

## **Bello en Buenos Aires? - construcciones de genero y lugar en el turismo de cirugía estética.**

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### **Introduction**

*"We take care of every detail regarding the organization of your trip. We want you to have a great and pleasant surgical as well as touristic experience in Argentina" (aesthetictrip.com, 2020).*

The fusing of surgical practices with touristic experiences, as suggested in this quote from aesthetictrip.com, is a situation brought about by the radical increase of mobility in recent decades. Tourist-patients as well as cosmetic clinics and tour agents explore mobilities ranging from the personal, the mobilities of things, economic relations, ideas, lifestyles and media communication (Holliday et al 2014).

As the industry of invasive and non-invasive cosmetic procedures is experiencing a rising global popularity (ISAPS), Cosmetic Surgery Tourism (CST) materializes as a subbranch of medical tourism, and as Holliday et al writes; Medical tourism may offer someone a new

Hip, but cosmetic surgery tourism promises something more: a new 'you'. This points to the important way in which CST differs from Medical Tourism, as self and identity are put into play in ways closely linked with self-esteem and confidence (Holliday et al. 2013)

Several scholars have described present practices of CST as the inversion of a past structure, in which privileged people from the global South travelled to exclusive top-rated clinics in Europe and North America. Tendencies show that this formula have been turned upside down in recent years, as large groups of middleclass and lower-middleclass tourist-patient from the global North, go abroad for (cosmetic) surgeries in countries less economically stable. Here they gain access to procedures at a much cheaper rate than in their home countries (Viladrich and Baron-Faust 2014, Casanova and Sutton 2013).

As CST is a transnational phenomenon numbers are hard to come by, but in a 2013 article Holliday et al. suggest that "the UK's annual International Passenger Survey [...] shows that approximately 100,000 UK citizens go abroad each year for medical treatment" (Holliday et al. 2013).

Villadrich and Baron-Faust writes (in 2014) that over 300,000 cosmetic procedures (including 60,000 breast implant surgeries) are performed in Argentina annually at internationally competitive prices (Villadrich and

Baron-Faust 2013). This next to the fact that a group of government ministries including Tourism and Health in 2011 launched a new initiative to increase tenfold the number of yearly medical tourists, gives the indication of an expanding field (Vindrola-Padros 2015). Also, as the country has been facing some very rough years in economic and political terms during the Macri government, neoliberal market ideals, together with an historic drop of the peso, could be thought to have created ideal conditions for the sector of CST.

So while countries like India and Thailand have been described in CST literature as global centers (Viladrich and Baron-Faust 2014, Holliday et al. 2013), and from a Scandinavian point of view, Turkey and Poland might represent more regional destinations, there are various reasons to look at Argentina in this question of CST.

One is that Argentina represents the second largest market of cosmetic surgeries in South America, only surpassed by Brazil. In this way offering a South American perspective CST, situated in a unique cultural context, and with a national geography that might also play an important part in the conceptualization of the touristic experience. Furthermore, reflecting on my personal interest in gendered aspects of Cosmetic Surgery Tourism, Argentina is interesting due to a tradition of machismo masculinity.

Gender and specifically masculinity as it emerges together with geographical place in CST online marketing, will be my main focus in the ponencia. Gender is difficult to get around when writing about CST, as other scholars have pointed out, that gender has been the most important social category, through which cosmetic surgery has been analyzed (Holliday et al. 2013). The assumption underlying much of what is written about Cosmetic Surgery and CST is that its subject is always female. Woman *do* represent the largest group of patient, and most surgeons *are* male, and for this reason feminist engagement with this topic has pointed to a misogynistic beauty culture that, as Holliday et al. writes; only really affects woman and a small portion of deviant men (Holliday et al. 2013).

Cosmetic treatments are so strongly constructed in contemporary culture as feminine, that we readily accept this idea, that only woman are its consumers, but men are forming an increasing part of the statistics. According to international and Danish sources, they make up around 10 % of both non-invasive and invasive procedures, and compared to woman, the number of men engaging in cosmetic surgery is rising much faster. (ISAPS, e-sundhed.dk)

Holliday et al. are critical towards the “writing out” of men who “get in the way” of feminist arguments, as well as to stereotypical notions of geography, as always representable through a globalized North-South lens. This they argue, peels away notions of agency and attention to local variations. I follow their lead, in that an analysis of gender and place, should steer clear of to strong male-female and north-south polarizations (Holliday et al. 2013).

