

## FEMININITY, CONSUMPTIONISM AND ILLNESS

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### **Abstract**

The article is a reflection on the impact of the social construct of femininity on individual identity, examining what it means to be a woman for individuals and for the society (observers). There are more cosmetic procedures and aesthetic medicine, that promises 'being beautiful' and 'feeling beautiful' as the norm and a woman's duty. This obligation to be beautiful is increasingly present in mass media when individuals struggle with cancer. More campaigns are supporting the individual's fight against cancer by offering metamorphoses. Similarly, more websites focused on helping cancer patients place focus on the correct skin care or applying makeup during and after anti-cancer therapy, promising to enhance the well-being of patients. Thus, we observe both criticism of the pressure associated with the constant construction of femininity, and the support for women diagnosed with cancer by offering them ways to look attractive while fighting the disease..

**Key words:** *Identity, Social Exclusion, Cancer, Consumption, Well Being.*

### **INTRODUCTION**

Consumerism invariably affects most aspects of people's lives. It generates people's needs for better products that make life easier, save time, and allow individuals to allocate time for other purposes. People want better, easier, more visually appealing products. They want to keep up with the times, follow current trends, be in constant exchange for self-improvement. This machine drives people so much, that we see

endless possibilities for our “tomorrow”. Consumerism gives us the control and perspective of thinking that our “tomorrow” will always be manageable day by day. This sense of control is enhanced by the illusory of the possibilities of stopping time - slowing it down or even reversing aging. There are many ways - diets, treatments, and supplements, promising eternal youth. This leads us to take for granted the fact that every day we are getting older and will eventually die. The pursuit of youth and beauty affects women in particular, who in many cases try to adapt to the standards set by television and social media. They undergo treatments that promise them a beautiful complexion, shiny hair, slim figure, or reduction of wrinkles. They decide on these procedures regardless of the pain, recovery time or cost. We desire not only to feel beautiful, but also to be perceived by society as attractive people. Consumerism and the social construct of femininity also influences situations when an individual faces a disease, especially cancer. More and more attention is paid to recognizing the role of self-care during illness, including the impact on the patient’s well-being. However, there are situations when the patient goes into an advanced disease stage, where she begins to face her own impending death.

### **CONSTRUCTING OF FEMININITY AND BODY DISCIPLINING**

Initially, the body was perceived as a biological object, described as a “bag for unconscious desires and impulses” [Schier 2010: 10]. However, thanks to Sigmund Freud’s theory of development, marked a key shift in our thinking about the connection between the psyche and the psyche [Schier 2010: 10]. The tradition of experiencing the inner works of a body with the in connection to personality and identity in sciences such as philosophy or psychology, has an extensive history. According to Katarzyna Schier, “it was the omnipresence of death and human fear of it that led to the emergence of the awareness of the bodily self” [Schier 2010: 11]. Among the ancient Egyptians, mummification was performed because it was believed that the soul might need a body after death. Additionally, painting posthumous artwork, or placing a name with a photograph on gravestones was supposed an attempt to “assure oneself or one’s relatives that one’s body and soul would last in time” [Schier 2010: 11]. In recent times, research began to focus on issues related to the mental representation of the body, i.e. the image of the body that arises in the mind of individuals. David W. Krueger [2007] believes that “the body and its evolving mental representation is the foundation of a sense of self.” According to this author, “the body self refers to the vast field of bodily experiences on and within the body, including bodily functions” [Krueger 2007: 7]. The body is “a specific phenomenon in the world of objects because it contains the paradox ‘I-others’” [Schier 2010: 27]. Moreover, there has been a noticeable surge in interest on the subject of body image, both among researchers in various scientific fields, as well as women, for whom numerous books on this subject are being written. Self-image consists of: self-assessment, self-esteem and self-awareness, including one’s personal needs.

In the late 1990s, Kevin Thompson et al. [1999] provided a list of sixteen different definitions of the term “body image” employed by researchers of this phenomenon. Among them, the author lists: body satisfaction – the accurate estimation of the dimensions of the body and its parts or distortion in this area; adequate perception of body size – the appropriate evaluation of proportions between the elements of the body, its dimensions and parts, or distortion in this area; satisfaction with appearance - satisfaction with the overall appearance; usually associated with facial features, hair, weight, but also, for example, with sex appeal and body distortion. Given the large number of definitions of what we consider body image, researchers find it necessary to specify which definition they use each time [Thompson et al. 1999].

