is, so hormonal replacement is not possible for me, well I increase my chance of cancer, therefore I have to choose. So I think that is something that has been a bit of an issue which is something I have probably thought about a lot earlier, most twenty-four year olds don’t really think about the menopause. So I think it is quite, yeah, that it is scary to think that I couldn’t modify my body if I wanted to when I am older. I think that is going to be so hard when you are not in your twenties anymore and you have got to look at yourself in the mirror knowing what you looked like at twenty and you’re fifty or sixty.

Phoebe asserted that consideration of the menopause and anti-ageing practices was unusual for women of her age. She understood the body modification restrictions her mother faced due to their familial medical history as something she would inherit. The prospect of not being able to carry out practices she believed she would want was problematic for Phoebe.

Other participants mixed together the material ageing body of their mothers and their tastes and regimes to inform their own expectations of future practices. Jenny was one of many who did this:

I think as far as I could go, would be moisturisers that help it. I don’t think I could have any, like my mum and my Nanan have aged really well and I think I would rather just follow what they do rather than have anything more serious done. Like my mum doesn’t even have to wear makeup, her skin is just that good and I think that is what I want to aim for . . . my boyfriend’s grandma is eighty and she looks amazing, she
looks like a fifty-year old and it is just like whatever she has done, that is what I want to do.

Jenny took how her mother and Nanan (grandmother) had physically aged as an indication of how she would age, and she evaluated this positively. The practices of the two and of her boyfriend’s grandmother were appealing because of their positive result. She anticipated following them in order to achieve the same results. Their dismissal of more ‘serious’ methods, which I take to mean invasive or permanent, resulted in her rejection of these too. The opinion of her mother, grandmother and boyfriend’s grandmother were treated as authoritative. They were understood as both visual predictions of her own ageing body because of the genetic link between mother, daughter and grandmother and as good examples of ageing well, in terms of taste as well as materiality. The assumption that she might physically age in the same manner as her mother and grandmother meant the practices and regimes of body modification both followed were seen as patterns to be emulated.

Moving away from the material reality of bodies, maternal attitudes towards ageing also strongly influenced my participants’ approach to it and their views on what was acceptable and desirable in regard to appearance as they aged. Carla and Leah both illustrated this in their narratives. These two women were sisters and gave very similar explanations of their expectations of future practices, which featured their mother as an influential factor:

Carla: Having seen my mum age, from nearly my age actually till she is fifties, I think I would be unlikely to dye over grey hairs, cos I quite like that look, I think it is natural to look how old you are, erm I wouldn’t ever consider surgery.

Leah: My mum I don’t know, my mum is not that into it. I mean, she is worried about it but she is not that obsessed about having perfect hair or perfect makeup so I guess that will relax me a little bit, thinking about it, but if I had a mum who was perfect all the time and did that a lot of the time then I would be more likely to copy her.
Both women clearly believed their mother’s attitude and practices towards ageing influenced their own. They felt they would be unlikely to do anything much to try and hide or disguise wrinkles or grey hair because their mother had not. Leah overtly stated that she believed if her mother had taken a different approach to ageing and body modification so would she. In seeing their mother take a more relaxed approach, this was given legitimacy for these two women and was presented as the preferable approach by them.

As participants considered their future practices what was very evident in their narratives was the understanding that practices of body modification and appearance are age-specific and life-cycle dependent. In their narratives participants constantly reiterated that one engaged in practices at certain points in life and dropped them at others because it was expected, normative and acceptable. Participants spoke of practices they would stop when they reached a certain age, as Kirsty had suggested in regard to tattooing, because they felt too old for them to be appropriate. When discussing removing her lip piercing following pressure from an ex-boyfriend Peggy for example stated:

I think it was the right thing to do as you get older, like, I think those piercings are a bit related to like little emo kids (laughter). So I am glad I took them out but I didn’t take them out for the right reasons.

While she regretted the original reasoning behind her removal of these piercings, Peggy asserted that she would have taken them out in the long run regardless of this pressure because she believed they were only suitable for ‘kids’ and not appropriate for an adult. The piercing was related to an age group she was no longer part of. Similarly Charlotte explained how her age and the age-specific categories she attributed to specific appearances informed her decisions around body modification:

Some things I wouldn’t wear just because, for example say, if I saw a shirt and I thought it would make me look older because I have seen older women wearing or something or I saw a belly top that I knew loads of young girls were wearing, I wouldn’t wear it. And also just physically
I am not going to wear something that is aimed at young people because I wouldn’t feel comfortable wearing it, cos I am too old or too young.

For Charlotte clothes were clearly segregated by age group. Sociality was central to this categorisation. The social norms of different age groups informed how she attributed clothes to these categories and what she saw as appropriate for herself at any given age. If a group she considered older or younger than her was predominantly associated with certain clothing then she avoided these garments, deeming them inappropriate for her age group by default.

While certain practices were likely to be abandoned once a woman reached a certain age, others were seen to be only needed and justifiable once a woman reached a specific age. Age in these instances brought on the practice. Kerry demonstrated this in her comments:

You get the wrinkle reducing treatments and I can really imagine having a face lift or something when I was older or that kind of thing . . . I don’t think I should use anti-wrinkle cream now cos I don’t think I am old enough to, but in a few years I am sure I will be like, oh I should start now. And it won’t really be because I have got wrinkles, it will be because I am a certain age.

Kerry emphasises that it would not be her material body that would make her begin anti-ageing body modification but her age, and social body modification expectations. Kerry’s body modification practices are regulated by the social norms and expectations of her life-stage. The judgement of practices by age appropriateness means that body modification which is deemed unnecessary and inappropriate by participants for their age group is assumed to result in a negative social response. These same practices are thought plausible, positive and acceptable at later life stages. More permanent and invasive practices particularly fitted into this way of thinking. For older women and women who had gone through pregnancy and childbirth, practices such as cosmetic surgery and Botox were considered more legitimate and acceptable. The participants showed more understanding for women in these life-stages engaging in such practices and argued that socially this would
also be perceived as more acceptable than for younger women. This perspective was evident in Susanna’s narrative:

It is probably more acceptable for a woman who is in her middle ages to have plastic surgery than somebody my age because I don’t know, yeah you have got, you would be seen as shallow if you got plastic surgery at my age but when you are older it is like, oh are you trying to prolong your youth, which is ok I think in today’s society.

Cait displayed similar beliefs and expectations:

It is more acceptable to maybe think about, it depends on how you feel, but if somebody said to me, now at twenty-five I want to go for Botox I would just laugh and think you are an idiot, you look young, you are wasting your money. Whereas if a sixty-five year old said to me, I want Botox, I would be more understanding, like oh, if you have got the money and you want to, then why not?

Both women said it was far more acceptable for an older woman to engage in cosmetic surgery or Botox than a young woman. As it is culturally assumed women want to appear youthful, actions which previously were situated as vain, unnecessary and shallow, became understandable when this was the aim of their user. For many this was the first time that more invasive procedures such as plastic surgery or Botox were regarded as plausible. Only ageing could warrant such procedures.

Older bodies were assumed to require more work as they moved further away from the youthful ideal. The materiality of the older body is problematic because it does not fit with what is viewed in the UK and the west more generally as the ideal. Long-term body modification ‘investments’, the more routinised and self-regulatory practices being carried out with consistency, are seen as likely to occur at a time when both more self-regulation and control is felt more plausible but also when more care is assumed to be needed. Slowing metabolisms, the beginning of wrinkles and the possibility of grey hair were all considerations as my participants contemplated the materiality of the ageing body. Such physical changes were viewed as negative
and would require rectifying, managing and hiding. Carla and Leah both made this observation:

Carla: I think as I get older I will be more conscious of the difficulty to keep my body shape.

Leah: There is quite a pressure to look young, I am twenty-one now so it is not too much of an issue . . . I think there is a pressure there to look good as you get older if you’re female, so I don’t know, I might try and take a little bit more care of myself. So I would do more attention to my hair, I might cut my hair short because it’s difficult to keep it looking nice when it is long when you get older. Erm I might start using sort of anti-ageing stuff even though it probably doesn’t work (laughter), yeah and just I guess, it’s tricky because I’d like to think I’d get into the habit of choosing a bit more carefully what I wear and stuff like that.

Both Leah and Carla understood youth as an asset and ageing as a disadvantage. In both narratives there was an expectation that as a woman ages she will seek to minimise the visual signs of this and so be prepared to engage in more body modification. Leah highlights the gendered nature of the social pressure on appearance and ageing, stating that it is an expectation, specifically of women (Jyrkinen and McKie 2012; Granleese and Sayer 2006). This again reflects wider societal patterns and judgements about men and women ageing and their appearance. While ageing is always seen as problematic for women’s appearance and accompanied by an assumption that extra body modification will be needed, age is still expected to result in a better body modification regime.

