

'MY BODY IS MY ART': COSMETIC SURGERY AS FEMINIST UTOPIA?

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In August 1995, the French performance artist Orlan was invited to give a lecture at a multimedia festival in Amsterdam.¹ Orlan has caused considerable furore in the international art world in recent years for her radical body art in which she has her face surgically refashioned before the camera. On this particular occasion, the artist read a statement about her art while images of one of her operations flashed on the screen behind her. The audience watched as the surgeon inserted needles into her face, sliced open her lips, and, most gruesomely of all, severed her ear from the rest of her face with his scalpel. While Orlan appeared to be unmoved by these images, the audience was clearly shocked. Agitated whispers could be heard and several people left the room. Obviously irritated, Orlan interrupted her lecture and asked whether it was 'absolutely necessary to talk about the pictures *now*' or whether she could proceed with her talk. Finally one young woman stood up and exclaimed: 'You act as though it were not *you*, up there on the screen'.²

This may seem like a somewhat naive reaction. Good art is, after all, about shifting our perceptions and opening up new vistas. That this causes the audience some unease goes without saying. Moreover, the young woman's reaction is not directed at Orlan the artist who is explaining her art, but rather at Orlan the woman who has had painful surgery. Here is a woman whose face has been mutilated and yet discusses it intellectually and dispassionately. The audience is squirming and Orlan is acting as though she were not directly involved.

From: K. Davis (ed.), *Embodied Practices: Feminist Perspectives on the Body*, London: Sage, 1997.

I became interested in Orlan (and the reactions she evokes) as a result of my own research on women's involvement in cosmetic surgery (Davis 1995). Like many feminists, I was deeply troubled by the fact that so many women willingly and enthusiastically have their bodies altered surgically despite considerable hardship and risk to themselves. While I shared the commonly held feminist view that cosmetic surgery represented one of the more pernicious horrors inflicted by the medical system upon women's bodies, I disliked the concomitant tendency among feminists to treat the recipients as nothing more than misguided or deluded victims. In an attempt to provide a critical analysis of cosmetic surgery which did not undermine the women who saw it as their best option under the circumstances, I conducted in-depth interviews with women who had had or were planning to have some form of cosmetic surgery. They had undergone everything from a relatively simple ear correction or a breast augmentation to – in the most extreme case – having the entire face reconstructed. Since the research was conducted in the Netherlands where cosmetic surgery was included in the national health care package, my informants came from diverse socioeconomic backgrounds. Some were professional women or academics, others were cashiers or home-helps and some were full-time housewives and mothers. Some were married, some single, some heterosexual, some lesbian. They ranged in age from a 17-year-old school girl whose mother took her in for a breast augmentation, to a successful, middle-aged business woman seeking a face lift in order to 'fit into the corporate culture'.

These women told me about their history of suffering because of their appearance, how they decided to have their bodies altered surgically, their experiences with the operation itself and their assessments of the outcome of the surgery. While their stories involved highly varied experiences of embodiment as well as different routes towards deciding to have their bodies altered surgically, they invariably made cosmetic surgery viewable as an understandable and even unavoidable course of action in light of their particular biographical circumstances. I learned of their despair, not because their bodies were not beautiful, but because they were not ordinary – 'just like everyone else'. I listened to their accounts of how they struggled with the decision to have cosmetic surgery, weighing their anxieties about risks against the anticipated benefits of the surgery. I discovered that they were often highly ambivalent about cosmetic surgery and wrestled with the same dilemmas which have made cosmetic surgery problematic for many feminists. My research gave a central role to women's agency, underlining their active and lived relationship with their bodies and showing how they could knowledgeably choose to have cosmetic surgery. While I remained critical of the practice of cosmetic surgery and the discourse of feminine inferiority which it sustains, I did not reject it as an absolute evil, to be avoided at any cost. Instead I argued for viewing cosmetic surgery as a complex dilemma: problem and solution, symptom of oppression and act of empowerment, all in one.