According to many authors, the body, especially the female body, is subject to discipline and control. However, the body cannot be “manipulated indefinitely” or constantly beautified. As Kashak [1996: 186] observes, “it can be fought constantly with cosmetics and clothes, diets and exercises, and even with the increasingly popular plastic surgery.” They can also be “modeled, shaped and corrected” [Kashak 1996: 186]. However as a woman pays more attention to her appearance and counts on better treatment, she may find herself lost when reconciling her own needs, which are contrary to societal requirements. The body, and above all the female body, “becomes a product that can be manipulated and displayed in the most favorable light” [Kashak 1996: 187]. This can lead to certain psychological conflicts, as the woman is burdened because she does not perceive her body only as an object, but also through the lenses of its social construct, including meanings and symbols. Certain props and elements used to emphasize appearance evoke specific feelings or thought patterns [Zwolinski 2006]. For example, hair originally associated with fur, carries linkages to the hair found on animals. The lack of one’s hair care or the lack of a hairstyle correspond with associations related with wildness or chaos, whereas a well-groomed hairstyle aligns the norms prevailing in culture and “incorporating into the order of the human community” [Zwolinski 2006: 33]. Messy hair was formerly used to define a sick or unclean person.

According to Lemmy [2014: 43], “the body remains an exposed territory throughout life.” No matter how hard we try to hide, cover or change it, “the body never escapes the mark left by the gaze of another” [Lemma 2014: 43]. The term ‘Other’ is understood as every person with whom we come into contact both during interaction and with whom we only pass without having direct contact. This look “of the other” is related to the desire to dominate and rule, granting access to the body without physical contact. Sometimes it also causes the other to exercise control over our body [Lovber, Moore 2011]. Individuals define the body as something that belongs to us, with its desires and limitations, while agreeing that “the same body is the area where we meet the other and determine what it means to be the same and different, dependent and separate” [Lemma 2014: 43-44]. There are two types of looking: “I-looking (watching) and I-exposed-on-view (viewed)” [Lemma 2014: 44].

The perspective of the other is also beyond the reach of the observed, because we are unable to control his thoughts, perceptions or feelings [Schier 2010]. Being watched, our “foundations are outside of us” or even that “we exist only for the other” [Lemma 2014: 44]. The other’s gaze also diminishes our sense of power over our own bodies [Shilling 2010; Kurczewski 2006]. Moreover, we are not able to fully control how our presentation will affect the actual perception of us by others [Kurczewski 2006]. The way we will be perceived by the other comes from individual unconscious feelings, but also from projections [Schilling 2010]. Sometimes, regardless of how others perceive us, a sense of ‘insufficiency’ is generated in the context of feeling a lack of desire by those around us [Thompson 1999]. This feeling is rooted in the body, and it is within our bodies that we feel it most intensely. In order to address this feeling of insufficiency, one can reach for available methods such as cosmetic treatments and better clothing to increase one’s own attractiveness [Kurczewski 2006; Schier 2010].

We experience the sense of our own omnipotence when we feel the desire for others and “we can experience ourselves as his ideal” [Lemma 2014: 46]. It is only through the eyes of the other that we are able to “discover and/or rediscover the ideal image of ourselves”, although accepting this fact can be difficult, because the other can either give us an ideal image or take it away [Lemma 2014: 46]. Some people experience this unavoidable dependence as a threat, because the perception of another’s image of us in a negative way can disturb their own sense of integrity. Nowadays, the so-called “reality show” focused on changing the body’s appearance, have emerged. According to Lemma, programs of this type “play the role of an archaic fairy tale who can do the impossible” because they emphasize the possibilities of metamorphosis and body transformation [Lemma 2014: 53]. The imperfect bodies of the participants also bring mental problems. Metamorphosis, modifying their bodies so that they are beautiful or even satisfying, as declared by patients, will help them get rid of their internal barriers or disorders [Kashak 1996; Schier 2010]. Often, in such programs, you can hear from patients who have already undergone treatments that they can finally be themselves. Lemma [2014: 53] noted that girls “do not feel comfortable in their bodies”. Interestingly, according to her, they made a “caricatured impression” [Lemma, 2014: 53]. Some of them did not feel any signs of femininity and adopted masculine body posture and masculine clothing. Others, on the contrary, hid their complexes under the cloak of an extreme sexualized attitude. They hid a great fragility under the very carefully constructed facade. The Respect of one’s body is the result of “respect for order, boundaries, purity and indivisibility” [Lemma 2014: 74]. In the Renaissance era, the canon of beauty, which was considered classic, emphasized the aesthetics of the desirable body, in relation to cleanliness and order. This classical canon of the ideal figure was separated from “any connection with birth, death, or everyday mundane functions” [Lemma 2014: 53]. In contrast, the grotesque body