Almost contradicting participants’ assumption that as they aged they would want to and need to engage in more body modification was the belief that as they aged they would become more immune from external pressures and aware of their own preferences. The idea of age bringing immunity to external pressure is a common trope in popular culture and women’s magazines (Carpenter 2012). The younger a woman or girl is, the more susceptible to peer pressure she is thought to be, and the more likely to try and please others (Frost 2001, 2003; Bordo 1993 [2004]; Walter
2010). This understanding of development fits with participants’ own narratives of their earlier life stages in which the younger self was always positioned as more susceptible to outside influence, which I analysed in Chapters 3 and 4. In these instances the contemporary self was juxtaposed with the future older self through the assertion that the latter would be less concerned with social expectations regarding appearance and more likely to resist external pressures. This narrative of ‘progression’ through life course was a common feature which Nicole exemplifies here:

I think probably as I get older I will become, in a way I will be less bothered . . . I guess that when I was at school it was more like as a teenager you are probably more insecure and you are more worried about appearance so you spend a lot more time on your appearance. Whereas when you get a bit older you get a bit more secure and realise it’s not you, appearance isn’t actually that important a lot of the time (laughter), it’s obviously other things, so yeah I think that . . . I think in general I will be less bothered about appearance as I get older.

Nicole documents her expectation of decreasing insecurities and worries around women’s appearance as they age. She saw school and the teenage years as the pinnacle or most intense points of these concerns, continuing to suggest that as women age these concerns decrease.

The continued importance of sociality informing my participants’ body modification throughout their lives and in their future predictions strongly challenges and contradicts this idea. Though it was in no way the reality of the body modification development participants described to me in their narratives, the trope of progression exemplified the sense amongst many of my participants that they would become ‘wiser’ in their approach to body modification as they aged and more resistant to external pressure as they matured. This resistance was expected and viewed as a positive attribute. Interestingly however, there was no evidence of this in my participants’ reported behaviour to date, which suggests that, while the trope of ageing bringing resistance to external pressure was popular discursively, it might be unlikely to actually occur in any of their lives.
While a belief in an increased resistance to external pressure was regarded as a positive attribute acquired through ageing, overwhelmingly in participants’ narratives ageing was seen as negative both implicitly and explicitly. Visual signs of old age were always understood to be unattractive in women, in need of prevention or masking. The vast majority believed that all women would want to stop or disguise any signs of ageing through body modification. Susanna for example said:

We are living in a society that seems to be allergic to ageing. It is not ok to look old (laughter), it is not ok to have wrinkles and grey hair. So I think as you get older, people feel more pressure to buy anti-wrinkle cream and dye your hair or whatever. People just want to look young forever, don’t they?

Susanna attributed a societal idealisation of youth, and derision and intolerance of ageing, as pressuring and motivating people to want to look young. The idealisation of a youthful image has long been acknowledged by feminist scholars, as has the gendered nature of ageism, with attention being drawn to the lack of representation of older women on television and film (Bordo 1993 [2004]; Wearing 2007; Jermyn 2012; Milestone and Meyer 2012: 98). The assumption of a desire to disguise the visual signs of ageing was reflected in Ellie’s narrative: ‘I think I would want to look as young as possible’. While for Ellie and many others the specifics of their future image and practices were unknown, there was an assumed certainty in the aim to look young and for body modification to become focused on the prevention and disguising of the ageing process (Bordo 1993 [2004]; Coupland 2003; Coupland 2007; Smirnova 2012). Carla, for example, spoke about her mother’s experience of ageing and its effect on how she was treated and interacted with by others:

My mum has talked about, my mum is an extremely attractive lady, she is fifty-two, she can still fit into my jeans and we have essentially the same figure from the back. And she says that she has had like guys go past in cars, pip her and then look horrified when they see her in the mirror (laughter) and they see she is fifties. But erm she has talked about becoming invisible when you go past, when you go through the menopause and suddenly you are an invisible person. And that I think is
a really interesting thing that I don’t, I obviously haven’t experienced and won’t for many years but her talking about it is very interesting to listen to because it does make you wonder. You can only experience society from your own personal point of view, can’t you? But I would be really interested to see what it is like being a sixty-year old woman and whether when I went into shops and needed help finding something it would be as easy with just general members of the public . . . I think as I grow older that might be a reason to engage in more body modification practices.

Carla here suggests that a reason to engage in anti-ageing body modification is not ‘vanity’ but instead to mediate how one is treated by others and socially perceived. The fear of a negative reception or becoming invisible to others exerts a powerful pressure to ensure women conform to the ideal image of femininity even when this means trying to prevent the ageing process their bodies are undergoing.

Though all of my participants implied that culturally the visual signs of ageing were viewed negatively, not all participants said they held this view personally. Several, in contrast to what they believed to be the social norm, asserted that they would not try to hide signs of ageing when these developed. These few participants did not position the visual signs of ageing as unattractive or negative but instead claimed that they looked forward to experiencing them. Louise exemplified this attitude:

I am quite a believer of like looking forward to getting old and growing old gracefully, like my mum. I keep going back to my mum, but my mum does use anti-wrinkle creams and stuff but they are like organic creams not like brand names, they are very much like oils and what not. I don’t think I would at all. I quite like the idea of maybe going grey and being an older lady with a grey bun on top of her head (laughter).

While acknowledging the negativity attached to ageing in the wider social and cultural setting, Louise suggested she would take a more ‘natural’ approach and not seek the appearance of youth forever. She distanced the products her mother used from ‘branded’ and mainstream items, linking them to a ‘natural’ approach. Though Louise voiced an acceptance of old age and its visual impact on appearance, a
judgement of appropriateness and attractiveness was still present in her narrative. Her use of the phrase ‘growing old gracefully’ illustrates not a complete acceptance of women ageing per se but of ageing in a specific manner which she positioned as acceptable. This phrase is loaded with class and gender judgements which Louise expanded upon:

Growing old gracefully . . . I definitely wouldn’t want to look like erm mutton dressed as lamb, like wearing the same younger clothes that I am now, when I am older. Like I would tailor my outfits to the age and things like that. I wouldn’t wear like, so when I do go out I do wear the eye liner and the foundation and things, I wouldn’t be like mutton dressed as lamb all glam and stuff I would be quite like a, this is what I am hoping anyway, a sophisticated granny.

Louise juxtaposes ‘growing old gracefully’ with ‘mutton dressed as lamb’. Overt attempts to appear youthful or the adoption of a style considered to be associated with a younger age category is presented as negative. A lack of taste and ‘class’ is assumed of women who present themselves in this manner.

While a notion of not being bothered about ageing or seeing it positively was occasionally voiced, this was accompanied by a strong sense of what to avoid. Too much of an attempt at stopping the ageing process or presenting oneself in an appearance associated with a younger age group was looked down on. Again this can be seen as associated with class and with knowing what is socially acceptable and appropriate. From a common-sense perspective these participants seemed broadly accepting of the ageing body and the material reality of this, but the distaste voiced towards those trying to disguise the ageing process too much reveals judgements about what was considered as ageing well. Though they had not yet experienced ageing themselves, my participants still situated their own predictions and anticipations in relation to taste judgements and what they saw as a desirable image.
Conclusion

In this chapter I have focused on my participants’ move into and experience of the work place and adulthood as well as their expectations of the impact of ageing and life events on body modification. As with previous life stages, sociality was the dominant factor in decisions made about practices and was situated as such in expectations of future engagement in body modification. The importance of meeting social expectations in the world of work was considered to be influential for career success with material implications. To get it wrong was to lessen one’s chances of getting a job or progressing in a career. To be good at one’s job as a woman was not enough, participants thought that to be taken seriously in a role and to be believed to be successful it was necessary to look the part, to have an appearance deemed appropriate for the job. My participants experienced the importance of appearance for one’s career as a very gendered burden, with men facing less pressure and their appearance being seen as less important in how they were judged by others. Many of the judgements of and criteria for a ‘professional’ image were classed. The professional image was associated with the middle-class and the supposedly stereotypical look of the working-class presented as inappropriate for the work context. This middle-class image was defined by restraint and moderation. Any sign of excess, whether of body weight or size, makeup, nail length or dress choices was read as a signal of an individual’s inability to meet the criteria of the work place and as a possible demonstration of their inability to carry out their role. In participants’ discussions of an acceptable and expected professional image the language they used to describe this appearance altered from previous discourse. Participants used unspecific and clichéd language when describing the image they aimed for in contrast to the specifics of practices that had been detailed when describing the aims of younger selves. The narratives had become outcome rather than process focused. In these descriptions of the desired professional image, the undesirable image to avoid was discussed in detail, acting as a tool to give more clarity to the aimed-for image. The professional self was defined by that which it was not, by the distancing of this image from others. What was desired was based on the appearance norms of colleagues.
In focusing on adulthood this chapter also analysed my participants’ expectations of later life body modification practices and desires. Participants’ predictions of their future engagement in these practices were founded on an assumed life event trajectory which was very traditionally heteronormative. The three main factors believed to be most likely to influence them were the acquisition of a long-term partner, career development and motherhood. The social expectations of each of these events and their identity were what participants anticipated being the defining factor for their practices at that time. Partner acquisition was seen to bring security in one’s own attractiveness but also revealing of a woman’s unmodified self and the labour of body modification. These factors were expected to result in a reduction in practices. Careers were thought influential not just because of the social expectations of the work environment context but also because of the financial improvement the participants anticipated. Financial resources limited women’s ability in attaining the image they sought. Pregnancy and motherhood produced contradictory expectations. Pregnancy was believed to impact negatively on women’s appearance and thus require more body modification, while at the same time participants expected giving less time to this once they were mothers because of time and money constraints and changes in their priorities. The need to alter one’s appearance was felt more pressing as a result of pregnancy, but women’s ability to do so was expected to diminish.