Given my research on cosmetic surgery, I was obviously intrigued by Orlan's

surgical experiments. While I was fascinated by her willingness to put her body under the knife, however, I did not immediately see what her project had to offer for understanding why 'ordinary' women have cosmetic surgery. On the contrary, I placed Orlan alongside other contemporary women artists who use their bodies to make radical statements about a male-dominated social world: Cindy Sherman's inflatable porno dolls with their gaping orifices, Bettina Rheim's naked women in their exaggerated sexual posings, or Matuschka's self-portraits of her body after her breast has been amputated. It came as a surprise, therefore, when my research was continually being linked to Orlan's project. Friends and colleagues sent me clippings about Orlan. At lectures about my work, I was invariably asked what I thought about Orlan. Journalists juxtaposed interviews with me and Orlan for their radio programmes or discussed us in the same breath in their newspaper pieces. Our projects were cited as similar in their celebration of women's agency and our insistence that cosmetic surgery was about more than beauty.³ We were both described as feminists who had gone against the feminist mainstream and dared to be politically incorrect. By exploring the empowering possibilities of cosmetic surgery, we were viewed as representatives of a more nuanced and – some would say – refreshing perspective on cosmetic surgery.

These reactions have increasingly led me to reconsider my initial belief that Orlan's surgical experiments have nothing to do with the experiences of women who have cosmetic surgery. In particular, two questions have begun to occupy my attention. The first is to what extent Orlan's aims coincide with my own; that is, to provide a feminist critique of the technologies and practices of the feminine beauty system while taking women who have cosmetic surgery seriously. The second is whether Orlan's project can provide insight into the motives of the run-of-the-mill cosmetic surgery recipient.

In this article, I am going to begin with this second question. After looking at Orlan's performances as well as how she justifies them, I consider the possible similarities between her surgical experiences and the surgical experiences of the women I spoke with. I then return to the first question and consider the status of Orlan's art as feminist critique of cosmetic surgery – that is, as a utopian revisioning of a future where women reappropriate cosmetic surgery for their own ends. In conclusion, I argue that – when all is said and done – surgical utopias may be better left to art than to feminist critique.

ORLAN'S BODY ART

Orlan came of age in the 1960s – the era of the student uprisings in Paris, the 'sexual revolution' and the emergence of populist street theatre. As visual artist, she has always used her own body in unconventional ways to challenge gender stereotypes, defy religion and, more generally, to shock her audience (Lovelace 1995). For example, in the 1960s, she displayed the sheets of her bridal trousseau stained with semen to document her various sexual encounters, thereby poking fun at the demands for virgin brides in France. In the

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1970s, she went to the Louvre with a small audience and pasted a triangle of her own pubic hair to the voluptuously reclining nude depicted in the *Rape of Antiope* – a hairless body devoid of subjecthood, a mere object for consumption. In the 1980s, Orlan shocked Parisian audiences by displaying her magnified genitals, held open by means of pincers, with the pubic hair painted yellow, blue and red (the red was menstrual blood). A video camera was installed to record the faces of her viewers who were then given a text by Freud on castration anxiety.

Her present project in which she uses surgery as a performance is, by far, her most radical and outrageous. She devised a computer-synthesized ideal self-portrait based on features taken from women in famous works of art: the forehead of Da Vinci's *Mona Lisa*, the chin of Botticelli's *Venus*, the nose of Fountainebleau's *Diana*, the eyes of Gérard's *Psyche* and the mouth of Boucher's *Europa*. She did not choose her models for their beauty, but rather for the stories which are associated with them. *Mona Lisa* represents transsexuality for beneath the woman is – as we now know – the hidden self-portrait of the artist Leonardo Da Vinci; *Diana* is the aggressive adventuress; *Europa* gazes with anticipation at an uncertain future on another continent; *Psyche* incorporates love and spiritual hunger; and *Venus* represents fertility and creativity.

