Developing a stable sense of self and body in today’s image-saturated environment is challenging to say the least, particularly for women. A woman’s body is the primary source of expression for cultural values of beauty, difference, and morality. For women with disabilities, these bodily negotiations experienced by all women become compounded when cultural values of health, attractiveness, and normality are interpreted as abject on the disabled body. In *Becoming Women: The Embodied Self in Image Culture*, Rice interweaves the personal narratives of 90 women of diverse backgrounds with post-structural feminist critical psychology and disability studies theory in a manner that illuminates the complex process of identifying and becoming a woman. Using becoming-embodiment theory as her anchor, Rice interprets common themes experienced by women regarding femininity, beauty, difference, and health. Unlike previous research, Rice focuses on the experiences of women often deemed outside the margins of normality: women of colour, trans/queer women, women with physical disabilities or differences, fat women, etc. Although these women are often viewed as radically different from each other, Rice manages to meaningfully report the commonalities between their stories: their shared difference or “abject” embodiment that contradicts cultural norms. At the same time, Rice acknowledges and honours the unique differences between these women and respects their individuality and agency.

One of the book’s major strengths lies in Rice’s ability to summarize a large body of literature in a manner that is digestible and easy to understand. Her emphasis on both theory and
Roosen, Review of *Becoming Women* by Carla Rice
*CJDS 3.3* (Fall 2014)

personal narrative helps the reader to empathize with the female participants and truly understand how abstract theory applies to their own lives. She craftily introduces complex theories and their historical underpinnings and then draws the reader’s attention to their modern day significance through her use of narratives, metaphors, and current popular media (e.g., television shows, movies, cultural events, news). In this way, Rice has created a piece that is both stimulating and comprehensive for the academic, while also inviting to any person interested in understanding how women negotiate cultural ideals represented in the media to form their own self-and body-image (i.e., embodiment).

In addition, Rice succeeds in combining a largely diverse, and previously incompatible, body of literature. The field of problematic eating has been traditionally divided into three areas: 1) feminist scholarship that largely emphasizes sociopolitical factors, 2) psychological literature on eating disorders, and 3) biomedical scholarship aimed at preventing obesity. In contrast, Rice discusses how problematic eating can be viewed as a survival mechanism in response to socially constructed pressures of being a “proper” woman, particularly during puberty. These pressures also contribute to future obesity by encouraging problematic eating behaviours such as dieting, binging, and other unhealthy weight-loss methods. In this way, she integrates psychological theory with feminist studies and even offers social commentary on the plight of the “obesity epidemic.” Thus, her book is a great asset for body image, obesity, and eating disorder researchers and clinicians. For these professionals, it offers a gentle introduction to understanding how social and cultural factors impact mental health and women’s self-worth, particularly with women who are rarely studied in mainstream literature (e.g., disabled, racialized women).

Moreover, through the use of personal narratives, Rice brings the *body* back into the forefront of disability studies. Early social models of disability were criticized due to their limited
In her analyses of disabled women’s personal accounts, Rice honours these women’s unique experiences of their bodies, while also integrating these accounts with social theory. Her use of body becoming embodiment theory allows her to “approach the becoming of participants’ embodied selves as ongoing and open ended, as historically and socially constructed, and as determined by many forces, including their own psychic creativity and the biological agency of their bodies” (27). Body becoming theory, as used here, acts as a conduit between social, critical theories and the inclusion of individual factors. As a result, Rice does not shy away from discussions of her research participants who report ambivalent, love-hate relationships with their bodies. Growing up during the tail end of the second-wave feminist movements and within the thick of consumerist-image culture, these women received conflicting messages about their bodies. Pressure from the feminist movement to love themselves for who they were and to prize attributes beyond beauty was in stark contrast to society’s messages to be thin, pretty, youthful, and fit. Rice’s ability to capture these women’s internal psychic negotiations, which, in my opinion, is often lacking in theoretical disability studies literature, is refreshing.

A significant contribution to disability studies is Rice’s unflinching comparison of disabled women who had experienced trauma as patients in the medical system with women who had been sexually abused. Rice describes how her participants reported:

- clumsy lifting, insensitive touching, manipulation of body parts, aggressive poking and prodding, rough handling, questionable use of restraints, and other improper treatments in routine contact with care providers. When they endured painful and frightening interventions without consultation or support, most women felt abandoned or betrayed by the people in whose care they have been placed. This left them with the sense that they had little protection from intrusion and con-.
firmed their emerging view that disability made them vulnerable to abuse (112-113).