was associated with everyday functions and death or birth, which is why it was considered as something unfinished.

We always seek to avoid what is ugly or unsightly. In movies, characters we consider ugly are associated with bad deeds. According to Lemmy [2014: 53], “ugliness is too often portrayed as evil.” Being ugly, as the author suggests, perhaps scares us enough that it should be a category beyond good and evil. We often want to distance ourselves from ugly people because they can be a threat to the ‘I’. Julia Kristeva [2007] analyzes, among other things, the concept of impurity. For example, the corpse is regarded as impure, “that which has irreversibly fallen” [Kristeva 2007: 9]. According to her, the cloaca and death cause a violation of identity in people who stand over a corpse, because this experience makes the living see how fragile and fraudulent they are. Consequently body secretions in sick individuals, are as repulsive as the “corpse” itself: “a wound full of blood and pus, or a sweetish and acrid odor of sweat, secretions” [Kristeva, 2007: 9]. Marked death can be signaled, among others, by a flat encephalogram, which shows specific vital parameters and deviations from the norm with which the individual cannot disagree or negate. Waste, corpses, and “a real theater without make-up and masks” indicate what a person tries to push aside in order to live [Kristeva, 2007: 9]. According to Kristeva [2007: 10], if the impurities associated with dying represent “the other side of the border”, where one ceases to exist and no longer lives, then the corpse as “the ugliest of all waste” is, according to her, a border that has taken everything. At this point “it is not I who throws out, I was thrown out”. This border turned into an object (corpse). Lack of purity or health is not what Kristeva finds most disgusting, it is the ultimate suspension of identity, system and order. Suspension of identity occurs through ‘fainting’, which is a metaphor for a sudden ‘disappearance’ from the realm of living.

In Western culture, girls, especially “middle-class white girls,” are “thoroughly protected” and expected to “look nice and gentle” [Lemma, 2014: 53]. Already during childhood games, girls frequently engage in dress up in their mothers’ clothes and use their make-up cosmetics [Aucoin, 2012]. It is also evident that female children receive admiration for their appearance, especially when wearing dresses. During therapy with a psychoanalyst or outside of it, in adulthood, women recall traumatic moments in childhood, they refer to their external appearance and insufficient attractiveness, which could lead to rejection by young “boys or teenagers. Kashak [1996: 73] argues that the “essential period of female identity development”, which is based on outward appearance, “runs from birth, when that identity is primarily physical and preverbal, to adolescence, when it is introduced and implemented throughout the complex social influences: by adults, peers, books, magazines, mass media, and even the reactions of strangers on the street”. According to her, it lasts throughout a woman’s life, but with a different fluidity. Adolescence is an important stage in the development journey. It is a phase in which individuals deal with the creation and crystallization meanings linked to their body and generic identity. Although certain

attitudes of adults and parents refer to “identifying a woman with her appearance and attractiveness”, they are present from birth, but only during adolescence do they become a “numbering determinant” [Kashak 1996: 73]. At this developmental stage, the pressure from parents and peers to “observe gender roles is greatest” [Kashak 1996: 73]. In addition, peers judge females by focusing on their appearance. Girls are more preoccupied with their appearance, often perceiving themselves as less attractive than boys their age. The research cited by Kashak [1996] reinforces those conclusions, also emphasizing how the environment of girls also focuses on the same aspect, i.e. assessing them through the prism of physicality.

