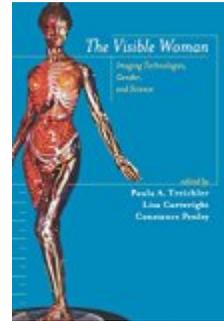


H-Net Reviews

in the Humanities & Social Sciences

Paula A. Treichler, Lisa Cartwright, Constance Penley, eds. *The Visible Woman: Imaging Technologies, Gender, and Science*. New York: New York University Press, 1998. vii + 400 pp. \$65.00 (cloth), ISBN 978-0-8147-1556-7.

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Until very recently, women were virtually invisible in medical literature, except in discussions of female reproduction. Medical scientists considered male bodies to be the “norm” for all human anatomical and physiological features except those that were unique to women. The exclusion of women and women’s issues from medical research was done partly for women’s own good—or rather the good of possible unborn fetuses—but was also based on assumptions about the social value of research subjects. As Eileen Nechas and Denise Foley show in their book *Unequal Treatment*, “decisions on what aspect of health to study, on what research protocol to fund” are based “not only on scientific merit...but on a judgment of social worth. What is valuable to medicine is who is valuable to society, and that is white men.”[1]

Women have been more visible in scholarship on the history and sociology of medicine: Over the past three decades there has been a wealth of scholarship exploring the often uneasy relationship between women and the medical profession. Early work in this area tended to focus on women’s victimization by male physicians and how medical ideology was used to restrict women’s roles in society. More recent work has also taken into account women’s agency and demonstrated how women have reacted to, embraced, or resisted prevailing medical ideology.[2]

The collection of thirteen essays in *The Visible Woman* attempt to do the same for recent developments in medical technology, as well as on new health care crises such as the AIDS epidemic and the resurgence of tuberculosis which have special import for women patients. The book is divided into three parts, which represent what the editors describe as “three paradoxes of visibil-

ity” in recent science and medicine. The first paradox is that while new imaging technologies and scientific initiatives have made bodies—particularly women’s bodies—visible in new ways, “the knowledge and insights about health and disease that these new technologies make possible are shaped and constrained by existing networks of power, cultural values, institutional practices, and economic priorities” (p. 4).

The four essays in the first section of the book provide examples of how images of women’s bodies tend to reinforce rather than challenge existing power structures. Lisa Cartwright’s essay, “A Cultural Anatomy of the Visible Human Project,” places the Visible Human Project within the broader history of anatomy, which until very recently tended to use male bodies to represent the normal human body. The Visible Human Project has partially remedied this problem by using both female and male bodies to represent the human body. Cartwright also demonstrates that the Visible Human Project still tends to reinforce older anatomical conventions by presenting the Visible Woman as an exception to male anatomical norms. Stacie Colwell’s essay analyzes the production and dissemination of “The End of the Road,” a film used by the U.S. War Department to prevent venereal disease during the First World War. Colwell argues that the film reflected the views of women reformers involved in public health work during the War. Consequently, the film was more forward-thinking than most other anti-venereal disease films of the period in that it depicted men rather than women as the source of infection. At the war’s end, however, “women’s avenues for influencing public health policy were dismantled,” and “insulated officials with their private agendas took over the regulation of women’s access to information about

their own sexuality and reproduction” (p. 75).

Paula Treichler and Catherine Warren’s essay, “Maybe Next Year: Feminist Silence and the AIDS Epidemic,” alleges that “mainstream feminists” (including the authors themselves) ignored the implications of the AIDS epidemic for women. The effect of this “feminist silence” during the early years of the epidemic, the authors claim, has helped to facilitate and legitimate a range of anti-feminist and anti-woman interests that restrict women’s reproductive choices. The fourth and final essay in this section, Anne K. Eckhman’s “Beyond ‘The Yentl Syndrome’: Making Women Visible in Post-1990 Women’s Health Discourse,” examines the outcomes of the National Institutes of Health’s increased attention to women’s health issues since the founding in 1990 of the Office for Research on Women’s Health in the National Institutes of Health. Eckman argues that while the NIH’s health initiatives for women are progressive in that they no longer use the male body as the normative standard for medical research, this new attention to “women’s health” has also been divorced from the feminist movement that first called attention to inequities in women’s health care. As a result, says Eckman, the “new visibility” of women’s health issues has occurred in “a political environment that has limited understanding of the social inequalities structuring the production and distribution of women’s health and knowledge about women’s health” (p. 158).