Orlan's 'self-portraits' are not created at the easel, but on the operating table. The first took place on 30 May 1987, the artist's 40th birthday and eight more have taken place since then. Each operation is a 'happening'. The operating theatre is decorated with colourful props and larger-than-life representations of the artist and her muses. Male striptease dancers perform to music. The surgeons and nurses wear costumes by top designers and Orlan herself appears in net stockings and party hat with one breast exposed. She kisses the surgeon ostentatiously on the mouth before lying down on the operating table. Each performance has a theme (like 'Carnal Art', 'This is My Body, This is My Software', 'I Have Given My Body to Art', 'Identity Alterity'). Orlan reads philosophical, literary or psychoanalytic texts while being operated on under local anaesthesia. Her mood is playful and she talks animatedly even while her face is being jabbed with needles or cut ('producing', as she puts it, 'the image of a cadaver under autopsy which just keeps speaking').⁴

All of the operations have been filmed. The seventh operation-performance in 1993 was transmitted live by satellite to galleries around the world (the theme was omnipresence) where specialists were able to watch the operation and ask questions which Orlan then answered 'live' during the performance. In between operations, Orlan speaks about her work at conferences and festivals throughout the world where she also shows photographs and video clips of her operations. Under the motto 'my body is my art', she has collected souvenirs from her operations and stored them in circular, plexi-glass receptacles which are on display in her studio in Ivry, France. These 'reliquaries' include pieces of her flesh preserved in liquid, sections of her scalp with hair still attached, fat cells which have been suctioned out of her face, or crumpled bits of surgical

gauze drenched in her blood. She sells them for as much as 10,000 francs, intending to continue until she has 'no more flesh to sell'.

Orlan's performances require a strong stomach and her audiences have been known to walk out midway through the video. The confrontation of watching the artist direct the cutting up of her own body is just too much for many people to bear. Reactions range from irritation to – in Vienna – a viewer fainting.⁵ While Orlan begins her performances by apologizing to her audience for causing them pain, this is precisely her intention. As she puts it, art has to be transgressive, disruptive and unpleasant in order to have a social function. ('Art is not for decorating apartments, for we already have plenty of that with aquariums, plants, carpets, curtains, furniture ...').⁶ Both artist and audience need to feel uncomfortable so that 'we will be forced to ask questions'.

For Orlan, the most important question concerns 'the status of the body in our society and its future ... in terms of the new technologies'.⁷ The body has traditionally been associated with the innate, the immutable, the god given or the fated-ness of human life. Within modernist science, the body has been treated as the biological bedrock of theories on self and society – the 'only constant in a rapidly changing world' (Frank 1990: 133). In recent years, this view has become increasingly untenable. The body – as well as our beliefs about it – is subject to enormous variation, both within and between cultures. Postmodern thinkers have rejected the notion of a biological body in favour of viewing bodies as social constructions. Orlan's project takes the postmodern deconstruction of the material body a step further. In her view, modern technologies have made any notion of a natural body obsolete. Test-tube babies, genetic manipulation and cosmetic surgery enable us to intervene in nature and develop our capacities in accordance with our needs and desires. In the future, bodies will become increasingly insignificant – nothing more than a 'costume', a 'vehicle', something to be changed in our search 'to become who we are'.⁸

The body of which Orlan speaks is a female body. Whereas her earlier work explored gender stereotypes in historical representations of the female body, her present project examines the social pressures which are exercised upon women through their bodies – in particular, the cultural beauty norms. At first glance, this may seem contradictory, since the goal of her art is to achieve an 'ideal' face. Although she draws upon mythical beauties for inspiration, she does not want to resemble them. Nor is she particularly concerned with being beautiful. Her operations have left her considerably less beautiful than she was before. For example, in operation seven she had silicone implants inserted in her temples (the forehead of Mona Lisa), giving her a slightly extraterrestrial appearance. For her next and last operation, she has planned 'the biggest nose physically possible' – a nose which will begin midway up her forehead. Thus, while Orlan's face is an ideal one, it deviates radically from the masculinist ideal of feminine perfection. Her ideal is radically non-conformist. It does not make us aware of what we lack. When we look at Orlan, we are reminded that we can use our imagination to become the persons we want to be.

