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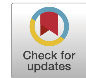

Lifting, sculpting, and contouring: Implications of the blurred boundary between cosmetic procedures and 'other' beauty products/services

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ABSTRACT

This paper critically examines how cosmetic surgery and 'other' beauty products are presented as forming a continuum in UK women's lifestyle magazines. Having analysed 744 adverts and various editorial features published across different lifestyle magazines, this paper qualitatively examines the categorization of cosmetic procedures and beauty products and treatments. The implications of this categorization for current attempts to regulate the marketing of the cosmetic surgery industry are considered.

Reflecting a worldwide trend, the cosmetic surgery industry in the UK has grown substantially; from 10,700 cosmetic surgery procedures in 2003 to 51,140 procedures in 2015 (BAAPS 2004, 2016). Accompanying the growth in the number of procedures, the value of the market increased from £128.3 m in 1993 to an estimated £3.6 bn in 2015 (Gallagher 2014). Nevertheless, the demand for surgical procedures, such as breast enlargements, abdominoplasties, and rhinoplasties, has declined since 2015 as people are increasingly opting for non-surgical procedures like Botox injections, filler and laser treatments, and chemical peels[1] (cf. BAAPS 2018; Davies 2019). Healthcare business intelligence provider LaingBuisson (2019) estimates that the non-surgical cosmetic market segment alone will be worth £3.6 billion in the UK in 2021.

Reflecting and reinforcing the rise in the number of cosmetic procedures, these procedures have become increasingly popularized and normalized (cf. Berkowitz 2017; Brooks 2004; Moran & Lee 2013). As part of this normalization, cosmetic procedures are constructed and perceived to be similar to 'other' beauty products – e.g. foundation or anti-ageing creams – and services, such as going to the hairdresser's or getting a manicure (Garnham 2013; Gilman 1999). The conceptual connection between cosmetic procedures and 'other' beauty products/services operates in two ways; on the one hand, medical procedures are presented as similar to non-medical beauty products and services, whereas, on the other hand, beauty products and services are increasingly medicalized. Medicalization transforms 'natural processes of life', such as ageing, and aspects of appearance which are not in line with contemporary, cultural conceptualizations of what is 'ideal', into issues which require medical – or medically-inspired – treatments (cf. Conrad 1992; Harvey 2013).

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[1] Cosmetic procedures can be divided into surgical/invasive and non-surgical/non-invasive procedures. The National Health Service (NHS, 2021) created the following categorization of cosmetic procedures: breast enlargement, breast reduction, surgical fat transfer, facelift, ear correction surgery, abdominoplasty, rhinoplasty, liposuction, hair transplant, labiaplasty, and eyelid surgery are considered surgical cosmetic procedures. Botox injections, face and lip fillers [dermal fillers], permanent make-up, chemical peels, microdermabrasion, laser hair removal, skin lightening, and tattoo removal are considered non-surgical cosmetic procedures.

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Whereas adverts for beauty products increasingly draw on scientific and/or medical discourses (cf. Ringrow 2016; Smirnova 2012), cosmetic surgery advertising has traditionally been reluctant to draw attention to its medical side; rather, cosmetic surgery has generally been framed across media "as a beauty technique like others…" (Woodstock 2001, 437). Moreover, the growth in non-surgical cosmetic procedures, which can be performed in traditional beauty salons, and the rise of cosmeceuticals, which are sold in both beauty salons and cosmetic surgery clinics, have contributed to the blurring between cosmetic procedures and beauty products/services (Worth 2009). As will be discussed below, this framing of cosmetic procedures – particularly in marketing materials – has been criticized and several bans on cosmetic surgery advertising have been proposed in the UK (cf. Latham & McHale 2020).

In light of this blurred boundary between cosmetic procedures and 'other' beauty products/services, the aim of this paper is to examine whether, and if so how, cosmetic procedures and beauty products/services are conceptually linked in both editorial and advertising content in women's lifestyle magazines. Having briefly explored this conceptual link in advertising for anti-ageing over-the-counter skincare products, Smirnova's (2012) research inspired some of the analyses presented here. Nevertheless, as will become clear, Smirnova's research limited itself to one category of products and did not engage with examples of cosmetic surgery discourses. Moreover, the blurred boundary between cosmetic procedures and 'other' beauty products/services was not Smirnova's focus, whereas it is at the heart of this current paper.

As media outlets and marketing materials are both socially shaped and socially constitutive (Smirnova 2012), the analysis of lifestyle magazines – and advertising in particular – can provide insights into the presentation and construction of cosmetic procedures and 'other' beauty products/services. The focus on women's magazines in particular reflects that cosmetic procedures are highly gendered in nature; in 2019, only 8% of all cosmetic surgery procedures in the UK were conducted on men (BAAPS 2020). Reflecting and reinforcing this statistic, previous research has indicated that different media have framed cosmetic procedures as less acceptable for men (cf. Adams 2009), even though men are (increasingly) enticed and expected to participate in the beauty/grooming industry (Barber 2016).

