

Luna Dolezal

The Body and Shame: Phenomenology, Feminism, and the Socially Shaped Body

Lanham, Md.: Lexington Books, 2015

ISBN 978-0-7391-8168-3

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Ever since the 1990s, when cosmetic surgical interventions became increasingly accessible and when, subsequently, the number of interventions increased spectacularly, the practice of cosmetic surgery has been the subject of critical feminist analyses. Given the fact that the majority of people seeking cosmetic surgery are female, this feminist interest is not surprising. Feminist debates about cosmetic surgery are staged mainly by the opposition between, on the one hand, the claim that women who seek cosmetic surgery are victims of oppressive masculine norms pertaining to feminine embodiment and, on the other, the claim that these women are empowered agents. In this "structure-agency" debate, cosmetic surgery is seen as either a vicious external force inflicted on female bodies or a means to free oneself from given bodily restraints. Instead of choosing sides in this debate, Luna Dolezal claims that women's struggles with body modifications such as cosmetic surgery are far more complex and cannot be reduced simply to either victimhood or empowered subjectivity. To understand the "complex state of mind of women who are struggling with negative self-conscious emotions" (144), we need to examine the many-headed monster of "body shame": many-headed because, as Dolezal explains lucidly throughout her book, body shame can be both beneficial and oppressive, both necessary and something to be avoided.

Dolezal argues that we need to understand cosmetic surgery as a particular outcome of shame's potential for shaping bodies. To substantiate this claim, she develops an in-depth philosophical theory of shame that addresses three different aspects of the relationship between the body and shame: (a) the body as a *source* of shame; (b) shame *experienced* by the body; and (c) shame *shaping* the body. She unravels the complexity of this threefold relationship between the body and shame while drawing on both phenomenological and social-constructivist approaches. Defining shame in terms of negative, self-conscious emotions (for example, feeling humiliated, embarrassed [xvi]), she focuses especially on the experiential dimension of body shame. How exactly is shame experienced? What happens to one's embodied existence while being ashamed about one's body? Whereas Dolezal resorts to phenomenology to provide a description of some universal structures of this typical experience, she relies on social theory and social constructionism to make explicit how contingent social forces condition these universal structures

(xiii, 79). As a consequence, her analysis elegantly oscillates between readings of phenomenologists such as Husserl, Beauvoir, Sartre, and Merleau-Ponty and social theorists such as Foucault, Elias, Bourdieu, and Goffman.

Shame from a Phenomenological and Social Theory Perspective

Dolezal draws heavily on Sartre's (early) work, even though she makes it very clear that his conception is limited with respect to recognizing power relations in social interaction (91). For Sartre, shame is produced by the gaze of the Other, as he illustrates in the famous example of a peeping Tom. While sneakily peeping through a keyhole, I might be totally involved in the act of peeping. However, the moment I hear footsteps in the corridor, my act of peeping is suddenly disrupted by the possibility of another seeing me. The gaze of the Other makes me feel ashamed of myself. I am peeping through the keyhole because I am jealously spying on my partner--not something to be very proud of. The interesting thing in Sartre's theory is that this self-conscious experience of shame produces an existential transformation and a transformation of the appearance of one's own body. At an existential level, shame transforms me from "being for myself" (*pour soi*) into "being for another" (*pour l'autrui*), which means that I am transformed from a totally freely acting subject into a perceptible object. Shame thus leads to existential alienation. At a phenomenological level, shame transforms the appearance of one's own body in the background, as "passed by in silence" (27), into the appearance of one's body in the foreground. These transformations essentially go together with a decrease in a person's possibilities and thus with a shrinkage of her world.

