ABSTRACT: Human motives are varied, often hidden, and sometimes highly complicated, and this point applies with special force to persons’ motives to modify their bodies. The motives to undergo cosmetic surgery in order to change one’s appearance have, or at least seem to have, racial dimensions that are both particularly complicated and peculiarly obscure. In the case of cosmetic Asian eyelid surgery, at least six theories shed light on the explanation, analysis, and appraisal of this class of body modifications. The theories are here called benign explanation, performance theory, aesthetic oppression, internalized racism, Foucauldian care of the self, and complicity with a racist society. These theories, as articulated here, illuminate bodily alterations that relate to racial identity, especially in regard to minority races. Several of these theories make room for the exercise of freedom in the face of pressures to succumb to a seeming aesthetic ineluctability created by a dominant race.

I advance the thesis that surgical bodily modifications that alter phenotypic characteristics associated with racial identity in pursuit of aesthetics are amenable to no single analysis. Rather, at least six different theories are needed to explain, analyze, and evaluate these forms of body modification. Because these theories do different kinds of intellectual work, it is useful to consider all of them. The present inquiry yields a deeper understanding and critique of aesthetically oriented bodily alterations that affect phenotypic racial
characteristics than is currently available. Acquaintance with eyelid anatomy and surgery facilitates this understanding and critique.

I make no claim that these half-dozen theories are the only useful perspectives on Cosmetic Surgery, Racial Identity, and Aesthetics. Although some of the theories discussed here may rest, in part, on the view that race is a “social construction,” for various reasons I do not examine this view in any detail. Some hold that race is a social construction, but do not say what they mean by this term. Others hold this view and say something about what social construction means, but what they say is vague. Still others hold this view and say a great deal about what the term means, but they do not all say the same thing. At day’s end, I feared that to pursue the multitudinous byways of the race-as-social-construction view would lead to a loss of focus and unduly lengthen this essay.

Not Really Changing Race

Patricia, age 17, an American of Korean ancestry, had full upper eyelids and a broad, somewhat flat nose. At her urging, but with her mother’s consent and pocketbook, Patricia underwent cosmetic surgery to produce an upper-eyelid crease and a taller, thinner nose.

1. Compare, for example, the sociological analysis of Michael Omi and Howard Winant, Racial Formation in the United States: From the 1960s to the 1990s, 2nd ed. (New York: Routledge, 1994), with the communications-theory/social-cognition analysis of Jerry Kang in his “Trojan Horses of Race,” Harvard Law Review 118 (2005): 1489–1593, and “Cyber-race,” Harvard Law Review 113 (2000): 1131–1208. For reservations about the social-construction thesis, see, for example, John Hartigan Jr., “Is Race Still Socially Constructed? The Recent Controversy over Race and Medical Genetics,” Science as Culture, 17 (2008): 163–193. I lay aside, as only tangentially relevant, interconnections between race and ethnicity. Perhaps it is plausible to say that if Asians make up a race, Chinese Americans, Japanese Americans, and Korean Americans belong to different ethnicities within that race. Laura E. Gómez’s view that membership in a race is assigned by members of some other race, whereas membership in an ethnicity is chosen by members of that ethnicity, fails to draw an effective line between race and ethnicity (Gómez, Manifest Destinies: The Making of the Mexican American Race [New York: New York University Press, 2007], pp. 2–3, 143, 206n3). The race/ethnicity distinction need not line up with the assignment/choice distinction, such that race is always a matter of assignment by others and ethnicity is always a matter of choice. Members of the same race could assign, and perhaps sometimes have assigned, a subset of those members to lower-ranking ethnicities; and members of the same high-ranking ethnicity in a given society could choose, and perhaps sometimes have chosen, to regard themselves as members of a race that has a higher status in that society, rather than as members of an alternative race composed of lower-ranking ethnicities.

2. Patricia is a hypothetical person, as are Samantha, James, and Vivian later in the essay.

3. Newspaper accounts include Irene Chang, “For Asians in U.S., a New Focus on Eye Surgery,” Los Angeles Times, August 22, 1989; and Donna Kato, “The Eyes Have It and
What is going on with Patricia? Across time and place, people do things to their bodies to make them more attractive. Most people groom their hair and some get manicures and pedicures. Many women shave their legs, and many men try to cover their bald spots. Some people undergo liposuction to remove fat from hips or thighs and, in some countries, quite a few women obtain breast implants. What is distinctive about Patricia is that her bodily alterations modified, reduced, or eliminated certain physical characteristics that are statistically or stereotypically associated with being Asian, and they substituted features that are commonly associated with the Caucasian majority in the United States (see the appendix).

Patricia’s story raises issues about racial identity and aesthetics, and it prompts an investigation into how phenotypic characteristics associated with race relate to racial identity. For present purposes, I count at least blacks, Asians, and Caucasians (whites) as different races. Few claim that it is possible to change race, in the sense of what philosophers call “type-identity.” Not even the late Michael Jackson, who underwent many cosmetic procedures, was considered a black man who became white. And in common cases where individuals alter, by surgery or otherwise, some phenotypic characteristic that has racial associations, no one supposes that they are changing race. Instead, they are altering a feature that is taken to be a racial characteristic and emerging with an appearance that is less stereotypically associated with the race to which they belong (see section 1 of the appendix).

Many bodily alterations that affect racially associated phenotypic characteristics have been attempted. In the interest of depth, this essay focuses on the surgical alteration of the eyelids to produce a less stereotypically Asian appearance. There are two main procedures to accomplish this: one, called blepharoplasty, modifies the eyelids themselves; the other is epicanthoplasty, which modifies the inner...
corner of each eye to reduce or eliminate a half-moon-shaped fold of skin. Throughout, the focus is on the phenotypic rather than sociocultural aspects of race (see section 2 of the appendix).

This inquiry examines half-a-dozen different theories of racial identity and aesthetics in connection with Asian eyelid surgery. These I call: “benign explanations,” “performance theory,” “aesthetic oppression,” “internalized racism,” “Foucauldian care of the self,” and “complicity with a racist society.” This sextet does not consist of analyses that are all “theories” in the same sense; and although they are hardly identical, they are not wholly divergent either. My conclusion is that no single analysis explains all instances of Asian eyelid surgery. Put generally, for any given racially related bodily inscription, at least one of the six theories applies; and for some inscriptions, two or more apply.


7. Epicanthoplasties often produced excessive scarring, but surgical techniques developed within the last two decades seem to have better outcomes and may lead to more such surgery in the years to come (see the appendix, section 2). At present, blepharoplasties are far more common among Asians than epicanthoplasties.

8. In this context, explanation includes providing the reasons why the person engages in these surgical modifications, clarifying the reactions of others to them, and elucidating the meaning or meanings of these modifications. For a structuralist-semiotic analysis of meanings of this sort, see Stephen R. Munzer, “Bodily Inscriptions as Signs in Medieval Christian Piety and Aztec Rituals,” *Journal of Ritual Studies* 25:2 (2011): 37–51.
I have an explicit project and a subtext. The project is to deploy and assess a handful of theories for explaining and analyzing racially related bodily inscriptions. The subtext is normative in two ways. First, it offers some moral and political evaluation of the motives for these inscriptions. Second, it urges people to develop a psychological self that achieves critical self-awareness and exercises autonomy with regard to these inscriptions, an ethical self that responds to concerns for the body, and a virtuous self that transcends the bounds of beauty and race.

A preliminary puzzle remains: How did talk of identity arise in connection not only with race, but also with sexual orientation and gender? The next section answers this question as background for examining racial identity and aesthetics. This essay as a whole is multidisciplinary. The wellsprings of identity-talk in this context may lie in social psychology, yet this essay is not mainly a piece of social psychology. I merely use some social-psychological perspectives in the next two sections as a springboard for examining performance theory (chiefly a feminist or critical race enterprise), aesthetic oppression (influenced by feminism and critical race theory), internalized racism (a political position with roots in Marxism and Lacanian psychoanalysis), care of the self (Foucault), and complicity with a racist society (a critique aided by analytic moral philosophy). In point of technique, this essay reflects analytic philosophy more than any other discipline, at least in the sense that I aim to write clearly and analyze carefully.

Identity in the Social Sciences and Public Discourse

The term “social sciences,” as used here, covers not only psychology and sociology, but also anthropology and some forms of history. Among social scientists who write in English, the word “identity” became a popular term only in the 1950s. Identity as understood in philosophy particularly emphasized personal identity—that is, continuing to be the same person over time. Yet soon scholars began understanding identity in a looser, perhaps vernacular way as meaning sense of identity. A few writers in this early period, such as Will Herberg, speak of both identity and identification.


10. See ibid., pp. 911–912.

It is useful to contrast the work of Daniel Stern with that of Erik Erikson. Stern locates identity as it develops in the first several years of life of the infant, while Erikson, writing in the 1950s and '60s, locates it within both the core of an individual and the individual's culture. In the literature of social psychology in this earlier period, the chief controversy was between those who held that ethnicity is an immutable element in one's identity, and those who maintained that ethnicity is subject to change. Erikson allied himself with a strand in this latter group. A key development in the social sciences at this point was the emergence of ethnic identity as a species of identity worth examining.

These developments in the social sciences prompt the following question: Why did identity become so quickly a key term in American academic and journalistic social commentary? One reason was the preoccupation after World War II with the character of the United States as a nation. Another reason was the fact that the notion of identity seemed to many thinkers to be a link between the individual personality and the various social and cultural features that gave different groups their distinctive character. Thus “Who am I?” and “Where do I belong?” became important questions. A linkage approach to identity, which emphasizes both the core of an individual and the place of the individual within a larger community or culture, is quite evident in the work of Erikson. For whites and some minority groups who had voluntarily immigrated to the United States by the late nineteenth century, this approach might tally with academic and journalistic discourse. But the approach needs tinkering in the case of more recent immigrants, whose integration into any national community was, and sometimes remains, a work in progress. It also requires adjustment in the case of blacks, who were forced to become chattel slaves, and Asian groups, who were free though viewed, like blacks, as racially “Other.”