Ageing was another life event which produced contradictory and complex narratives regarding participants’ expectations of their future. Ageing appearances were considered to be negative, to be a decline and move away from the youthful ideal. Body modification featured as the tool to delay this decline and rectify the effects of ageing. On the one hand participants voiced their expectation that the impact of social pressure would diminish as they aged and that they would become more resistant to external influence. On the other hand the material reality of the ageing body and its social position as negative and in need of fixing meant that at the same time most anticipated that they would take up more practices to prevent themselves from showing the signs of ageing and that this would require more labour. To be viewed positively my participants believed women needed to age well, and this judgement was based on expectations of how women should appear at a certain age and what practices were acceptable for that age group. Age functioned as a form of regulation in the same way as context. Participants’ perceptions of their later life
practices were based on their understandings of the social expectations of these age groups. From start to finish, participants’ experienced and expected sociality to define their body modification. Previous life experiences of body modification and social reactions to it shaped participants’ approach to body modification at this life stage and their expectations of the future.
6. Conclusions

In this thesis I set out to investigate why women engage in their chosen forms of body modification and how their practices change over their life course from childhood to adulthood. In my work I focused on three key life stages: the school years, university, and the world of work - as well as looking at women’s future expectations of the body modification. As empirical data, I conducted interviews with 30 university-educated British women aged 18 to 25 in 2012. In these interviews I collected life-history narratives of the women’s body modification, beginning with their first engagement in these practices. These narratives explained participants’ motivations to engage in body modification and their understandings of their practices as these developed. In this concluding chapter I shall begin by briefly going back over the main debates in the field of body modification which were the starting point for my own research. Following this I shall discuss my findings and how they contribute to knowledge in the research field of body modification and feminism. Lastly I shall outline future possible research avenues which would contribute to this field further.

Key Debates

Body modification is an important issue in a contemporary culture where women are endlessly assailed by exhortations to manipulate their bodies to fit in with problematic body norms and where it has been claimed that an unaltered female body is unacceptable. It is a topic that has been widely researched by both feminist and non-feminist scholars, as I illustrated in my Literature Review. The key debates and focus in body modification research centres on the question of who does what and why, on women’s motivation to engage in these practices and their agency in this. In medical literature, practices that are extreme or are deemed to be damaging to women’s health are given attention, in contrast to the predominantly mundane and temporary practices engaged in by my participants. The driving aim of this field of research is always to discover the cause behind an individual’s engagement in
damaging practices and the cure to stop them. Body modification in these cases is treated as a symptom associated with an individual rather than a reaction to societal norms, as my research has found. Feminist literature on body modification, the most significant work for my research, has notably centred on the question of agency and choice. Addressing the question of what degree of agency (or oppression) women have in their decisions to modify their bodies has defined most feminist research in this area, especially in the last three decades. Different and often opposing stances emerge from feminist research on this debate. On the one side cultural-dupe theory was developed which presented women as passive victims of patriarchal control. On the opposing end of the spectrum, third-wave feminism positioned body modification as an act of agency and a source of empowerment. From this stance body modification is argued to be a tool that offers the possibility for the democratisation of good looks, which is understood as beneficial for women in contemporary society. This perspective cites choice as key in women’s decisions and either does not acknowledge or significantly downplays the role of external pressure and norms in contributing to women’s engagement in body modification. My participants did not cite choice as key in their decisions, and this recognition is part of my contribution to knowledge on body modification, which this conclusion will elaborate on.

Throughout my thesis I have used the phrase ‘body modification’ broadly to mean all methods which women engage in, in order to alter their physical body and appearance. All methods of body modification (e.g. invasive or non-invasive; self-administered or other-administered; permanent or temporary) are part of this, provided the intention of their use is primarily to alter the user’s physical appearance. I decided on this inclusive definition in order to ensure that women’s ordinary body modification regimes and practices could be investigated. Despite the fact that women engage in a multiplicity of practices as my research has shown, the vast majority of literature on body modification, in particular that based on empirical research, tends to focus on only one practice at a time, for example on dieting. By only engaging with a single practice this literature ignores the relationships and hierarchies that exist between practices of body modification and the significance of these in women’s experiences of engaging in them. I would also argue that it is important to investigate the mundane, everyday and unquestioned aspects of body modification that make up the majority of the everyday practices of the women I
interviewed because, as Hope (1982) writes, ‘those behaviours which are most taken for granted in a culture may well be the most important ones for revealing an understanding of that culture’ (92). My definition of body modification contrasts with understandings of the term in popular imagination and in popular culture. Body modification usually is a phrase used to denote invasive and permanent methods, such as surgery, Botox or tattooing. In addition it also contrasts with the focus of much of the empirical literature on body modification where similarly extreme, invasive or dangerous methods are the most discussed practices. This was reflected in many of my participants’ statements that prior to the interview they would have understood body modification in this way. Peggy, for example, said: ‘if you say body modification, straightaway I just think about the really permanent stuff, like surgery or piercings and tattoos’, while Nicole stated that she ‘would see it as body modification if it was a permanent thing . . . the way you dress or dying hair or things like you know like your hair cut I wouldn’t see that as body modification because it’s a temporary thing’. My more expanded definition and approach to researching body modification offers a fresh investigatory perspective as, even in academic work, my thesis is the first comprehensive qualitative examination of British women’s body modification practices that considers all the practices raised by the interviewees and not just one.

The life-history approach of this thesis and my focus on women’s experience of body modification at three key stages of their lives: the schools years, university and the world of work, is also an original perspective in this field. Previous literature has not examined women’s body modification as an ongoing process across individuals’ life courses or the interconnected relationship between all of the body modification an individual engages in over her life time. By taking this new approach I was able to investigate my participants’ reported body modification practices as these developed across different life stages. This approach made the prevailing norms of different age groups visible. Consequently, in this thesis I have been able to take a holistic view of women’s body modification regimes, which acknowledges the context of their lives rather than analysing my participants’ practices as isolated methods detached from the rest of their life. My approach thus constitutes a new and significant contribution to knowledge for this field of work.
My Findings and Contributions to Knowledge

I set out to discover why women engage in their chosen body modification and the reasons behind changes in these practices over time. In line with my findings I argue that the key driver for these women was sociality: the people with whom they spent time in any given period in their lives and the social norms, expectations and understanding in each given context. In my participants’ narratives sociality was the factor which defined their body modification decisions, determining throughout their lives what practices they engaged in, the products they bought and the appearance they desired. This finding contrasts directly with third-wave feminism’s stance on body modification as a free choice and an act of empowerment. It also differs from the dominant line taken in popular culture where the ‘media’ are regarded as the undefined culprit pressuring women into body modification through the unrealistic idealised images of women they propagate. While a more general and broad concept of the feminine ideal was always present in my participants’ narratives this was not the most important factor determining their decisions. Instead, the people they spent time with, the context which my participants inhabited and the norms of acceptable feminine appearance in that context were the variables integral to their decisions and practices of body modification. One can of course argue that these were influenced by the media. Ellie’s statement that she and other women engage in body modification to ‘fit in’ and Peggy’s assertion that body modification is about ‘acceptance’ and that ‘it changes depending on who I hang out with and who my friends are’, epitomise the role of sociality that consistently emerged in all of the narratives I collected.

My participants were aware of the role and influence of sociality on the body modification decisions they made and in their narratives reported the different ways that it had operated across their life course. However, alongside my participants’ awareness and identification of external social pressure as the key determinant in their past, present and predicted later life practices, a contradictory trope of age bringing resistance to external influence simultaneously coexisted. On the one hand sociality was consistently identified across the life course as crucial in the decisions the women made, on the other hand the younger self was positioned as more
susceptible to external pressure and age was identified as bringing with it resistance to this. None of my participants identified or engaged with this contradiction, meaning it existed simultaneously and unproblematically for my participants in their narratives. These contradictions shall be discussed in more detail later in this Conclusion.

Sociality functioned in a variety of ways in my participants’ narratives and to varying degrees across the life-course. Mothers and peers were the two sources of overriding and pervasive influence. How the influence of these two groups operated changed across time but its presence was consistent from the beginning of all my participants’ narratives. The influence of mothers operated through commentary, example (to follow and occasionally to avoid) and guidance. When participants were young, mothers often had direct control and power to regulate their body modification engagement. As participants grew up however, the mothers’ influence operated in a less restricting fashion and became more covert. Requested advice and the examples mothers set through their own behaviours took over as the main form of their influence when my participants reached their late teens and were at university. Mothers were frequently viewed as figures of authority because of the greater knowledge and experience of body modification they were expected and understood to have and because they were perceived to be examples of participants’ corporeal futures.

Peers acted throughout most of my participants’ lives as the barometer of social norms. They were examples which participants objectified and compared themselves to. They often acted as regulators, sanctioning those who got their appearance ‘wrong’ and praising those who got it ‘right’. Peers were the group with whom participants wanted to fit in and they adapted their body modification accordingly to ensure this. Mothers and peers frequently (especially in the school years) influenced participants in conflicting ways. During their younger years it was common for example for mothers to prohibit the wearing of makeup or the uptake of shaving, as in Natasha’s and Kerry’s cases, while peer norms and sanctioning made these practices a necessity for my participants to fit in in the school context. The outcome of participants’ body modification decisions was a negotiation of these two
influences. As I work through the specific findings of each of my chapters, the role of mothers and peers at each life stage will be explored in more detail.