Agreeing with this criticism, my intention with this ponencia is to show that men too are imagined as the consumers of CST. In my presentation I will explore how the representation of men as a segment targeted in CST marketing intersects with the proposal of Buenos Aires as a destination. I have found a few previous studies on Buenos Aires as a CST destination, but none that deal with men – and in this sense I’m looking to close a knowledge gap.

The internet constitutes a central resource for CST as the facilitating technology enabling information about procedures to be found, airline tickets and hotel rooms to be booked, money to be transferred, as well as desires and imaginaries to be built and circulated. Taking this Ponencia as an initial study to a wider investigation and being for Covid19 reasons limited to do research online, I chose to focus on online representations at this point.

The research question that I am working with then is; how are men represented as consumers of CST in online marketing materials - and how does masculinity emerge together with the local geography of Buenos Aires on social media accounts also used in the promotion of CST to Argentina.

## **Data**

For answering this question, I will be looking at a selection of online material including both websites and social media profiles marketing CST to Buenos Aires.

Although it has been pointed out that word of mouth is the most trusted source of information about Cosmetic Surgery (Sanchez Taylor 2011), in the case of CST Holliday et al. writes; that the internet is stitched into the heart of cosmetic surgery tourism, and therefore must be a core consideration in any study of it (Holliday et al. 2013).

I am especially interested in the use of social media for the marketing of CST, as social media in its interactive structure resembles word of mouth much more, than static websites.

As an empirical focal point, social media allows us a window into the popular meaning production taking place around the actual medical procedures and surgeries that CST is about. Through build-in functions such as the possibilities to like, comment or ask a question to content posted, this type of media, provides future tourist-patients sense of connection as well as enabling them to read other people's comments. Furthermore the content of social media is often about relations, and in this sense there is a positioning going on in the content of these SoMe profiles marketing CST that is about relationality – to other “agents” in the form of people (surgeons, patients, family members, influencer, celebrities) and in the form of things (scalpels, scrubs, hotel rooms, continental breakfast plates, mate, asado, football stadiums).

For this ponencia I will look at data found on the various media platforms of the CST agency Aesthetic trips. This includes a website, a Facebook profile and an Instagram account. It also include the Instagram account of a doctor Navarro (drgerardogarcianavorro). Doctor Navarro is the surgeon behind Aesthetic trips, or at least that is the impression given on Instagram as a link to Dr Navarro's profile is included in the “bio” of Aesthetic trips (aesthetictripba).

This material is selected for practical reasons, as it is very explicitly offering CST to Buenos Aires. It is chosen as an exemplar representative of many other CST websites and social media accounts, that I have looked at, which had less specific and clear-cut profiles. I will be creating perspective on the chosen material by looking at other websites ([www.infinitalbelleza.com](http://www.infinitalbelleza.com), [www.rodriopalacios.com](http://www.rodriopalacios.com), [www.gagliardicirugiaplastic.com](http://www.gagliardicirugiaplastic.com)) and their accompanying SoMe profiles. These media profiles are of private clinics for Cosmetic Surgery in Buenos Aires, that also offer CST.

Now I will turn to my theoretical situatedness to create some background for my inquiry. I will draw up some general lines regarding men's rising engagement in consumer culture and cosmetic medicalization – as well as point to influential theories of masculinity that I draw upon in my analysis, but first I offer a brief summary of what has previously been written on media representation of CST in relation to Buenos Aires.

### **Cosmetic Surgery Tourism**

I will jump right into the context of my investigation and focus on the scarce number of previous studies on media representation of CST in relation to Argentina and Buenos Aires as a destination.

