

## ARTICLE Networked Scars

### Networked Scars: Tattooed Bodies and Breast Cancer

Reisa Klein

University of Alberta

reisa@ualberta.ca

#### Abstract

This paper investigates the growing trend of mastectomy tattoos as an alternative to reconstruction, and their implication for the (de)regulation of women's bodies in the digital context. I explore how tattoos are incorporated into a "breast cancer culture" (King, 2010) as a form of self-care in the recreation of areola pigmentation after breast reconstructive surgery and in cosmetic masking of post-operative mastectomy scars. I examine how online discourses of tattooing practices are drawing women's bodies into an emergent 'biopolitics' (Foucault, 1990; Rose, 2001; Clarke et al., 2010), a productive type of power concerned with the risk management of a "biomedicalized subject" where women are encouraged to care for their health through informed decisions via online media (Pitts, 2004) and through consumption and beautification techniques in line with normative femininity (King, 2006). Yet, online media can potentially operate as sites for the creation of new publics wherein women can retell the stories of their bodies through new practices of inscription that subvert medicalized and masculinist reconstruction narratives. I perform a discourse

Klein, M. (2018). Networked Scars: Tattooed Bodies after Breast Cancer. *Catalyst: Feminism, Theory, Technoscience*, 4(1), 1-46. <http://www.catalystjournal.org> | ISSN: 2380-3312 © Reisa Klein, 2018 | Licensed to the Catalyst Project under a Creative Commons Attribution Non-Commercial No Derivatives license

analysis of Canadian expert and popular discourses in health websites, plastic surgery and cosmetic service websites, tattoo-parlor websites, and in social media, including P.ink, (an organization that supports mastectomy tattoos). I argue that within digital media, competing medical, pop cultural and feminist narratives intersect in ways that can contribute to an "awkward feminist politics" (Smith-Prei & Stehle, 2016) where women's hybridized medical, digital, tattooed bodies can operate as material obstacles to normative correlations between health, femininity and sexuality.

Any amputation is a physical and psychic reality that must be integrated into a new sense of self. The absence of my breast is a recurrent sadness, but certainly not one that dominates my life. I miss it, sometimes piercingly. When other one-breasted women hide behind the mask of prosthesis or the dangerous fantasy of reconstruction, I find little support in the broader female environment for my rejection of what feels like a cosmetic sham. But I believe that socially sanctioned prosthesis is merely another way of keeping women with breast cancer silent and separate from each other. For instance, what would happen if an army of one-breasted women descended upon Congress and demanded that the use of carcinogenic, fat stored hormones in beef-feed be outlawed? (Lorde, 1980, 16.)

In Audre Lorde's ground-breaking scholarship, *The Cancer Journals*, she imagined the visibility and banding together of disfigured bodies as a site of collective feminist activism. This article explores, almost forty years later, the visible presence of disfigured bodies in a digital age through the growing trend of mastectomy tattoos: artistic chest tattoos done as an alternative to reconstruction and their impact on the (de)regulation of women's bodies. Specifically, I examine how tattoos, which have been traditionally stigmatized as disfiguring and hyper-masculinized (DeMello, 2000; Lodder, 2010; Steward, 1990) are being incorporated into a "breast cancer culture" (King, 2006; 2010; Lerner, 2001; Saywell et al., 2000) in the recreation of areola pigmentation after breast reconstructive surgery and in cosmetic masking of post-operative mastectomy scars. This trend

is part of a larger “tattoo Renaissance” (Rubin, 1988) wherein body modification practices are increasingly adopted by middle class culture (Atkinson, 2003; Hebdige, 1979; Kosut, 2006) as well as women (Davidson, 2016; Mifflin, 2013; Murray, 2012; Neville, 2005; Thompson, 2015.) Online media have been pivotal in sanitizing tattooing practices and distancing them from social deviance (DeMello, 1995b; DeMello, 2000; Neville, 2005) and they have provided resources for health and illness (Clarke et al., 2010). The latter is particularly true in relation to breast cancer, where women are encouraged to take responsibility for their health by making informed decisions (Bryson & Stacey, 2013; Cartwright, 1998; Orgad, 2005; Pitts, 2001, 2004; Sharf, 1997). This paper therefore concentrates on how practices of tattooing are situated into online biomedicalized discourses where they function as techniques of self-care (Foucault, 1986; Polzer, 2010) for breast cancer ‘survivors’ to return to a sense of wellbeing after various surgeries and medical interventions.

Online discourses about breast cancer are playing an increasingly important role in (de)regulating women's bodies by drawing them into an emergent “biopolitics” (Foucault, 1978/1990; 1997a; Rose, 2001), a productive type of power concerned with the regulation of the population through a focus on the health and wellbeing of bodies. In its contemporary incarnation, biopolitics involves the risk management of a “biomedicalized subject” (Rose, 2001) whose body is increasingly positioned through complex, multisited, multidirectional technoscientific biomedical discourses and practices (Clarke et al., 2010). These biomedicalized discourses extend beyond the regulation and control of bodies to focus also on assessing, shifting, reshaping, reconstituting and ultimately transforming bodies, albeit in stratified ways (Clarke, 2010). This study, therefore, focuses on the ways that tattooed bodies are positioned in relation to breast cancer within biomedicalized discourses and the types of relations and assemblages that emerge from those intersections (Clarke, 2010; Deleuze & Guattari, 1980; Puar, 2012). At the same time, online media can operate as sites for breast cancer activism

in the creation of new publics (Cartwright, 1998; Orgad, 2005) wherein women can retell the stories of their bodies through new practices of inscription in ways that disrupt medicalized and masculinist reconstruction narratives. This essay will therefore also examine online media's potential for challenging and resisting biomedicalized discourses and practices through the creation of these new bodily assemblages (Puar, 2012). By tracing and critically interrogating online Canadian<sup>1</sup> expert and popular websites in relation to breast cancer and tattooing, including Canadian expert health websites, plastic surgery and cosmetic service websites, tattoo parlor websites and social media sites, I argue that biomedical, popular cultural, neoliberal<sup>2</sup> and feminist narratives intersect in ways that can contribute to an "awkward feminist politics" (Smith-Prei & Stehle, 2016) where women's hybridized medical, digital, tattooed bodies can operate as awkwardly assembled, material obstacles to regulatory correlations between health, femininity and sexuality.

### **Online Media, Biomedicalization and Breast Cancer Activism**

A complex and multidimensional "breast cancer culture"<sup>3</sup> (Cartwright, 1998; King, 2006; Saywell et al, 2000) has materialized within a larger "biomedicalization healthscape"<sup>4</sup> (Clarke, 2010) where biomedicine has proliferated into all aspects of mass culture. Mass media in particular have played a central role in creating new visibilities for biomedicine in popular culture, and creating new subjectivities through discourses of health, illness and disease (Clarke, et al, 2010). News media outlets and breast cancer campaigns often frame breast cancer in attractive and sexy terms through an iconography of the breast (Potts, 2000; Saywell et al., 2000). Mediated representations are often structured by images of fetishized, idealized, youthful, healthy and symmetrically reconstructed breasts where the inclusion of post-surgical scarring is extremely rare (Saywell, et al., 2000). These representations subscribe to a rigid and limited definition of femininity, a femininity threatened by notions of mutilation, reinforced by maternal sacrifice and recovered heterosexual

attraction. Through these discourses, women are positioned as "survivors" (Lerner, 2001; King, 2006, 2010) who are expected to erase any signs of the illness itself through a focalization on a return to health through practices of self-care.<sup>5</sup> The metaphor of the survivor further assumes that women are responsible for their health and wellbeing and that they are ultimately to blame if they succumb to the disease. As such, women are expected to adopt an unbridled optimism (Ehrenreich, 2009), and what King (2006) calls a "tyranny of cheerfulness" through individual-based consumption of products and beautification practices (Bell, 2006; King, 2006; Pitts, 2001).<sup>6</sup> In this way, health is conflated with the adoption of beauty practices (Klein, 2015) that reproduce normative conceptions of femininity and sexuality.

This breast cancer "survivor" culture has been further characterized by a recent proliferation of breast cancer expert and popular health websites, forums, support groups, social media sites, blogs and newsletters in online spaces (Bell, 2006; Cartwright, 1998; Ehrenreich, 2001; Pitts, 2001, 2004) where women can research and become informed about diagnoses and treatments. Through gathering information and seeking advice online, women are increasingly delegated as responsible for the management of their illness and their survival (Clarke et al., 2010; King, 2006; Rose, 2001). Specifically, women's bodies are positioned through health-based websites in such a way that encourages individuals to act as "prudent subjects" (Rose 2001) through the implementation of technoscientific practices such as mammograms<sup>7</sup> as well as through self-regulating practices of surveillance, prevention, risk management and the consumption of appropriate self-help, beauty products and biomedical goods often in line with reconstruction (Clarke et al., 2010; Fosket, 2000).

Thus, in spite of this democratization of knowledge, the interests of corporate, patriarchal medicine still tends to predominate (Pitts, 2001, 2004; Saywell et al, 2000). Moreover, in this era of biomedicalization the focus is no longer on simply sustaining or repairing the body; it is also on customized and tailored enhancements and optimizations (Clarke, 2010),

including cosmetic procedures and cyborg prostheses. As such, it is important to consider the ways tattooing practices in relation to breast cancer are marketed toward a niche population in the pursuit of perfection (Hogle, 2006). Yet, online media not only produce biomedicalized subjects but also concurrently operate as crucial sites for breast cancer activism and advocacy (Cartwright, 1998; Orgad, 2005). In fact processes of biomedicalization are never completely uniform; they are simultaneously characterized by active negotiations, refusals of engagements and resistances (Clarke et al., 2010). Klawiter (2008) further makes these intersections visible by plotting connections between changes in the medical management of breast cancer, the de-stigmatization of the disease and the growth of activism. She demonstrates how a multiplication of treatment regimens, a proliferation of support groups and the expansion of screening into asymptomatic populations during the 1980s and 1990s helped produce new social spaces, solidarities and sensibilities among breast cancer survivors by opening up numerous spaces in which women could openly share their experiences of the disease and thus enable a multifaceted breast cancer movement.

Cartwright (1998) further highlights the crucial role that media played in the formation of breast cancer activism where some of the most significant influence over health culture is taking place through advocacy, activists and community health groups using visual media as a space for public intervention. In this sense, circulating mediated images of breast cancer have been instrumental in shifting the disease (and women's bodies) from the realm of privacy into the public domain (King, 2006; Saywell et al., 2000). For example, in the US context, (with its cultural and geographical proximity to and influence in Canada), Matuschka's<sup>8</sup> highly stylized self-photograph of her one-breasted, post-mastectomy chest on the cover of the *New York Times Magazine* in 1993 was one of the first media images to make visible the "uglier" sides of breast cancer and the impact of lasting scars on women's bodies, in complex ways that both adhered to and thwarted normative expectations of beauty and femininity

(Cartwright, 1998; King, 2006; Saywell et al. 2000).