The vocabulary of identity as used in the social sciences and public discourse might seem even more important, and more problematic, now than it was earlier. Racial and ethnic identities have become,

15. See ibid., pp. 914, 926–928.
variously, more splintered and more mixed. Many people identify themselves as multiracial or multiethnic. Further twists emerge as one moves to accounts of sexuality and sexual orientation.

A good example of the phenomenon just mentioned is the discussion of identification by Eve Kosofsky Sedgwick. Central to Sedgwick’s account is a threefold distinction among identification-with, identification-as, and identification-as-against. In her brief formula, “to identify as must always include multiple processes of identification with. It also involves identification as against.” Sedgwick explicitly connects her project with that of some psychoanalysts. The relations implicit in identifying-with are, “as psychoanalysis suggests, in themselves quite sufficiently fraught with intensities of incorporation, diminishment, inflation, threat, loss, reparation, and disavowal.” There exists here, then, at least some connection with the concept of identification as first explored by Freud. But there is also a salient difference. For Freud, Lacan, and other psychoanalysts, identification is generally an unconscious process. For Sedgwick and some other writers on race, gender, and sexual orientation, identification can be either conscious or unconscious.

Of these varieties of identification, it is identification-as-against that seems most useful and important in the present context, for at least four reasons. First, it is often useful for members of both dominant cultures and subcultures to contrast themselves with others. The contrast holds each together. Second, this understanding of identification is apt to be strongest in the face of prejudice, oppression, or persecution. One can see this in the work of Gordon Allport on prejudice over a half-century ago. In prejudice, there is an in-group and an out-group. Thus to run it at least one way, the in-group will identify themselves as against the out-group. But perhaps the reverse also holds true; even within out-groups, microcosms of

17. Ibid., p. 61 (emphasis in original).
18. Ibid.
19. Later scholarship in law and psychology emphasizes implicit cognitive biases; see especially Kang’s “Trojan Horses of Race” and “Cyber-race” (both above, n. 1), together with the works he cites.
prejudice—say, in terms of shades of skin color—may appear. Third, identification-as-against can function as a sword: to say that you identify yourself as against certain groups can be a powerful vehicle both politically and socially. And fourth, in regard to Asian blepharoplasties, identification-as-against facilitates understanding with whom Asian individuals are contrasting themselves: Caucasians, or Asians who look less stereotypically Asian. These four reasons provide a starting point on linking identification-as-against with identity, and specifically with racial identity.

Benign Aesthetic Explanations

Let us bring this discussion of identity in the social sciences to bear on benign aesthetic explanations of Asian eyelid surgery. The reasons to be examined are explanations in the sense that they reveal, or try to reveal, something about Asian racial identity and choosing eyelid surgery. The explanations are plural. No one reason for choosing to have eyelid surgery applies to all Asians or all Asian Americans, or even to all Korean Americans, Chinese Americans, Japanese Americans, and so on. The explanations are aesthetic, in that they draw on views about what makes people prettier, more handsome, or more attractive. They are benign in the sense that they offer reasons for seeking surgery that are not particularly troubling as related specifically to race.22 These reasons could worry those who see vanity as morally or psychologically problematic; but I will disregard vanity unless it is racially driven. My conclusion is that the assorted benign aesthetic explanations, although helpful, contain cracks and fissures that require further examination.

Typical benign explanations of Asian blepharoplasties include the following:

1. Faces look prettier if there is an upper-eyelid crease.

2. Eyes look more “energetic” or “welcoming” if the upper eyelids have a crease. Caucasians without an upper-eyelid crease can, to some observers, look a bit tired or seem to have a flat affect.

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3. It is much easier for women to apply eye makeup effectively if there is an upper eyelid crease.

4. It is common among one’s family, friends, or socioeconomic class to get eyelid surgery—that is, within these groups, it is just something “one does.”

5. Getting an upper-eyelid crease deflects unwanted attention, because, for example, upper eyelids without a crease make the face look more “exotic” to Caucasian men.

The thinking behind this last explanation is not immediately obvious, but from some Asian women with whom I have spoken, the thought seems to be that eliminating this stereotypical feature diminishes the “Asian-ness” of their appearance to whites. Evidently, this reasoning has to be placed partly in the context of romantic relationships between Asians and whites.23

Nevertheless, these and kindred explanations reveal flaws under intellectual pressure. Even in the surgical articles, one can see some tap-dancing around an appropriate interpretation of what the ophthalmic plastic surgeon is trying to accomplish for the patient. Don Liu and Wen Ming Hsu, for example, say that it is “patronizing” to talk of the “Westernization of [the] Oriental eyelid.”24 Apparently, what they refer to as westernizing would be accomplished by the “plastic construction of an upper eyelid crease.”25 Nevertheless, they stress that the surgeon needs to understand and respond to the patient’s ideal of beauty.26 S. Amrith’s attitude seems slightly different: “if the surgical correction imposes an occidental look it must be considered a failure as the patients are extremely unhappy with the result.”27 Yet he adds that “it is essential to produce a lid crease at the end of the surgery that is aesthetically acceptable to the patient and does not violate his or her racial identity.”28 Amrith fails to


25. Ibid., p. 60.

26. Ibid., pp. 59, 64.


28. Ibid.
confront the obvious question: Might what is “aesthetically acceptable to the patient” turn out to “violate his or her racial identity”? Even if he ignores this question, some plastic surgeons do not.29

Divergent interpretations are evident in newspaper articles that appear in the United States. Nearly twenty-five years ago Donna Kato reported that Asian women are having not only eyelid surgery, but also rhinoplasties that produce a taller, thinner nose. She indicates that patients want “features compatible with most Western standards of beauty,” but “don’t want their ethnicity completely erased.”30 There are differences in attitude, she reports, among different Asian groups. Filipinos, she says, tend to be the most open about such surgeries, and Japanese the most private. She adds that “[t]he Chinese and Korean cultures tend to think it’s altering something sacred and feel guilty about making the changes.”31 It is worth asking whether the views Kato ascribes to Chinese and Korean Americans still hold, because views of fashion and aesthetics often change over time. Perhaps now there is less a sense of the sacred and a more typical ambivalence about liking the way one looks, but not disliking it enough to go under the knife. An article in the Los Angeles Times by Irene Chang concentrates principally on Asian blepharoplasties. She notes that plastic surgeons finesse the difference between looking better and looking American or Swedish.32 Twenty-three years after Kato’s article, Sam Dolnick reported that “double-eyelid surgery” is the most common procedure among Asians, quoting surgeon Steve Lee: “One of the traits of beauty is to have large eyes . . . and to get that effect you have to have double eyelids.”33

The alert reader will press on the interpretations just offered. Plainly, there is more going on from an aesthetic point of view than the surgeons acknowledge. Sometimes patients wish to look more Western, but not too Western. There may be both racial longing and feelings of shame. People have varied motives, either conscious or unconscious, for undergoing this kind of surgery. At the margin, the line between conscious and unconscious motives is blurry.

29. Adams, Everything Women of Color Should Know About Cosmetic Surgery (above, n. 22), pp. 75–81, turned away a young black prospective rhinoplasty patient partly on the ground that the “white” nose she wanted did not fit her face.
32. See Chang, “For Asians in U.S., a New Focus on Eye Surgery” (above, n. 3).
One position regarding such surgeries is that persons who undergo them can feel both a desire for beauty and a desire to look more nearly Western. These desires can produce tension if wanting to look Western is correlated with wanting to look beautiful, especially if some social privilege attaches to looking Western. Critical observers of the phenomenon of eyelid surgery among Asians might feel torn between acknowledging reasonable efforts on the part of individuals to make themselves look more attractive and regarding the particular way in which this end is pursued to be problematic, given that implicit social cognitions might be in play. Furthermore, a person’s interest in appearing less Asian or not too Western hardly makes the investment nonracial. Think back to the example of Michael Jackson: he might not have been able to become white in the sense that Brad Pitt is white, but it hardly follows that he was wholly disengaged from a project of lightening.

Some interpretations mix issues of aesthetics with issues of identity. In this context, it is important to consider both identity and the sense of identity. Likewise, it is important to consider whether having surgery of this type might express either identity or the sense of identity, and, further, whether having this sort of surgery might build the patient’s identity or sense of identity. Asian blepharopectomies are far more common among women than men. For women, beauty standards may seem all-encompassing. Twin pressures are at work here: being a woman, and being an Asian or Asian American. Racially related upper-eyelid surgery hinges on a point that is peculiar mostly to Asian or Asian American women and very few Caucasian women. Further, choices about bodily presentation can have implications for groups: if many Asians or Asian Americans choose to get eyelid surgery, their choices are likely to have aggregate effects upon the group and represent a broader social phenomenon.

Novelist Maxine Hong Kingston is a prominent critic of these cosmetic surgeries, saying that “[i]t’s a version of self-mutilation, worse than tattooing.” She remarks that culture “gives us many examples of Caucasian beauty or blond beauty but society does not teach us to look for our own beauty.” Kingston’s comment about self-mutilation may seem overblown, but there is something to her critique. Her insight is that societies, both Asian and Caucasian, have a

34. Qtd. in ibid.

35. Ibid. Professor Margaret M. Chin, speaking of eyelid surgery, voices a kindred sentiment more softly: “You [Asians] want to be part of the acceptable culture and the acceptable ethnicity, so you want to look more Westernized. . . . I feel sad that they [Asians] feel like they have to do this” (qtd. in ibid.).
responsibility to teach their members how to look for and appreciate different paradigms of beauty. Art educators have taught people how to see aesthetic value in Greek sculptures, Near Eastern Islamic designs, Eskimo sculptures, Renaissance paintings, African masks, Native American paintings, and so on. Education can play a corrective role by moving from variation in general aesthetic values across cultures to different paradigms of the aesthetics of the human body.