My theoretical explanation of how sociality operates builds upon the work of Gesa Lindemann (1997) and expands on her conceptualisation of a three-tiered differentiation of the body based on its phenomenology. This theoretical elaboration is an original contribution to knowledge and offers a new perspective for body modification to be analysed and the motivation behind these practices to be understood. In Lindemann’s three-tiered differentiation the first bodily level is the objectified body, the body as a visible and concrete gestalt. The next, the experiencing body, is the body which lives in sensory and practical reference to the environment. The third and final level is the experienced body, one’s own body distinguished to the extent that it is experienced. If the latter two levels cannot be differentiated, they are referred to as the living body. I added a fourth level to Lindemann’s distinction, the ideal body. This is the ideal female body taken from popular culture, and it informs us of how the ideal woman is culturally constructed. The ideal body is the body to which all others are compared and by which they are judged. The ideal and objectified body in combination are key to the occurrence of body modification. It is the point at which a person experiences her own body as objectified that body modification begins. The objectified body is the body compared to other bodies. When a woman’s objectified body fails to meet this ideal, it is experienced and viewed as lacking. Body modification is employed to reduce this lack. This four-fold differentiation of the body offers a new and original way to investigate the cause and motivation behind body modification practices. It underpinned all my analysis chapters. I shall therefore now discuss the new findings I produced in each of my chapters. The implication of the knowledge contributions I make in this thesis for the research fields of body modification and feminism will also be outlined.

My methodological approach to investigating body modification was different from prior research in this field. I began the process of designing my interview schedule by writing an auto-ethnographical piece on my own body modification history. In this I documented my practices from first engagement until the point at which I wrote my auto-ethnographical account. I used this piece to inform the composition of
my interview schedule and define my interview focus. At the time of my interviews I fit the demographics of my participants, and so my auto-ethnographical account provided a good example of possible topics and practices which might be raised in my participants’ narratives. This piece also made visible how a body modification history may be narrated, illustrating areas which are easily overlooked, taken for granted or difficult to discuss. This approach to designing an interview schedule might well be beneficial for future body modification research because of the awareness it gives the interviewer in relation to discussing and disclosing in relation to this topic.

In Chapter 3, the first analysis chapter, I examined my participants’ first engagements with body modification and their experience of these practices during their school years. The school years were the life-stage at which all of my participants began body modification and the school context was critical to the development of these practices. Through my analysis I made four new discoveries specific to this life stage: the importance of the school context and sociality in determining individuals’ initiation into and engagement with body modification; identifying mothers and peers as the main source of influence; identifying how sociality functioned at this time; and establishing the meaning of body modification within the school setting and school years.

This chapter demonstrated that my participants understood body modification at this point in their lives to be a sign of womanhood and, as Peggy stated, the means of ‘the real transition between a child and a woman’. Participants’ motivations to engage in body modification were not based on their ‘need’ to engage in these practices, as Kerry’s engagement in body hair removal before hair growth demonstrates, but instead were founded on the connotations of the act of engagement in their immediate environment. This contradicts previous research, which I discussed in my Literature Review, where the physical development of puberty is given precedence in girls’ motivation to engage in body modification (Bloustien 2003). The need to engage in body modification for one’s sense of womanhood was as much about the act and consumption of products as it was about the appearance produced through these practices. Body modification was seen as an integral part of acceptable adult female identity, reported as an embodied event and not something simply done to the
body. This finding offers a fresh interpretation of the significance of body modification for school-age girls and contributes to our understanding of girls’ motivations to engage in these practices.

Sociality was key in my participants’ decisions to begin to engage in body modification. It informed both their understanding of these practices as necessary for womanhood and dictated the norms and acceptable appearance within the school context. Mothers and peers were the significant groups influencing my participants at this time, as I previously mentioned. The influence of these two groups worked concurrently, though often not in harmony, and in conjunction with a cultural context which reinforced to my participants the need for women to engage in body modification and its importance to their identity.

At this life stage sociality operated predominantly through direct comments, intervention and overt social sanctions from peers at school. Peer appearance and practice norms were emulated in order to ensure participants fitted into the school context and avoided negative social ramifications and ostracisation. At school this manifested itself in a desire to look the same as one’s peers, to carry out the same practices of body modification as they did and to buy the same clothes and products, reinforcing previous research which has highlighted the significance of peer preference in product choices (Frost 2005). Peer norms in the school context determined whether a form of body modification was started or stopped and what one’s appearance goal was. Participants’ practices only changed when the prevailing norms did. For example many spoke of how they altered their appearance on commencing sixth form because of the new expectations of this environment that differed from those of their school previously. The immediate environment was crucial to participants’ decisions and practices as the feedback circle demonstrates. While appearance did change, the goal to meet peer and context norms remained throughout the school life-stage. The key point or catalyst for participants’ initial uptake of body modification was their comparison of themselves to their peers and their peers’ comparison of them to the norms of those around them. They began body modification when they and others (their peers) began to objectify their bodies. The theoretical approach of a four-tiered differentiation of the body I developed was
crucial here to fully understand how this objectification through comparison worked in my participants’ experience.

Mothers at this life stage acted as teachers, examples and regulators. Parental reactions to my participants’ body modification was not consistent or uniform, but was always based on the understanding of body modification as a sign that daughters were developing or transitioning into being a woman, reinforcing the view that these practices are a sign of womanhood. Mothers’ understandings of body modification as a sign of womanhood have not been considered as a contributing factor in girls’ initiation into body modification in previous literature. My research therefore brings to the field a fresh analysis of daughters’ understandings and recollections of the role of their mothers in their uptake of these practices.

My investigation of the school years revealed not only participants’ motives to engage in body modification but also details of the practices they used and the norms of their peer groups at this time. These practices were surface focused and temporary for the most part, dominated by makeup, hair removal, hair styling and clothes. As these practices were explained to be those which also made up the body modification regimes of participants’ peers it is possible to infer that for at least some British girls at school these methods were the norm. This finding is consistent with the practices advertised and discussed in magazines aimed at this age group but contrasts with the discourse in popular culture more widely where invasive and extreme procedures are presented as increasingly common and engaged in by a substantial number of girls in this demographic. I do not want to suggest that there has not been an increase nationally in young girls’ engagement with these practices but rather, my point is that a discord exists between how girls’ body modification practices are portrayed, the panic which surrounds them, and what appears to be the experience of the majority of girls at school, at least in terms of the women I interviewed.

The findings of Chapter 3 offer a fresh perspective on girls’ first and early engagement in body modification and experience of these practices during the school years. These findings contrast with the third-wave feminist argument that body modification is an act of individual agency. Third-wave feminism has presented younger women in particular as able to deconstruct and be uninfluenced by social
pressures of acceptable femininity. They are a group believed to be especially adept at using body modification for their own empowerment and enhancement. My participants’ reality and experiences contrasted with this logic. They used body modification to cover flaws. The act of hiding was used as enhancement. The uniformity of my participants’ narratives of their first engagement with body modification and its development reinforces that endless possibilities did not in reality exist for most of them. The school setting provided an environment where certain ideas about femininity were disseminated and effectively enforced upon girls. School was where my participants received their formative education on gendered norms and expectations; it was where they learnt what practices are deemed socially necessary for a woman to engage in. Peer commentary and comparison alongside maternal influence acted to enforce these norms at this time. School was also the context where the belief that a woman would be judged by her appearance was instilled. From this stage women’s expectation of their bodily objectification became internalised.

Chapter 4 of my thesis moved on chronologically in terms of life stage to analyse participants’ experience of body modification at university. Once again the dominant message in participants’ narratives was that they wanted to fit in with the norms of their context. This contrasts strongly with previous research that has identified girlhood as the life stage where women are most susceptible to external influence in terms of body modification (Bordo 1993 [2004]; Bloustien 2003; Frost 2005). Sociality, through comparison among peers, continued to inform and determine both the practices participants engaged in and the appearance they sought. At this stage however, sociality functioned no longer through direct and overt comments and interventions from peers sanctioning those who got it wrong, but instead was characterised by internalised expectations of norms and appearance in conjunction with seeking commentary from peers. This stage was defined by a more covert form of peer pressure. This finding provides a new insight into the development of women’s body modification practices and how external influence operates at this time in young women’s lives.

While fitting in with peers at university was still the main reported determinant of their appearance and body modification, when at university this was not how
participants perceived their motivations at this stage. A disjunction existed between how my participants vocalised the development of their practices at university and what their narratives suggested about their actual experience of body modification at this time. When explaining change in their body modification regimes participants distinguished the university experience from the school years in part by saying that at this stage in their lives they had become less influenced by peer and external influence and instead were now more motivated by their own preferences. Participants’ narration of their experience of body modification at this life-stage and its development contradicted this assertion however. This finding expands our understanding of how women perceive their body modification regimes and narrate their history of these practices.