In *Transnational Body Projects* (2013) Casanova and Sutton, explore news coverage produced in the US and in Argentina – as “sending” and “receiving” countries of CST. They find that the media coverage in the receiving country Argentina is invested in positioning itself as part of the globalization process, by

promoting the nation as a modern and advanced society, in terms of technical competency and high quality of its services (Casanova and Sutton 2013). The media coverage in the U.S. in contrast represents the CST to Argentina as dangerous and Argentine technology and medical capacity as inferior to that of the U.S., implicitly upholding a north-south power dynamic. They focus on the negative media construction of what they assume to be female patient-tourist as ignorant, uninformed and driven mainly by the low price of surgery overseas (Casanova and Sutton 2013).

In their 2014 article, *Medical tourism in tango paradise*, Viladrich and Baron-Faust argue that the online marketing that promotes CST to Argentina is fundamentally invested in providing an image of “cultural affinity” between Argentine “hosts” and their foreign patients on the basis of their racial, ethnic, and cultural similarities (Viladrich and Baron-Faust, 2014). They also found that notions of sensual exoticism are constructed through the promotion of tango products, arguing that Argentine CST marketing delivers its own “tangoized version of beauty”, described by Viladrich and Baron-Faust as spiced with sensuality and charm (Viladrich and Baron-Faust, 2014).

### **Men, consumer culture and cosmetic medicalization**

In western modernity, the white middle-aged (cis) male body has figured as a site of privilege by giving flesh to *normality* – a productive force in terms of ensuring privileges, while in tandem producing its *others* (by their contextual distance from it). In this historical configuration, where masculinity has been conceived to align with qualities of the mind in the cartesian mind/body split (Hakim 2019, Grosz 1994), the male body has enjoyed cultural invisibility, not attracting modes of surveillance or regulation in the way that the bodies of women, racialised or sexual minorities did and do (Bordo 1999, Robinson 2000, Grosz 1994). This privileged invisibility has been eroding for some time, as the male body is increasingly embraced by popular media and consumer culture, in ways that objectify it and cast it as an aesthetic self-management project (Gill et al. 2005, Lefkowich et al. 2017, Hakim 2019). In this trajectory, the marketing of cosmetic treatments for men can easily be considered as only the latest of an array of products initially intended for women, now being re-branded and sold to men (for instance fashion, styling products, make-up and diets) (Hall 2013, Whitmer 2017, McCauley 2018).

The wider social tendencies surrounding these shifts in gendered consumption indicate that the norms for how men should present their bodies are currently under complex re-negotiation (Bordo 1999, Calasanti and King 2007, Coffey 2016, Hakim 2019).

Hakim suggests that new types of sexualised masculinity have been emerging in western culture at least since the 1960s, referencing studies of film and media culture by Neale (1983), Dyer (1983) and Mort (1996). However, attention to the increasing objectification of the male body starts to saturate around the

turn of the millennium (Bordo 1999, Gill et al. 2005, Nixon 1996, Boni 2002, Featherstone 1991). As Gill et al. note: 'It is not simply that the *number* of images of the male body has increased; more significant is the emergence of *a new kind of representational practice* in mainstream popular culture, depicting male bodies in idealized and eroticized fashions, coded in ways that give permission for them to be looked at and desired' (Gill et al. 2005: 38). Digital media have been instrumental in providing the technologies and pluralities that have amplified the representations of men's bodies in new aestheticised ways, both in advertising images and through selfie practices (Coupland 2007, Whitmer 2017, Schroeder and Zwick 2004, Enguix and Gómez-Narváez 2018).

In an overlapping period of time, appearance as an essential marker of social identity is installed with the rise of consumer culture (Giddens 1991, Featherstone 1991). Rosenmann et al. have developed the term Consumer Masculinity to describe how masculinity as identity in consumer culture has become contingent upon buying the 'right' products and displaying the 'right' lifestyle (Rosenmann et al. 2018). The case of cosmetic medicine and the marketing of cosmetic treatments online illustrate how consumer culture intertwines with medicalisation in contemporary society, as the two merge into a number of consumable body technologies (Elliot 2010, Conrad 2007, Rosenfeld and Faircloth 2006). The websites analysed in this article form part of consumer culture's current orientation towards the medicalisation of masculinity.