Realistically, though, the main action is likely to be in the popular media, not in university art courses. One can allow some room for objective beauty, while stressing that individuals’ perceptions of the beauty of artifacts and human bodies are culturally influenced and partly subjective. Unblemished skin and facial symmetry are plausible candidates for beauty standards that hold across a great many, if not all cultures. In contrast, many other phenotypic characteristics seem to be culturally contingent markers of human beauty. For example, upper eyelids with a crease are not always and everywhere the paradigm of facial beauty any more than are short noses or blue eyes. Some of the social and psychological pressures on Asian American women may ease with careful, serious attention to varied paradigms of facial aesthetics.

Performance Theory

The previous observations on identity and identification in the social sciences lead to the performance of identity in gender studies, which has implications for the performance of race in social contexts. Here, the most provocative writer is Judith Butler, whose book *Gender Trouble* has occasioned a great deal of comment. The book is written in a postmodern idiom, which some will find congenial and others mystifying and still others irritating. Although an effort to restate her thinking in plain English may not be successful, I will try.

Unfortunately, Butler uses the words “gender” and “sex” in a confusing, if not confused way. Perhaps it is possible to clarify what is going on by distinguishing among anatomical sex, “social” sex,
and sexual orientation. Butler is not, at least not very often, discussing anatomical sex.\textsuperscript{39} When she uses gender and sex she is ordinarily referring to social sex, which is, in part, a cultural construction. Similarly, she seems to use both “sex” and “sexuality” to refer to sexual orientation; her use of the terms “gender identity” and “sexual identity” exhibits a corresponding fluidity (or confusion).

Butler claims to offer a \textit{performative}, rather than a \textit{metaphysical}, account of identity, sex, gender, and sexual orientation. The basic line of thought goes like this: society is so set up that male heterosexuality is the norm. But to start from this norm entails that one cannot adequately understand either women (as a social sex), or lesbians, or male homosexuals. To understand any of them, she says, one must reject the “metaphysics of substance”—that is, one must reject the idea of a substantive person who turns out to have the attribute of being a man or a woman (social sex) or of being homosexual or heterosexual.

Yet, she continues, one need not embrace the idea that gender in any sense is a set of free-floating attributes. Rather, gender is “performative—that is, it constitutes the gender it purports to be.”\textsuperscript{40}

This line of thought is vulnerable to objection. First, it is not clear what it might mean to say that gender is performative. Let it be granted that, as a person matures, he or she encounters and internalizes various conceptions of social sex. As that person has various sexual experiences, his or her sexual orientation is likely either to crystallize or change. Even so, it seems that something undergoes these changes. True, a few philosophers have a “no-ownership” view of the self; that is, no underlying entity has experiences of thinking, feeling, doubting, or performing. Much controversy swirls over the issue of whether this view is even coherent.\textsuperscript{41} However, Butler’s view seems

\textsuperscript{39} One critic suggested to me that Butler is arguing that there is no such thing as “anatomical sex” prior to a set of ideas about what constitutes anatomical sex. Any such argument confuses objects in the world with concepts; the former existed long before the latter. A million years ago, there existed human penises, testicles, vaginas, ovaries, wombs, and so on. The objects that make up anatomical sex existed at that time. It may well have been much later before humans developed the concept of anatomical sex. Compare Ian Hacking, \textit{The Social Construction of What?} (Cambridge, MA: Harvard University Press, 1999), pp. 21–22.

\textsuperscript{40} Butler, \textit{Gender Trouble} (above, n. 37), p. 25.

\textsuperscript{41} David Hume’s skeptical position that the self seems to be a bundle of perceptions at least suggests the no-ownership view; see Hume, \textit{A Treatise of Human Nature} (1739), bk. 1, pt. 4, sec. 6, ed. L. A. Selby-Bigge (1888; reprint, Oxford: Clarendon Press, 1960), pp. 251–263. No-ownership theorists include Georg Lichtenberg and, possibly, Moritz Schlick. P. F. Strawson, in \textit{Individuals: An Essay in Descriptive Metaphysics} (London: Methuen, 1959), pp. 94–100, argues that the no-ownership theory is incoherent.
restricted to gender identity; namely, that no gender identity exists behind expressions of identity. She does not seem to hold that no identity at all lies behind such expressions. Her position appears to be that gender is the performing of actions that yield certain attributes. Social lines of gender coherence wrap these attributes together to keep them from being free-floating. Yet if gender attaches to socially expected performance, one then needs to ask what this performance attaches to. An obvious answer is that it attaches to performers—that is, to persons who behave in certain ways. In this case, the deep-down reason that gender attributes are not free-floating is that they attach to persons, not merely to socially expected performances.

Second, Butler's discussion of gender and self-identity is muddled. To say that someone is the same person over time is to say that he or she satisfies whatever criteria are necessary and sufficient for personal identity. But people do not generally suppose that becoming a man or a woman (social sex) or gradually discovering or building their sexual orientation disrupts personal identity. Even if they did, it still seems that something undergoes this change.

Third, to read Butler on gender more weakly yields a position that has much less intellectual punch. I have heard some suggest that by the metaphysics of substance, she means essential properties. For example, think about dancers and dancing. To dance perhaps constitutes a person as a dancer, but, let us suppose, any properties of the dancer that relate to dancing are nonessential. Similarly, to perform a gender perhaps constitutes the performer as a man or a woman, but being a man or a woman is not an essential property of the performer. This move hardly shows that all properties are nonessential. One could still argue, for example, that anatomical sex—being male or female, or maybe some third sex—is an essential property of particular persons. So all the move gets us is the modest claim that, because gender is social sex and is perhaps socially constructed in manifold ways, gender is not an essential property of persons.

Finally, Butler goes wrong on understanding others—that is, whether those who differ in significant ways from a particular person are even intelligible to that person. Suppose that I am a heterosexual man. I may find women, lesbians, and gay men puzzling, even though some heterosexual men may puzzle me even more! I may find it hard to imagine what the inner experience of women, lesbians, and gay men is like. Yet I do not find them to be unintelligible, and I certainly do not conclude that they fail to be persons.

42. See Butler, Gender Trouble (above, n. 37), pp. 16–17.
There are specific difficulties with the performative account of gender, the view that gender is a stylized repetition of acts.\textsuperscript{43} Butler takes this account to be nonfoundationalist\textsuperscript{44} and to conflict with what she regards as the Western subject/object dichotomy.\textsuperscript{45} Of course, confident assignment of a person to a particular gender, where that means social sex, can be undermined by such practices as cross-dressing. Here, Butler is right to stress that gender is a more complicated matter than is sometimes thought.\textsuperscript{46} Still, it does not follow that the “inner truth of gender is a fabrication.”\textsuperscript{47} For one thing, truth applies to statements or propositions, not to concepts, and gender is a concept. For another, once one has discerned the gender of a particular person, one can state that that person has such-and-such gender at a certain time. Persons can change, so one may need to state that the person has a different gender at some later time. Furthermore, whatever it is that performs the “stylized repetition of acts” that constitute gender seems, for all Butler has shown, to be a subject that has at least some nonessential properties. If so, Butler has not overcome the so-called Western subject/object dichotomy. Neither has she shown how a nonfoundationalist account of gender is possible, for if gender attaches to socially expected performances, it ultimately must attach to performers who serve as a foundation.

One way to attempt to rehabilitate Butler’s theory is to suggest that it is politically, rather than philosophically, driven. Her concern with the politics of identity bottoms itself in a concern for various groups that are on the margins of society. For some purposes, this concern includes, in her view, lesbians, gay men, racial minorities, and, perhaps, women. Consequently, in trying to understand Butler, one must keep in mind that she starts from a political perspective, from which she draws certain philosophical conclusions. Furthermore, Butler may not use the word “unintelligible” in the way that most analytic philosophers use it, by which they mean that something is incoherent. For Butler, to say that something is unintelligible is to say that it is not readily understood by a certain group of individuals (say, heterosexual men). Accordingly, in her

\textsuperscript{43} Ibid., p. 140.
\textsuperscript{44} Ibid., p. 142.
\textsuperscript{45} Ibid., p. 144.
\textsuperscript{46} Some of the complexities are illustrated in Jennifer Blessing, \textit{Rrose is a Rrose is a Rrose: Gender Performance in Photography} (New York: Guggenheim Museum, 1997).
\textsuperscript{47} Butler, \textit{Gender Trouble} (above, n. 37), p. 136.
discussion of what is “intelligible” and of the “cultural matrix,” she hopes that the reader will challenge a dominant political paradigm. She aspires to empower her lesbian and gay male readers. She hopes that heterosexual readers will see the limitations of their perspective on the world. Consequently, to the extent that Butler's project is primarily political rather than philosophical, her conception of gender is plastic. There is no truth about gender, she might say, in the way that there is truth about gravity.

To emphasize the role of the political valence of identity in Butler's thought is hardly to agree with her. One might grasp that a certain political dimension dominates her thinking, but disagree that gender is illuminatingly understood as performative or that the “metaphysics of substance” has to be rejected. Even Butler's political observations on gender are limited. *Gender Trouble* largely neglects motherhood, whether in a biological context or a sociocultural context. It gives scant attention to bisexuality or to those whose sexual attraction is to children or to material objects, such as shoes. Neither does *Gender Trouble* offer much illumination on sexual attraction. What is it that makes attraction sexual rather than nonsexual? Is the structure of heterosexual desire the same for men and women? Is the structure of sexual desire the same for heterosexuals as it is for homosexuals? Butler's account sheds little if any light on these questions, yet for all its shortcomings it is a start on seeing why racially related bodily inscriptions may not be benign aesthetic changes.

Some scholars who practice critical race theory adapt Butler's account of gender performance to the performance of race in various social contexts. The best of this work, in particular that of Devon Carbado and Mitu Gulati, does not slavishly follow Butler. Often

48. Ibid., p. 25.

it does not explicitly endorse her nonfoundationalism or her rejection of the so-called Western subject/object dichotomy. Instead, it absorbs her emphasis on performance and extends it to racial minorities in the workplace, with specific reference to the intersection of race, gender, and sexual orientation.