In Chapter 4 I also demonstrated how university brought with it new and varied environments and that as a result participants were now required to respond to a more divergent range of self-presentation demands. At this life-cycle stage we begin to see the start of participants’ identities becoming adapted to meeting the diverse requirements of each of the environments they inhabit. For the first time in their narratives participants reported engaging frequently and simultaneously in different, often disconnected environments that each had particular requirements of acceptable and normative appearance. Participants now had to adapt their appearance to fit each context. These adaptations were undertaken in order to ensure they could present their chosen identity in each environment. For example Betty spoke of the discomfort she would feel if she was seen by her supervisor or work colleagues when on a night out because of the difference in her self-presentation in this setting from the appearance she would normally present to these individuals. Jenny also raised this issue, describing how she presented a different appearance when with friends from university than when she was with friends at home. My participants by this stage had an established understanding of the expectations of each setting and the cultural readings of specific appearances, and it was expected others would too. Their knowledge of social expectations was not however without gaps, demonstrated through the mistakes they had made in the past and through the mistakes they reported other women to have made. ‘Getting it right’ was still vocalised as a concern because participants still wanted to fit in and gain the approval and acceptance of their peers.
It was at this life stage that consideration of classed appearances became apparent in participants’ narratives. A woman’s appearance was understood as a visual display of her classed identity, and class (though not identified in such terms) was viewed hierarchically. The closer a woman’s appearance was to the middle-class ideal the ‘better’ she was deemed. As a result, at this time body modification became more covert as participants moved to a more middle-class image exemplified by participants’ desire for practices to be non-detectable and the labour involved hidden. Those who failed to hide their labour effectively were viewed as incompetent and as having poor taste. By this stage my participants were skilled in most practices of body modification. What was being judged externally was their taste and knowledge of an appropriate appearance. The dominant practice reported in my participants’ narratives related to dress. The prominence of this reflected the new need for multiple self-presentations which participants experienced while at university. Dress enabled participants to alter their appearance to fit into each new context they encountered. It allowed participants to demonstrate taste, identity and their knowledge. My participants’ awareness of the social judgements made of their appearance and their own pragmatic conformity to the norm as a result has not previously been considered in body modification literature. This discovery simultaneously challenges the third-wave feminist argument of body modification being a choice and the concept of the cultural dupe.

The university life-stage was the period where participants also began to encounter new restrictions and limits on their body modification regimes which had previously not impeded their actions. In particular, time and financial restriction were experienced as having considerable constraining effects on their self-presentation. Participants now had to fit their body modification regime into a schedule which they had for the first time to self-manage. They were in charge of their own budget, which now meant managing household and full living costs, not only one’s disposable income. Body modification decisions were not only defined by personal adaptations to social expectations but also confined by time and finance which impacted on how people dealt with their bodies.

Continuing along participants’ life-course in Chapter 5 I investigated the world of work and participants’ expectations of their future practices in later life. My research
demonstrates that at this life-stage and in the work context presenting an acceptable professional appearance was my participants’ dominant aim. The professional appearance described by my participants was classed and gendered and might be interpreted as middle class. This professional image was defined by restraint and moderation, the avoidance of any sign of excess, revealing neoliberal judgements and values in participants’ understandings of how body modification is read. When describing the professional image they desired and saw as appropriate for the work place a disparity was evident between the discourse participants used to describe an acceptable appearance and the one they used to illustrate an unacceptable image. The professional image was characterised through clichéd and vague phrases. In contrast unacceptable appearances were described in concrete detail. My participants found it much easier to specify the undesirable than the desirable appearance.

Behind participants’ explanations of their conformity to a conventional professional image was a conviction that appearance has material implications for women’s careers. This was something most participants reported as experiencing first-hand or having been witness to. It was the reason for the importance they saw in meeting the social expectations in the world of work. This finding reinforces existing literature on ‘lookism’ and the significance of appearance in the work environment, which I discussed in Chapter 5 (Wellington and Bryson 2001; Granleese and Sayer 2006; Harwood 2007; Warhurst, Van den Broek, Hall, et al 2009). Participants argued and demonstrated in their narratives that for a woman to be taken seriously in a job she must have the appropriate appearance for that employment.

Each participant’s professional image was established through the norms of their particular work environment. Sociality was still crucial and functioned in four dominant ways. The first and most apparent of these ways was colleagues as role models. The interviewees objectified their colleagues as sources of information in a similar way as they had done at university (Chapter 4). This provided them with context-specific knowledge of the dominant work-appearance norms. The second way in which sociality functioned in this life stage was through a very strong understanding by my participants of how they would be perceived by others: colleagues, clients, employers. All of my participants made the assumption that they would be objectified by others and that this objectification would be used to inform
judgements about them. The third function built upon this expectation of being observed and objectified by others, as participants understood themselves as potential models for others. For those in positions of authority or responsibility the knowledge that they might be looked at as a guide for how to present oneself impacted on their appearance decisions. The final dominant way in which sociality functioned at this time was through participants’ belief that they represented a firm or company. This was particularly notable in outward-facing jobs. As a result, participants said they felt obliged to ensure their appearance matched the image their employer or firm wished to propagate, and that this was part of their job role, irrespective of what it actually was. Appearance was read as an indicator of competence, and of suitability for a job. The significance of appearance for career progression was experienced as a gendered burden. Participants such as Kerry spoke of the different expectations women and men face in the workplace, highlighting the greater value placed on women’s appearance over other attributes than on men’s. Social impact and regulation was based on observation, observation of others, of self and the belief that one would be observed by others. Women’s own experience and understanding of how appearance expectations operate and are disseminated in the workplace has not been investigated in this manner before and so these original findings constitute new knowledge in this field.

In Chapter 5 I also analysed participants’ expectations of their practices in later life. This included both the near and the distant future. I found participants’ expectations of their future practices to be based on their perceptions of what appearances and body modification would be socially acceptable and normative for the varying environments they anticipated inhabiting. They took into consideration the identities they anticipated taking on and the effects of age. Even before these events had occurred sociality was still understood by my participants as the key influential factor. Participants’ predictions revealed an assumption that their life would develop along a conventional heteronormative path. Anticipated key events, specifically the acquisition of a long-term partner, career development and motherhood, were identified as significant for a woman’s engagement with body modification and as certain to result in change. The acquisition of a long-term partner was predicted to be significant because of the intimate and personal space partners were assumed to simultaneously occupy. Participants speculated that, once in a long-term relationship,
women would allow themselves to be seen by the partner in question unmodified and would no longer conceal the labour of body modification from this individual. A long-term relationship was also understood to bring a woman more security in her sense of attractiveness. My participants said that the combination of these changes was likely to result in a decrease of body modification for women.

The second event they predicted to be influential and cause change in their regimes was successful career progression. They thought that their careers were likely to influence them beyond the necessity of meeting the professional image I previously discussed. Participants, for example, anticipated having a higher income which they predicted would result in them switching to better (and inevitably more expensive) products and methods of body modification. Notably in their predictions my participants did not anticipate the aims of their body modification to alter or their practices to increase as their financial situation improved. Instead, they predicted that they would continue to aim for the same appearance but be better able to achieve this as a result of their increased purchasing power. This prediction contrasts with third-wave feminist arguments of body modification providing a democratisation of good looks as it highlights the significance of financial resources for women’s ability to attain their appearance preferences. This was the case for Monica for example.

Motherhood was the final life event that all participants expected to have an effect on their body modification practices. The influence of this life event was described in contradictory ways. Firstly, pregnancy was believed to impact negatively on women’s appearance and thus necessitate more body modification. Participants believed that following pregnancy they would, of necessity, have to engage in more dieting and exercise to ‘rectify’ the effect of pregnancy on their bodies. This was also often the first point in participants’ lives that they envisaged considering or engaging in cosmetic surgery, and the first time they saw it as a legitimate option for other women. In contrast, once mothers, participants anticipated that they would give less time to body modification practices. This was in part due to the financial and time constraints they understood to come with motherhood, but also because they expected the role to change their priorities and the identity they wanted to portray. These expected changes in self-presentation were predicted to be motivated by certain social factors. My participants explained their predictions through examples
of what they perceived as normative and socially acceptable images of motherhood and the accompanying body modification practices and appearances for this identity. In part participants wanted their appearance to fit in with social expectations of acceptable motherhood in order to avoid stigma. This decision was also however the result of their understanding that daughters would copy their examples, as they had their own mothers. They wanted to present a ‘positive’ appearance to their daughters that they believed would be socially acceptable and non-problematic or stigmatic. Young women’s predictions of their future body modification are a previously unexplored area. My findings on this topic provide new insights into how women understand body modification as an ongoing practice and their perception of the social norms of different age groups and ‘types’ of women. This discovery also reinforces the significance of context and external objectification on self-presentation and how body modification is used to shape this.

In addition to considering the impact of expected future life events on their body modification, my participants also discussed their assumptions of how ageing, and its corporeal effects, would impact on their decisions and regimes. Mothers once again featured as significant influential figures in participants’ narratives, impacting on their predictions of their future practices and their attitudes towards body modification and ageing. My participants generally believed that they would follow in their mothers’ footsteps both biologically (a lot of weight was given to the concept of hereditary genes and characteristics) and in regard to taste and attitude towards body modification. Contemplating the impact of ageing on their body modification practices resulted in participants producing contradictory narratives. Participants described ageing appearances as negative and a move away from the youthful ideal, necessitating the need for more body modification to aid a woman in hiding and rectifying the visual signs of ageing. This perspective reinforces existing feminist literature which discusses the negative cultural perceptions of ageing women, particularly in relation to women’s appearance. Contradicting this assertion, my participants simultaneously anticipated their resistance to external pressures with increasing age, reducing their engagement in body modification practices.