Within a more contemporary context, online media sites have been central to this process of making women's health matters, and breast cancer more specifically, visible (Bryson & Stacey, 2013; Cartwright, 1998; Orgad, 2005; Pitts, 2001, 2004; Sharf, 1997). Although cyber feminist scholars have argued that online media's transgressive potential is based on an increased capability of disembodiment and anonymity (e.g., Turkle, 1995; Waskul et al., 2000), in the case of breast cancer, identities and bodies are not entirely abandoned (Pitts, 2004). Rather women often engage with bodily representations and display through digital media's multi-modal capacities to make breast cancer bodies more visible as well as create networks of support. Through text, images and videos, women with breast cancer can not only learn about the illness, but can also "rewrite" and represent biomedical narratives in ways that subvert hegemonic medical authority and biomedical surveillance (Scharf, 1997). In a digital context, women can create their own spaces of resistance by drawing attention to what used to be highly privatized and individualized experiences, detailing some of the more unpleasant aspects of sickness and treatment and showcasing bodies that do not conform to a normative biomedicalized subject (i.e. wealthy white, heterosexual, feminine able-bodied), offering alternative representations to customizations in line with reconstruction. Thus, online media can promote women's voices, which have historically been silenced and make visible bodies that have been stigmatized, offering a place for marginalized perspectives to reach wider audiences. In this way, online media can operate as sites for the formation of new (counter)publics: collective networks of women that subvert personal and individually-based responsibility narratives and promote breast cancer activism.

Yet, just as processes of biomedicalization are not inherently divorced from processes of resistance, breast cancer activist media are not entirely situated outside of, and in opposition to, institutional medicine or mass public culture. Cartwright (1998) argues that although activist

media often rely on a binary model that sets off local, oppositional community-based groups against the globalizing forces of mainstream medicine and media institutions, much health care activism crosses the boundaries of the two spheres, especially in online contexts. Similarly, other scholars have foregrounded that the Internet is not an inherently empowering technology, but rather, online feminist discourses are often subsumed within neoliberal, popular cultural and corporate-based logics (Pitts, 2001, 2004; Smith-Prei & Stehle, 2016). Through this lens, breast cancer websites can circulate a hybrid of feminist, biomedical and popular cultural discourses concerned with gendered consumption, which intersect and compete in complex ways. For instance, Pitts's (2001) study of women.com's Breast Fest, a website dedicated to breast cancer awareness, found that the website not only circulated information about breast cancer resources, but also directed readers to a broad range of women's self-care and self-improvement practices reflecting a mix of feminist, biomedical and consumerist beauty aims, including the promotion of Victoria's Secret lingerie and breast augmentation surgery. In another study on women's personal web pages, which would seemingly be more independent from corporate and advertising interests, Pitts (2004) found that these sites were still saturated in beautification and consumerist discourses in line with normative femininity. Thus, even in instances in which women were writing their own narratives, she found they still tended to frame breast cancer in ways that reproduced dominant norms of femininity, (hetero)sexuality and individual responsibility.

Smith-Prei and Stehle (2016) take these tenuous relationships further by underscoring that within digital contexts, feminist body politics are necessarily positioned within and intersect with neoliberal and popular cultural logics of capitalism, consumerism and individualism in ways that can contribute to an "awkward feminist politics," through which feminists "stay with the trouble" (Haraway, 2016) in order to destabilize these processes. For them, the body can be deployed as a form of "popfeminist activism" where the corporeal and digital come together in

visibly troubling ways that can create awkward moments of disruption. In other words, within online media, feminist bodily representations are necessarily circulated across and within neoliberal and capitalist platforms that create frictions in such a way that calls these practices into question. Rather than being goal-oriented, awkward feminist politics is therefore a process-based practice that acknowledges messiness and contradictions as forms of feminist intervention.

Baer (2016) further highlights the ways digital media foster a capacity for "doing feminist politics" in a neoliberal age. She argues that within contemporary global capitalism, feminism can no longer be separate from neoliberal forces. Due to the precarity of both neoliberalism and feminism, digital media provide important sites for the circulation of individual bodies in ways that can foster transnational and intersectional feminist dialogues. Baer revises Angela McRobbie's (2007) assertion that individual-based self-representational online body displays are part of a post-feminist sensibility<sup>9</sup> that arrests a capacity for feminist politics. Specifically, McRobbie (2007, 2009) argues that online bodily representations masquerade under the guise of women's rights to freedom and liberation and has been rebranded as a form of empowerment, while re-establishing normative patriarchal and capitalist standards of femininity and gender inequality where projects of individual representations and self-improvement are intimately linked with consumption practices. Instead Baer proposes that digital media are inherently positioned within neoliberal frameworks where feminist body politics can be brought to the fore, offering new subjectivities and collaborations.

The online representations and circulations of mastectomy tattoos examined in the current study straddle competing feminist, neoliberal, biomedical and popular cultural logics, which can enable an awkward feminist politics. Specifically, online media representations of mastectomy tattoos can refigure and re-inscribe the body in awkward ways that can in turn make patriarchal and biomedicalized discourses and practices awkward. In this sense, breast cancer survivors use digital

media and practices of tattooing to create new "cyborgian assemblages" (Puar, 2012) through the hybrid intermeshing of digital, corporeal, medical and mechanical technologies and bodies. Puar (2012) particularly revises Haraway's figure of 'the cyborg' by problematizing its unintended reinforcement of an *a priori*, essentialized pre-existing body and subject position, proposing instead a focalization on how the biological-discursive-social-technological-cultural merge in ways that create new assemblages: new processes and patterns of arrangements and subjectivities. These digital biomedical tattooed bodies can create new cyborgian assemblages that disrupt biomedicalized and normative conceptions of health, femininity, sexuality, race, class, beauty and survivorship. These bodies can therefore operate as what Ahmed (2014) calls "willful subjects" by "getting in the way" via the digital sphere. According to Ahmed, bodies can "become monstrous" (p.162) when they are allied or banded together, "becoming an obstacle, a physical fleshy thing" (p.163). Online circulations of these cyborgian assembled monster bodies can forge alliances in ways that generate a new-networked public, which poses a threat to biomedicalized and neoliberal logics. I therefore argue that within digital media, these bodies can contribute to an awkward feminist politics where hybridized, medical, digital, tattooed bodies can be banded together in ways that destabilize expert medical, patriarchal and neoliberal discourses and practices.

Before I turn to the analysis of these contemporary online Canadian discourses of tattooing and breast cancer, it is worth noting briefly the historical significance of tattooed women's bodies as monstrous. Medical practices such as mastectomies and lumpectomies, and tattooing practices are often conceptualized as forms of mutilation, damage and disfigurement, and as such have also been associated with female monster bodies (Saywell et al., 2000; Slatman, 2012; Steward, 1990). Breast cancer and tattooing have historically been conceived as a violation of femininity, the former as an assault on beauty, sexuality and motherhood (Hallowell, 2000), and the latter as a construction of a "monster beauty" (Braunberger, 2000; Frueh, 2001) that counters

normative beauty standards and docile femininity (DeMello, 1995b, Harlow, 2008; Mifflin, 2013; Pitts, 2003; Thompson, 2015). In the late nineteenth century, tattoos were seen as markers of deviancy (Steward, 1990), especially for women (Braunberger, 2000) where heavily tattooed bodies were turned into sexualized and fetishized objects displayed in circuses, carnivals and freak shows (DeMello, 1995a; DeMello; 2000; Mifflin, 2013), environments that tended to showcase bodily excess and transgressions in order to re-inscribe social boundaries of acceptability (Bakhtin, 1984). The public display of these bodies further re-inscribed tropes of victimization through the invocation of Orientalist stories of tattoo rape and their salvation from foreign lands (Braunberger, 2000; Mifflin, 2013). However, these tattooed women's bodies also included an element of transgressive agency, where women in fact chose these bodily practices (as opposed to other circus acts) as a way of gaining more social mobility and more opportunities for travel than were otherwise available to women (Braunberger, 2000; Mifflin, 2013). By engaging in practices of monstification, including hypersexualization, excess and freakiness, tattooed women transformed their bodies to play with the limits of social respectability, being both sexual subjects who welcomed certain gazes as well as challenged the limits of normative beauty, femininity and appropriate sexuality through a revolutionary feminist aesthetic. In this sense, the body is a site of cultural inscription, where tattoos are a chosen form of writing on the body itself, outside scripts of normative femininity (Martel, 2016).

A second category of tattooed women also emerged in Western contexts in the late nineteenth century referred to as "complexion treatments" (Burchett, 1958). In contrast to the aforementioned practices of monstification, beauty salons started "to discretely offer tattooing to add a glow to one's cheek, an arch to one's brow, a pout to one's lips, and for the very brave, the illusion, of a few more eyelashes" (Braunberger, 2000, p.5) often without the knowledge or consent of the women themselves, suggesting that they were objects to be painted on with no subjectivity or agency of their own. These complexion treatments,

which used a mechanical process that was medically supervised, have left traces in some of today's practices such as cosmetic tattooing, which I will discuss in more detail below.

As practices of self-care (Foucault, 1986, 1997b, 1997c) in the context of breast cancer, tattoos straddle both "monster beauty" and "complexion treatment," potentially creating new bodily transformations that generate awkward tensions regarding the appropriate limits of femininity, beauty and sexuality. On the one hand, these practices of self-care can be used as part of processes of biomedicalization to transform women's bodies to create a sense of "perfection" in line with normative standards of health, beauty, gender, sexuality, race and class. On the other hand, practices of self-care can include an element of resistance in that individuals can fashion themselves in unexpected and surprising ways that do not meet conventional norms and practices such as reconstruction. To explore these complex relations, I examine how online discourses across various Canadian expert health websites, plastic surgery and cosmetic service websites, tattoo parlor websites and social media sites reproduce and disrupt normative correlations between health, beauty, femininity and (hetero)sexuality in awkward ways through these practices of self-care.

## Method

This research takes as its starting point that the body is a physical fleshy thing that has a materiality, but is also socio-culturally constructed and given meaning through mediated discourses (Crossley, 2006; Davidson, 2017; Marvin, 2006). Media discourses, in this sense, make the body more porous, malleable and capable of transnational flows across national boundaries where they are influenced by socio-cultural and national proximities. For example, in the context of online medical information, networking and support groups, Canadians often look to American websites (Kimber, 2009). Such images of breast cancer tattooed bodies can circulate across national borders in ways that create

visibilities, connections and alliances. Still, bodies remain grounded within nationally coded politico-economic contexts, particularly in relation to biomedical practices, surgeries and health insurance coverage. As such, my research concentrates on Canadian websites that deal with tattooing in relation to breast cancer, while examining the ways these discourses and practices can crisscross with other North American sites that influence these practices. I particularly focus on Canada-based websites as an anchor to best illustrate how digital representations of the body and text are situated within specific socio-cultural and politico-economic contexts that ground and set limits on these discourses and practices. At the same time, I am interested in tracing how digitized bodies in nationally coded spaces become slippery, ungrounded and regrounded in transnational circulations of bodies toward a feminist body politics.