Although past research has confirmed poor treatment in medical settings for women with disabilities (e.g., Priestly, 1998), Rice’s participants’ narratives and her subsequent comparison to sexual abuse helps to qualify the horrifying extent of this practice. Unlike previous debates that question whether this mistreatment could be categorized as abusive (Kennedy, 1996), Rice takes a much needed stand in interpreting her participants’ experience as what it was: abusive and traumatic. The biomedical model not only applies a limited understanding of disability by focusing on individual impairments, but it actually is physically and psychologically harmful, even today as we celebrate 24 years of the Americans with Disabilities Act coming into practice. Rice’s critique and subsequent expansion of sexualization/objectification theory to include other forms of objectification, such as objectifying women with disabilities as sources of entertainment or medical diagnoses (196), helps to explain medical mistreatment among women with disabilities. This highlights the need for more scholarship and interventions to challenge and change the dominant medical practices that are continuing to abuse these women today.

Rice’s integration of disability and physical differences in her book is a huge step forward for advancing embodiment theory for women with disabilities. In addition to a chapter dedicated to the experiences of disabled women, Rice integrates disability throughout the book when examining themes of beauty and puberty. However, as a disabled woman and an academic who researches disability, I found myself craving more explanations of how disabled women face unique challenges becoming women, including women with non-visible disabilities. For example, Rice discusses how racialized women are often subjected to pressures to exhibit “super” professional, moral, and articulate behaviours in order to offset negative stereotypes of black women
as promiscuous and wild (86). Likewise, women with disabilities have often described the need to “dress to impress,” in which they present themselves as attractive, fashionable, and articulate in order to offset negative stereotypes of being child-like, asexual, and burdensome (i.e., unemployed) (Zitzelsberger, 2005). Similar to the racialized women in Rice’s study, disabled women who engaged in this type of image control did so to enhance their social status, but at a cost of inhibiting self-expression and sexuality. This was only one of several areas where I felt that more could have been extrapolated to disabled women, i.e., the increased risk of problematic eating (e.g., Neumark-Sztainer et al., 1995) and the exclusion experienced in physical education (e.g., Clemens, 2012). I think the fact that I can extrapolate similar stories to women with disabilities attests to the power of Rice’s use of embodiment theory to connect the stories of women from various backgrounds with the common thread of societal difference. Further, her work speaks to the need for increased scholarship on disabled people’s experiences of embodiment and marginalization.

After reading Rice’s book, I was left with several questions. For instance, I wonder how the experiences of disabled women in her study would compare to the experiences of disabled women today. Most of her participants with disabilities had little to no exposure to the disability community or disability culture growing up in post-feminist, image culture. Disability studies scholars have argued that identifying within the disability community can add to feelings of empowerment and social connections based on shared experiences of oppression and common interests in advocacy/emancipation (Campbell & Oliver, 1996). Perhaps, given the surge of such advocacy groups over the past 10 years, participants in today’s climate would have more positive views of their disabled bodies. As well, maybe they would be more likely to discuss topics I felt
remained largely unaddressed in her book, such as, problematic eating, “passing” as nondisabled, and interacting with able-bodied peers in mainstream educational settings.

Furthermore, I was left pondering whether today’s disabled women would report experiences of “split-consciousness” that differed from, yet were analogous to, those of the women in Rice’s study. In her book, Rice discusses how her participants, growing up in the tail end of second-wave feminism and in an image-saturated culture, created a “split-consciousness” (272). Here, women described the conflict that occurred in simultaneous messages to love yourself naturally and live up to strict beauty ideals. As such, many of the participants reported feeling like “failed feminists” if they experienced any body dissatisfaction or attempted to alter their body in any way to meet mainstream beauty ideals. However, as Rice explains, there are severe consequences for women who fall outside beauty standards (e.g., social status, employment, romantic partners) and most women are just trying to exist within the continuum of “normality” rather than reach an “ideal beauty standard” (198). Accordingly, I was curious about whether disabled women today experience a similar type of split-consciousness, a consciousness conflicted between the disability rights movement’s messages of disability pride and promotion of a social model of disablement, and the mainstream society’s view of disability as deviant, burdensome, or unnatural. How would these women negotiate conflicting messages to advocate for environmental and attitudinal changes around disability, while also receiving messages to overcome their disabilities? How does a proud disabled woman plead for assistance from a charity-model organization so that she can continue to live independently? More scholarship is needed to fully understand how these different coexisting models of disability impact disabled women’s becoming of self.
In summary, *Becoming Women: The Embodied Self in Image Culture* is a rare gem for disability studies that grounds complex theory within the personal narratives of women with disabilities. She contributes to the literature by situating disability within a continuum of difference or abjection negotiated by women in developing a sense of themselves and their bodies. She also acknowledges disabled women’s unique stories through use of the body, including how a disabled body can become dehumanized in a biomedical, reductionist model, and at great costs to the women within this system. This book highlights the need for cultural change in viewing disabled bodies, particularly within medicalized caregiving settings.

References