Consider anew Patricia, the 17-year-old Korean American, who is now ready to enter college with an upper-eyelid crease. Consider also her 30-year-old sister Samantha, who is an investment banker and has also had eyelid surgery. No fellow student of Patricia or colleague of Samantha would mistake either for a Caucasian. Yet their modified eyelids, together with increased ease in applying typical sorts of eye makeup, enable them to present themselves differently at school and work from the way they otherwise would have. Neither may now seem exotically Asian to Caucasian men. Perhaps their altered eyes allow them to perform their roles at school and work in ways that mark them out as less stereotypically Asian. If they so present and perform their Asian identity, or Korean American identity, even as they might assimilate more readily into the mainstream, they may distance themselves from Asian Americans who have not undergone eyelid surgery and disapprove of the practice. Of course, eyelids do not stand alone, any more than does a grin on a real Cheshire cat. Patricia and Samantha perform their Asian and Korean American identity in many other ways: for example, dress, speech, work habits, politics, dating, and so on. They may also perform other dimensions of their identity as human beings that have little or nothing to do with race, such as their religion or their athletic interests. And I am certainly not claiming that all white men will react in the same way to Asian women who have had eyelid surgery.

Some of my male colleagues, both Asian and non-Asian, have objected that eyelids are too small a factor to drive exoticism. I think that this objection underplays the significance of eyelid surgery in several ways. To some white men, blepharoplasty alone may diminish exoticism. Also, my male colleagues seemed to be out of touch with the way that an eyelid crease guides the application of eye makeup. Moreover, if an Asian woman also has an epicanthoplasty, the combined effect of all three might make her appear less exotic to white men than she did before. Finally, in heterosexual dating situations, one must be attuned to the role that eyes play in the dance between the sexes.

Performance theory can make Asian blepharoplasty seem rather more problematic than did the benign explanations considered earlier. To perform is, in this context, to choose to present oneself in a certain way. To enlist the aid of eyelid surgery in this choice will,
to some, seem undesirably strategic or even manipulative. Insofar as getting an upper-eyelid crease partly erases phenotypic characteristics of race, it appears pro tanto to deny, conceal, or blunt one’s race. A signal contribution of critical race theory lies in its emphasis on the intersection of race, gender, and sexual orientation. Patricia and Samantha, as Korean American women with unspecified sexual preferences, manifest themselves to others—both Asians and non-Asians—in race-conscious ways.  

A deeper point lies behind the bearing of performance theory on racial identity and aesthetics: namely, one must take into account not only performance as a more or less strategic choice about how to be and act in the presence of others, but also the effect of performance on the development of a full-fledged personality. Some individuals might try to take the sting out of the previous paragraph by saying that performance is not always a conscious decision or a product of choice, let alone a strategic move. Performance results from manifold influences, and often people are not aware of their behavior and what lies behind it. This maneuver, though, exchanges the frying pan for the fire. Insofar as performance is given this subliminal, reactive status, the performer may find herself with a psychological makeup of which she is less aware than other people are of theirs. Her sense of self risks being, or becoming, shallow and unexamined. Should this risk materialize, Asian eyelid surgery threatens to become more problematic still, as I will show in the following two sections.

Even if Patricia and Samantha do not intend to communicate anything racial, or anything at all, by their eyelid surgeries, that fact would not exhaust their performance identity. Other people, be they Asians or non-Asians, could still attribute intentions to them, and thus interact with them based on those attributions. As with stage actors, the performance is only partly a function of their intentions; it is also a function of others’ interpretations, including others’ ascriptions of intentions to Patricia and Samantha.

50. Compare Kaw, “Opening Faces” (above, n. 6), who makes the intersectional point that the burden of measuring up to the ideal of beauty in American society falls heavily on Asian American women: as Asian Americans, because they belong to a minority, and as women, because society bombards them with the idea that beauty reigns supreme.

Aesthetic Oppression

One way of developing this line of thought distinguishes among the options, in the United States and other Western countries, available to whites and nonwhites in regard to physical characteristics that are statistically or stereotypically associated with nonwhite races. The distinction leads to a view that one might call “aesthetic oppression”: the dominant racial group imposes its aesthetic standards so as to constrain the options of minority racial groups. The imposition comes largely from the mainstream media, yet occasionally the law plays a key role by, for example, regulating hair in special contexts.


53. A law that is racially discriminatory on its face would violate the Equal Protection Clause of the United States Constitution. However, laws that are facially neutral but have a disproportionate impact on a racial minority may, or may not, be held unconstitutional by the courts. The following examples relate to Asians, African Americans, and Native Americans: 1) A San Francisco ordinance of 1876 declared that every male imprisoned in the county jail was to have his hair cut or clipped to a uniform length of one inch from the scalp. Ho Ah Kow v. Nunan, 8 F. 195, 12 F. Cas. 252 (No. 6,546) (C.C.D. Cal. 1879), held that the ordinance was unconstitutional under the Equal Protection Clause as applied to a Chinese man whose queue was cut off, which plunged him into disgrace. The intent behind the ordinance was not benign, and it was known in the community as the “Queue Ordinance.” 2) Various prison systems require that inmates’ hair not be too long. Enforcing the requirement makes it harder for inmates to conceal contraband or to disguise themselves in the event of escape. Rastafarianism is a religious sect that developed among black people in Jamaica, but now includes some African Americans. A central tenet is that men should not cut or comb their hair, but instead allow it to grow in ropy, matted strands called dreadlocks. The courts are divided over whether such prison regulations are unconstitutional, under either the Free Exercise Clause of the First Amendment or the Equal Protection Clause, as applied to Rastafarian men in prison. Compare Scott v. Mississippi Department of Corrections, 961 F.2d 77 (5th Cir. 1992) (upholding the prison hair-grooming regulation), with Reed v. Faulkner, 842 F.2d 960 (7th Cir. 1988) (vacating the judgment of the district court in favor of the prison officials and remanding the case for further consideration). 3) Some public schools require that students’ hair not exceed a certain length. These requirements can preclude Native American students from wearing their hair in long braids in accordance with tribal tradition, culture, and religion. The legal validity of such requirements is controversial, although many courts have sided with the schools.
John Kang articulates this line of thought. His thesis is that white people and people of color are differently situated in regard to using their bodies as means of expression. White people have preferences and can make a choice in deciding how to present themselves. People of color, even if they have preferences on this matter, lack such a choice; they must either conform to or reject the aesthetic values of the dominant group. Because of social domination, large Caucasian eyes are seen as normal, objective, and natural. Contrariwise, says Kang, the eyes of Asians and Asian Americans are seen as abnormal, subjective, and deviant. At root, Asians and other minorities have a sense of aesthetic inferiority and do not allow themselves to be moved by considerations of beauty that either derive from their own race or are independent of race.

In at least one passage, Kang presents his thesis in an almost definitional way. But he cannot establish his thesis at the drop of a definition, and it would be uncharitable to ascribe to him a belief that he can. So it is necessary to consider what the arguments and evidence establish. A difficulty with Kang’s thesis is that he overemphasizes the options available to individuals qua members of various races, and underemphasizes the variation in options available to individuals who belong to one race or another.

The overemphasis comes out in the statement of his thesis. White people, he indicates, have a range of options, and their acting on a “preference” in deciding how to express themselves using their bodies is a matter of “choice.” Asian Americans (and blacks), he says, “lack such a choice.” Their options are binary—either to conform or to reject. There is something to this thesis. Insofar as whites have more power and already embody the phenotypic norm to some degree, they might experience less tension in deciding how to present themselves physically—and it is just the opposite for Asian Americans. All the same, the differences between minority races as

Compare New Rider v. Board of Education, 480 F.2d 693 (10th Cir. 1973) (upholding the school regulation as applied to Pawnee students despite constitutional and statutory challenges), with Hatch v. Goerke, 502 F.2d 1189 (10th Cir. 1974) (holding, in part, that due process entitles Arapaho parents of Arapaho students to a hearing before such students may be expelled for violating rules pertaining to hair length).


55. Ibid., p. 286 (emphasis in original): “[T]he thesis . . . is that with respect to using one’s body as a means of expression, white people have preferences in deciding how to express themselves, whereas people of color lack such choice and must resign themselves to either conforming to or rejecting the dominant group’s aesthetic values.”

56. Ibid. (emphasis omitted).
groups and whites as a group are not nearly so sharp as Kang claims. Empirical support for such a claim is wanting.

Additionally, Kang underemphasizes the extent to which individuals vary in their psychological capacity to make decisions regarding the bodily performance of racial identity, no matter what race they belong to. Some Asian Americans see and act upon options other than just conforming or rejecting, such as selecting some form of body modification—say, bodybuilding or piercing—that has no close relation to race. Some whites might feel pressure to achieve some phenotypic standard of white beauty precisely because they already embody the norm to some degree, and thus its full embodiment may seem to be an achievable goal. A white woman might get a “nose job” to advance her career as an entertainer or to look less stereotypically Jewish.57 At the same time, I do not claim that the social meaning of particular phenotypic traits is purely statistical. Assume, for the sake of argument, that equal percentages of whites and blacks have an upper-eyelid crease and lack an epicanthal fold. To the extent that Asian women who get eyelid surgery in order to look less stereotypically Asian and more like members of some other race, it does not seem plausible that half of these women want to appear more nearly white and the other half more nearly black.