To examine the role of online communication of tattooing practices in the (de)regulation of women's bodies, I conduct a discourse analysis (Foucault, 1966/2008; Wodak & Meyer, 2009) of expert and popular health websites discussing tattooing in relation to breast cancer. My research adopts a multimodal analysis of texts, images and videos (Bezemer & Jewitt, 2010; Jewitt 2009; Kress & van Leeuwen, 2006), paying attention to their complex and sometimes contradictory discourses through these relationships (Martin, 2003) to trace systematically how they can contribute to an awkward feminist politics. My corpus includes 1) two Canada-based expert health websites: the Canadian Cancer Society (Canada's largest researcher and leading public information provider on cancer) and the Canadian Breast Cancer Foundation (the leading national research center and community support for breast cancer) to document how tattoos are treated in biomedicalized discourses and practices; 2) Health Canada's website, in order to analyze how state discourses are implicated in processes of biopolitics in terms of the regulation and transformation of women's bodies; 3) a representative sample of Canadian plastic surgery and cosmetic websites from Canada's large cities, that discuss tattoos in relation to breast cancer to trace how these practices are further appropriated into

medicalized and cosmetic frameworks;<sup>10</sup> 4) a representative sample of Canadian tattoo parlor websites that include representations of areola and mastectomy tattoos to demonstrate how their appropriation into artistic discourses can impact the (de)regulation of women's bodies;<sup>11</sup> 5) online news media articles which provide a supplementary framing mechanism for these tattooing practices; and 6) social media platforms including Facebook, Instagram and Pinterest affiliated with Personal Ink (P.ink), a United States-based Not-for-Profit organization with Canadian chapters in Montreal, Vancouver and Calgary that brings breast cancer survivors together with tattoo artists for mastectomy tattoos. P.ink's social media presence particularly operates as a potential site for the formation of a new-networked public that can resist biomedical and cosmetic discourses. My corpus includes posts and articles gathered from the aforementioned sources between September 2016 and March 2017 inclusively; instances where website content has shifted are recorded. In the following sections, I draw on examples most exemplary of the significant trends which I will discuss through the following sections: 1) reconstruction or bust: biomedicalized discourses of breast cancer and tattooing; 2) the art of the areola: cosmetic tattoos and artistic tattoos as biopolitics; and 3) "going flat": social media, mastectomy tattoos, and monster bodies. The first two sections will frame the way in which the biomedicalized discourses position women's bodies within expert health websites and then within cosmetic- and tattoo-based websites, respectively, while the final section will look at the ways in which social media can offer a site for the transformation of women's bodies in ways that render biomedicalized discourses and practices awkward.

### **Reconstruction or Bust: Biomedicalized Discourses of Breast Cancer and Tattooing**

A central concern for Canadian health experts in post-surgery breast reconstruction is the tattooing of areola pigmentation. For instance, the

Canadian Breast Cancer Foundation website explains:

Once your breasts have been reconstructed, it is possible to undergo a procedure to reconstruct a nipple. A new nipple can be formed from a bit of skin from the breast or another part of the body. A tattoo procedure can be used to darken the reconstructed nipple and areola. The new nipple(s) will not have the sensation of a natural nipple (Canadian Breast Cancer Foundation, 2016).

Notice the assumption of reconstruction as the only expected option after mastectomy or lumpectomy. In fact, in October 2016, during Breast Cancer Awareness month, the Canadian Breast Cancer Foundation<sup>12</sup> went so far as to include this discussion of tattooing in their Breast Reconstruction Awareness Campaign. The campaign purports that "most women don't know about their post-mastectomy options. That's why we created [Breast Reconstruction Awareness Day<sup>13</sup>] information events and website" (Canadian Breast Cancer Foundation, 2016). In addition, the campaign features images of breast cancer "survivors" with accompanying texts stating that "every woman deserves to have access to accurate unbiased information" and that "wanting to feel good in my body is not vain," as seen in the figure below.

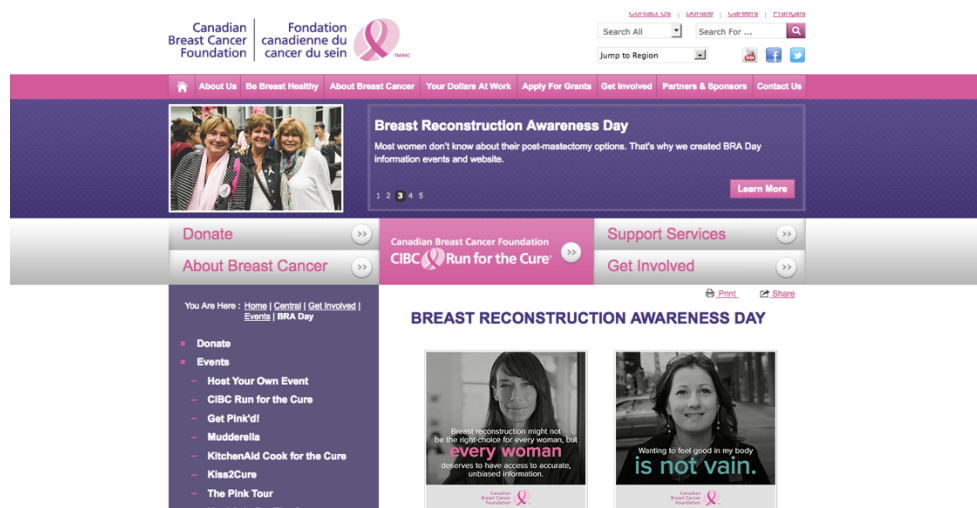


Figure 1. Canadian Breast Cancer Foundation, Homepage

This campaign discourse therefore conflates increased visibility of breast

cancer, breast cancer awareness and activism with reconstruction alone. Breast reconstructive surgery is presented as the only viable option after mastectomy or lumpectomy; an option, it is suggested, that is under-appreciated and about which women need to become more informed<sup>14</sup>. These online representations fit into larger discourses produced by medical industries which tend to frame breast cancer in patriarchal, sexualized and heteronormative terms through emphasis on women's appearance, pressure for women to look "normal," the erasure of signs of illness, and re-beautification often in line with practices of reconstruction (Lorde, 1980; Fosket, 2000; Saywell et al., 2000; Wilkinson, 2001). Therefore, women are often positioned in these discourses as needing to be as worried about their sexual attractiveness, beauty and maternity as the disease itself.

These biomedicalized discourses incorporate tattoos into a transformative recovery process where breast reconstruction acts as a synecdoche for health of the whole of the body, and where areola tattoos act as the proverbial icing on the cake. Expert discourses on areola tattoos therefore tend to operate as techniques of biopolitics where women's self-led research works to conflate women's return to health with a return to norms and standards of femininity, beauty and sexuality. What is astounding is that these expert health websites are wholly uncritical of the ways breast cancer—and tattooing practices—are reconfigured through an elective cosmetic surgery framework where reconstruction inevitability means increased invasive surgeries that may pose additional health risks for women.

Through a focus on reconstruction, tattoos are integrated into the breast cancer "survivor" culture discussed above, where women are encouraged to return to a state of health (underscored by representations of young, healthy, white women) through individual-based beautification practices. As forms of self-care, tattoos are conceptualized as necessary gendered body projects that women must engage in to take care of their health and wellbeing. The focus on survivors taking responsibility for their health and wellbeing through these "lifestyle choices" (Simpson, 2000)

works to shift the onus of responsibility for women's health onto individual-based normative body projects rather than focusing on finding systemic causes and cure (Orgad, 2005).

The Health Canada (Canada's federal ministry of health) website further frames practices of tattooing within a framework of survivorship. In relation to breast cancer, tattoos are only ever discussed in terms of areolas and as part of discourses on the safety and risks of breast implants. For example, Health Canada's website provided studies on the Mentor MemoryGel™ Silicone Gel-Filled Breast Implants, where breast reconstruction is discussed along the same lines as augmentation and revision surgery, further regulating women's bodies in sexualized and feminized terms ("Summary Basis of Decision", 2011). As Foucault conceived it, biopolitics is an instrument of the state (and deployed through various institutional practices) that regulates the population through a focus on the health of individual bodies. By conceptualizing practices of tattooing through this biomedical risk lens, Health Canada secures tattoos through the framework of reconstruction, exclusively. In fact, Health Canada's website does not even mention mastectomy tattoos but rather positions tattooing more broadly through a focus on infection control, hygiene and safety practice for tattoo parlors ("Infection Prevention," 1999). Indeed, state health care insurance (which is administered at the provincial level) only covers areola tattoos in instances where physicians or nurses perform them in hospitals and other medically sanctioned environments and never when performed in tattoo parlors (Griwkowsky, 2016). Perhaps one of the reasons for this is that tattoo parlors are seen as unregulated, illegitimate and risky sites, especially for women who have undergone radiation and/or chemotherapy who may be more susceptible to infections such as lymphedema (Aragon, 2013; Topic: mastectomy tattoo, n.d.). At the same time, Health Canada does not discuss these risks in the context of areola tattoos in biomedicalized settings or the practice of tattooing a blue or black ink dot on women's breasts during radiation therapy (Clow & Allen, 2010). Thus, the state acts as the ultimate economic regulator of

women's bodies by transforming them in line with biomedicalized and patriarchal discourses and practices. In rare cases, tattooing practices are insured when performed in other clinical settings by cosmetic technicians, but only areola tattoos (i.e. not mastectomy tattoos), further underscoring the management and transformation of women's bodies in line with normative codes of beauty, gender and sexuality. As will be discussed in more detail in the following sections, these kinds of economic regulators ensure that areola and mastectomy tattoos performed outside of clinical settings — in tattoo parlors — are less accessible and more generally available to elite groups, thereby regulating women's bodies in complex, contradictory and awkward ways. The following section examines the online discourses of areola tattooing performed in cosmetic settings and tattoo parlors.

### **The Art of the Areola: Cosmetic Tattoo and Artistic Tattoos As Biopolitics**

When areola tattoos are represented outside expert health websites, two types of classification emerge: cosmetic tattoos and artistic tattoos. These categories are not distinct but overlap in a multiplicity of ways particularly in relation to beautification and consumerist practices that are tied to biopolitics. In the former, areola tattoos are appropriated into biomedicalized discourses and performed in quasi-medicalized settings through their assimilation into plastic surgery and cosmetic services practices. In the latter, areola tattoos are integrated into more artistic discourses and practices performed by tattoo "artists" in tattoo parlors. For example, Dr. Sheina Macadam is a leading plastic and reconstructive surgeon in the Vancouver area who further specializes in "cosmetic and medical tattooing" (Dr. Sheina Macadam Inc., n.d.). Her website, incorporates practices of areola tattooing into more general practices of plastic and reconstructive surgery, where breast cancer treatment options are discussed in the same terms as breast reduction and augmentation.