In order to answer the research question, it is necessary to discuss relevant literature related to the current status and regulation of the cosmetics industry in the UK and the ways in which cosmetic procedures and beauty products have been presented in the media. Essential to the explorations presented here is a discussion of boundaries, categories, and the conceptualization of cosmetic procedures and beauty products/services as part of a continuum. Following these discussions, I will present the methods for data collection and analysis, which draw on insights from discourse analysis, corpus linguistics, and thematic analysis.

The results of this study highlight the changes that have taken place in how cosmetic procedures are presented and marketed in women's lifestyle magazines and, in particular, how advertising for 'other' beauty products and services create parallels with cosmetic procedures. Moreover, the implications of this blurred boundary between cosmetic procedures and beauty products/services are discussed, particularly in light of current attempts to regulate – or even ban – the marketing of cosmetic procedures.

1. Cosmetic procedures

The cosmetic surgery industry in the UK must be understood within the context of current consumerist, neoliberal systems. As Gill and Scharff (2011) have argued, as privatization, deregulation and deinstitutionalization were promoted and implemented, consumerism and individualism have been encouraged and commended in the UK. Within 'consumer packages', the body constitutes the most precious object (Baudrillard 1998, 129), which is conceptualized as malleable; bodies are continuous projects "which should be worked at and accomplished as part of an individual's self-identity" (Shilling 2003, 4; cf. Bocock 1993; Featherstone 2000, 2007; Giddens 1991). Reflecting neoliberal discourses, these body projects are imbued with a sense of responsibility; individuals are constructed as "self-governing, independent [entities], engaging endlessly in self-examination and improvement" (Moran & Lee 2013, 374).

Body projects can be realized and manifested in different ways: e.g., by using make-up, working out and/or dieting, or undergoing cosmetic procedures. As mentioned above, this latter option has become increasingly 'normal'. Echoing Berkowitz's (2017, 49) caution, however, it is important to understand that this normalization should not be considered solely – or even mainly – in a statistical manner; after all, "only 3–5 percent of Americans have used Botox" for example. Yet, the rise in the number of people undergoing cosmetic procedures does affect the normalization of procedures; as Delinsky (2005, 2024) has found, knowing people who have undergone cosmetic procedures makes them seem "more familiar, less bizarre, and more understandable". Similarly, Swami et al. (2008) confirmed that vicarious experiences of cosmetic procedures had a significant impact on the likelihood of people undergoing cosmetic procedures themselves.

Despite the role that the quantitative increase in procedures has played, the normalization of cosmetic procedures is largely constructed discursively (cf. Berkowitz 2017). As Davis (1995) and Brooks (2004) have argued, mass media plays an important role in the popularization and normalization of cosmetic procedures. Supporting this finding, a survey study by Swami et al., (2008, 217) suggested that "greater media exposure leads to greater awareness of cosmetic surgery", which may challenge preconceptions, particularly if media content positively frames cosmetic procedures.

Various – predominantly monomodal – studies have confirmed the positive framing of cosmetic procedures. Fraser (2003), for example, found a decline in the publication of articles critical of cosmetic surgery in women's magazines during the 1990s, which she linked to magazines' growing dependence on advertising revenue. Moreover, in an extensive analysis of American magazines, Brooks (2004, 214) identified various narratives which encouraged the "acceptance and approval of cosmetic surgery". The focus on the scientific and technological newness of cosmetic procedures, for example, posited these procedures – and the people undergoing them – as "fantastical and wondrous, innovative and progressive" (*ibid*, 218). A later study of US newspaper articles by Adams (2009, 120) confirmed Brooks', (2004) results as it found that cosmetic surgery was presented as a "widespread phenomenon that is a safe and

accessible way to maintain one's appearance, bolster self-confidence, and remain competitive in a youth-driven marketplace". This emphasis on having a positive impact on self-esteem was also found by Polonijo and Carpiano (2008) who examined Canadian women's lifestyle magazines; cosmetic procedures were presented as benefitting people's emotional health.

In addition to the positive framing in traditional (news) media, various studies have focused on how cosmetic procedures are marketed. Sanchez Taylor (2012, 642), for example, analysed adverts for breast augmentation surgery by clinics in the UK and Belgium and found that these minimized risks and emphasized how "quickly and easily [these procedures are] performed". In line with this, Moran and Lee (2013) found that Australian websites promoting labiaplasty and labial reduction, depicted these procedures as 'easy', and Lirola and Chovanec (2012, 490) found that promotional leaflets for a cosmetic clinic in Spain presented procedures as "quick and easy solutions to change the body and feel better". Similarly, Pitts-Taylor (2007) found that promotions for cosmetic surgery would highlight the positive effects of physical changes on people's self-esteem and body image.