Much of what has been written on men's aesthetic body work and medicalizing consumer culture gravitates around fitness and muscularity (Lefkowich et al. 2017, Gattario et al. 2015, Lin and DeCusati 2015, Coffey 2017). Men's engagement with cosmetic procedures, invasive and non-invasive, has been given little attention in academic research – as almost every study on the subject (this one included) has argued (Holliday and Carnier 2007, Atkinson 2008). What *has* been written divides over fields of media history, medical ethnography and ageing studies. Elisabeth Haiken has accounted for the history of men's cosmetic surgery in a North American context, piecing together media coverage of the phenomenon from WWI and throughout the 20<sup>th</sup> century (Haiken 2000). Other scholars have explored the narrative account of men who have cosmetic surgery, showing that a multitude of individual stories and considerations underlie such a decision, while general themes of risk management and investment in 'body capital' run through the accounts as well (Holliday and Carnier 2007, Atkinson 2008, Ricciardelli and White 2011, Ricciardelli and Clowe 2009). Scholars from ageing studies have written about anti-ageing products and some cosmetic procedures in relation to gendered ageing and ageism, showing how products and practices are constructed in relations to categories of naturality and gender differences (Kinnunen 2010, Ojala et al. 2014, Marshall and Katz 2006, Calasanti and King 2007).

## Critical masculinity theory

in the following I will give short introductions to influential theories in masculinity, in order to introduce some of the key terms that I will be drawing on in my analysis.

Critical Studies on Men and Masculinity (CSMM), often described as a subfield to gender and woman's studies, is positioned within an academic trajectory, beginning as sex role theory in the 1970 (Berggren, 2014, Hearn, 2019). Since then, the field has unfolded into a heterogeneous catalogue of studies, with numerous directions, methodologies and knowledge interests. The assumption in place at the center of most work on men and masculinity is, however, the understanding that masculinity *is social, socially and societally constructed* (Hearn, 2019). CSMM takes seriously the gendered nature of men's histories, cultures and life courses, as well as the problematic consequence masculinity may entail for some men, through its marginalizing functions (Sedgwick, 1985, Connell, 1995, Kimmel, 1994).

In *Masculinities* (1995), Connell theorizes masculinity as plural, intersectional and hierarchical. Within the social system of gendered relations, hegemonic masculinity is the dynamic configuration that at a given time holds the place as the exalted ideal of masculinity – as such, it serves to legitimize patriarchal power relations, implying the continued subordination of woman and marginalized men (Connell 1995).

Hegemonic masculinity is the dominant ideology of masculinity, and as such, few actual men – if any – will embody it consistently over time, but all men will be required to position themselves in relation to it (Connell 1995). This is what Demetriou has termed the internal hegemony (Demetriou 2001). As the difficulties entailed by hegemonic masculinity for individual men do not outweigh the benefits for men as a group (the external hegemony over women), most men complicitly take part in upholding its ideology, as they gain from its symbolic hierarchy (Connell and Messerschmidt 2005).

Eric Anderson's argument that western culture is moving away from the homophobia that used to characterize it. Based on a variety of ethnographic studies, Anderson found that young straight men in peer groups rejected homophobia and included gay peers in friendship networks - they were more emotionally intimate with friends, as well as physically tactile with other men (Anderson and McCormack 2018). As the level of homophobia declines, Anderson writes, society becomes more inclusive, and men's behaviors are no longer restricted and policed by homophobia (McCormack 2012).

In his book *Work that Body*, Jaime Hakim builds on Gill's and Scharff's point that neoliberalism is always already gendering and that women are its ideal subjects. Hakim argues that men, too – especially after

2008, in the age of austerity as they experience 'precarization' – are becoming subjected to neoliberalism's feminizing axiomatic (Hakim 2019).

When the male body is intensified as a site 'where the cultural politics of neoliberalism are being negotiated', men's lived experiences are brought closer in line to those of women (Hakim 2019). For women the negotiation of the precarity of the neoliberal every day, by aestheticizing and sexualizing their bodies as a means to create value, is not new. Hakim writes that as precarity becomes the experience of the middle class too, (some) men resort to such strategies as well (Hakim 2019).