The expectation of age resulting in an increased resistance to external pressure was a constant theme which ran throughout my participants’ narratives. The younger self,
irrespective of specific ages, was always depicted as more susceptible to peer pressure. When narrating their life histories of body modification and so the development and change of their regimes and motives, participants explicitly identified their own resistance to external societal influence as increasing as they aged and spoke of body modification becoming more based on personal preference. What participants’ life-course narratives demonstrated however, was that their reported motivations and practices ran counter to their statement of greater independence from others. This was further illustrated by the frequency with which participants asserted the conventions of age appropriateness as an important consideration in how they presented themselves and how they judged others, which phrases such as ‘mutton dressed as lamb’ encapsulate. While a dominant argument exists in body modification literature asserting that young girls are most at risk, with the implication that age protects women against external pressures, my findings strongly challenge this presumption. The disconnect between participants’ reported experiences and practices of body modification and their perception of this is illustrative of how the discourse of increasing self-reliance and resistance to external (peer) pressures has had considerable impact on popular perceptions of body modification development in women’s lives and on women’s perceptions of their own history.

**Conclusion**

The dominance of sociality in determining my participants’ decisions about their appearance proved consistent throughout their lives. During my final thesis advisory panel meeting (TAP) I was asked whether any of my participants had broken the mould and not conformed to social expectations and norms at any point in their lives. The answer to this question was no. There was no sense of dissent in any of the thirty narratives I collected. At every life stage sociality dominated participants’ motivations to engage in these practices. While how sociality operated and the message it projected did change, its importance in the decisions they made did not. Women do not engage in body modification just because they want to, nor are their decisions made in a situation of free choice. Choice and agency were never cited by any of my participants as a key motive for their practices. My participants were very
aware that they engaged in certain practices to fit in with the norms of those around them and the expectations governing any given context. Their decisions were pragmatic. They thought that not conforming to an acceptable female self-presentation would result in social sanctions. Fear of this, or of having their identity read as wrong or negative, was what motivated my participants to engage in body modification. Throughout all life stages sociality acted to define and regulate my participants’ body modification and self-presentation. The findings of my thesis directly challenge third-wave feminism’s frequent argument that body modification is a personal choice made freely which empowers the user. Participants also made it very evident that because women’s body modification practices are restricted by time and financial resources, it cannot be argued to offer the democratisation of good looks that it has sometimes been praised for.

The findings of my research and the data I was able to collect are the result of my methodological decisions and need to be critically reflected on in thinking about the conclusions I make in this thesis and avenues of possible future research. My decision to include a wide range of practices in the definition of body modification I utilised for this thesis enabled me to obtain data which made visible women’s developing regimes of body modification and the relationships between their varying practices. In deciding that this definition would be of a ‘participatory’ nature, with any practice my participants identified as body modification being included, practices which ordinarily might be categorised separately (e.g. self-harm and makeup) were brought together for discussion. The advantage of this approach was that it ensured that I did not make prior assumptions about how my participants would categorise or experience their varying practices. This also enabled me to investigate the relationships between different practices which I would not have initially considered part of the same regime. Based on an auto-ethnographical account of my own body modification history, my interview schedule was also significant in influencing the data I collected. This approach proved advantageous in allowing me to anticipate areas of possible difficulty in the interview or topics easily overlooked, but it also meant that the focus of my questions was informed by my own experience and priorities, not necessarily the participants’. The decision to interview itself was crucial for answering my research question and identifying sociality as the key determinant in women’s body modification practices. This
method helped me to illicit my key findings which another method such as observation would not have allowed. Observation for example would not have enabled me to know of participants past experiences of body modification or future expectations. Given the private and taboo nature of many of the topics discussed in addition to the fact that often participants, such as Anouk, said that they had not previously discussed certain practices or decisions with others, I do not think that I would have been able to glean the same information through observation and without prompt.

My thesis has shown that sociality plays a key role in why women engage in body modification. In doing this my thesis has simultaneously opened up new questions for feminist body modification research that would contribute to gaps in the literature. My research focus on a specific group of women (aged 18-25 who had attended university) means that in part the findings of my research are limited in their application to this demographic. Given the importance of context and social norms in my participants’ body modification decisions, I would argue it is highly probable that a different sample of women would report engaging in a different range of practices and have different aims for their appearance. It would therefore be useful to carry out the same type of research on other demographics in order to establish whether the importance of sociality is also evident more broadly and if so what its effects are.

Firstly, it would be useful to carry out this same type of research on older women, particularly those over the age of fifty. This is an age group not well-documented, especially in regard to body modification, and an age which my participants found particularly difficult to imagine themselves in. Despite this, women over fifty make up a key and large consumer group. A substantial and growing market exists for anti-ageing products for which they are the main target audience, adding to the need for this research. The importance of the maternal example in participants’ narratives also makes this age group of women an important demographic because of the likelihood of a large percentage being mothers themselves. As I have considered body modification over the life course, women in this demographic would also be able to provide narratives inclusive of a far greater stretch of time, having undergone many of the predicted future events which participants anticipated to be influential on a woman’s body modification regime. In addition, in researching this specific group of women, the contradictory trope of age bringing resistance to external pressure which
featured strongly in my participants’ narratives but was unsubstantiated could be better investigated and tested.

An investigation into the practices of women from a different class and socio-economic background would also be useful. This would allow for the investigation of the influence of socio-economic status on women’s body modification regimes and motives. This is particularly relevant because of the classed nature of the appearances my participants described and the importance of appearance in their narratives. My participants were all heterosexual (by chance, not design) and their predictions of their future practices of body modification were based on very normative heterosexual life developments. It would therefore be useful to conduct research with lesbian women from the same demographic background to establish whether sexuality plays an influential role in women’s body modification decisions. Given the multiplicity of practices that people engage in further research into the relationships between the different practices women undertake and the hierarchy that exists across them would offer a better understanding of how these regimes develop and are experienced by women. Finally I think that if this study were longitudinal and I were able to interview the same women at multiple points as they aged, it would provide evidence of both how realistic their predictions of the future were and to what extent their experience and relationship to body modification changed across their lives. This would extend our understanding of women’s life-long engagements with body modification as well as how an individual’s past impacts on her practices throughout her life.

Further research is needed in the field of body modification because of the discord between how these normative, pervasive and expected practices are understood and the reported reality of the experiences of the women that engage in them. Body modification is discussed and understood as a practice of the self. While the self is usually the administrator of these practices, as my thesis has shown, they are not self-generated or self-sustaining. Body modification is a practice of the social.
Appendix A: Call for Participants

I am conducting research for a project that is interested in women’s relation to the management of their bodies, from makeup to Botox, self-tanning to dieting, shape-wear to hair dying and much more.

I am looking for British women aged 18-25 who are either in attendance of university or have attended university and are now in employment. I will be conducting one to one interviews approximately 45-90 minutes long. The interviews will take place in a mutually agreed location. If you are interested in being a participant please get in touch via email to: alt510@york.ac.uk
Appendix B: Consent Form

Consent Form

Project Title: Female Cultures of Body Modification

Researcher: Abigail Tazzyman, PhD Candidate at the Centre for Women’s Studies, University of York.

Please tick box

Yes  No

1. I confirm that I have read and understand the information sheet for the above project and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving an explanation.

3. I agree to take part in the above project.

4. I agree to the interview being audio recorded.

5. I agree to the use of anonymised interview quotes in the PhD thesis and other related publications or talks.

6. I agree that the data gathered in this study (the audio recordings and transcriptions of the interviews) will be stored anonymously and securely on the University of York’s network, and can only be accessed by the researcher Abigail Tazzyman and her supervisor Professor Gabriele Griffin.

_____________________________________________  ________________  __________________________
Name of Participant                          Date                        Signature

_____________________________________________  ________________  __________________________
Name of Researcher                          Date                        Signature

Contact Details:
Postal Address: Abigail Tazzyman, Centre for Women’s Studies, Grimston House, University of York, York, YO10 5DD.

E-mail: alt510@york.ac.uk                        Phone Number: [Redacted]
Appendix C: Participant Information Sheet

Participant Information Sheet

You have been asked to take part in a research project. This sheet offers some basic information about the research project and what it will entail. Please take some time to read the following information, and feel free to ask any questions.

Project Title: Female Culture of Body Modification.

Summary of the project:
I am researching women’s attitudes to and experiences of body modification in the UK. My research centres on women’s relation to the management of their bodies, from makeup to Botox, self-tanning to dieting, shape-wear to hair dying and other similar practices. To understand this, I shall interview British women aged 18-25 who are at or have been to university. The interviews will cover interviewees’ attitudes towards and experiences of body modification practices. The interviews will form the basis for PhD research taking place at the Centre for Women’s Studies, University of York.

What does the interview involve?
The interview, one-to-one, will last approximately 60 to 90 minutes, and will take place at a time and place convenient for the interviewee. The participant may stop the interview at any time.

Consent
I hope you'll feel interested in participating. If, after reading this information sheet, you decide that you are keen to take part, I'll ask you to sign a consent form which indicates that you've agreed to be interviewed and that I can use the anonymised data from your interview for my research. However, you can withdraw your consent at any time, and you will not have to provide a reason for your withdrawal.

By signing the consent form, you consent to having (anonymised) material from your interview reproduced in my PhD thesis and any related publications or talks, e.g. journal articles, book chapters and conference papers. Once the thesis is completed, it will be available for reference to other researchers through the library system.

Confidentiality
All information collected about participants will be kept confidential and private. Full anonymity is ensured, and participants will be assigned pseudonyms. Data generated by the study must be retained in accordance with the University of York’s policy on Academic Integrity. All the interview data (recordings, transcripts etc.) will be stored under pseudonyms, to retain anonymity. The only people who will have access to the interview data will be my supervisor (Professor Gabriele Griffin) and I, and it will be stored safely on our personal accounts within the University of York network.
Contacts for Further Information
Please contact either myself, Abigail Tazzyman at alt510@york.ac.uk or the supervisor for this project Professor Gabriele Griffin, gabriele.griffin@york.ac.uk if you have any queries or concerns regarding this research project.

