Talley, H.L. Saving Face: Disfigurement and the Politics of Appearance. New York: New York University Press. 2014. 256pp.

Marie Le Clainche - Piel

► **To cite this version:**

Marie Le Clainche - Piel. Talley, H.L. Saving Face: Disfigurement and the Politics of Appearance. New York: New York University Press. 2014. 256pp.. Sociology of Health and Illness, 2015, 37 (4), 10.1111/1467-9566.12290 . hal-01361455

HAL Id: hal-01361455

<https://hal.science/hal-01361455>

Submitted on 7 Sep 2016

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

Journal: SOCIOLOGY OF HEALTH AND ILLNESS

Article type: Book Review

Reference : Le Clainche-Piel, M. (2015), Talley, H.L. Saving Face: Disfigurement and the Politics of Appearance. New York: New York University Press. 2014. 256pp. \$24.00 ISBN 978-0-81478411-2 (pbk) . Sociol Health Illn, 37: 647-649. doi:10.1111/1467-9566.12290

First published 29 april 2015 <http://onlinelibrary.wiley.com/doi/10.1111/1467-9566.12290/abstract>

Talley, H.L. Saving Face: Disfigurement and the Politics of Appearance. New York: New York University Press. 2014. 256pp. \$24.00 ISBN 978-0-81478411-2

In this book, Talley explores the cultural meaning and social significance of repairing faces and its relationship with the disfigurement imaginary in the contemporary USA (p. 31). The apparent paradox of facial surgery is that whereas it affects one's appearance, the term refers at the same time to repair, a normalisation technique, and a lifesaving procedure. Through four case studies, Talley argues that despite the diverse public targeted for surgery, facial work is presented as a necessary way to prevent people from social death. That is, modern aesthetic surgery is investigated as a space for reinforcing the stigmatisation of facial difference.

The first case study looks at the reality TV show Extreme Makeover and analyses the scenarios in which the candidates are staged as well as the show's reception between 2002 and 2005.

According to Talley, the show illustrates an erosion of borders between life-saving and lifeenhancing surgeries; facial transformations are justified not only by the unattractiveness of bodies but also, and above all, by the social life impasse that characterise these peoples' situations.

The second case study focuses on the marketing of facial feminisation surgery for transgender women – that is, those whose faces are considered too masculine to fulfil gender-based expectations (that is, changing features to bring them closer in shape and size to typical female features). This shows that unremarkability, rather than beauty, is the driving force for undertaking facial work. Interested in the question of inequality and gender relations, Talley's most compelling chapter is on a dual analysis of surgeons' justifications for facial surgery and various studies concerning transsexuality and bodily gendered expectations.

The third case study is dedicated to the aims and purposes of the non-governmental organisation (NGO) Operation Smile that supports surgery for children born with a cleft lip and palate. On

the basis of the NGO campaigns and interviews conducted with volunteers, children are framed as vulnerable to abandonment and death from maltreatment because they lack 'a universal feature of humanity' (p. 118). The relationship between social and biological forms of death is discussed in this chapter, which offers a wide detour through the sociology of philanthropic and religious tourisms.

The final case study is an analysis of the ethical debate on face transplantation that took place in the USA in 2004. On the basis of publications in the American Journal of Bioethics and observations of professional meetings in a hospital where face transplants are evaluated and debated, Talley aims to reveal the common ground from which advocates and opponents defend their point of view. She also highlights the relationship between the degree of adherence to the stigmatising disfigurement imaginary, on the one hand, and the assessment of the appropriateness of a transplant, on the other. This gives rise to an original formulation of the problem of the functions associated with the face: either the face is no more than the manifestation of an inessential appearance or, on the contrary, it is a manifestation of the person. Talley's position can be put into perspective with the work of advocacy groups such as Changing Faces in the UK. She suggests that if surgery can help to prevent some people from the risk of social death in the short term, it is preferable to fight against the negative framings of disfigurement in order to provide an inclusive social response to different aesthetic appearances. Discussing disfigurement and facial repair as social phenomena, *Saving Face* raises two key issues: (i) how do we describe and account for the materiality of bodies and appearances and (ii) how do we assess the representations of disfigurement and their impact on the persons so designated?

On the first point, describing the appearance of people referred to as disfigured is a constant difficulty in the book. Talley develops a slightly relativist approach of the materiality of the body. Disfigurement is seen as culturally fluctuating; it is a 'felt' reality without 'objective' content that lacks an institutional definition and statistical records. Talley claims that there is no 'shared collective understanding of what kinds of appearance might be deemed disfigured and what might simply be called unusual' (p. 14). Therefore, she does not consider that the team of surgeons involved in transplantation or the NGO Operation Smile, hold collective or institutionalised understandings. However, Talley does not take into account the materiality of the body, even when people point to tangible body marks that they consider to be important to their understanding of their self and their situation. She constantly reminds the reader of collectively shared standards of appearance using a variety of common-sense criteria such as 'facial characteristics conventionally defined as unattractive' (p. 72), 'based on Western notions

of what is attractive,’ and ‘according to dominant cultural ideals’ (p. 96). Thus, there is a paradox between the constant reference to a disfigurement imaginary and the concomitant assertion of a lack of shared and objectified apprehension of this phenomenon.

On the second point, Talley does not address the experiences of facially marked people through their life stories but through the meanings granted to facial repair by professionals. The concept of social death, drawn from Sudnow’s (1967) study on the dying process, is central in the book. Although the notion was forged to describe the situation before clinical death – when individuals are no longer considered admissible for life-saving measures – Talley argues that in terms of disfigurement, the opposite occurs: it is the allocation of a social death status which gives such individuals access to the award of life-saving measures. The definition of this status is referred to as the cessation of ‘the ability to fill given social roles’ (p. 39) and access to surgery is based on three vague criteria: (i) there is a substantial impact on crucial components of human life, (ii) access to essential social interactions is threatened, or (iii) universal human traits are significantly impaired. Moreover, it is difficult to follow Talley’s argument when she stresses the contradictions of the surgeons who defend life-saving face transplantation as legitimate, although not life-saving: ‘By describing the procedures as not life-saving in “the strict sense of the word,” the team implied that FT is life-saving in some sense of the word’ (p. 170). Surprisingly, the strong thesis of the book – that disfigurement is conceived as life-threatening – leads to a reductionism of both representations of facial differences and the spectrum of the possible lives for these individuals.

Finally, although the book offers a rich literature review and relies on original conceptual work, it would benefit from assessing, more precisely, the variety of framings of body diversity, notably by following people in their judgments in practice and by taking greater account of the materiality of the body. Nonetheless, *Saving Face* will likely interest social scientists and organisations questioning standards of appearance and disabilities, and the medicalisation of human conditions.

Marie Le Clainche-Piel

Maison Française d’Oxford, Ecole des Hautes Etudes en Sciences Sociales

leclainchepiel@gmail.com

Reference

Sudnow, D. (1967) *Passing On: The Social Organization of Dying*. Englewood Cliffs: Prentice-Hall.