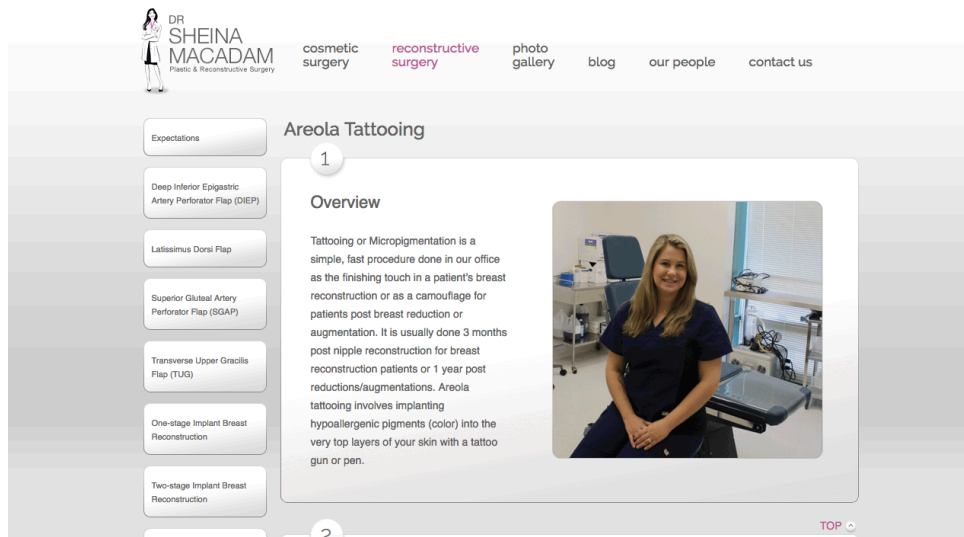


Figure 2. Dr. Sheina Macadam's Website

From this perspective, tattoos are appropriated into elective cosmetic surgery and beautification discourses, which further transforms women's bodies by shifting the focus away from a disease and into objectified and sexualized terms (Saywell et al., 2000). As seen in the photograph above, the website adopts technical and medical imagery through the representation of a technician in medical "scrubs" and medical instrumentation in the background, as well as makes use of medical language. The utilization of medical discourses works to filter practices of tattooing through a seemingly expert, clinical and objective lens, but which in effect regulates and transforms women's bodies through a biomedicalized male gaze.

Areola tattoos are also appropriated into cosmetic service practices, which most closely resemble the "complexion treatments" discussed above. For example on the website for the Clinique de la Belle Peau ("Clinic of Beautiful Skin"), a Montreal-based registered nurse who specializes in "micro-pigmentation,"<sup>15</sup> areola tattoos are discussed in the context of other forms of "permanent makeup" such as for scar removal, camouflage, paramedical stretch marks, thinning hair and vitiligo (a skin condition characterized by loss of pigment). These cosmetic tattoos are

still suffused within biomedicalized language while simultaneously invoking logics of beautification, sexualization and consumption. The homepage particularly depicts a young white women's nude body in ways that reinforce the construction of breast cancer in sexualized terms (Saywell et al, 2000).

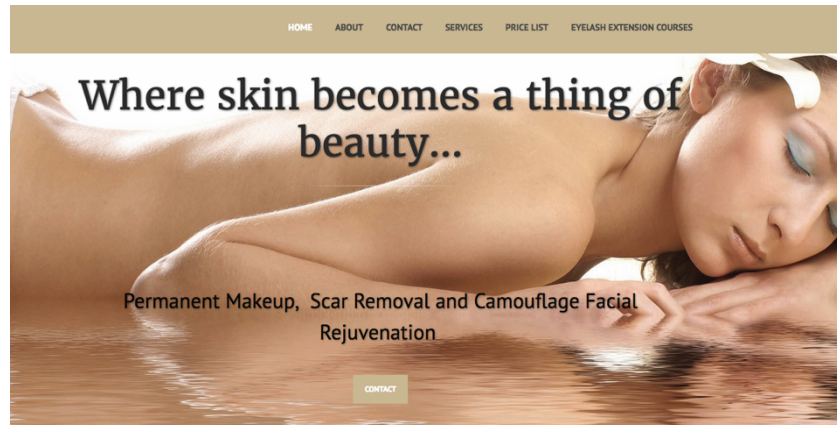


Figure 3. Clinique de la Belle Peau Homepage

Subsuming areola tattoos under these logics of beautification, sexualization and consumption more firmly positions breast cancer into survivorship discourses where women are encouraged to take responsibility for their health and wellbeing through the application of these "complexion treatments" that reproduce normative codes of femininity. Moreover, the performance of these tattoos in clinical settings regulates women's bodies insofar as cosmetic-grade ink tends to fade and need "touch-ups" ("Questions" Cosmetic Transformations, n.d.; Rae, 2015b), further subjecting women to constant practices of surveillance to keep their bodies in line with conventions of femininity.

The production of survivorship subjectivities in areola tattooing discourses is further evinced through the representation of white bodies. As documented in Figure 4, cosmetic websites, like Cosmetic Transformations in Peterborough Ontario, tend to include images of areola tattoos as pink/peach, further reinforcing that a return to femininity is coded as white.<sup>16</sup>

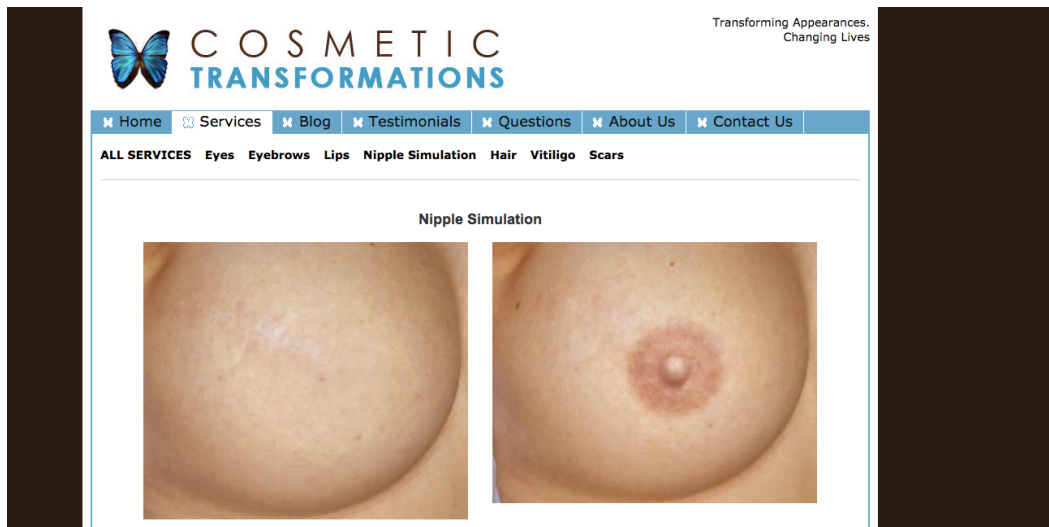


Figure 4. Cosmetic Transformations Website

The showcasing of these areola tattoos suggests that not only are white bodies worthy of being beautified and healed, but also of public display and visibility. Through a lack of representation, women of color are almost entirely occluded from breast cancer discourses, as though their bodies cannot be reshaped into normative codes of femininity and sexuality. The exclusion of these bodies from survivor discourses works to regulate breast cancer in predominantly “white” social terms, which can have lasting material impacts on diagnoses and treatments for different communities of women.

Also undergirding these biomedicalized cosmetic discourses is the assumption that the adoption of normative beauty standards will not only make a woman feel whole again, but — through the adoption of normative femininity — she will also make her (heteronormative) relationships whole again. Her areola tattoos therefore return a sense of health and wellbeing to the larger community through her return to a “natural” body. For instance, in an online news article for Global News on medicalized tattoos, Edmonton's Dermallusion's cosmetic technician stated in relation to areola tattoos for breast cancer survivors, “I'm trying to recreate things that should be there naturally...Now they can look in the mirror, feel good about themselves, feel feminine again. I have some

tell me that their husbands are more comfortable as well (Ramsay, 2015). These cosmetic, medical and patriarchal reconstruction narratives and practices therefore transform women's bodies through the (re)production of essentialist and heteronormative assumptions about the body and gender defined through the male gaze.

Whereas the first category positioned areola tattoos in biomedicalized and cosmetic terms, in the second category, these tattoos are appropriated into the tattoo parlor, performed by tattoo artists and discussed in more artistic language. On these websites, areola tattoos are performed by tattoo artists and tend to be interspersed with more traditional tattoos, as seen in the image below.

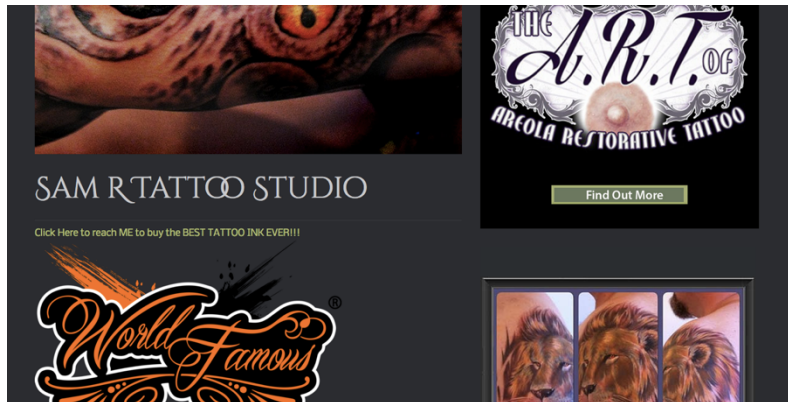


Figure 5. Sam R Tattoo Studio Homepage

These tattoo websites invoke artistic techniques in their treatment of areola tattoos, shifting the discourse from a biomedicalized to an artistic lens. For instance, Stacie Rae's Areola Restorative Tattoo business (aptly abbreviated as A.R.T.) discusses the pioneering of a whole new system of areola tattoos through the use of traditional art techniques such as “pointillism, micro-pigmentation, colour mixing and three-dimensional shading to create depth and texture” (Rae, 2015a). Still, in some instances, tattoo artists continue to blur artistic and biomedical discourses. For example, in a news video by Shaw Media Nanaimo included on Sam R's Tattoos website, the Vancouver-based artist incorporates biomedical discourses in her treatment of tattoos over mastectomy scar tissue:

There are actually a lot of technical things that we look at with scar tissue. So regular cellular tissue — healthy skin tissue — has a certain engineering to it — as a surface of the skin, whereas when you come into contact with a scar, it can be striated, it can be thin, it can be thick, it can have blood flow, it can have less blood flow. You really have to also read the damage from the surface of the skin through the depths of layers (Lucas, N.D.).

These artistic and sometimes biomedicalized discourses are invoked to further establish tattoo artists with the required expertise to perform areola tattoos in contrast to plastic surgeons, nurses or cosmetic technicians who, according to Stacie Rae, simply fill a two-dimensional circle in with color (Rae, 2015a).

While these artistic discourses can potentially shift the focus away from the biomedicalized surveillance of women's bodies, they are not necessarily forms of deregulation, especially insofar as artistic techniques are used to create even more realistic areolas that transform the body in ways that conform to dominant beauty standards. Moreover, considering areola tattoos in artistic terms firmly grounds them in beautification and consumption practices, and as practices of self-care through modifying the body to attain a state of happiness and/or "perfection." Yet, these more "beautiful" areolas are not covered by public health insurance in any province and therefore women are required to pay between \$200 and \$500 per nipple, making areola tattoos available primarily to elite classes. Just as other beauty standards and practices tend to reproduce class distinction, differentiation, and hierarchization (Bourdieu, 1984), areola tattoos are no exception. In this context, only those who can afford these quasi-artistic, quasi-medicalized services can fashion their bodies in this way. In addition, as with cosmetic tattooing websites, images of areola tattoos on these tattoo parlor websites are primarily of white women, thereby reproducing whiteness as the normative yardstick of healthy bodies.<sup>17</sup> In this instance, beauty and consumption practices are conflated with health and wellbeing to regulate women's bodies along classed and racial lines.