Thank you for taking time to read this information sheet.

Abigail Tazzyman
Postal Address: Abigail Tazzyman, Centre for Women’s Studies, Grimston House, University of York, York, YO10 5DD.
E-mail: alt510@york.ac.uk
Phone Number: [redacted]
Appendix D: Support Contacts and Information for Participants

Support Contacts and Information

**BEAT:**
BEAT provides helplines, online support and a network of UK-wide self-help groups to help adults and young people in the UK beat their eating disorders.
www.b-eat.ac.uk

**Helplines:**
For the **Adult Helpline**, please call 0845 634 1414. This helpline is available to anyone over the age of 18 and is open Monday to Friday 1.30pm – 4.30pm. We are also open 5.30pm-8.30pm on Mondays and Wednesdays. Alternatively, you can email help@b-eat.co.uk.

For the **Youthline**, please call 0845 634 7650. The Youthline is available to anyone aged 25 or under, and is open Monday to Friday 1.30pm – 4.30pm. We are also open 5.30pm-8.30pm on Mondays and Wednesdays. You can also text the Youthline on 07786 20 18 20 - send us a message and we will get back to you within 24 hours. There is also a Youthline email service at fyp@b-eat.co.uk

**NHS Support**
www.nhs.uk/conditions/eating-disorders

**Anorexia and Bulimia Care:**
www.anorexiabulimiacare.org.uk
mail@anorexiabulimiacare.org.uk

**Mental Health Foundation**
www.mentalhealth.org.uk

**Mind:**
www.mind.org.uk
0300 123 3393
info@mind.org.uk
Appendix E: Interview Schedule

Interview Schedule

Aims:
From my interviews I wish to find out:
What the interviewee perceives body modification to be
The personal history of body modification of the interviewee
The practices they do and do not undertake
The reasons why they engage in certain practices and not others
Their prediction of their future engagement with body modification practices.
What influences their decisions to undertake these practices?
How they perceive the practices they do not engage within and those who undertake them.
Where the interviewee places the line of acceptability in regards to the practices of body modification and what they perceive as necessary or unnecessary.
Discourses employed to express relation to the practices they undertake.

Interview Areas:

1. History of participants’ practices:
Tell me about your history of body modification and how this has developed.
When and how did you begin your own practices of body modification?
What is your daily routine?
What are you trying to do when you engage in these practices?
Where do you learn about practices of body modification?
What forms of body modification do you currently engage in and why?
What forms of body modification have you undertaken today? Why? (Prompt to consider if they were trying to deliberately present themselves in a certain way).
How do you or would you feel if you are not able to engage within your body modification practices?
How important to you are the practices you engage within?
What forms of body modification do you think you are likely to engage in in the future?

2. Understanding of body modification to:
What do you think body modification is all about?
What practices and methods would you include within this category and why?
Do you see body modification as purely cosmetic or would you include medical and cultural procedures?
(Ask participants to consider: gastric band: weight loss for health vs. weight loss for image, breast surgery: implants or reconstructive after cancer, facial reconstruction,
pinning ears back. When is it one and then the other… continuum? Psychological/Physiological)

3. Influences:
So why do you think you do the forms of body modification you do?
How do you think these influence you?
How do you make the decision to engage in one practice over another?
What influences changes in your practices?
(Seasons, money, age, event/occasion, setting)
Where do you learn about practices of body modification?
Are the practices you engage in situational specific? Do you alter your practices depending on what you are doing and where?
Do you think not being able to carry out your daily routine or practices for specific occasions would affect how you feel and how you are treated?

4. Perception of practices not engaged with:
What practices of body modification do you not engage in?
Why do you not engage in these practices?
How do you view those who do undertake these practices?
Are there any forms of body modification that you are against?
What sort of things do you think women are most likely to do?
What sort of things do you think women are most likely to receive hostility for not doing?
How would you think people would react to a woman who didn’t engage in any form of body modification?
Where would you place the line of acceptability in regards to body modification, i.e. what do you deem as necessary, acceptable and too much/ vain/ unnecessary?
Do you feel there is any discrepancy between what you or other women practice and what you think about body modification?
(If so, where do you think these arise from?).
## Appendix F: Body Modification Methods Categorisation

<table>
<thead>
<tr>
<th>Body Modification Method</th>
<th>Permanent</th>
<th>Non-Permanent</th>
<th>Surface</th>
<th>Interior</th>
<th>Invasive</th>
<th>Non Invasive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hair removal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epilating</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Hair removal cream</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Laser</td>
<td>?</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Plucking</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Shaving</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Threading</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Waxing</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Hair</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curling</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Cutting</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Dying</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Hair extensions</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Perm</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Relaxing</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Shaving</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Straightening</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Styling</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Weave</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Wig</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Nails</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extensions</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>False nails</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Filing</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Gel nails</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Manicure</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Nail polish</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Pedicure</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Piercing/jewellery</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Tips</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Weight Loss/Body Shape</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anti-cellulite treatment</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Appetite suppressors</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Body wrap</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Cool-sculpting</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Diet</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Treatment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exercise</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gastric band</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hypnotism</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laxatives</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purging</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weight loss pills</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wiring jaw</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Skin-Surface</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acupuncture</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anti-ageing products (creams and serums)</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anti-cellulite cream/lotion</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Botox</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Braces</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemical peel</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contacts</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental implants</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental veneers</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dermal fillers</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dying eyebrows</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dying eyelashes</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exfoliation</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eyelash extensions</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facial</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fake tan</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>False eyelashes</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IPL skin rejuvenation</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laser treatment</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Makeup*</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Microdermabrasion</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moisturiser</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mole/skin tag removal</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Piercing</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin bleaching</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sun-bed</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tattoos</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tattooing makeup</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teeth bleaching</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thread/varicose vein removal</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toner</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toning cream/lotion</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Whitener</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cosmetic Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arm lift</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast enlargement</td>
<td>?</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast reduction</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast uplift</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buttock implants</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calf implants</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cheek implants</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ear correction</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye bag removal</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye lid surgery</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Face lift</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female Genital Surgery</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hair transplantation</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laser lipo</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liposuction</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nipple correction</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rhinoplasty</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thigh lift</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tummy tuck</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clothing/ Fashion</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicken fillets</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Corset</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Fashion*</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Heels</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Hold in/ control underwear</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Padded bra</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Padded knickers</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Push up bra</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Spanx</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

* Makeup includes: primer, foundation, concealer, powder, eye shadow, mascara, eyeliner, blusher, bronzer, cheek tint, lip gloss, lip balm, lipstick, lip liner, lip tint, highlighter.

** Fashion includes any deliberate usage of clothing to alter the appearance of an individual’s body, e.g. belts to make waist look small, black tights to make legs look slimmer

**Terms of Categorisation**
Permanent: Modification which is irremovable/ or removable only through a cosmetic procedure.

Non- Permanent: Modification methods which are not permanent.
Surface: Modification methods which alter the appearance of the surface of the body only.

Interior: Modification methods which alter the appearance of the body from within. Invasive: Procedures which involve practices which penetrate the surface of the body.

Non-invasive: Procedures which are only carried out at the body’s surface level.
## Appendix G: Participants’ Demographic Details