Kang errs in presenting conforming or rejecting as a digital on-off switch. Recent literature indicates that individuals frequently seek something that is nuanced. A 2007 article in the Boston Globe reported that in “recent years the dominant aesthetic standard in American society has moved away from the blond, blue-eyed Caucasian to a more ethnically ambiguous type. . . . Today’s beautiful woman comes in many colors, from ivory to cappuccino to ebony . . . and some white women [have got] gluteal augmentation, or butt implants.”58 More than four years later, the New York Times reported that a plastic surgeon in a Dominican neighborhood in Manhattan said that “[m]y patients are proud of looking Hispanic. I don’t get patients who want to obscure their ethnicity.”59 Italia Vigneiro, age 27 and a Dominican patient of this doctor, was considering a buttocks lift to attain “the silhouette of a woman. . . . We Latinas define ourselves with our bodies,” she said. “We always

57. See, respectively, the well-known case of Sullivan v. O’Connor, 363 Mass. 579, 296 N.E.2d 183 (1973) (botched rhinoplasty), and Gilman, Making the Body Beautiful (above, n. 3), pp. 88–91, 119–122, 130–137.
have curves."\textsuperscript{60} Although these quotations might not reflect typical preferences, the situation of racial and ethnic minorities seems more complicated than Kang allows.

Further appraisal of Kang’s thesis requires some grasp of Asian American identity and possible conflicts engendered by it. Here, the emphasis is on Asian Americans as members of minority populations in a predominantly Western culture. In question is not what philosophers call “token-identity,” but rather a grasp of a certain sort of type-identity—namely, “social identity.”\textsuperscript{61} For present purposes, social identity can be understood as “that part of an individual’s self-concept which derives from his [or her] knowledge of his [or her] membership of a social group (or groups) together with the value and emotional significance attached to that membership.”\textsuperscript{62} Thus understood, social identity includes both phenotypic and sociocultural aspects of race. In the case of Asian American identity within the context of dominant Western cultures like that of the United States, identity is apt to be shaped by a range of racial and ethnic factors and the treatment of Asian Americans by other groups in society.

Social psychologists have devised various models for illuminating the racial and cultural identity of minority groups.\textsuperscript{63} One model distinguishes five stages that members of a minority group might go through as they endeavor to understand themselves, their culture, the dominant culture, and the various relationships among all of these. The stages are conformity, dissonance, resistance and immersion, introspection, and integrative awareness\textsuperscript{64} and are listed in putatively increasing order of developmental progress. The psycho-

\textsuperscript{60} Ibid.

\textsuperscript{61} Compare Wetzel, \textit{Types and Tokens} (above, n. 4).


\textsuperscript{64} See Sue and Sue, \textit{Counseling the Culturally Different} (above, n. 63), pp. 128–142. These stages hardly need be confined to racial minorities; they could also apply, for example, to linguistic and religious minorities.
logical history of individual Asian Americans, however, may, in fact, not proceed in any such neat and orderly fashion: different Asian Americans may go through these stages in different ways, some may skip certain stages, and others may go through stages not listed here; some individuals may spend longer periods of time in some stages than in others, and some may find themselves going through the same stage more than once.65

In this five-stage model, some individuals will emerge from the resistance and immersion stage. This stage is one in which individuals begin to identify strongly with their particular Asian American culture and reject the values of the dominant group. They are likely to perceive the dominant society as the source of all problems, and evidence of racism is acutely felt and actively sought. Individuals may also feel guilty for having previously acted negatively in regard to their own group, and therefore focus attention on appreciating the history and values of their ethnic subgroup.66 In this stage of resistance and immersion, Asian Americans commonly no longer see the norms and values of the dominant group as valid. They might begin to stress feelings of pride in their own cultural heritage and a sense of commitment to and camaraderie with their own racial or ethnic group, and then, perhaps, to and with other minority racial or ethnic groups.

If this model has some normative merit, it seems desirable from the standpoint of individual autonomy to move to stages of introspection and later of integrative awareness. For me, autonomy is hardly all-or-nothing; there are degrees to which persons have the psychological capacity to be self-governing. In the introspective stage, individuals come to feel discontent with group views and start to feel more autonomous and comfortable with their own sense of identity.67 At the stage of integrative awareness, individuals may come to see aspects of different ethnic groups, as well those of the dominant society, more appreciatively. They may realize that all phenotypic attributes and all cultures have positive and negative features. Such a realization is entirely consistent with a desire to eliminate racism, prejudice, and discrimination on the basis of bodily appearance. The point of this last stage is not to become


66. See also Atkinson, *Counseling American Minorities* (above, n. 63), p. 31.

67. Ibid., p. 32.
more integrated into the dominant culture, but for individuals to become more integrated within themselves.

By no means do I think that Kang is the sole contributor to views of aesthetic oppression, for many feminist theorists were the first to forcefully articulate these views. Among feminist scholars, the work of Susan Bordo and Kathy Davis is especially prominent. Bordo’s book *Unbearable Weight* made a substantial impression on thinking about the ubiquitous pressure on women to conform to one or another of various ideals of beauty.68 Davis, in several books, elaborates a view that differs in a key way from that of Bordo.69 In a social order in which women’s options are limited, Davis suggests that “cosmetic surgery can, paradoxically, provide an avenue toward becoming an embodied subject rather than an objectified body.”70 Bordo, though wary of the discourse of equality that can blunt differences of gender, race, class, and ethnicity, perhaps allows for a larger degree of choice as far as women and cosmetic surgery are concerned. If this characterization of their views is correct, then the emphasis on autonomy in this essay puts me closer to Bordo than Davis.

Yet important as their contributions and those of other feminist thinkers are, they do not discuss in detail racially related bodily modifications. Bordo is keenly aware of the phenotypic subtexts of race and ethnicity, but touches upon them mainly from a theoretical perspective, rather than from cosmetic surgery.71 Davis spills only slightly more ink than Bordo on race and cosmetic surgery.72 To forestall misunderstanding, I am not taking issue with either Bordo or Davis on their respective projects. I point out only that for the project of this essay, the work of Carbado, Gulati, Jerry Kang, Susan Bordo, Kathy Davis, and many others is crucial.

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72. Davis, *Reshaping the Female Body* (above, n. 69), pp. 2–3, 21, 40, 51–52. Davis, in *Dubious Equalities and Embodied Differences* (above, n. 69), pp. 82–85, 87–103, is sensitive to identity issues and racially related cosmetic surgery, yet she spends too much time on Michael Jackson, who must be the most atypical case in the world of racially related bodily inscriptions, rather than on the wide variety of these inscriptions. For her response to Bordo, see ibid., pp. 9–14.
John Kang, and some other theorists of race is more helpful. Feminist work produced by white women and white men is less central to the main themes of this essay.

**Internalized Racism**

Internalized racism includes discrimination against or devaluation of individuals of a given race $R$, because of physical characteristics that are statistically or stereotypically associated with $R$ by members of $R$ themselves. One form of devaluation is aesthetic, and one form of aesthetic devaluation is the elimination, reduction, or masking of these characteristics. If $R$ is black, the characteristics might include dark skin, thick lips, broad noses, and tightly curly hair. If $R$ is Asian, the characteristics might include an epicanthal fold and the absence of an upper-eyelid crease. The internalized racism theory, then, holds that Asians and Asian Americans might undergo cosmetic surgery to produce an upper-eyelid crease or to reduce or eliminate an epicanthal fold so as to appear less stereotypically Asian.

The present examination does not require specifying a mechanism for internalized racism. Perhaps there are many different mechanisms. Yet the very expression “internalized racism” suggests that something outside is brought inside. So Asian Americans might experience one or more of the following: seeing pictures of Caucasian models and film stars, all of whom have upper-eyelid creases; or being referred to as a “slant”; or being taunted in the schoolyard by white classmates who mockingly use their index fingers to elevate the outside corners of their eyes. These external perceptions are then brought inside by some pattern of thought that aesthetically devalues upper eyelids that lack a crease. The thought pattern might be: it is normal to have an upper-eyelid crease and deviant to lack one; or it is ugly to be “slant-eyed”; or it is no surprise that others mock my eyes, for they are indeed objects of derision. Having now internalized the norm that an upper-eyelid crease is normal and attractive, Asians and Asian Americans may consequently long for one and obtain it through plastic surgery. This internalization of a racially related aesthetic norm is akin to what Bernadette Wegenstein calls the internalization of an aesthetic gaze.

73. A Korean girl who was adopted by a white couple in the United States uses the term “internalized racism” of herself at age 32 in Barb Lee’s documentary Adopted (Point Made Films, 2009). I thank Bernadette Wegenstein for bringing this film to my attention.


Jacques Lacan’s distinctive and initially somewhat perplexing analysis of desire offers one way to deepen understanding of internalized racism. If commonsense psychology and most forms of psychoanalysis recognize that people sometimes have desires that conflict, Lacan goes farther by claiming that subjects are always split or fractured. The divided Lacanian self implies that no one desires what he or she wants, or what other people want, but only what he or she “wants as Other.” For this reason, desire is always radically torn and problematic.

If Lacan’s analysis is sound, it illuminates the choices of racial minorities to elide physical characteristics associated with their own races, and to substitute features commonly associated with the white majority. For instance, a young Asian American woman who elects surgery to create an upper-eyelid crease does not choose on the basis of a desire for what she wants. Neither does she desire what someone else—say, a Caucasian—wants. She desires what she wants as Other. For Lacan, the Other is, roughly, a preexisting set of public rules that mediates between the mind and the world. In the present context, the woman’s desire cashes out as a want generated by a normatively powerful ideal of white beauty that she constructs in the imagination, whether or not she is aware of doing so. A Lacanian analysis, then, offers a deeper understanding of how and why racially driven bodily modifications are intensely problematic.

The experiences that lead to internalized racism do not, however, all stem from the white majority. Sometimes they come from other members of R. For instance, an Asian American woman might experience one or more of the following: overhearing her father say how pretty her sister looks, who happens to have an upper-eyelid crease naturally; or seeing Asian American men give more attention to Asian American women who have had upper-eyelid surgery; or being complimented by her mother on how energetic she looks after having had upper-eyelid surgery. These experiences might then be brought inside and result in such thought patterns as the following: my father likes my sister better than me because of the way her eyes look; or I would draw more attention from men if my eyes were different; or I have finally secured a compliment from my mother, even though in other respects she criticizes me severely. Thus fellow Asians or Asian Americans can play a role in creating a desire for an upper-eyelid crease.