Some tattoo artists in Canada (e.g., Funhouse Tattoo in Vancouver, Newcomber Ink in Halifax) are providing areola tattoos to breast cancer survivors free of charge or by sliding scale to bypass the economic barriers and classed-based state regulation of women's bodies (through the distinction between insurable cosmetic tattooing and uninsured artistic tattooing). These tattoo artists are therefore attempting to position areola tattoos away from capitalist- and consumer-oriented logics into discourses and practices of charity and a gift economy, as a form of resistance, which can make tattoos more accessible to various groups. However, the increased accessibility of nipple tattoos through charity masquerades under the guise of helping breast cancer survivors' wellbeing while reinforcing normative femininity. In this sense, even artistic areola tattoos, which seem to offer an alternative to regulating biomedicalized discourses, reproduce "survivor" narratives, where women are encouraged to restore their health and wellbeing through beautifully crafted normative two-inch circles. The following section shifts to online representations of mastectomy tattoos as a potential site for the transformation of bodies in ways that resist biomedicalized and patriarchal definitions of normative femininity and sexuality.

### **“Going Flat”: Social Media, Mastectomy Tattoos and Monster Bodies**

Social media can provide more in-depth and complex representation of practices of tattooing and breast cancer and potentially act as sites for the formation of new publics that can collectively deregulate normative correlations between health, beauty, gender, sexuality and race. In addition to reconstruction narratives, they can offer spaces for the transformation, circulation and visibility of new types of bodies, including what survivors are calling "going flat" (Rabin, 2016), (i.e., opting for no reconstructive surgery or "getting inked" with mastectomy tattoos: full or partial chest tattoos on reconstructed or non-reconstructed breasts). Through online representations of mastectomy-tattooed bodies, women can retell their own stories on and about their bodies. For example in

social media, mastectomy tattoos can make visible bodies that are usually rendered invisible through the reproduction of the figure of the white, young, healthy, elite and vibrant breast cancer survivor. Images of mastectomy tattoos can bring to the fore "an army of one-breasted women" to use Audre Lorde's terms (1980, p.16), who do not try to erase breast cancer treatment scars but rather use chosen scars to reconstruct their bodies as a "monster beauty" in ways that subvert expert correlations between health, wellbeing and normative femininity. However, as previously discussed, even within the context of social media, feminist discourses are not necessarily divorced from popular cultural, medical and neoliberal logics. Rather, these hybridized "monster bodies" are circulated and deployed in troubling and awkward ways that can contribute to a collective feminist body politics.

The (re)production of online mastectomy images in social media is often linked to the organization, P.ink, a Colorado-based not-for-profit launched in 2013 that brings together breast cancer survivors and tattoo artists from across North America in order to provide survivors with free mastectomy tattoos. Although the NGO is located in the US, P.ink has chapters in various North American cities including Montreal, Vancouver, and Calgary. Through flow (Williams, 1974) and intertextuality (Hall, 1997), Canadian and US content in social media overlap and intersect in ways that can create transnational and intersectional feminist interventions. In this way, online representations of the body can be harnessed to mobilize a network of alliances across various digital sites in order to create awkward moments of disruption to national and localized bodies (Baer, 2016; Smith-Prei & Stehle, 2016), as will be demonstrated in more detail below.

P.ink, as its name suggests, is part of a larger breast cancer "survivor" culture linked with breast cancer campaigns, and a "tyranny of cheerfulness" and pinkwashing practices, through a focus on individual-based beautification products. Yet, P.ink purports to transform bodies outside conventional biomedicalized reconstruction narratives, pointing to some of these awkward relations. As P.ink's homepage communicates:

"most breast cancer survivors face two choices: reconstruction or not. But most don't realize there's a third option: ink." (Breast Cancer, n.d.) P.ink frames mastectomy tattoos as a new form of healing, including a tweet on its homepage claiming that "there is a difference between being cured and being healed. Mastectomy tattoos help women heal." P.ink therefore uncouples correlations between a return to health and normative femininity, while still being subsumed under neoliberal individual-based forms of beautification and bodywork. The website includes various images, videos and examples of mastectomy tattoos which are then circulated through social media sites, including Twitter, Facebook, Instagram and Pinterest as well as onto online news sites and breast cancer support groups such as BRCA Sisterhood of Canada.



Figure 6. P.ink Day New York

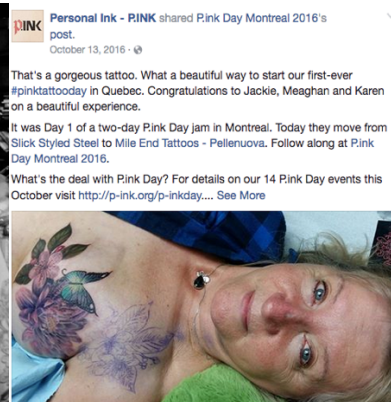


Figure 7. P.ink Day Montreal

These bodies do not just circulate through digital contexts but are also corporeal and grounded in local environments through participatory events held in different locations, which can produce awkward tensions and relationships. Since P.ink's inception, the organization has hosted "P.ink Days" annually in October, in different cities across North America, including Vancouver, Montreal and Calgary, where breast cancer survivors get together with tattoo artists. To date, over 100 women have received tattoos through the organization. It is no coincidence that these P.ink days are part of a larger breast cancer awareness month and are squarely situated within survivorship discourses and practices of

individual responsibility. And yet, P.ink Days also create supportive communities for breast cancer survivors, whose stories are then digitized through videos uploaded and shared through social media, which in turn helps to build increased networks of support through the visibility of these tattooed bodies. In the Canadian context, these images challenge the conventional figure of the breast cancer survivor through the inclusion of older bodies, queer bodies, flat-chested and one-breasted bodies, although they still remain predominantly (exclusively) white bodies. In this way, representations of mastectomy-tattooed bodies reproduce discourses similar to those reconstructive narratives that reproduce whiteness as the normative yardstick.

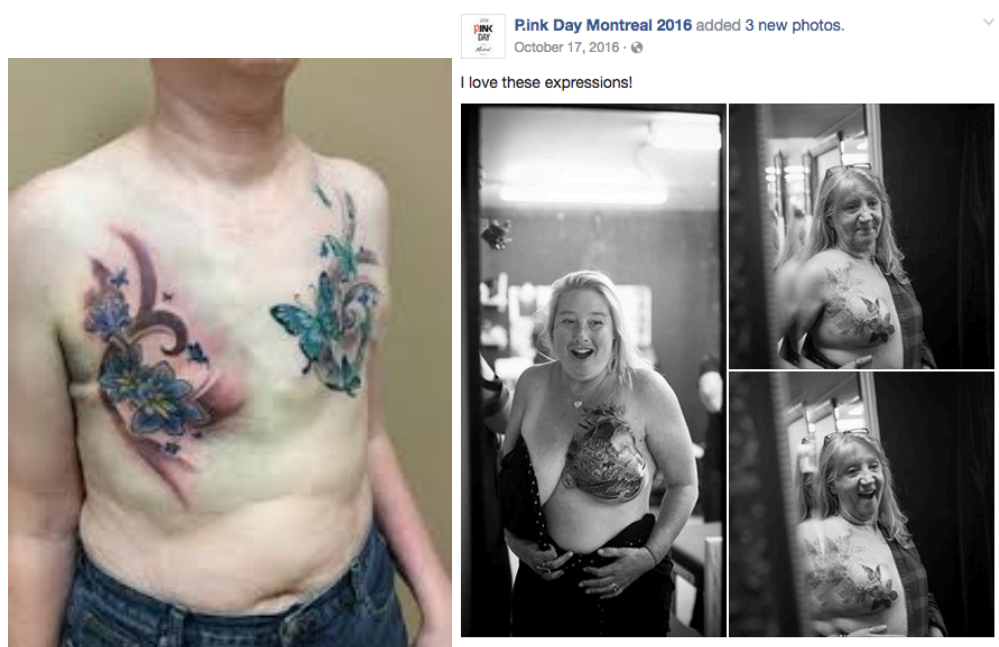


Figure 8. P.ink Day Calgary 2015 (Facebook)

Figure 9. P.ink Day Montreal 2016 (Facebook)

It is only when these bodies link up with US-based social networking sites that women of color are represented. In other words, through the circulation of these bodies within digital media, these white mastectomy-tattooed bodies intersect with representations of mastectomy tattoos of women of color. For example, P.ink's website includes a video about the

first P.ink Day in New York City where the representation of women of color make awkward the entrenched stereotype of the white survivor ("Introducing P.ink Day", 2013). Through the circulation and crisscrossing of bodies across transnational settings, there is a capacity for awkward intersectional feminist politics, albeit in fragile ways.

In the same video mentioned above, a woman of color explains: "the mirror is my friend again...I knew I was beautiful but now I am beautiful with my scar and all" ("Introducing P.ink Day", 2013). In this context, despite the continued conflation of health with a focus on individual appearance and beautification, beauty discourses also serve to destabilize whose bodies are worthy of being celebrated and showcased as beautiful. Furthermore, mastectomy tattoos often include conventionally feminine symbols such as flowers, butterflies, vines and corsets, where the feminine body is conflated with nature. These tattoos therefore operate with the limits of normative and essentialized conceptions of femininity. In this sense, bodies are awkward in that they simultaneously reproduce and subvert norms of beauty and femininity. Yet, in this context, femininity is rearranged on the body and reordered in such a way as to subvert its standardization and normalization processes. Specifically, these practices of beautification turn women's bodies into a "monster beauty" such that they create awkward assemblages of the natural-technological-biomedical-mechanical in ways that "queer" essentialist and naturalized definitions of femininity.

The ambassador of Montreal's P.ink Day's documentary "Beauty on my Terms," featured on their Facebook site further makes visible the awkward tensions between neoliberalism, post-feminism, beautification and a feminist body politics in online spaces. In the documentary, Lazarovitz (2016) correlates mastectomy tattoos with a return to femininity stating: "It's a good way for women to feel whole again and get back their femininity and not feel self-conscious about their scars." In this way she invokes individual-based body modification and display as a form of empowerment, akin to a post-feminist sensibility. However, she turns these individual and self-responsibility beauty projects into a call for

a collective body politics when she states:

It was empowering. It was my turn to do things my way. To end this journey my way, that to me was so freeing. It gave me that sense of freedom that so many women dealing with mastectomies don't feel. Because so many of our options are taken away from us...To take this part of my journey to show women...that they can do something (Lazarovitz, 2016).