Orlan's project explores the problem of identity. Who she is, is in constant flux or, as she puts it, 'by wanting to become another, I become myself'. 'I am a bulldozer: dominant and aggressive ... but if that becomes fixed it is a handicap ... I, therefore, renew myself by becoming timid and tender ...'.⁹ Her identity project is radical precisely because she is willing to alter her body surgically in order to experiment with different identities. What happens to the notion of 'race', she wonders, if I shed my white skin for a black one?¹⁰ Similarly, she rejects gender as a fixed category when she claims: 'I am a woman-to-woman transsexual act'. However, Orlan's surgical transformations – unlike a sex-change operation – are far from permanent. In this sense, Orlan's art can be viewed as a contribution to postmodern feminist theory on identity.¹¹ Her face resembles Haraway's (1991) cyborg – half-human, half-machine – which implodes the notion of the natural body. Her project represents the postmodern celebration of identity as fragmented, multiple and – above all – fluctuating and her performances resonate with the radical social constructionism of Butler (1990, 1993) and her celebration of the transgressive potential of such performativity.

For Orlan, plastic surgery is a path towards self-determination – a way for women to regain control over their bodies. Plastic surgery is one of the primary arenas where 'man's power can be most powerfully asserted on women's bodies', 'where the dictates of the dominant ideology ... become ... more deeply embedded in female ... flesh'.¹² Instead of having her body rejuvenated or beautified, she turns the tables and uses surgery as a medium for a different project. For example, when Orlan's male plastic surgeons balked at having to make her too ugly ('they wanted to keep me cute'), she turned to a female feminist plastic surgeon who was prepared to carry out her wishes. The surgical performances themselves are set up to dispel the notion of a sick body, 'just an inert piece of meat, lying on the table'.¹³ Orlan designs her body, orchestrates the operations and makes the final decision about when to stop and when to go on. Throughout the surgery, she talks, gesticulates and laughs. This is her party and the only constraint is that she remain in charge. Thus, while bone breaking might be desirable (she originally wanted to have longer legs), it had to be rejected because it would have required full anaesthesia and, therefore, have defeated the whole purpose of the project. Orlan has to be the creator, not just the creation; the one who decides and not the passive object of another's decisions.

ART AND LIFE

I now want to return to the issue which I raised at the outset of this article: namely, the puzzling fact that my research is continually being associated with Orlan's art. As one journalist noted after reading my book: the only difference between Orlan and the majority of women who have cosmetic surgery is one of degree. Orlan is just an extreme example of what is basically the same phenomenon: women who have cosmetic surgery want to be 'their own Pygmalions'.¹⁴

At first glance, there are, indeed, similarities between Orlan's statements about her art and how the women I interviewed described their reasons for having cosmetic surgery. For example, both Orlan and these women insisted that they did not have cosmetic surgery to become more beautiful. They had cosmetic surgery because they did not feel at home in their bodies; their bodies did not fit their sense of who they were. Cosmetic surgery was an intervention in identity. It enabled them to reduce the distance between the internal and external so that others could see them as they saw themselves.¹⁵ Another similarity is that both Orlan and the women I spoke with viewed themselves as agents who, by remaking their bodies, remade their lives as well. They all rejected the notion that by having cosmetic surgery, they had allowed themselves to be coerced, normalized or ideologically manipulated. On the contrary, cosmetic surgery was a way for them to take control over circumstances over which they previously had had no control. Like Orlan, these women even regarded their decision to have cosmetic surgery as an oppositional act: something they did for themselves, often at great risk and in the face of considerable resistance from others.

However, this is where the similarities end. Orlan's project is not about a real-life problem; it is about art. She does not use cosmetic surgery to alleviate suffering with her body, but rather to make a public and highly abstract statement about beauty, identity and agency. Her body is little more than a vehicle for her art and her personal feelings are entirely irrelevant. When asked about the pain she must be experiencing, she merely shrugs and says: 'Art is a dirty job, but someone has to do it.'¹⁶ Orlan is a woman with a mission: she wants to shock, disrupt convention and provoke people into discussing taboo issues. 'Art can and must change the world, for that is its only justification.'¹⁷

This is very different from the reasons the women I spoke with gave for having cosmetic surgery. Their project is a very private and personal one. They want to eliminate suffering which has gone beyond what they feel they should have to endure. They are anxious about the pain of surgery and worried about the outcome. They prefer secrecy to publicity and have no desire to confront others with their decisions. While their explanations touch on issues like beauty, identity and agency (although not necessarily using those words), they are always linked to their experiences and their particular life histories. Their justification for having cosmetic surgery is necessity. It is the lesser of two evils, their only option under the circumstances. They do not care at all about changing the world; they simply want to change themselves.