During the adolescence period, young people are eager to engage in various kinds of movements that express their rebellion against the values prevailing in society. Each of these movements is characterized by a different code that determines how its members should dress (e.g. hippies, punks). From childhood through adolescence, “hair and clothing are the clearest clues to sex” [Kashak 1996: 77]. Ellyn The author argues that in society, women in particular are seen through the lens of their own bodies. However, this assessment is not judged by its strength or ability to act, but by its appearance. The dexterity of the body is not assessed, but the shape, size and whether they appearance aligns with male standards of femininity. If a woman’s appearance is accepted, then “it means that the woman is attractive and will be treated accordingly”, but if her appearance is assessed negatively, “her object is less valuable” [Kashak 1996: 77]. Conversely, appearance that does not fit the criteria may be a threat to the individual within their social environment, and the lack of attractiveness may be perceived as a deliberate choice.

The wearing of high heels by women is an example of a “cultural marker of gender” [Kashak 1996: 79]. Wearing high heels is often associated with a lack of comfort, and sometimes even with pain. However, women wear these types of shoes because “it would dispel the illusion”, moreover, each women understands that she should not reveal discomfort [Kashak 1996: 79]. Appearance and attractiveness is conspicuous to such an extent, that paradoxically they render invisibility [Berry 2016]. The perfect figure is someone that is admired, to which other people react. In a 1989 interview with the Times, one supermodel said “I’m a visual illusion”, another model, Janice Dickinson, describing herself confessed: “I don’t have breasts, but I know how to hold on to make it look like I do. With makeup, you can create cheekbones and cover up a black eye” [Kashak 1996: 99]. In this quote, the model showed how to construct and display female attributes using the available means and observations.

### **CULTURE EXPECTATIONS, FEMININITY AND ILLNESS**

Body image is also shaped in a cultural context [Schier 2010]. In recent years, in many countries including the United States, Great Britain, have can observed a “significant increase in the interest of the mass media in the issues of the body”, in particular plastic surgery, tattooing, piercings and diets [Schier 2010: 187]. In media,

there are also discussions on anorexia and the growing interest in sculpting body muscles in women. Moreover, there is an increasing number of programs dedicated to changing one's own appearance, where participants voluntarily undergo often painful plastic surgeries in order to increase their self-esteem and satisfaction with their appearance. Among the mass media, the female body "stands for lust, hunger, thirst, fast cars, perfume, jeans, and a thousand other phenomena" [Kashak 1996: 96]. Femininity itself consists in caring for the appearance as well as the belief that it is what defines a woman. This is part of the process of understating what is femininity involves parents and caregivers, family and friends, doctors, nurses, teachers, peers and the media.

According to Schier [2010: 53], "the cosmetics, clothing and food industries 'prey' on a woman's dissatisfaction with her body, so she is 'condemned in the effort to preserve her own identity'. The ideal silhouette not only determines what a woman should look like, but media and specialists alert that a slim body is supposed to protect and prevent various diseases, including hypertension, diabetes or heart disease. However, the latest research on overweight people should be distinguished from obese people, because the latter are more likely to suffer from these health problems. According to another researcher, Nancy Etcoff [2002: 15], with the exception of extreme thinness and obesity, it is the proportions, and above all the ratio of the hip circumference to the waist, that prove the female beauty, and not the weight itself. Interestingly, Etcoff [2002: 15] believes that "beautiful is what we actually perceive as average - "beautiful are those physical properties that suggest sexual maturity, fertility, health and proper constitution." As for the face, its attractiveness depends on the mediocrity of its features, which is synonymous with health and vitality [Leder 1990]. The second aspect is facial features reminiscent of a child's appearance, while maintaining the characteristics of adult femininity.