These are only possible external perceptions and thought patterns. Although internalized racism can produce conscious self-loathing, often its effects are muted. Consider the remarks of Jamie, a 20-year-old Asian American college student who underwent eyelid surgery: “I never thought of it [the surgically altered appearance] as looking more white, just feeling more accepted by society. You look at these magazines and celebrities like Britney Spears. Where are the flat noses and Asian features? There are none. Maybe this will give me confidence.”

Differences abound between internalized racism and the previous theories. For instance, benign aesthetic explanations are untroubling and not especially probing. In contrast, internalized racism is quite troubling and rests upon a more nuanced picture of human motivation.

Performance theory is theoretically subtle and yields a problematic picture of racially tinged bodily alterations. As presented, it sometimes takes performance to be a self-conscious, sometimes strategic choice. In contrast, internalized racism holds that racially driven bodily alterations are sometimes subliminal, reactive, or unawares. It is theoretically subtle in different ways from the subtleties of performance theory. At least one subtlety of internalized racism lies in its description of the process by which aesthetic standards are brought in from outside and then adopted. A theory of aesthetic oppression, at least in the form advanced by John Kang, gives members of a racial minority just two options: either to conform to the dominant group’s aesthetic values, or to reject them. Internalized racism, by contrast, allows for many options. Moreover, deciding on an option can be a choice by members of racial minorities and rest upon their preferences.

These various theories do not occupy watertight compartments. They offer broadly different although partly overlapping explanations and analyses of why racial minorities sometimes seek to alter physical characteristics that are statistically or stereotypically associated with, say, being Asian or black, and to substitute stereotypical or statistically common Caucasian features for them. The assessment of these theories involves various factors, among which are whether a theory is superficial or probing, cobbled together or assembled with care, spotty or complete, and dismissive of or attentive to race.

To combat internalized racism, one can make use of the strategy articulated at the end of the treatment of aesthetic oppression. For racial minorities, introspection and integrative awareness improve

the chance of making autonomous, self-conscious choices about grooming, cosmetic surgery, and other aspects of bodily presentation. To the extent that a possible choice stems from internalized racism, they are more likely to be alert to what is happening and to avoid that choice. More broadly, insofar as racist beliefs and aesthetic devaluations have crept into the thinking and behavior of minorities, minorities have a key role in undoing internalized racism. By no means do members of the white majority get off the hook. They need to avoid the taunting and the deprecating remarks that can fuel internalized racism. To the extent that control of the media lies largely in the hands of whites, they must do their part in correcting aesthetically unfavorable images of minorities and supplying different, favorable images.

Becoming aware of the existence of internalized racism is a step, although not the only or the last step, toward emancipation for racial minorities. Ideally, this step involves critical self-awareness. It does not seem productive for minorities to say or suppose, in the manner of John Kang on aesthetic oppression, that they lack choices, and that white people have unconstrained choices. To think in this way might foster a sense that people of color can do little to help themselves. Such thinking ignores the facts that most choices are constrained to a greater or lesser degree, and that the degree of constraint does not have to march in lockstep with race. If so, the heart of the problem is not that racial minorities lack choice. Instead, everyone, including members of racial minorities, should be sufficiently self-aware to examine and perhaps criticize choices in regard to racially related bodily inscriptions. Part of what is involved is examining and perhaps criticizing the choices of others. But more importantly, it requires examining and perhaps criticizing one’s own choices. An Asian or Asian American who after careful thought can honestly say “I chose unwisely in getting eyelid surgery two years ago” or, differently, “I realize that my choosing to get eyelid surgery is in no way selling out my race” is well on the road to critical self-awareness.

The road need not end there. A psychological self attains critical self-awareness and exercises autonomy by choosing or refusing, among other things, eyelid surgery without regard to race. All else being equal, people tend to be happier and live more productive lives when they are not overly burdened with issues of facial beauty and racial identity. Another notion of self is also pertinent here—namely, a virtuous self that transcends the bounds of beauty and race. Virtuous people cultivate moral characteristics and humane values that have no connection to facial features or racial identity,
save insofar as considerations of justice and interpersonal sensitivity require them to be aware of certain forms of injustice and discrimination. In most other respects, however, the virtuous self sheds preoccupation with bodily aesthetics and race. The characteristics and values include courage, honesty, justice, temperance, humility, love, friendship, aid to those in distress, and avoiding harm to others. In no way, then, am I saying that a virtuous self is a raceless self. My point is rather that most of the characteristics we ascribe to human beings and consider virtues are not in and of themselves racial characteristics. Nonetheless, some ways of acting courageously, honestly, helpfully, and so on are responses to racial injustice.

One can, of course, imagine a society that has different races, with different associated phenotypic characteristics among other things, but is devoid of racial injustice and racial discrimination. In this imaginary society, alterations of racially related phenotypic characteristics could still occur. But they might sink into triviality. They might carry no more risk to the psychological self than, say, a woman’s dying her hair red, then brunette, then black, and so on. Yet even were this so, the racially related bodily alterations would still be open to scrutiny by the virtuous self, which might criticize them as vain or light-minded.

The Care of the Self

This heading echoes the title of the third volume of Foucault’s history of sexuality. There care of the self (heautou epimeleisthai, cura sui, souci de soi) has a semi-technical meaning: the development of an art of living (technē tou biou) that responds to embodied selves who are, or are becoming, ethical agents. The forms of care (askēses) include attention to our bodies. Foucault’s understanding of the ethical has little to do with ascetism as self-abnegation or with moral theories of right or wrong acts, such as consequentialism or deontology. His understanding laps up against virtue ethics, but it is not a theory of virtue in the Aristotelian or Thomistic tradition. Unlike Kant, who makes room for duties to oneself, Foucault views care of the self fluidly as attention and responsiveness to one’s self, which includes “the ethics of pleasure.”

Unfortunately, Foucault’s remarks on the care or cultivation of the self are interlarded with so many quotations from Greek and Roman philosophers, as well as some Christian thinkers, that his
own normative views are hard to discern. This care is both personal and social, correlates with some medical thinking and practice, and deals with both the well and the ill body across the life cycle.80 If one must care for oneself within a system of power relations, this watchful ethical concern for one’s body nevertheless has, and depends on, an underlying freedom of the will.81 The context of Foucault’s remarks reveals preoccupation with sexual pleasure and, to a lesser extent, with differences between male and female bodies—but he says virtually nothing about race.82

Of contemporary writers on the body and racially related cosmetic surgery, Cressida Heyes may be the most prominent articulator of a Foucauldian position.83 Heyes insists that changing sex differs from changing race.84 Gender Identity Disorder (GID) is a DSM-IV-TR classification.85 There is no such classification for a putative “racial identity disorder” (RID).86 “Sex-gender,” argues Heyes, “is essentialized as a property of the individual’s body, while race is essentialized with reference to both the body and ancestry.”87 Surgery, hormone therapy, and other treatments might enable someone to change sex and/or gender. Still, no related body modifications could enable someone to change race, even if it allowed someone to pass as a person of a different race, for that person’s race is partly a matter of ancestry.88

Heyes makes an intriguing case, but I question some of her arguments. First, it is partly adventitious that GID is a psychiatric clas-

80. Ibid., pp. 50, 54, 56, 58.
82. But see ibid., pp. 285, 286, on one’s “appearance” being visible to others and on not being a slave “of the people around you,” which could bear on the self-presentation of one’s race.
86. Heyes, “Changing Race, Changing Sex” (above, n. 83), pp. 275–278.
87. Ibid., p. 267. Heyes’s criticisms of Bonnie Morris, Christine Overall, and Janice Raymond, who in different ways analogize race and sex, are largely effective (ibid., pp. 268–270).
88. Ibid., pp. 267, 270–274.
sification, but RID is not. It seems unlikely that she would change her position if the American Psychiatric Association had recognized the latter, but not the former. Second, Heyes oscillates among sex, gender, and sex-gender. Sex is biological; gender is social; and sex-gender seems to be either a hybrid category or a hyphenated term for sex and/or gender. Changing gender is both logically and practically possible. Changing sex is, I think, logically possible, but right now it is not practically possible (unlike passing as a member of a different sex). Third, Heyes seems fuzzy or confused on ancestry. “I will show,” she says, “that the belief that an individual’s racial identity derives from her biological ancestors undermines the possibility of changing race, in ways that contrast with sex-gender.”89 Later, she claims to have shown that “race is taken to be inherited in a way that sex is not.”90 Suppose that James is almost entirely phenotypically white, that in growing up he plays about equally with whites and blacks, and that having noticed he has one or two phenotypically black characteristics he begins, at age 18, to think he is black. Both parents who have raised him are phenotypically white. When James attains age 21 they reveal that not only is he adopted, but that his biological parents are phenotypically black. Because James’s “immediate forebears are not white,” his belief that he is black does not, as Heyes says, “risk being unintelligible.”91 I suspect that the relation between phenotypic traits and ancestry needs clarifying in ways that space constraints preclude here.

Despite these reservations, Heyes helps to unpack Foucault’s ethic of care of the self. She identifies some themes that might aid individuals, including people of color, in deciding which bodily modifications are acceptable.92 Resist social pressure to “normalize” your body. Do not become a dupe of a racial hierarchy. Revisit the history of your own bodily self-image and perhaps build an alternative genealogy. Be open to a nonteleological becoming with respect to your body over the life cycle. Exercise your freedom in changing your body. Do not allow an artifactual, shared bodily identity to be created for you by others. Generate a sense of a stable embodied self, in

89. Ibid., p. 271.

90. Ibid., p. 273 (emphasis in original).

91. Ibid. Heyes’s example goes from black to white and mine from white to black, but the point is the same. Perhaps her position here depends on some reluctance to accept the view that “[r]ace is socially constructed,” which she attributes to “virtually every philosopher writing on racial identity” (ibid., p. 270).