Thus, cosmetic surgery as art and cosmetic surgery in life appear to be very different phenomena. I, therefore, might conclude that there is little resemblance between Orlan's surgical experiences and those of most women who have cosmetic surgery, after all. Orlan's celebration of surgical technologies seems to have little in common with a project like my own, which aims to provide a feminist critique of cosmetic surgery. Consequently, comparisons between my research and Orlan's project can only be regarded as superficial or premature.

But perhaps this conclusion is overhasty. After all, it was never Orlan's intention to understand the surgical experiences of 'ordinary' women. Nor is it her intention to provide a feminist polemic against the unimaginable lengths to which women will go to achieve an ideal of beauty as defined by men. Hers is not a sociological analysis which explicitly attacks the evils of cosmetic surgery and its pernicious effects on women (Lovelace 1995). Nevertheless, her project is an implicit critique of the dominant norms of beauty and the way cosmetic surgery is practised today. It belongs to the tradition of feminist critique which imaginatively explores the possibilities of modern technology for the empowerment of women. As such, Orlan's project might be viewed as an example of a feminist utopia.

COSMETIC SURGERY AS FEMINIST UTOPIA

Feminists have often envisioned a future where technology has been seized by women for their own ends. Take, for example, Shulamith Firestone's *Dialectic of Sex* (1970) in which she fantasizes a world in which reproductive technology frees women from the chores and constraints of biological motherhood. In a similar vein, the novelist Marge Piercy depicts a feminist utopia in *Woman on the Edge of Time* (1976) where genetic engineering has erased sexual and 'racial' differences, thereby abolishing sexism and racism.¹⁸

More recently, the feminist philosopher Kathryn Morgan (1991) applies the notion of utopia to cosmetic surgery. She claims that refusal may not be the only feminist response to the troubling problem of women's determination to put themselves under the knife for the sake of beauty. There may, in fact, be a more radical way for feminists to tackle the 'technological beauty imperative'.

She puts forth what she calls 'a utopian response to cosmetic surgery': that is, an imaginary model which represents a desirable ideal that because of its radicality is unlikely to occur on a wide scale (Morgan 1991: 47). Drawing upon feminist street theatre, on the one hand, and postmodern feminist theory – most notably Judith Butler's (1990) notion of gender as performance – on the other, Morgan provides some imaginative, if somewhat ghoulish, examples of cosmetic surgery as feminist utopia.

For example, she envisions alternative 'Miss ...' pageants where the contestants compete for the title 'Ms Ugly'. They bleach their hair white, apply wrinkle-inducing creams or have wrinkles *carved into* their faces, have their breasts pulled *down* and *darken* their skin. (Morgan 1991: 46). Or, she imagines 'beautiful body boutiques' where 'freeze-dried fat cells', 'skin velcro', magnetically attachable breasts complete with nipple pumps, and do-it-yourself sewing kits with pain-killers and needles are sold to interested customers.

These 'performances' can be characterized as a feminist critique of cosmetic surgery for several reasons.

First, they unmask both 'beauty' and 'ugliness' as cultural artefacts rather than natural properties of the female body. They valorize what is normally perceived as ugly, thereby upsetting the cultural constraints upon women to comply with

KATHY DAVIS

the norms of beauty. By actually undergoing mutations of the flesh, the entire notion of a natural body – that linchpin of gender ideology – is destabilized.

Second, these surgical performances constitute women as subjects who use their feminine body as a site for action and protest rather than as an object of discipline and normalization. These parodies mock or mimic what is ordinarily a source of shame, guilt or alienation for women. Unlike the 'typical' feminine disorders (anorexia, agoraphobia or hysteria) which are forms of protest where women are victims, Morgan's actions require 'healthy' (*sic*) women who already 'have a feminist understanding of cosmetic surgery' (Morgan 1991: 45).