These forms of online body display are being utilized in ways that make use of individual body projects to foster collective action, facilitated through digital technologies. The circulation of these images can ally bodies together, even unintentionally, in such a way that creates awkward moments of disruption, precisely because they do not quite "fit."

Digital mastectomy tattoos further create awkward tensions with gendered consumerist discourses and practices. For example, in October 2016, P.ink Day Montreal promoted a campaign in which they teamed up with Blush Lingerie where five per cent of the proceeds from bra purchases would support mastectomy tattoo projects.

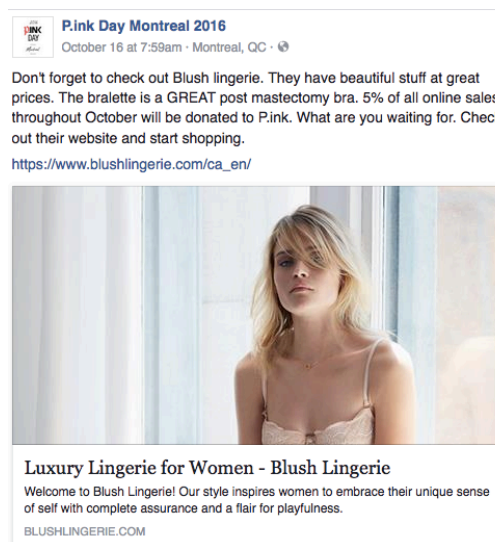


Figure 10. Luxury Lingerie, P.ink Day Montreal, Facebook Page

The inclusion of this image on P.ink Montreal's Facebook page resituates discourses of breast cancer into sexualized and objectified terms. In addition, these forms of breast cancer charities, which promote feminine,

consumerist- and individual-oriented body projects as important survivor practices, draw resources away from searching for more systemic root causes and a cure. In this context, the onus of responsibility is placed on women for their own health and wellbeing through practices of beauty and consumption. In the same vein, P.ink Days in Calgary and Vancouver are held at Compassionate Beauty, a center that sells beauty products such as wigs, bras, skin care and spa routines to cancer patients, thus further situating mastectomy tattoos into neoliberal-branded consumer-based products necessary for health and wellbeing. That said, and in spite of these attempts to resituate mastectomy tattoos in traditionally feminine consumer-oriented terms, mastectomy tattoos defy traditional gendered expectations by not reproducing conventional beauty standards. These assemblages then create new forms of bodily transformations, which call into question the relationship between charity and neoliberal body-based gendered consumption and beautification practices. To add further complication, recently in September 2016, P.ink stopped taking new clients for mastectomy tattoos due to their large demand, thus making it more difficult to access mastectomy tattoo services which can range from \$100 to \$500 an hour. This kind of exclusivity creates complex hierarchies through which women's bodies can be mobilized in these deregulating processes. For all of these reasons, any emergent feminist body politics are therefore unstable, fragile, messy and slippery.

How social media enterprises handle these kinds of images also complicates these discourses. Facebook and Instagram have attempted to regulate and demobilize these tattooed bodies through policies and practices that call for their removal (Gates, 2013). Although in the past year, Facebook has changed its policies to allow for images of mastectomy tattoos,<sup>18</sup> ("Encouraging Respectful", n.d.), the policing, disciplining and regulation of women's bodies still comes from users who flag these photos as inappropriate (Farr, 2013).<sup>19</sup> By forcing their removal, there is an attempt to reregulate women's bodies by repositioning them in patriarchal terms as objects of pornography and sexuality rather than as

the documentation of the physical and emotional scars and healing processes of women who have undergone mastectomies and lumpectomies. The concealment and delegitimation of these bodies work to damage online communities that are banding together for knowledge and inspiration by showing what bodies after mastectomies look like and in order to normalize post-breast cancer bodies in the networked public sphere. In spite of these efforts on the part of social media enterprises, various breast cancer activists have circulated petitions through change.org and other means, which have put pressure on Facebook to change its policies and practices. In part, these activists are arguing that these representations of bodies are not actually naked "breasts," but rather a hybrid intermeshing of bodies, art and technology, further calling into question essentialized, and sexualized notions of women's bodies. These calls to action underscore the ways individual body representations can be used to mobilize a collective feminist politics. As one petitioner stated in relation to The Scar Project, a photography series that documented tattooed post-mastectomy bodies:

As a woman living with Stage IV breast cancer, photos like The Scar Project help me feel a little less alone in what I'm going through. With so many young women facing breast cancer diagnoses, I know these photos give them hope, too. By removing the photos, Facebook is sending us a message that our struggle with this disease should be kept in the dark (Barrington, 2013).

The online circulation of these images makes visible bodies that have largely been rendered invisible and subject to biomedicalized and patriarchal control. By showcasing bodies that are scarred, disfigured and refigured in awkward ways, these women are constructing new subjectivities, and rewriting biomedicalized and patriarchal inscriptions of breasts through chosen scars.

## Conclusion

Digital culture presents complex and competing discourses that intersect in contradictory ways. According to Smith-Prei and Stehle (2016), we should stay with these awkward relationships as a fruitful place for feminist politics. Online representations of mastectomy tattoos are caught up in survivor discourses concerned with a focus on a return to health through self-responsible, beautification and consumption practices. These discourses operate within a framework of biomedicalization where the onus of the responsibility for health and wellness is placed on the breast cancer survivor through a focus on self-care, and these discourses sometimes recreate dominant values of femininity, race and class through the figure of the elite, white survivor as the only body worthy of being healed. The positioning of mastectomy tattoos in survivor discourses in part regulates women within neoliberal discourses and can further transform their bodies through beautification techniques that mask the "uglier" sides of breast cancer such as, for example, women with Stage IV breast cancer who may not survive or have the opportunity to engage with these survivorship practices. This visibility of mastectomy tattoos can obfuscate the occlusion of Stage IV bodies from systemic representation, evinced in the popular hashtag #stagefourneedsmore. In the same vein, the focus on these individual-based practices of self-care and the charities that support them further downplays systemic causes and responsibilities for the disease.

However, the position of tattooing in survivor practices is part of the complex and awkward ways that tattoos are simultaneously implicated in individual discourses of self-responsibility and can be utilized towards a feminist body politics. Specifically, the adoption of individual and body-based practices can be used to disrupt regulatory narratives and practices of reconstruction where beautification practices are used to challenge a patriarchal conception of health and wellbeing and where neoliberal logics are used to make visible new bodies. As one breast cancer survivor stated, it is through these practices that they can

become "mutant sisters" (In Memory, 2017), hybrid monster assemblages that can re-inscribe bodies to create new arrangements and subjectivities. These hybridized bodies are awkward in that they blend the digital with the corporeal, the technological with the biological, the medical with art. These assembled cyborg "monster bodies" transform women in ways that do not easily fit in and in turn make biomedicalized, neoliberal, and popular cultural discourses and practices awkward. The display of these body modification practices can be used to subvert conventional notions of healing and what a healthy woman's body should be, which tend to erase physical scars through reconstruction discourses and practices. The circulation of these monster bodies in digital contexts, inside and outside local and national borders, offers the capacity for bodies to be allied and impact the tendency to conflate health with normative categories of race, class, gender and sexuality, albeit in fragile and problematic ways. These digital bodily circuits can begin to shift biomedicalized discourses, as a recent illustrated article published in the *Journal of the American Medical Association*, one of the top ranked academic medical journals in North America (with an Impact factor 44.405) attests. The article, which is authored by a Chicago-based tattoo artist (Allen, 2017), a very unusual occurrence for a scholarly medical journal, promotes the healing role of post-mastectomy tattoos acquired in tattoo parlors to the larger medical community, thereby impacting biomedical practices on health and healing. Although differently imagined from Lorde's material bodies descending on government, the display and visibility of mastectomy tattoos online can foster an awkward feminist body politics through networked scars.

## Notes

<sup>1</sup> It is important to note that due to online media's fluidity, bodily representations inherently operate beyond national border and overlap transnationally, which will be reflected in some of the contexts and examples discussed in this article. At the same time, biomedicalized bodies, discourses and practices are also necessarily grounded and

limited by national politico-economic contexts.

<sup>2</sup> Broadly speaking, neoliberalism is understood here as a mode of political and economic rationality characterized by privatization, deregulation structured by individual entrepreneurial freedom (Baer, 2016; Gill & Schraff, 2011).

<sup>3</sup> Scholars have discussed this culture in terms of breast cancer awareness campaigns (e.g. King, 2006; 2010), races for the cure (e.g. Klawiter, 2000) and the consumption and pinkwashing of products.

<sup>4</sup> Since 1985 medicine more broadly, has transformed into an era of biomedicalization which is organized around five key interactive processes: 1) a new biopolitical economy and media; 2) an intensifying focus on health, optimization and enhancement by technoscientific means, pointing to an elaboration of risk and surveillance of individual niche groups and population levels; 3) the technoscientification of biomedical practices where interventions for treatment and enhancements are more reliant on science and technology and are conceived in those very terms; 4) the transformation of biomedical knowledge production, information management, distribution and consumption; and 5) the transformation of bodies and the production of new individual, collective and population level technoscientific identities. (Clarke et al, 2010).

<sup>5</sup> Breast cancer 'survivors' do not only refer to women who have survived breast cancer but include all women who have undergone breast cancer treatments including those who have had elective preventative mastectomies and lumpectomies due to the BRCA gene who are now positioned by these discourses and practices.

<sup>6</sup> Scholars have discussed this focalization on survivorship practices in different settings including charity events and breast cancer awareness campaigns such as races for the cure, (King, 2006; Klawiter, 2000), as well as in terms of corporate philanthropy and the "pinkwashing" of products which reinforce individual responsibility over systemic and corporate culpability (Selleck, 2010).

<sup>7</sup> Many critics have expressed doubt about the usefulness of mammograms arguing that they are detective rather than preventative and that even under optimal conditions, mammograms can miss up to 15 per cent of tumours (King, 2006, p.38).

<sup>8</sup> Matushka is a New York City photographer, model and activist.

<sup>9</sup> McRobbie builds on Gill and Scharff's description of a "postfeminist sensibility" which is evident in the common tropes of twenty-first century media productions, including the notion that femininity is a bodily property; the shift from objectification to subjectification in the ways that women are represented, an emphasis on self-surveillance, monitoring, and discipline; a focus on individualism, choice, and empowerment; the dominance of a makeover paradigm; the articulation or entanglement of feminist and anti-feminist ideas; a resurgence in ideas of natural sexual difference; a marked resexualization of women's bodies and; an emphasis on consumerism and the commodification of difference" (Gill and Schraff, 2011, p.3-4).

<sup>10</sup> These include every relevant Canadian website that I could locate during the period of September 1, 2016 and March 31, 2017: Cosmetic Transformations, Margeaux Collyer's The Art of Micropigmentation, Cosmetic and Paramedical Tattooing, Areola Tattoos: The Finishing Touch to Feeling Complete, Clinique de la Belle Peau, Dr. Sheina Macadam, True Balance, A New You Medical Tattoo Inc., Dermallusion Personal Cosmetics, Revive Clinic, Cosmedic Ink, and Change Hair.