Following Merleau-Ponty's phenomenology of embodied subjectivity, according to which agency is based on motor intentionality, instances of alienation involve a disruption of a person's "I can." Others have described this transformation in terms of a disruption of the "flow" (Dreyfus) or a shift from "absence" to "dys-appearance" (Leder). Dolezal describes the specific alienating nature of the experience of shame while employing a set of ocular concepts: "invisibility," "visibility," "(in)visibility," and the "seen body." While being in the flow, not being bothered by any (negative) conscious experience of one's own body, one's body is invisible. The moment this flow breaks down, it becomes visible. Typically, Dolezal's use of "visibility" is very broad and entails different kinds of experiences of being perceptible, including experiences of discomfort or inability. Being "visible," however, becomes objectifying and alienating only if it is reduced to the stricter ocular "being seen": the "seen body" involves the body such as it appears as a seen object for others and oneself (80). Combining this phenomenology of the body with Goffman's theory of social interaction, Dolezal explains that social recognition requires both invisibility and visibility, hence her notion of (in)visibility. "Passing" involves being seen and recognized as a group member yet without being objectified. Being totally invisible implies a powerless position. For example, as described by Honneth, a white slave-master can totally disempower his black slaves by pretending they are invisible: he unself-consciously (and shamelessly) undresses in front of them. Because they are made invisible, they have no power to return their master's powerful gaze (97). Phenomenology and social theory thus teach us that experiences of shame can be caused by the objectification of the body ("the seen body") and/or the overlooking of the body ("the invisible body").

Shame as an Incorporated Moral Compass

From a phenomenological and existential perspective, the experience of shame is absolutely negative and painful. However, from an educational point of view, it is a positive experience

since it teaches us to judge ourselves (81). As self-judgment is always related to existing norms about how to behave, shame's greatest value lies in guiding social interaction. Shame functions as a threshold of social norms. Feeling ashamed makes one instantly aware, without the intervention of reasoning, of having transgressed this threshold. We could therefore say that shame is like an incorporated moral compass. Exactly because shame is such a negative and painful experience, we try to avoid it as much as possible, and it is this shame-avoiding behavior that results in the acquisition of social prestige and social capital, as explained by Elias and Bourdieu. If you want to be recognized as a member of a certain social group, you need to learn, control, and incorporate that group's manners and "body techniques."

According to Elias, social skills involve first and foremost skills to regulate bodily functions and embodied skills. How shameful if you are not able to control your bowel movements, or your dripping nose, but also if you are not able to wield your cutlery, use your table napkin correctly, or if you don't know how to smile in a friendly way, how to nod politely, or how to sit decently. According to Elias, this civilizing process of regulating posture and bodily functions is driven by a fear of social degradation, which is experienced primarily as shame. In that sense, Elias's theory differs essentially from Foucault's idea that body normalization and discipline is based upon the power of the gaze. Underlining the importance of the gaze of the Other for social interaction, Foucault builds on Sartre's theory, yet at the same time transforms it totally while making clear that social interaction can be understood only while taking into account the normative framework in which social interaction takes place (56). Panoptically distributed power transforms bodies into "seen bodies" that, because of their principal visibility, are willing to adjust to prevailing norms, to embrace the prevailing discourse. Although Foucault's theory might be helpful for understanding how power relations constitute subjectivity, Dolezal shows that it is limited exactly because it does not address the subjective experience of shame (63). Indeed, in a world in which subjects do not experience shame, the panoptical gaze would be totally powerless. Panoptical power becomes powerless if subjects under surveillance shamelessly expose their objectionable behavior.

Chronic Body Shame

So far, the phenomenon of shame is described as an experience that, although negative and painful, is necessary for the constitution of social agency. Beyond this description of shame as a universal human experience, Dolezal claims, however, that some people are more "shame-prone" than others, and this indeed forms a key argument in her book. According to her, the "propensity to shame" is dependent on power relations in the sense that people who occupy social positions that lack authority experience more shame than others because social norms are set by these more powerful others (90-91). Dolezal conceptually justifies this difference in "shame-proneness" on the basis of a distinction between two forms of body shame: acute body shame and chronic body shame (8-11). Whereas "acute body shame" involves temporary experiences of embarrassment caused by transgressions of the threshold of proper behavior, appearance, or performance, "chronic body shame" forms a "background pain" caused by permanent aspects of one's bodily perceptibility, such as skin color, weight, disfigurement, or disability. It is chronic body shame especially to which some people are more prone than others.