Third, by providing a travesty of surgical technologies and procedures, these performances magnify the role that technology plays in constructing femininity through women's bodies. At the same time, they usurp men's control over these technologies and undermine the power dynamic which makes women dependent on male expertise (Morgan 1991: 47). Performances show how technology might be reappropriated for feminist ends.

Morgan acknowledges that her surgical utopias may make her readers a bit queasy or even cause offence. However, this is as it should be. It only shows that we are still in the thrall of the cultural dictates of beauty and cannot bear to imagine women's bodies as ugly. Anyone who feels that such visions go 'too far' must remind herself that she has merely become anaesthetized to the mutilations which are routinely performed on women by surgeons every day (Morgan 1991: 46–7). Where the 'surgical fix' is concerned, 'shock therapy' is the only solution.

DOES COSMETIC SURGERY CALL FOR A UTOPIAN RESPONSE

The attractions of a utopian approach to cosmetic surgery are considerable. It enables feminists to take a stand against the cultural constraints upon women to be beautiful and dramatically exposes the excesses of the technological fix. It destabilizes many of our preconceived notions about beauty, identity and the female body and it provides a glimpse of how women might engage with their bodies in empowering ways. However, most important of all – and I believe this is why such approaches appeal to the feminist imagination – it promises the best of both worlds: a chance to be critical of the victimization of women without having to be victims ourselves.

While I am entertained and intrigued by the visions put forth by Morgan and enacted by Orlan, I must admit that they also make me feel profoundly uneasy. This unease has everything to do with my own research on cosmetic surgery. On the basis of what women have told me, I would argue that a utopian response to cosmetic surgery does not just open up radical avenues for feminist critique; it also limits and may even prevent this same critique. It is my contention that there are, at least, four drawbacks.

First, a utopian response discounts the suffering which accompanies any cosmetic surgery operation. One of the most shocking aspects of Orlan's performances is that she undergoes surgery which is clearly painful and yet

shrugs off the pain ('Of course, there are several injections and several grimaces ... but I just take painkillers like everyone else')¹⁹ or explains that the audience feels more pain looking at the surgery than she does in undergoing it. ('Sorry to have made you suffer, but know that I do not suffer, unlike you ...')²⁰ This nonchalance is belied by the postoperative faces of the artist – proceeding from swollen and discoloured to, several months later, pale and scarred. Whether a woman has her wrinkles smoothed out surgically or carved in has little effect on the pain she feels during the surgery. Such models, therefore, presuppose a non-sentient female body – a body which feels no pain.²¹

Second, a utopian response discounts the risks of cosmetic surgery. Technologies are presented as neutral instruments which can be deployed to feminist ends. Both Orlan and Morgan describe surgery as conceived, controlled and orchestrated by the autonomous feminine subject. She has the reins in her hand. However, even Orlan has had a 'failed' operation: one of her silicone implants wandered and had to be reinserted – this time not in front of the video camera. Such models overstate the possibilities of modern technology and diminish its limitations.

Third, a utopian response ignores women's suffering with their appearance. The visions presented by both Orlan and Morgan involve women who are clearly unaffected by the crippling constraints of femininity. They are not dissatisfied with their appearance as most women are; nor, indeed, do they seem to care what happens to their bodies at all. For women who have spent years hating their excess flesh or disciplining their bodies with drastic diets, killing fitness programmes or cosmetic surgery, the image of 'injecting fat cells' or having the breasts 'pulled down' is insulting. The choice of 'darkened skin' for a feminist spectacle which aims to 'valorize the ugly' is unlikely to go down well with women of colour. At best, such models negate their pain. At worst, they treat women who care about their appearance as the unenlightened prisoners of the beauty system who are more 'culturally scripted' than their artistic sisters.

Fourth, a utopian response discounts the everyday acts of compliance and resistance which are part of ordinary women's involvement in cosmetic surgery. The surgical experiments put forth by Orlan and Morgan have the pretension of being revolutionary. In engaging in acts which are extraordinary and shocking, they not only entertain and disturb, but also distance us from the more mundane forms of protest.²² It is difficult to imagine that cosmetic surgery might entail *both* compliance *and* resistance. The act of having cosmetic surgery involves going along with the dictates of the beauty system, but also refusal – refusal to suffer beyond a certain point. Utopian models privilege the flamboyant, public spectacle as feminist intervention and deprivilege the interventions which are part of living in a gendered social order.