92. This distillation rests on a free though sympathetic reading of Heyes’s Self-Transformations (above, n. 83), pp. 3–37.
which free action and self-understanding are important. And think and act in solidarity with others, not docilely, but without fear of being “twisted into someone else’s theoretical material.”

However appealing these Foucauldian themes might be at an abstract and hortatory level, they lack the definiteness and normative “bite” of moral principles. In consequence, a large gap exists between these themes and Heyes’s discussion of racially related cosmetic surgery. People do, she states, “inflect their race through changes to their bodies,” and she cites “hair-straightening treatments,” “rhinoplasty,” “eyelid surgery,” and “skin-lightening creams” as examples. This statement is true and the examples are apt. All the same, Heyes does not say which cosmetic procedures a person of color may undergo to inflect, rather than change, race. She does not say what the person of color is to do.

Relatedly, Heyes states that “cosmetic surgeons sell the procedures with talk of ‘enhancing ethnic beauty’ rather than creating Caucasian uniformity.” She is right about the talk, but “Caucasian uniformity” does not exist anymore than black uniformity or Asian uniformity does. A bit later she writes that “the body modifications of individual people of color can only exemplify that they are dupes of whiteness.” I do not see how Heyes can make this assertion, let alone claim to know it to be true, given her observation on the same page that there is little deep research on “the complex motivations of people of color who elect to change their appearance along what might be thought of as racialized lines.” In sum, whatever the appeal of Foucault’s ethic of care of the self and Heyes’s interpretation

93. Ibid., p. 13.
94. I am not arguing that Foucault’s project is misguided or that Heyes has failed to get as much practical guidance on racially related bodily inscriptions from his late work as possible. I have found little additional guidance in such distinguished authors as Alexander Nehamas, The Art of Living: Socratic Reflections from Plato to Foucault (Berkeley: University of California Press, 1998), pp. 157–188; Johanna Oksala, Foucault on Freedom (Cambridge: Cambridge University Press, 2005); and Timothy O’Leary, Foucault: The Art of Ethics (London: Continuum, 2002).
96. Ibid.
99. Ibid.
of it, the practical payoff of that ethic for persons of color, and perhaps for many other persons, seems vanishingly small.

Complicity with a Racist Society

The foregoing theories all hinge, in one way or another, on pathologies relating to racial identity. A final theory hinges directly on complicity with a racist society. Suppose that Vivian, an Asian American, reasons like this:

I will change certain physical characteristics of my body that are statistically or stereotypically associated with my race so that I can pursue, in a racist society, ends that I value. To me a society is racist if, among other things, it regards as inferior or discriminates against people who have physical characteristics like those I plan to change. I do not seek to “pass.” Nor do I seek to advance my own interest. The ends that I value are noble—to promote harmonious relations among all groups in society and the well-being of people of color. I do not favor these ends because securing them will, on balance, have better effects overall. I favor them because I believe, on nonconsequentialist grounds, that these ends comport admirably with the inherent dignity of all people of all races. The cosmetic changes to my appearance that I envision would be needless in a nonracist society, and I regret having to make them. But I do not believe that I can advance my noble ends without doing so.

Some readers may pick at this reasoning. Perhaps society is not racist. Perhaps Vivian deceives herself in regard to her professed motivations. Perhaps she can advance her noble ends more effectively without altering her appearance. If such criticisms were sound, Vivian might prove to be just another case of individual pathology that turns on race.

Her case will be more interesting if we waive these possible criticisms. The heart of the matter, moreover, is not that Vivian is being disloyal to her race. After all, she wishes to promote the well-being of people of color, including the members of her own racial minority. Anyway, it is not clear why a person’s race deserves loyalty, or even that race could be an object of disloyalty or betrayal. However, it is possible for Vivian to betray or be disloyal to people who belong to the race she does. The heart of the matter, however, is that Vivian’s altering her appearance is morally problematic because she would be acting complicitly with a racist society. Her actions would be shoring up, to some degree, a society that devalues some persons because of the very physical characteristics that Vivian seeks to erase.

An assessment of the gravity of Vivian’s complicity requires separating out at least three different types of criticism in a society that
is racist, and in which racially related bodily inscriptions occur. First, the means needed to make an autonomous choice may be lacking. Almost always, this lack is a ground for criticizing a society, rather than an individual. This type of criticism can point to what is often called “blaming the victim,” although this phrase is sometimes bandied about without much thinking. If Vivian lacked autonomy for this reason or possessed autonomy only to a marginal degree, her complicity would be excusable. Still, this criticism does not seem to apply to the hypothetical example of Vivian.

Second, the means for making an autonomous choice might exist, but the individual fails to exercise his or her autonomy. In Vivian’s case, the claim might be that she fails to scrutinize critically her choice to get a racially related change in her appearance. Such cases usually involve criticism of an individual, rather than criticism of a society. The nature and seriousness of the criticism turn on the reason, or reasons, for the failure. If the reasons involve aesthetic oppression or internalized racism, it is tempting to say that the individual’s autonomy has been overborne or that its exercise has been contaminated so that most of the blame should fall on society. But any such way of interpreting Vivian’s case seems not to fit the hypothesized facts.

Third, there may be the means for an autonomous choice and the individual exercises it with adequate critical scrutiny, but does so in a morally objectionable way. This situation involves criticism of an individual, rather than of a society. In this situation, we are not coming from outside autonomy, where either the means for it are wanting or an individual has the means, but fails to exercise critical scrutiny. We are now inside autonomy. This third type of criticism best fits the case of Vivian. She is making an autonomous choice to get a racially related alteration of her appearance, but she is exercising her autonomy in a morally objectionable way, because she is acting complicitly with a racist society.

A significant virtue of the complicity theory is that it throws into sharp relief something that the five earlier theories left somewhat unclear. To act complicitly with something that is wrong or evil partakes of that wrong or evil. So to act complicitly with a racist society participates to some degree in the very racism we should oppose.

Conclusion

The foregoing critical examination establishes the thesis that surgical bodily modifications that alter phenotypic characteristics associated with racial identity in pursuit of aesthetics are amenable to no single analysis. Scant reason exists for believing that these modi-
fications change race; at most, they might aid someone in passing as a member of a different race.

The multidisciplinary approach of this essay identifies some points that might elude a narrower approach. Whatever the merits or infirmities of the quite general idea that race is a social construction, I find helpful at least one theory, that of Jerry Kang, who adheres to one version of that idea. Kang’s views build on communications theory and social-cognition analysis, which link up with both earlier and later social-psychological treatments of identity, prejudice, bias, and impersonation. These views and treatments make it hard to give much credence to benign aesthetic explanations of racially related cosmetic surgery. Despite sincere pleas by some surgeons that they aim only to make their patients prettier, it is impossible to ignore that many patients of color, wittingly or unwittingly, seek physical changes intimately associated with race.

Other theories grapple somewhat more successfully with race and cosmetic surgery. In this group I place accounts of racialized aesthetic oppression, such as those offered by John Kang and suggested, albeit distantly and obliquely, by Bordo and Davis. Also in this group are the ethics of the care of the self, whose roots lie in Foucault’s excavation of Greco-Roman thinking, and the remarkably interesting discussion by Heyes of the difference between changing race and changing sex or gender. If Foucault’s and Heyes’s ethical views are rather indeterminate, those of John Kang may be less nuanced than would be desirable.

It is, however, another group of theories that shed the most light on racially related cosmetic surgery. These theories can make room for degrees of autonomy, and indeed one of the most valuable features of John Christman’s recent study of autonomy is that he explicitly allows for degrees. In regard to cosmetic surgery, I have in mind, first, performance theory. The foundations of this work, as articulated by Butler, are muddled, yet its concrete development and application to race by Carbado and Gulati, among others, are impressive. Second comes the theory of internalized racism. Its sources are manifold, and Lacan’s initially puzzling account of desire helps

100. John Christman, The Politics of Persons: Individual Autonomy and Socio-historical Selves (Cambridge: Cambridge University Press, 2009), pp. 245, 246 (emphasis omitted): “Autonomy [in unchangeable social situations] can, at best, mean a kind of self-management, a minimal level of self- and social control that allows us to make sense of our existence, even if we cannot celebrate it fully. Sometimes we have full control over the details of our lives. . . . But at many other times and for many of us we are merely coping. . . . [T]he model of autonomy I have defended here is that in such cases, we are still autonomous despite being pulled and pushed by the forces of such a life.”
to understand how it works. Third is the theory of complicity with a racist society. I cannot trace this theory to a well-defined set of sources, but, for me, it was a long conversation with John Pittman that helped me to understand its power and implications.

Too often, those mesmerized by Foucauldian power relations become disheartened at the possibility of beneficial change. This loss of heart can lead to gridlock and frustration. If people do nothing but bewail the force of racialized ideals of human beauty, probably little will change for the better. A central contribution of this essay, I think, is that it makes room, as does some of Foucault’s later work, for freedom. In my judgment, one can escape the thrall of aesthetic inevitability by making wise normative decisions about one’s body. These decisions come from a psychological self that is autonomous and critically self-aware; an ethical self that responds to concerns of the body; and a virtuous self that transcends the limits of beauty and race. None of this is to say that people are raceless individuals with neither sex nor gender nor ethnicity. They are, however, human beings who can play a vital role in choosing wisely and encouraging others to do the same.

Appendix: Eyelids and Eyelid Surgery

Anatomy of the Eyelids and Neighboring Structures

Because everyone is familiar with human eyelids, it may seem academic beyond belief to provide any more detailed account of their structure. In fact, however, such an account is desirable both for understanding certain structural variations among human eyelids and for grasping various surgical procedures for altering their appearance.

The lower eyelid does not exhibit much variation across individuals of the same age, at least in youth and early to middle adulthood. In later life, the outer skin of the lower eyelid becomes less elastic, and fat may accumulate underneath the skin. Such common effects of aging may produce dark circles and “bags” under the eyes that some individuals endeavor to hide through cosmetics or eliminate by plastic surgery.