<sup>11</sup> These include every Canadian tattoo parlour website that specifically offered post breast cancer surgery tattooing services that I could locate during the period of September 1, 2016 and March 31, 2017: Sam R Tattoos, The Talisman Studio, A.R.T (the Art of Areola Restorative Tattoos, Stacie Rae-Weir, Funhouse Tattoos, Psychocity Tattoo, Slick Styled Steel, Pain and Pleasure Tattoos, Monarch Tattoo, Mile End Tattoos, and The Arthouse Ink.

<sup>12</sup> Since February 2017, the Canadian Breast Cancer Foundation merged with the Canadian Cancer Society.

<sup>13</sup> Breast Reconstruction Awareness Day is an informational event held in different locations across Canada aimed at providing women an opportunity to learn about breast reconstruction products and services, meet with plastic surgeons and other women who have undergone treatment (Breast Reconstruction Awareness Day, 2016). In this context, tattooing practices are among the products and services available to women, but exclusively through the lens of areola re-pigmentation after reconstruction.

<sup>14</sup> It is important to note that in Canada, breast reconstructive surgery in relation to breast cancer is covered by most provincial insurance plans (Breast reconstruction, n.d.)

<sup>15</sup> According to the website, "Micro-Pigmentation is sometimes referred to as Para-Medical Pigment Implantation or Cosmetic Tattooing."

<sup>16</sup> It is important to underscore that women of colour have long histories of tattooing practices (Pitts, 2003) that the emphasis on white bodies in representations of areola tattooing overlook and obscure.

<sup>17</sup> Artistic discourses regarding colour offer a small fissure into these normalizing practices. Specifically, through discussions on colour matching and pigmentation, tattoo artists can complexify biomedical and cosmetic standards of whiteness. For examples, included on Stacie Rae's website is a "specialized areola pigment set with the beautiful natural tones we see in the cosmetic tattoo field, but the lasting quality we only see in the traditional tattoo field." The set includes various "natural skin tones" including beiges, browns and oranges in addition to pinks and peaches.

<sup>18</sup> In its community standards page, Facebook states: "we also restrict some images of female breasts if they include the nipple, but we always allow photos of women actively engaged in breast feeding or showing breasts post-mastectomy scarring" ("Encouraging respectful", n.d.).

<sup>19</sup> In an interview with Venture Beat, Facebook stated: "We have long allowed mastectomy photos to be shared on Facebook, as well as educational and scientific photos of the human body and photos of women breastfeeding. We only review or remove photos after they have been reported to us by people who see the images in their News Feeds or otherwise discover them. On occasion, we may remove a photo showing mastectomy scarring either by mistake, as our teams review millions of pieces of content daily, or because a photo has violated our terms for other reasons. (Farr, 2013)

## References

Ahmed, S. (2014). *Willful subjects*. Durham, NC: Duke University Press.

Allen, D. (2017). Moving the needle on recovery from breast cancer: The healing role of postmastectomy tattoos. *Journal of the American Medical*

*Association*, 317(7), 672-674.

Aragon, B. (2012, July12). Are breast tattoos safe? *CV Skin Labs*. Retrieved from <https://cvskinlabs.com/are-breast-tattoos-safe/>

Areola Tattooing (n.d.) *Dr. Sheina Macadam: Plastic and reconstructive surgery*. Retrieved from <http://www.drsheinamacadam.com/reconstructive-surgery/areola-tattooing-info>

Atkinson, M. (2003). *Tattooed: The sociogenesis of body art*. Toronto, ON: University of Toronto Press.

Baer, Hester (2016). Redoing feminism: digital activism, body politics, and neoliberalism. *Feminist Media Studies*, 16(1), 17-34.

Bakhtin, M. (1984). The grotesque image of the body. In H. Iswolsky (Trans.) *Rabelais and his world* (pp. 303-367). Bloomington, IN: Indiana University Press.

Barrington, S. (2013). Facebook: Stop censoring photos of men and women who have undergone mastectomies. Change.org Retrieved from <https://www.change.org/p/facebook-stop-censoring-photos-of-men-and-women-who-have-undergone-mastectomies>

Bell, S. E. (2006). Living with breast cancer in text and image: making art to make sense. *Qualitative Research in Psychology*, 3, 31-44.

Bezemer, J. and Jewitt, C. (2010). Multimodal analysis. In L. Litosseliti (Ed.), *Research Methods in Linguistics* (pp. 180-197). London, UK: Continuum.

Bourdieu, P. (1984). *Distinction: A Social Critique of the Judgment of Taste*. Richard Nice (Trans.). Cambridge, MA: Harvard University Press.

Braunberger, C. (2000). Revolting bodies: The monster beauty of tattooed women. *NWSA Journal*, 12(2), 1-23.

Breast cancer doesn't have to leave the last mark (n.d.) P.ink Retrieved from <http://p-ink.org/>

Breast reconstruction (n.d.) *Canadian Cancer Society*. Retrieved from

<http://www.cancer.ca/en/cancer-information/cancer-type/breast/treatment/surgery/breast-reconstruction-surgery/?region=on>

Breast reconstruction awareness day: A program of Canadian Breast Cancer Foundation. (n.d). Retrieved from <http://www.breast-reconstruction.com/breast-reconstruction/>

Bryson, M. & Stacey, J. (2013). Cancer knowledge in the plural: Queering the biopolitics of narrative and affective mobilities. *Journal of Medical Humanities*, 34(2), 197-212.

Burchett, G. (1958). *Memoirs of a tattooist*. New York, NY: Crown Publishers.

Cartwright, L. (1998). Community and the public body in breast cancer media activism. *Journal of Cultural Studies*, 12(2), 117-138.

Clarke, A. E, Shim, J.K., Mamo, L., Fosket, J.R. & Fishman, J.R. (2010). Biomedicalization: A theoretical and substantive introduction. In A.E. Clarke, L. Mamo, J.R. Fosket, J.R. Fishman & J.K. Shim (Eds.) *Biomedicalization: Technoscience, health, and illness in the U.S.* Durham, NC: Duke University Press, 1-44.

Clarke, A. E. (2010). From the rise of medicine to biomedicalization: U.S. Healthscapes and iconography, circa 1890-present. In *Biomedicalization: Technoscience, health, and illness in the U.S.* (pp. 104-146). Durham, NC: Duke University Press.

Clow, B & Allen, J. (2010). Psychosocial impacts of radiation tattooing for breast cancer patients: A critical review. *Canadian Woman Studies/Les Cahiers de la Femme*, 28(2/3), 46-52.

Cosmetic Transformations (n.d). Nipple Simulation. Retrieved from <http://www.cosmetictransformations.com/services>

Cosmetic Transformations (n.d.) Questions. Retrieved from <http://cosmetictransformations.com/questions/>

Crossley, N. (2006). *Reflexive embodiment in contemporary society: The body in late modern society*. Maidenhead, UK and New York, NY: Open University Press.

- Davidson, D. (2016) *The Tattoo Project: Visual Culture and the Digital Archive*. Toronto, ON: Canadian Scholars' Press.
- Deleuze & Guattari. (1987). *Thousand plateaus: Capitalism and schizophrenia*. (Brian Massumi, Trans). Minneapolis, MN: University of Minnesota Press. (Original work published 1980).
- DeMello, M. (2000). *Bodies of inscription: A cultural history of the modern tattoo community*. Durham, NC: Duke University Press.
- (1995a). The Carnavalesque body: Women and tattoos. In D.E. Hardy, (Ed.), *Pierced hearts and true love* (pp. 73-82). Honolulu, HI: Hardy Marks Publications.
- (1995b). Not just for bikers anymore: Popular representations of American tattooing. *Journal of popular culture*, 29, 37-52.
- Dr. Sheina Macadam Inc. (n.d.). Facebook. Retrieved from [https://www.facebook.com/pg/drsheinamacadam/about/?ref=page\\_internal](https://www.facebook.com/pg/drsheinamacadam/about/?ref=page_internal)
- Ehrenreich B. (2009). *Smile or die: How positive thinking fooled America and the world*. London, UK: Granta.
- Ehrenreich, B. (2001, November). Welcome to cancerland. *Harper's*, 43-53.
- Encouraging respectful behaviour (n.d.). Facebook community standards. Retrieved from <https://www.facebook.com/communitystandards#nudity>
- Farr, C. (4 June 2013) Cancer survivor urges Facebook to stop taking down post-mastectomy photos. *Venture Beat*. Retrieved from <https://venturebeat.com/2013/06/04/cancer-survivor-urges-facebook-to-stop-taking-down-post-mastectomy-photos/>
- Fosket, J. (2000). Problematizing biomedicine: Women's constructions of breast cancer knowledge. In L. Potts (Ed.), *Ideologies of breast cancer* (pp. 15-36). New York, NY: St Martin's Press.
- Foucault, M. (1990). *The history of sexuality: Volume 1: An introduction*. (R. Hurley Trans.). New York, NY: Vintage Books. (Original work published 1978).

- (1986). *The history of sexuality, Vol. 3: The care of the self*. (R. Hurley Trans.). New York, NY: Vintage Books. (Original work published 1984).
- (1997a). The birth of biopolitics. In P. Rabinow (Ed.), *Ethics subjectivity and truth*, (R. Hurley Trans.) (pp. xx-xx). New York, NY: The New York Press.
- (1997b). The ethics of the concern for self as a practice of freedom. In P. Rabinow (Ed.), *Ethics: Subjectivity and truth*. (pp. 281-301). New York, NY: The New York Press.
- (1997c). Technologies of the self. In P. Rabinow (Ed.), *Ethics: Subjectivity and truth* (pp. 223-252). New York, NY: The New York Press.
- (1966/2008). *The Order of things*. New York, NY: Routledge. (Original work published 1966)
- Frueh, J. (2001). *Monster/beauty: Building the body of love*. Berkeley, CA: University of California Press.
- Gates, S. (2013, February 20). Facebook removes photo of breast cancer survivor's tattoo, users fight back. *Huffington Post*. Retrieved from [http://www.huffingtonpost.ca/entry/facebook-breast-cancer-tattoo-photo-double-mastectomy\\_n\\_2726118](http://www.huffingtonpost.ca/entry/facebook-breast-cancer-tattoo-photo-double-mastectomy_n_2726118)
- Gill, R. & Scharff, C. (Eds.) (2011). *New femininities: Postfeminism, neoliberalism and subjectivity*. New York, NY: Palgrave Macmillan.
- Griwkowsky, C. (2016, January 4) Indelible strength: Cancer survivors cover scars, reclaim bodies with tattoos. *Edmonton Sun*. Retrieved from <http://www.edmontonsun.com/2016/01/04/indelible-strength-cancer-survivorscover-scars-reclaim-bodies-with-tattoos>
- Hall, S. (1997). *Representations: Cultural representations and signifying practices*. London, NY: Sage Publications.
- Hallowell, N. (2000). Reconstructing the body or reconstructing the woman? Problems of prophylactic mastectomy for hereditary breast cancer risk. In L. Potts (Ed.), *Ideologies of Breast Cancer* (pp. 153-80). New York, NY: St Martin's Press, 153-180.