In conclusion, I would like to return to the young woman I mentioned at the beginning of this chapter. At first glance, her reaction might be attributed to her failure to appreciate the radicality of Orlan's project. She is apparently

unable to go beyond her initial, 'gut level' response of horror at the pictures and consider what Orlan's performances have to say in general about the status of the female body in a technological age. She is just not sophisticated enough to benefit from this particular form of feminist 'shock therapy'.

However, having explored the 'ins' and 'outs' of surgical utopias, I am not convinced that this is how we should interpret her reaction. Her refusal to take up Orlan's invitation may also be attributed to concern. She may feel concern for the pale woman before her whose face still bears the painful marks of her previous operations. Or she may be concerned that anyone can talk so abstractly and without emotion about something which is so visibly personal and painful. Or she may simply be concerned that in order to appreciate art, she is being required to dismiss her own feelings.

Her concern reminds us of what Orlan and, indeed, any utopian approach to cosmetic surgery leaves out: the sentient and embodied female subject, the one who feels concern about herself and about others. As feminists in search of a radical response to women's involvement in cosmetic surgery, we would do well to be concerned about this omission as well.

NOTES

1. This festival was organized by Triple X which puts on an annual exhibition including theatre, performance, music, dance and visual art. I would like to thank Peter van der Hoop for supplying me with information about Orlan. I am indebted to Willem de Haan, Suzanne Phibbs and the participants of the postgraduate seminar 'Gender, Body, Love', held at the Centre for Women's Research in Oslo, Norway in May 1996 for their constructive and insightful comments.
2. *De Groene Amsterdammer* (23 August 1995).
3. See, for example, a recent article by Xandra Schutte in *De Groene Amsterdammer* (13 December 1995) or 'Passages and Passanten' (VPRO Radio 5, 17 November 1995).
4. Quoted in Reitmaier (1995: 8).
5. *Falter* (1995, No. 49: 28).
6. Quoted in Reitmaier (1995: 7).
7. See Reitmaier (1995: 8).
8. Quoted in Tilroe (1996: 17).
9. *Actuel* (January 1991: 78).
10. Obviously, Orlan has not read John Howard Griffin's (1961) *Black Like Me* in which a white man chronicles his experiences of darkening his skin in order to gain access to African-American life in the mid-1950s. For him, becoming the racial Other was a way to understand the material and bodily effects of racism – an experiment which was anything but playful and ultimately resulted in the author's untimely death from skin cancer. See Awkward (1995) for an excellent discussion of such experiments from a postmodern ethnographic perspective.
11. While Orlan has been cited as a model for postmodern feminist critiques of identity, her project is, in some ways, antithetical to this critique. She celebrates a notion of the sovereign, autonomous subject in search of self which is much more in line with Sartre's existentialism than poststructuralist theory *à la* Butler. See, for example, the debate between Butler and others in Benhabib et al. (1995).
12. Quoted in Reitmaier (1995: 9).
13. *De Volkskrant* (5 June 1993).
14. *De Groene Amsterdammer* (13 December 1995: 29).

15. Quoted in Reitmaier (1995: 8).
16. Quoted in Reitmaier (1995: 10).
17. Quoted in Reitmaier (1995: 7).
18. See José van Dyck (1995) for an excellent analysis of feminist utopias (and dystopias) in debates on the new reproductive technologies.
19. Quoted in Reitmaier (1995: 10).
20. Statement given at performance in Amsterdam.
21. This harks back to the notion that women – particularly working-class women and women of colour – do not experience pain to the same degree that affluent, white women and men do. This notion justified considerable surgical experimentation on women in the last century. See, for example, Dally (1991).
22. It could be argued that in the context of the art business where success depends upon being extraordinary, Orlan is simply complying with convention. This would make her no more, but also no less, revolutionary than any other woman who embarks upon cosmetic surgery.

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