Through Hakim's thinking, men's cosmetic appearance work can be understood as part of a cultural tendency where men too are prompted to attempt to create value by aestheticizing their bodies, as the precarity of neoliberal society has uprooted their traditional claims to authority (through traditional masculine identity or as part of the middle class). Hakim's notion of neoliberalism's feminizing axiomatic seems useful for explaining the emergent masculinities entailed in the taglines and images alluding to entrepreneurial selfhood, indicating that value must continually be produced (on the male body too).

The term emergent masculinities is proposed by Inhorn and Wentzell '*to account for ongoing, context-specific, embodied changes within men's enactments of masculinity, particularly as they encounter emerging health technologies*' (Inhorn and Wentzell 2011: 802). Writing within medical ethnography and building on Hegemonic Masculinity, they suggest that whereas *hegemony* emphasizes the dominant and hierarchical, *emergence* highlights the novel and transformative (Inhorn and Wentzell 2011). I will use the notion of emergent masculinities to account for representations of masculine embodiment that I understand as materializing emergence in the context of new cosmetic technologies.

### **Thoughts on Methodology**

I situated my research within a posthumanist and new materialist (feminist) tradition. This means that I first of all acknowledge my own position of situatedness as a researcher. Recognizing as Haraway has convincingly argued that all knowledge is situated, and all vision is embodied (Haraway 1988).

In this particular context as someone primarily rooted in a Scandinavian context and as a cis-gendered woman, which makes me susceptible to some cultural "differences" and problems regarding identity construction, while unaware of others.

With Haraway I understand objects as boundary projects, always forming in relational interactions, between my effect as a research on the object and the object's effect on me (Haraway 1988).



As I make decisions about what research objects to zoom in on, I will try to map the factors involved in the research process, as suggested by Haraway, for a higher degree of transparency about the way the “research object” came into being (Haraway 1988).

In looking at online communication I work with mixed methods, making use of a number of tools from the disciplines of semiotics and discourse analysis, as often formulated together for the purpose of website and social media analysis in Multimodal methodology (Machin, Caldas-Coulthard and Milani 2016, Jewitt 2009). For future development of this research I would like to be able to implement semi-structured interviews with clinic owners – and if possible male tourist-patients.

### **Initial sketch of my analytical points**

The analysis that I will be presenting in my spoken Ponencia has three point of focus, that will be sketched out here and developed more when I give my talk at the Jornadas Nacionales de Debate Interdisciplinario de Salud y Población 2020.

- My first analytical point will quite simply be about the presence of men in my empirical data – I will look at how men are represented in textual and visual form, primarily on the Aesthetic trips media platforms. This will help me outline the way the male patient-tourist - a figure that I find to be overlooked in the literature on CST, is constructed in the marketing material of CST to Argentina.
- In continuation I will analyze how men’s need for cosmetic surgery is constructed and legitimized – and how masculinity is mobilized as a tool in that narrative. As cosmetic treatments are heavily coded as feminine in western culture, I point to rebranding strategies that reference hegemonic ideals of masculinity – and how such strategies draw meaning from the notions of travel and cultural tropes such as the big city and cosmopolitan lifestyle, as well as Buenos Aires landmarks like el Obelisco y la Bombonera.
- Third I turn to the merging together of professional and private content on the various Argentinean cosmetic surgeons SoMe profiles. I will describe this as a new “genre” of marketing Cosmetic Surgery (Tourism) – one that facilitates a more masculine space, where traditional patient-doctor relationship can be redefined, and said to reconfigure. For making this point I will look at how the surgeons bring their own (Argentinean) masculinity into play through local and foreign objects and place (such as asado, craft beer, mate, día del padre, holidays in Brazil, football etc.).

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## **Web**

[www.aesthetictrip.com](http://www.aesthetictrip.com)

[www.infinitalbelleza.com](http://www.infinitalbelleza.com),

[www.rodriquezpalacios.com.ar](http://www.rodriquezpalacios.com.ar)

<http://www.gagliardicirugiaplastica.com>

<https://www.isaps.org/medical-professionals/isaps-global-statistics/>