Eckman’s essay provides a lead-in to the second part of the book, which focuses on the second paradox identified by the editors: although the new women’s health agenda of the 1990s grew out of the feminist movement and women’s health activism, it has “achieved its present prominence only by obscuring or obliterating its problematic political roots in struggles over abortion, reproductive choice, patient autonomy, and egalitarian ideals of health access for women across class, race, and employment status” (p. 5). The essays in Part Two provide case studies of how new reproductive imaging technologies have tended to limit rather than expand dialogue about women’s reproductive choices. Carol Stabile’s essay, “Shooting the Mother: Fetal Photography and the Politics of Disappearance,” demonstrates that the advances in medical imaging of the fetus have led to a construction of mother and child that reinforces the personhood of the “unborn child” while erasing the pregnant woman’s identity and rights. Valerie Hartouni’s “Fetal Exposures: Abortion Politics and the Optics of Allusion” compares and contrasts two films that use ultrasound technology to depict abortion: the notorious right-

to-life film “Silent Scream” and the independent feminist video “S’Aline’s Solution.” Hartouni demonstrates that “pro-life meanings, categories, and representations have so saturated public discourse” about abortion that even a feminist film is forced to adopt the same images and rhetorical strategies (p. 213). Mark Rose’s essay on “Mothers and Authors” focuses on the surrogate mother case *Johnson vs. Calvert* to demonstrate how discussions of surrogacy resemble older, romantic discussions of “authorship.” Rose argues that just as Michel Foucault’s essay “What is an Author?” challenged traditional notions of authorship, so too have new reproductive technologies “destabilized our understanding of human procreation” (p. 234). The final essay in this section, Ella Shohat’s “Lasers for Ladies,” examines how video laparoscopy provides the possibility of a “collaborative study of endometriosis,” which “may counter the ceding of the female body to medical institutions, and to shape healing-oriented spectatorship” (pp. 264-65).

Part Three looks at the third and final paradox identified by the editors: although scientists claim that imaging technologies provide unambiguously “objective” views of reality, discussions of these technologies among scientists and laypersons alike are actually marked by continual struggles over who has the knowledge and expertise to use them and what precisely is being seen or not seen in these images. The editors claim that the essays in this section “address the dual drama of medical imaging and inscription as a representational system and as a staging ground for professional authority, agency, and control” (p. 14). However, two of the essays in this section—Michael Brub and Janet Lyon’s “Living on Disability” and Richard Cone and Emily Martin’s “Corporeal Flows”—do not address either imaging technologies or gender, although both offer interesting perspectives on how medical clients can challenge dominant medical paradigms. The other essays in this section do address gender, at least tangentially, but none discuss medical imaging technologies, although they do make extensive use of films, videos, and literary representations. Sandy Stone’s “The *Empire* Strikes Back: A Posttranssexual Manifesto,” criticizes Janice Raymond’s book *The Transsexual Empire* for essentializing gender categories and for ignoring the actual lived experience of transsexuals. In “Beating the Meat/Surviving the Text, or How to Get Out of This Century Alive,” Vivian Sobchack uses her personal experience as a “techno-body” with an artificial leg to illustrate the shortcomings of postmodernist celebrations of the cyborg and other examples of bodily transcendence. The final essay in the volume, Gayle Nai-

smith's "Tales from the Crypt," analyzes Todd Hayne's film "[Safe]" to illustrate different approaches to the diagnosis, treatment, and existence of environmental illness.

The editors hope that their volume will provide a middle ground between technophilia and technophobia, and thereby "extend the range and vocabulary of patient knowledge and agency" (p. 3). However, several of the essays in the volume, especially those by Stabile, Hartouni, and Naismith, focus exclusively on representations of the body created by medicine and the mainstream media and do not consider how patients react to these images. Other essays provide a more balanced view of the tension between medical control and client agency. Ella Shobat, for example, provides a heartening view of how endometriosis sufferers can use new diagnostic and treatment technologies to their advantage. Michael Brub and Janet Lyon likewise suggest that it is possible to be Foucauldian about the treatment of the mentally retarded in the past while at the same time being optimistic about finding solutions that will help their son and other children with Down Syndrome.

Although this book is not meant to be a work of history, some essays could have benefited from a more nuanced view of the history of women and health. Shobat, for example, attempts to find "submerged" examples of endometriosis in the nineteenth century by examining representations of "nervous, ailing women" presented in advertisements for Lydia Pinkham's Vegetable Compound. Not only does she erroneously impose a modern medical category on a condition that may or may not have been endometriosis, she also blames evil male doctors for failing to "discover" the disease earlier. In contrast, Stacie Colwell, the only contributor trained in his-

tory, provides a more complex picture of the variety of perspectives on venereal disease control held by public health reformers in the early twentieth century.

As a whole, *The Visible Woman* raises some provocative questions about the assumptions underlying contemporary science and medicine. The contributors are particularly critical of claims that medical and scientific imaging systems such as X-rays, ultrasound, and MRI offer completely objective, value-free images of the "natural" world. Although they agree that "a new technology, theoretical perspective, or scientific initiative may make material phenomena visible in ways that are exciting, useful, or more humane," they also argue that "visibility is itself a claim that must be carefully examined." The book could have used a subtitle that more accurately describes all of the essays in the volume. Nevertheless the editors have succeeded in their endeavor to "illuminate unseen connections" between medical technologies and dominant power structures (p. 3).

Notes

[1]. Eileen Nechas and Denise Foley, *Unequal Treatment: What You Don't Know About How Women are Mistreated by the Medical Community* (New York: Simon and Schuster, 1994).

[2]. A good overview of this literature can be found in the essays collected in Rima Apple, ed., *Women, Health and Medicine in America: A Historical Handbook* (New Brunswick, NJ: Rutgers University Press, 1990).

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