Rather greater variation exists in the upper eyelid. The upper lid is a complex arrangement of tissues and structures made up of skin, connective tissue and fat below the skin, the chief muscle for raising and lowering the eyelid (the orbicularis oculi muscle), and two smaller muscles (the levator muscle and Müller’s muscle). There is usually a small amount of fat beneath one or more of these muscles.

The skin of the eyelids is generally quite thin and highly elastic. The various muscles of the upper eyelid proceed from their origins to the point where muscle becomes tendon (aponeurosis) and thence enter their points of insertion. With each muscle, there may be associated some aponeurotic or preaponeurotic fat.\textsuperscript{102}

Two features commonly distinguish the eyelids and neighboring structures of Asians from those of Caucasians. The adverb “commonly” is important, because not all Asians possess these features and not all Caucasians lack them. The first feature is the \textit{epicanthus}. The term “canthus” applies to the corners of the eye—both the inside (medial) corner and outside (lateral) corner. The epicanthus, also sometimes called the epicanthal or Mongolian fold, is a semi-lunar flap of skin that goes from the upper eyelid across the medial canthus down to the medial aspect of the lower eyelid. The epicanthus is present in the fetus and rather frequently in Asians, but is much less common in Caucasians.\textsuperscript{103} Specialists recognize several different types of epicanthal folds.\textsuperscript{104} The anatomy of the epicanthus involves the interweaving of the skin of the eyelids, three subdivisions of the orbicularis oculi muscle, medial canthal tendons, and subcutaneous adipose and other tissue.\textsuperscript{105}

A second feature separating most Asian from most Caucasian upper eyelids lies in the orbital septum and the levator aponeurosis. Liu and Hsu, relying on cadaver dissections, state that in “the Oriental, the levator aponeurosis fuses with the orbital septum below the superi- tor tarsal border . . . [resulting] in a fullness in the upper eyelid and a less well-developed or somewhat lower eyelid crease,” whereas in “an Occidental person . . . [t]he subcutaneous insertion of [the]
most superior [aponeurotic] fibers results in the formation of an eyelid crease,”106 as shown in figure 1.

Similarly, according to Amrith, in Asian eyes “the orbital septum fuses with the levator at a much lower level [and] as a result the preaponeuritic [sic] fat migrates anteriorly in the lid [fig. 2b]. This gives the fullness that one sees in Asian eyes. This lower attachment of the septum appears to prevent the distal aponeurotic fibres from attaching to the orbicularis and the subcutaneous tissue anteriorly. This explains the absence of lid crease in Oriental eyelids.”107 The levator muscle arises from the apex of the orbit and becomes aponeurotic in the ten millimeters or so that are most anterior. The aponeurosis attaches to the anterior surface of the tarsus (the fibrous plate that gives solidity and form to the medial edge of the eyelid). Figure 2 displays the contrast between typical Occidental and typical Oriental upper eyelids at somewhat greater magnification than figure 1. As Amrith puts it, “[t]he lid crease or the double eyelid is formed by its attachment to the orbicularis and the subcutaneous tissue of the skin [fig. 2a]. In a significant percentage of the East Asians (about 70%) the distal attachment is absent or rudimentary leading to an absence of lid crease [fig. 2b].”108

The net effect of these two features is as follows. First, often the eyes of Asians, unlike the eyes of Caucasians, present an epicanthal fold. Second, owing to differences in muscular structure, attachment, the orbital septum, and subcutaneous and preaponeurotic fat, Asian eyelids often lack the upper-eyelid crease that is fairly typical among Caucasians. Figure 3 displays the differences in appearance.

\textit{Eyelid Surgery}

In order to eliminate or reduce the prominence of common physical characteristics of Asian eyes, the surgeon must consider the precise anatomic structure in a particular patient and the objective to be sought. Evidently, the basic idea is to eliminate or reduce the epicanthal fold or to make such adjustments as will produce an upper-eyelid crease, or both.

Until the last two decades, ophthalmic plastic surgeons were reluctant to try to eliminate or reduce the epicanthus, for attempts often led to considerable scarring and other undesirable results. But of

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Figure 1. "Anatomic difference between an Oriental (right) and an Occidental (left) upper eyelid. The fusion of levator aponeurosis and orbital septum is higher in the Occidental. Note also the presence of a submuscular fat pad in the Oriental."

(Source: Don Liu and Wen Ming Hsu, "Oriental Eyelids: Anatomic Difference and Surgical Consideration," *Ophthalmic Plastic and Reconstructive Surgery* 2 [1986]: 59-64. Reprinted with the permission of Wolters Kluwer Health, under a license issued by the Copyright Clearance Center.)
Figure 2. A (left): Cross section of the upper lid of an Occidental eye. B (right): Cross section of the upper lid of an Oriental eye. Note the orbital septum overhanging the upper margin of the tarsus, causing fullness of the lid. **Key:** LA = levator aponeurosis; LM = levator muscle; MM = Müller’s muscle; OF = orbital fat; OM = orbicularis muscle; OS = orbital septum; SMF = sub-muscular fat; T = tarsus. (Source: S. Amrith, “Oriental Eyelids—Anatomical and Surgical Considerations,” *Singapore Medical Journal* 32:5 [1991]: 316–318. Reprinted with the permission of the Editor of the *Singapore Medical Journal*.)
Figure 3. **a:** Typical Asian eye with absence of lid crease and fullness of upper lid. **b:** Continuous crease. **c:** Discontinuous crease. **d:** Incomplete crease. **e:** Multiple creases. **f:** “Inside fold,” with tapering of lid crease toward the medial canthal angle and gentle flare of the crease laterally. **g:** “Parallel fold.” **h:** Typical Caucasian lid crease. (Source: William P. Chen, “Asian Blepharoplasty,” *Ophthalmic Plastic and Reconstructive Surgery* 3 [1987]: 135–140. Reprinted with the permission of Wolters Kluwer Health, under a license issued by the Copyright Clearance Center.)
late, the surgery, known as an epicanthoplasty, is attempted more frequently. There are many ways to do it. Byung Chae Cho and Kyung Young Lee remark that “[m]any techniques have been described to eliminate the epicanthal fold: resection of glabellar skin, resection of medial canthal skin, V-Y advancement, V-W technique, modified Z-plasty, multiple Z-plasties, and others”109 (the proliferation of capital letters indicates different shapes of incisions). Perhaps the most common procedure is the root Z-epicanthoplasty, which is sketched in figure 4. Won-Min Yoo, Sang-Hyeon Park, and Dong-Rhyul Kwag describe the operation as follows:

The surgical procedure [is] performed in the office operating suite with the patients under local anesthesia. . . . The root Z-plasty is designed by drawing a line along the edge of the epicanthal fold. A second horizontal line is drawn toward the midline at the level of the medial canthus up to the surface representation of the medial-most point of the lacrimal lake. The average length of the line is 4 mm. The skin of the nose is pulled medially to displace the epicanthal fold. A third curvilinear line is traced, starting at the caudal end of the first line and directed toward the lacrimal lake. An incision is made first in the central member in the line of the epicanthal fold, and then in the lateral member of the epicanthal fold and the lower eyelid [fig. 4]. The flap is raised with blunt dissection to avoid damaging the lacrimal canaliculus by making too deep an incision. The fibrofatty tissue and muscle that underlies the incision in the epicanthal fold is released. The flap between the lower eyelid and the medial canthal angle is elevated and transposed spontaneously without tension . . ., and skin sutures, rather than subcutaneous sutures, are used to fix the flap. The medial canthal tendon is exposed when necessary, and medial canthopexy may be performed.110

The surgeons report that, out of thirty patients, most obtained “satisfactory results,” and none required “revision surgery.” Redness appeared in “a small number of patients,” but usually lasted only a month.111

Surgery on the eyelids, known as a blepharoplasty, can produce an upper-eyelid crease. Liu and Hsu describe such surgery, as does William Chen. The gist of Chen’s technique is to excise some

preaponeurotic fat and remove some redundant skin above the lid-crease incision line. Amrith’s technique is similar. Amrith describes concisely one way of doing the procedure:

After adequate anaesthesia the upper lid is everted and the tarsal width is measured carefully over the central, medial and lateral portions and transposed to the skin side. This will constitute the new lid crease position. The lateral extent is marked slightly higher than the central or at the same level as the central mark. If there is excess skin, it is marked in an elliptical fashion and excised. It is advisable to stay within the lateral canthus. The epicanthic fold is untouched as this area has a tendency to scar too much. Only 2–3 mm of the muscle is excised along with submuscular fat, if any, from the lower

Figure 4. Drawings demonstrating the authors’ method of an epicanthoplasty. (Source: Won-Min Yoo, Sang-Hyeon Park, and Dong-Rhyul Kwag, “Root Z-Epicanthoplasty in Asian Eyelids,” *Plastic and Reconstructive Surgery* 109 [2002]: 2067–2071. Reprinted with the permission of Wolters Kluwer Health, under a license issued by the Copyright Clearance Center.)
flap. The orbital septum is exposed. I excise the orbital fat only in patients who have very puffy lids, and where indicated, only the prolapsing fat is cauterised and excised. . . . [S]utures are passed between the upper border of the tarsus or levator aponeurosis (which will be exposed if orbital fat is excised) and the lower skin edge and tied. It is important not to include the orbital septum in the stitch, as this will cause a lid lag. The skin edges are closed with a continuous nonabsorbable stitch.112

The surgical articles mention complications and undesired results. Complications include infection, excess bleeding, adverse reaction to the sutures, granuloma formation, secondary drooping of the eyelid, and retraction of the upper eyelid and exposure of the cornea. Suboptimal results include inadequate removal of the fat pads, differences in the upper-eyelid creases between the two eyes, insufficient lid crease, epicanthal scarring, and drooping of the upper eyelashes.113

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