Cultural patterns regarding acceptable body image are conveyed through all mass media targeting children, teenagers and adults. Magazines aimed at teenagers focus on "dress, makeup, appearance and how to get a boyfriend. The emphasis is on looks, looks and more looks" [Kashak 1996: 54]. With these messages generating a cult for the perfect figure, in men's magazines prevailing topics discuss increasing body musculature, whereas, aimed at weight reduction are found in magazines for women. According to the conducted research, women's magazines prioritize appearance related issues far more than in newspapers aimed at men, where these topics are discussed to a lesser extent. This extends to movies and tv shows aimed at targeting women. In them the ideal female body is slender, and women with obesity are often devalued. Katarzyna Schier [2010: 96] refers to the research of Dohnt and Toggeman, in which it was demonstrated that young girls who reach for popular magazines aimed at adult women, "show a higher level of dissatisfaction with their own appearance, and vice versa, those who reject the cult of a slim figure are characterized by a higher level of body satisfaction. It should be noted, however, that "women are more susceptible to

the influence of the media and peers than men” because they want to meet the expectations that are imposed on them [Schier 2010: 96]. It should be noted that women’s sense of attractiveness is also significantly influenced by their individual predispositions: “the stronger a person’s acceptance of social patterns and stereotypes related to appearance and the greater the perceived pressure to achieve them, the more negative the assessment of their own body” [Schier 2010: 96]. Body image studies among women between the ages of sixteen and seventy-seven have shown that most of them rate themselves low or average in terms of appearance. Other studies on Polish and Spanish female students showed that “women pay more attention to their own attractiveness and men the opposite”. Moreover, men in their responses preferred slim women with feminine shapes, while women paid attention to such features as height and elegance [Schier 2010: 96].

Caring for one’s appearance has become an important topic in the context of cancer. There are dedicated cosmetic treatments for women fighting cancer and guidelines on when and what procedure can be performed. There are also many websites on the internet giving advice to people during and after chemotherapy. They refer to this “how to keep looking and feeling like yourself during chemotherapy” (oprahdaily.com). These websites focus on showing and describing the beauty of women regardless of the disease. Cancer Research UK also published a tutorial on how to apply make-up during chemotherapy. Interestingly, their article is also addressed to patients who did not wear make-up before cancer. Many scientific studies analyzing the impact of cancer on the sense of beauty in patients focused primarily on breast cancer. In the study by Abend and Williamson [2002], the authors highlighted how interest and support from partners and the environment were important in helping cancer patients achieve a sense of attractiveness. Moreira et al. [2010] in a study on hospital patients in Portugal, found that cancer patients invested in grooming their appearance reported better results in counteracting anxiety and depression in terms of adaptation to the disease. Hopwood et al. [2001: 1] also pointed out that “body image is an important endpoint in quality of life evaluation since cancer treatment may result in major changes to patients’ appearance from disfiguring surgery, late effects of radiotherapy or adverse effects of systemic treatment”. Rogers et al. are of a similar opinion [2007], they support the idea that cancer patients who decided to exercise not only began to work on their fitness, but they also began to feel more attractive. In many countries, programs offering metamorphosis to cancer patients have been created. An example of this is the “Look good, feel better program”, the idea of which is to support women in the fight against the disease by offering beauty treatments, advice on breast reconstruction procedures, or fitting wigs while waiting for the patient’s own hair to grow back [Kendrick 2008]. All initiatives are designed to support the spirits of women with cancer, improve their well-being, give them strength to continue their fight and help them return to life after treatment.

## CONCLUSION AND DISCUSSION

In Western society, women have been preoccupied with their body since childhood, treating it as a means of communication. This is not only related to achieving physical fitness, but also to “fulfilling social expectations” [Schier 2010: 54]. According to Etcoff [2002: 15], “a woman’s attractive appearance is the best asset and currency, prestige, wealth and even love can be gained in return.” Kashak [1996: 96] is of the opinion that a woman in this context “becomes, in her own way, the enemy of her body.” As a result, people whose weight exceeds the established norm accept themselves only from the neck up, and people with eating disorders, such as bulimia or anorexia, isolate themselves from the social world. With constant attention to appearance, this brings with it “a kind of social, collective madness about building an external image” [Kashak 1996: 72]. Consumerism fuels the pressure of constantly taking care of one’s appearance. The felt obligation to take care of oneself, on the other hand, influences the need for better and more effective ways to construct one’s appearance - to control it. Illness and therapies can significantly affect our appearance changes, which are no longer within our control, they elude us. The aim of the article was to illustrate that, on the one hand, we see in the social discourse the negative aspects of influencing self-care, especially among women, and on the other hand, it can be significantly helpful in the case of cancer - significantly improving the quality of life, giving a sense of control again, helping in regaining ‘own self’, or building oneself anew.

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