Harlow, M. J. (2008). The suicide girls: Tattooing as radical feminist agency. *Contemporary Argumentation and Debate*, 29, 186-196.

Haraway, D. (2016). *Staying with trouble: Making kin in the chthulucene*. Durham, NC: Duke University Press.

Hebdige, D. (1979). *Subculture: The meaning of style*. London, UK: Routledge.

Hogle, L.F. (2006). Enhancement technologies and the body. *Annual Review of Anthropology*, 34, 695-716.

Infection prevention and control practices for personal services: Tattooing, ear/body piercing, and electrolysis (July 1999). *Health Canada*. Retrieved from [http://publications.gc.ca/collections/collection\\_2016/aspc-phac/HP3-1-25-S3-eng.pdf](http://publications.gc.ca/collections/collection_2016/aspc-phac/HP3-1-25-S3-eng.pdf)

[In memory of D'Ana Reed. founder. mutant. sister. friend.](https://www.livinglfs.org/in-memory-of-dana-reed-founder-mutant-sister-friend/) (24 August 2017). *Living LFS*. Retrieved from <https://www.livinglfs.org/in-memory-of-dana-reed-founder-mutant-sister-friend/>

Introducing P.ink day: Our first 12-hour ink-a-thon. (2013). *P.Ink*. Retrieved from <http://p-ink.org/>

Jewitt, C. (2009) *The Routledge handbook of multimodal analysis*. London, UK: Routledge.

Kimber, E. (2009, June 22). Top 5 medical sites. *Canadian Living*. Retrieved from <http://www.canadianliving.com/health/prevention-and-recovery/article/top-5-medical-sites>

King, S. (2006). *Pink ribbons inc.: Breast cancer and the politics of philanthropy*. Minnesota, MN: University of Minnesota Press.

King, S. (2010). Pink ribbons inc.: The emergence of cause-related marketing and the corporatization of the breast cancer movement. In L. Reed & P. Saukko (Eds.), *Governing the Female Body: Gender, Health and Networks of Power*. New York, NY: Suny Press.

Klawiter, M. (2008). *The biopolitics of breast cancer: changing cultures of*

*disease and activism*. Minneapolis, MN: University of Minnesota Press.

——— (2000). Racing for the cure, walking women and toxic touring: Mapping cultures of action within the Bay Area terrain of breast cancer. In L. Potts (Ed.), *Ideologies of breast cancer* (pp. 63-97). New York, NY: St Martin's Press.

Klein, R. (2015). *Beauty marks: Hegemonic power of the body?* (Doctoral dissertation). Carleton University, Ottawa, Canada.

Kosut, M. (2006). An ironic fad: The commodification and consumption of tattoos. *The journal of popular culture*, 39(6), 1035-1048.

Kress, G. and T. van Leeuwen (2006). *Reading image: The grammar of visual design* (2nd ed.). Asia-Pacific Press.

Lazarovitz, K. (16, November, 2016) Beauty on my terms documentary. *P.ink Montreal* Facebook. Retrieved from [https://www.facebook.com/PinkdayMontreal2016/?hc\\_ref=SEARCH](https://www.facebook.com/PinkdayMontreal2016/?hc_ref=SEARCH)  
P.ink Day

Lerner, B.H. (2001). *The breast cancer wars*. Oxford, UK: Oxford University Press.

Lodder, M. (2010). *Body Art: Body Modification as Artistic Practice*. (Doctoral dissertation). Reading, UK: University of Reading.

Lorde, A. (1980). The cancer journals. In *The Audre Lorde compendium: Essays, speeches and journals*. London, UK: Harper Collins.

Lucas, A. (n.d.). Restorative tattoos, *Shaw TV Nanaimo*. Retrieved from <http://samrtattoo.com/projects/areola-restorative-tattooing>

Luxury Lingerie for Women: Blush Lingerie (16 October 2016) *Facebook, P.ink Day Montreal*. Retrieved from [https://www.facebook.com/PinkdayMontreal2016/?hc\\_ref=SEARCH](https://www.facebook.com/PinkdayMontreal2016/?hc_ref=SEARCH)

Martel, S. (2016). Commemorative tattoos as visual-material media. In D. Davidson (Ed.) *The Tattoo Project: Visual Culture and the Digital Archive* (31-38). Toronto, ON: Canadian Scholars' Press.

Martin, M. (2003). When the illustrated press was a new media:

Confrontation between image and text. *International conference visual knowledges*, Edinburgh.

Marvin, C. (2006). Communication as embodiment. In G. J. Shepherd, J. St. John & T. Stripling, (Eds.). *Communication As...Perspectives on theory* (67-74). Thousand Oaks, CA: Sage Publications.

Mastectomy tattoo and lymphedema risk? (n.d.). *Breast Cancer.org Community*. Retrieved from <https://community.breastcancer.org/forum/64/topics/850141>

McRobbie, A. (2007). Top Girls? Young Women and the Post-Feminist Sexual Contract. *Cultural Studies*, 21(4), 718-737.

McRobbie, A. (2009). *The Aftermath of Feminism: Gender, Culture and Social Change*. London, UK: Sage Publications.

Mifflin, M. (2013). *Bodies of Subversion: A Secret History of Women and Tattoo* (3rd ed.). New York, NY: Powerhouse Books.

Murray, J. (2012, June 23). What is it about modern women and tattoos? *Daily Mail*. p.30.

Neville, H. (2005). Marking gender: Women and tattoos, practice and representation. *Philament*, 7, 42-63.

Orgad, S. (2005). The transformative potential of online communication: The case of breast cancer patients' Internet spaces. *Feminist media studies*, 5(2), 141-61.

P.ink Day Calgary (20, Feb. 2015). *Facebook Personal Ink-P.ink Page*. Retrieved from <https://www.facebook.com/search/top/?q=p.ink%20day%20calgary>

Pitts, V. (2004). Illness and Internet empowerment. *Health: An interdisciplinary journal for the social study of health, illness and medicine*, 8(1), 33-59.

Pitts, V. (2003). *In the flesh: The cultural politics of body modification*. New York, NY: Palgrave MacMillan.

Pitts, V. (2001). Popular pedagogies, illness and the gendered body:

Reading breast cancer discourse in cyberspace. *Popular Culture Review*, 12(2), 21-36.

Polzer, J. (2010). Caring for the self, caring for others: The politics and ethics of genetic risk for breast cancer. *Canadian woman studies*, 28 (2/3), 71-76.

Potts, L. (2000). Publishing the personal: Autobiographical narratives of breast cancer and the self. In L. Potts (Ed.), *Ideologies of breast cancer* (pp.98–127). New York, NY: St Martin's Press.

Puar, J. (2012). I would rather be a Cyborg than a Goddess: Becoming Intersectional in Assemblage Theory. *PhiloSOPHIA*, 2(1), 49-66.

Rabin, R.C. (2016, October 31). Going flat after breast cancer. *New York Times*. Retrieved from [https://www.nytimes.com/2016/11/01/well/live/going-flat-after-breast-cancer.html?\\_r=0](https://www.nytimes.com/2016/11/01/well/live/going-flat-after-breast-cancer.html?_r=0)

Rae, S. (2015a, July1). How long to wait?? *The A.R.T of areola restorative tattoo*. Retrieved from <https://www.nippletattoos.com/single-post/2015/07/01/How-Long-to-Wait>

Rae, S. (2015b March 3). What is a 3-D nipple exactly? *The A.R.T of areola restorative tattoo*. Retrieved from <https://www.nippletattoos.com/single-post/2015/03/03/What-IS-a-3D-Nipple-exactly>

Ramsay, C. (2015, June 22). Tattoo therapy helps people with body-altering medical conditions *Global News*, Retrieved from <http://globalnews.ca/news/2069223/tattoo-therapy-helps-people-with-body-altering-medical-conditions/>

Rose, N. (2001). The Politics of life itself. *Theory, Culture & Society*, 18(6), 1–30.

Rubin, A. (1988). *Marks of civilization: Artistic transformations of the human body*. Los Angeles, CA: University of California Press.

Sam R Tattoo Studio (n.d.). Retrieved from <http://samrtattoo.com/>

Saywell, C., Henderson, L. & Beattie, L. (2000). Sexualized illness: The

newsworthy body in media representations of breast cancer. In L. Potts (Ed.), *Ideologies of breast cancer* (pp. 37–62). New York: St Martin's Press.

Selleck, L. G. (2010). Pretty in pink: The Susan G. Komen network and the branding of the breast cancer cause. *Nordic journal of English studies*, 9(3), 119-138.

Sharf, B. (1997). Communicating breast cancer on-line: Support and empowerment on the Internet', *Women & health*, 26(1), 65-84.

Simpson, C. (2000). Controversies in breast cancer prevention: The discourse of risk. In L. Potts (Ed.), *Ideologies of breast cancer* (pp. 131–52). New York: St Martin's Press.

Slatman, J. (2012). Phenomenology of bodily integrity in disfiguring breast cancer. *Hypatia*, 27(2), 281-300.

Smith-Prei, C. & M. Stehle (2016). *Awkward politics: Technologies of popfeminist activism*. Montreal, QC: McGill-Queen's University Press.

Steward, S. (1990). *Bad Boys and Tough Tattoos: A Social History of the Tattoo with Gangs, Sailors, and Street-Corner Punks 1950-1965*. New York, NY: Harrington Park.

Summary Basis of Decision (SBD) Memorygel™ Silicone Gel-filled Breast Implants (2011). *Health Canada*. Retrieved from [http://www.hc-sc.gc.ca/dhp-mps/prodpharma/sbd-smd/md-im/sbd\\_smd\\_2011\\_mentorround-69312-eng.php](http://www.hc-sc.gc.ca/dhp-mps/prodpharma/sbd-smd/md-im/sbd_smd_2011_mentorround-69312-eng.php)

Thompson, B.Y. (2015). *Covered in Ink: Tattoos, Women and the Politics of the Body*. New York, NY: New York University Press.

Turkle, S. (1995). *Life on the screen: Identity in the age of the Internet*. New York, NY: Simon & Schuster.

Waskul, D., Douglass, M. & Edgley, C. (2000). Cybersex: Outercourse and the enselfment of the body. *Symbolic Interaction*, 23(4), 375-98.

Where skin becomes a thing of beauty(n.d). *Clinique de la Belle Peau*. Retrieved from <http://www.cliniquedelabellepeau.com/>.

Wilkinson, S. (2001). Breast cancer: Feminism, representations and resistance — a commentary on Dorothy Broom's 'Reading breast cancer'. *Health*, 5(2), 269-77.

Williams, Raymond (1974). *Television: Technology and cultural form*. London, UK: Fontana.

Wodak R. & M. Meyer (2009). *Methods of critical discourse analysis*. London, UK: Sage Publications.

## Bio

**Dr. Reisa Klein** is currently a postdoctoral fellow in the Department of Modern Languages and Cultural Studies at the University of Alberta. Her research broadly explores the relationship between the body, communication and power in diverse mediated contexts. Dr. Klein is a co-founder of Centre for Historical International Studies in Gender and Press (CHISGAP), an international research group engaged in transnational comparative studies on the internationalization and standardization of women's bodies in mediated cultures.