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Ethnicity</th>
<th>Education</th>
<th>Occupation</th>
<th>Relationship status</th>
<th>How I acquired interviewee</th>
<th>Additional Participant Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda</td>
<td>20</td>
<td>White British</td>
<td>BA (second year)</td>
<td>Student and café/library assistant</td>
<td>Boyfriend – Two years</td>
<td>No previous connection</td>
<td>Had given a lot of prior thought to the topic of body modification and was critical of normative expectations of femininity.</td>
</tr>
<tr>
<td>Andrea</td>
<td>22</td>
<td>White British</td>
<td>BA, MA</td>
<td>Student and child care worker at care home</td>
<td>Single</td>
<td>Through previous interviewee</td>
<td>Had difficulties discussing weight. Was also beginning to critically think about normative body hair removal practices.</td>
</tr>
<tr>
<td>Anna</td>
<td>23</td>
<td>White British</td>
<td>BA (due to commence MSC)</td>
<td>Medical HR assistant</td>
<td>Boyfriend - cohabiting partner</td>
<td>Partners friends partner</td>
<td>Mother had been particularly influential and forceful in her body modification engagement.</td>
</tr>
<tr>
<td>Anouk</td>
<td>20</td>
<td>White British</td>
<td>BA (second year)</td>
<td>Student and publishing internship</td>
<td>Boyfriend – Long distance, one year</td>
<td>No previous connection</td>
<td>Recovering anorexic.</td>
</tr>
<tr>
<td>Betty</td>
<td>25</td>
<td>White British</td>
<td>BA, MA</td>
<td>Student</td>
<td>Single</td>
<td>Friend</td>
<td>Identified as a feminist.</td>
</tr>
<tr>
<td>Carla</td>
<td>24</td>
<td>White British</td>
<td>Medical degree, MA</td>
<td>Doctor</td>
<td>Boyfriend – Two and a half years</td>
<td>Friend</td>
<td>Identified as a feminist. Previously had a problematic relationship with weight/food/exercise and self-harmed.</td>
</tr>
<tr>
<td>Name</td>
<td>Age</td>
<td>Ethnicity</td>
<td>Education</td>
<td>Occupation</td>
<td>Relationship</td>
<td>Notes</td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>-----</td>
<td>------------------------------------</td>
<td>-----------------------------------------------</td>
<td>------------------------------------------------------</td>
<td>-----------------------</td>
<td>----------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Charlotte</td>
<td>23</td>
<td>White British</td>
<td>BA, MA</td>
<td>MA Student and gallery attendant</td>
<td>Single</td>
<td>Friend Very concerned with age appropriateness.</td>
<td></td>
</tr>
<tr>
<td>Ellie</td>
<td>23</td>
<td>White British</td>
<td>BA, MA</td>
<td>PhD Student</td>
<td>Single</td>
<td>Friend Identified as a feminist.</td>
<td></td>
</tr>
<tr>
<td>Eva</td>
<td>22</td>
<td>White British</td>
<td>BA, PGCE</td>
<td>Dance teacher and history teacher</td>
<td>Boyfriend – One year</td>
<td>Friend of a friend Influential background in dance.</td>
<td></td>
</tr>
<tr>
<td>Gemma</td>
<td>22</td>
<td>White British</td>
<td>BSC</td>
<td>Insurance sales person</td>
<td>Boyfriend</td>
<td>Partner of a relative Very self-conscious of her appearance.</td>
<td></td>
</tr>
<tr>
<td>Jenny</td>
<td>20</td>
<td>White British</td>
<td>BA (third year)</td>
<td>Student</td>
<td>Boyfriend – Three and a half years</td>
<td>Friend Had danced until university which was significant to her practices.</td>
<td></td>
</tr>
<tr>
<td>Jessica</td>
<td>19</td>
<td>White British</td>
<td>Adult nursing studies</td>
<td>Student</td>
<td>Boyfriend – One and a half years</td>
<td>Family friend Would not leave the house without makeup and was particularly concerned about her colouring (ginger) and weight.</td>
<td></td>
</tr>
<tr>
<td>Joan</td>
<td>24</td>
<td>White British</td>
<td>BA, MA, PGCE</td>
<td>Teacher</td>
<td>Boyfriend – Four years, cohabiting for a year</td>
<td>Friend Engaged in the least body modification for her daily routine.</td>
<td></td>
</tr>
<tr>
<td>Kerry</td>
<td>24</td>
<td>Black British Caribbean and White British Italian</td>
<td>BA, Legal practice course</td>
<td>Trainee Solicitor</td>
<td>Engaged to male partner – six years</td>
<td>Friend Had previously suffered from anorexia and bulimia.</td>
<td></td>
</tr>
<tr>
<td>Kirsty</td>
<td>25</td>
<td>White British</td>
<td>BSC</td>
<td>Council transport assistant</td>
<td>Single</td>
<td>Friend The only participant to engage in extensive tattooing</td>
<td></td>
</tr>
<tr>
<td>Leah</td>
<td>21</td>
<td>White British</td>
<td>BA</td>
<td>Work experience placements in publishing</td>
<td>Boyfriend – Six months</td>
<td>Relative of a friend Identified as a feminist.</td>
<td></td>
</tr>
<tr>
<td>Louise</td>
<td>23</td>
<td>White British</td>
<td>BA</td>
<td>Student and tourist attraction workshop provider</td>
<td>Seeing a male partner</td>
<td>No previous connection Forced when younger to gain weight by doctors who incorrectly diagnosed her with an eating disorder. Was conscious of her weight as a result.</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Age</td>
<td>Ethnicity</td>
<td>Education</td>
<td>Occupation/Activity</td>
<td>Relationship</td>
<td>Other Comments</td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>-----</td>
<td>-------------------------------------</td>
<td>-----------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>--------------</td>
<td>--------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Monica</td>
<td>24</td>
<td>White British</td>
<td>BA (third year)</td>
<td>Student on placement as a marketing assistant and bar staff</td>
<td>Boyfriend – One Year</td>
<td>Friend of a friend Had the most extensive body modification regime of all participants.</td>
<td></td>
</tr>
<tr>
<td>Natasha</td>
<td>25</td>
<td>White British</td>
<td>BA, MA</td>
<td>Supply teaching assistant (about to commence on PhD)</td>
<td>Boyfriend – One year</td>
<td>Friend Dance background very prominent in her body modification development.</td>
<td></td>
</tr>
<tr>
<td>Nicola</td>
<td>24</td>
<td>White British</td>
<td>BA, MA, PGCE</td>
<td>Part time teaching assistant, about to commence fulltime teaching post</td>
<td>Boyfriend – Four and a half years</td>
<td>Friend of a friend Described herself as body conscious, and her appearance a daily worry. Viewed the pressure on women to meet certain appearance as significant cultural issues.</td>
<td></td>
</tr>
<tr>
<td>Peggy</td>
<td>24</td>
<td>White British</td>
<td>BA, Postgraduate Certificate</td>
<td>Student and business park advisor</td>
<td>Single</td>
<td>Friend of a friend Identified as a feminist.</td>
<td></td>
</tr>
<tr>
<td>Phoebe</td>
<td>24</td>
<td>White British</td>
<td>BA, MA</td>
<td>Market Researcher</td>
<td>Boyfriend – Eighteen months</td>
<td>Colleague of a friend Family health history and its restrictions on her mother’s practices meant she had given more consideration to later life body modification than most.</td>
<td></td>
</tr>
<tr>
<td>Rose</td>
<td>20</td>
<td>White British</td>
<td>BA (second year)</td>
<td>Student and bar staff</td>
<td>Boyfriend – Two months</td>
<td>Friend Would not leave the house without makeup.</td>
<td></td>
</tr>
<tr>
<td>Ruth</td>
<td>19</td>
<td>White British</td>
<td>BA</td>
<td>Student</td>
<td>Single</td>
<td>Work network Only participant to know someone who had had gastric band surgery.</td>
<td></td>
</tr>
<tr>
<td>Sally</td>
<td>24</td>
<td>White British</td>
<td>BA</td>
<td>Account manager for a market research company</td>
<td>Boyfriend – Three and a half years</td>
<td>Colleague of a friend Had attended an all-girls school and experienced this as influential/ different from friends in co-ed. schools.</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Age</td>
<td>Nationality</td>
<td>Course</td>
<td>Occupation</td>
<td>Relationship Status</td>
<td>Previous Connection</td>
<td>Notes</td>
</tr>
<tr>
<td>----------</td>
<td>-----</td>
<td>---------------</td>
<td>--------</td>
<td>---------------------------------</td>
<td>---------------------</td>
<td>---------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Samantha</td>
<td>21</td>
<td>White British</td>
<td>BA</td>
<td>Student and bar staff/ waitress</td>
<td>Single</td>
<td>No previous connection</td>
<td>Had previously had extensive piercings. Self-presentation described as changing to far greater degree than most other participants.</td>
</tr>
<tr>
<td>Sara</td>
<td>22</td>
<td>British Pakistani</td>
<td>BA</td>
<td>MA student women's studies</td>
<td>Single</td>
<td>Friend</td>
<td>Religion (Muslim) very important to her practice.</td>
</tr>
<tr>
<td>Stephanie</td>
<td>19</td>
<td>White British</td>
<td>BA – (First year)</td>
<td>Student</td>
<td>Single</td>
<td>Friend of a friend</td>
<td>Particularly concerned about weight and concealing flaws.</td>
</tr>
<tr>
<td>Susanna</td>
<td>19</td>
<td>White British</td>
<td>BA (first year)</td>
<td>Student and life guard</td>
<td>Single</td>
<td>Friend</td>
<td>Had self-harmed in the past. Ethical decisions had strong implications on her diet.</td>
</tr>
</tbody>
</table>
Bibliography


Clarke, Laura Hurd, Griffin, Meridith and Maliha, Katherine. 2009. ‘Bat Wings, Bunions, and Turkey Wattles: Body Transgressions and Older Women's Strategic Clothing Choices’, Ageing and Society, 29/5: 709-726.


Dean, Emily. 2014. ‘High-Intensity Interval Training’, *Instyle*, June: 175.


Goc, Nicola. 2007. ‘“Monstrous Mothers” and the Media’. In Scott, Niall, ed. *Monsters and the Monstrous: Myths and Metaphors of Enduring Evil*. Amsterdam: Rodopi, 149-166.


Lapadat, Judith and Lindsey, Anne. 1999. ‘Transcription in Research and Practice: From Standardization of Technique to Interpretive Positionings’, Qualitative Inquiry, 5/1: 64-96.


MacDougall, Colin and Fudge, Elizabeth. 2001. ‘Planning and Recruiting the Sample for Focus Groups and In-Depth Interviews’, Qualitative Health Research, 11/1: 117-126.


306


Smirnova, Michelle. 2012. ‘A Will to Youth: The Woman’s Anti-ageing Elixir’, *Social Science & Medicine*, 75/7: 1236-1243.


*Style.* 2014. ‘Pretty Vacant: Can We Stop Our Daughters Obsessing About their Looks?’ *Style,* 20 April 2012: 24-27.


Tibbits, Jessica. 2013. ‘Natural Selection’, Instyle, August, 163.


Warhurst, Chris and Nickson, Dennis. 2007. ‘Employee Experience of Aesthetic Labour in Retail and Hospitality’, Work, Employment and Society, 12/: 103-120.