Chapters 1, 2, and 3 provide an analysis of shame as a universal human experience, which thus mainly involves "acute body shame." In chapter 4, Dolezal starts explaining the nature of "chronic body shame" mainly on the basis of the example of misrecognition in racism, which is

not the strongest part of her argument. Racism definitely can cause deep-rooted and chronic embodied experiences of humiliation, or of being inferior, yet I am not convinced that it is helpful to place all these experiences under the heading of shame. Her analysis of how shame has political impact and how it can shape some bodies more drastically than others--which forms the most interesting aspect of her book--requires a conceptual distinction between acute and chronic body shame. Her definition of the latter is not very robust, though, since it refers to experiences as diverse as experiences of misrecognition, poor-self-esteem, and humiliation. Another problem with the notion of "chronic body shame" is its unclear phenomenological status. In some places, Dolezal describes it in terms of objectification and alienation, similar to experiences of acute shame, as I have described earlier, but when she explains body shame in women, she also writes, "[women] may not even realize that they are experiencing body shame or that they are exerting inordinate effort to avoid it" (110). So chronic body shame can also present itself as something that is not-experienced. This, however, contradicts Dolezal's definition of shame as something that is experienced by the body (xvii).

Shame Shaping Women's Bodies

Despite the fact that the concept of "chronic body shame" could have been more theoretically refined, Dolezal persuasively analyzes how shame may cause women to engage in body-shaping practices. She argues, while adhering to Beauvoir and Bartky, that women are more shame-prone than men because various ordinary biological aspects of the female body--including menstruation, sexual maturation and breast development, sexual desires, and post-pregnancy marks such as a sagging tummy--are often conceived as things that need to be carefully concealed. Body shame, so it seems, is a "cultural inheritance of women" (106). In contrast to acute shame that can be overcome by promptly adjusting or attempting to adjust one's behavior, chronic body shame in women is much harder to beat, if beatable at all. If it is true that women feel ashamed about ordinary female body aspects, this shame can be overcome only if they strive for something beyond the ordinary. Cosmetic surgery, then, becomes a powerful means to support this laborious endeavor while alleviating chronic body alienation and transforming shame into pride (136).

Instead of arguing only that chronic experiences of body shame may motivate women to have cosmetic surgery, Dolezal also explains how both neoliberalist consumerism and medical discourse nourish body shame-proneness in women. Whereas neoliberalism promotes an "endless culture of restyling and self-improvement, centred on the body, within an image-saturated milieu" (108), medical discourse increasingly shrinks the margin of what could be considered "normal" embodiment. If a minor flaw in otherwise normal appearance is transformed into a medical problem, a medical intervention becomes a legitimate solution for this problem. Contemporary medical discourse enables the identification of "pathological," and thus shameful, appearance, which consequently can be polished by purchasable self-improvement interventions. Mutually reinforcing each other, medicalization and consumerism thus propel a culture of body shame. Women might get trapped by this web of shame, Dolezal explains, yet she distances herself from the view that women who seek cosmetic surgery are "victims" of neoliberalist society. Women are not victims since most of the time they are very well aware of the coercive and oppressive nature of beauty norms. That they nevertheless choose to adjust to these norms could be explained by the fact that resisting the norms might lead to a loss of social prestige and capital (141, 144). Theoretically and rationally, it might be easy and logical to resist oppressive norms.

From an embodied, affective point of view this is not easy at all, exactly because the experience of body shame is so deeply entrenched in our existence.

Guiding the reader carefully through a huge variety of philosophical and sociological theory, and providing a clear review of contemporary feminist analyses of cosmetic surgery, Dolezal has composed a well-informed, convincing, and highly accessible book. The book teaches us a great deal about the relation between body shame, our image-saturated consumerist society, and appearance-improving behavior. Although her emphasis on visibility is understandable, Dolezal misses an opportunity by sticking to her ocular-centered conceptualization of embodiment and does not explicitly address other dimensions of embodiment that are unmistakably related to shame. The judging "gaze" of the Other not only targets what we look like, but also how we smell and sound. Think only of the shameful experience of not being able to control your bladder or bowels. Because (partial) urinary incontinence is a rather normal outcome of childbearing and because colon diseases that may cause feces-incontinence and stoma-use are highly prevalent, many people have to deal with smelly and sometimes noisy bodies. A feminist analysis that also took into consideration how women experience and manage this kind of chronic body shame could give rise to a broader understanding of female embodiment.