In light of the positive framing and marketing of cosmetic procedures, it is perhaps unsurprising that various surveys and interviews related to these procedures – predominantly conducted in the US – have confirmed the public's view of cosmetic procedures as a 'matter of maintenance', similar to 'other' beauty products and practices. When Gilman (1999, 105) interviewed schoolgirls on the topic of cosmetic surgery, for example, a girl compared the practice to getting an ear piercing: "it's like piercing your ears. Everyone is doing it now. I cannot understand why some people make a big fuss of it". More recently, Leve Rubin and Pusic, (2011, 8) explored narratives of women who had undergone facial cosmetic surgery and also found that "participants equated cosmetic surgery with other standard, maintenance procedures, drawing parallels between the body and a variety of consumer goods". Similarly, Sanchez Taylor (2012, 639) interviewed women who had undergone breast augmentation surgery who discussed their surgeries "in much the same way as they might talk about buying shoes or clothing or going for a beauty treatment".

1.1. Cosmetic procedures and 'other' beauty products/services

Far from being incidental, the industry behind cosmetic procedures has made a conscious effort to align itself with the beauty industry, which also means downplaying the medical, sometimes surgical, nature of procedures. In their report on the cosmetic surgery industry, Mintel (2006, 45) posited that by "[becoming] more closely related to subtle and risk-free enhancement", cosmetic procedures would become associated with maintenance, which would lead to increased consumer acceptance and uptake of procedures. Several professionals within the industry have also explicitly spoken out in favour of presenting cosmetic surgery alongside 'other' beauty products and services. Russell Place, a representative from Allergan's Juvéderm ULTRA® filler range, for instance, advocated blurring boundaries in his entry for the Institute of Practitioners in Advertising's *Effectiveness Award 2010*. In order to "turn facial filler treatments into a mainstream beauty choice", Place (2010) indicated that he "wanted to convince [their] target [audience] that starting a programme of Juvéderm ULTRA® was no different to making any other fashion or beauty decision" by "firmly [placing] Juvéderm ULTRA® in the same frame as any desirable fashion or beauty brand". In order to achieve this, an advertising campaign was designed that "[communicated] in the style characterised by a high-end fashion or beauty brand" (*ibid*). Moreover, by publishing the adverts in close proximity to beauty or fashion editorials in lifestyle magazines that shared editorial affinity, the normality of cosmetic surgery was accentuated. As will be explained below, this normalizing framing of cosmetic procedures has been critiqued and several attempts at regulating the marketing of cosmetic procedures have been proposed.

Before discussing attempts to regulate the market, however, it is essential to analyse the conceptualization of cosmetic procedures and beauty products/services as similar yet disparate.

1.1.1. Boundary or continuum? Issues of categorization

A discussion of 'blurred boundaries' between cosmetic procedures and 'other' beauty products/services, as has been alluded to above, must include a consideration of whether a boundary exists and, if so, how this boundary can be defined. This section explores the question in more depth as it considers the concept of a continuum which includes both cosmetic procedures and 'other' beauty products and services. Moreover, the concept of a 'boundary' and issues of categorization are examined.

Supporting the idea of a continuum, cosmetic surgeons Olesen and Olesen (2005, 12) have criticized the strict division between cosmetic procedures and 'other' beauty products and treatments, arguing that these procedures have merely taken the idea of "enhancing personal beauty" to a different level. Related to this view is the idea of technological incrementalism as adopted by Smirnova (2012, 1237), which "describes the process by which the use of less-invasive (or less "serious") treatments [or products] by consumers pave the way for more invasive procedures (and vice versa), thus constituting all of these products and procedures as nodes along a continuum". In this explanation, the use of beauty products, such as mascara and foundation belongs on a continuum with cosmetic procedures.[2]

As indicated earlier, previous studies have shown that cosmetic procedures and beauty products/services may be presented as belonging on a continuum. However, although rarely considered, it is important to explore the reasoning behind, and the validity of, assuming such a continuum. A potential explanation for the idea of a continuum relates to the pharmaceutical and/or healthcare background of several beauty brands. As reports by marketing intelligence service WARC show, various beauty conglomerates – e.g. Johnson and Johnson – have "roots in healthcare" (WARC 2015a, 7) or are "dermatologically aligned" (WARC 2015b, 32), meaning

[2] Smirnova applies the idea of technological incrementalism to cosmeceuticals, which suggests that beauty products without 'biologically active ingredients' are excluded from the continuum. However, the examples of cosmeceuticals that Smirnova (2012, p.1237) provides – e.g. Olay's 'Age Defying Crème and Estée Lauder's 'Ceramide' – indicate that she includes a broader spectrum of products.

that products are inspired by dermatological science and are tested by dermatologists. Vichy Laboratoires – owned by L'Oréal – for example, was established by a physician in 1931 and its products are still widely available in pharmacies. Other beauty products, for example those by Eucerin and La Roche-Posay, are also sold in pharmacies, which may give the impression that they are similar to – or on a continuum with – the healthcare products these outlets provide. Moreover, retailers such as Boots and Superdrug further the idea of a continuum between beauty and medical products as they sell both medical supplies and beauty products. Interestingly, as of August 2016, Superdrug has been offering facial fillers as part of a 'Skin Renew Service' in one of its major London stores. The decision to offer fillers in-store attracted a lot of criticism and in January 2019, Superdrug stated that it would conduct 'enhanced screening' for signs of body dysmorphic disorder before treating customers (cf. Campbell 2019). Moreover, the service is now only offered to people aged 25 and over (Superdrug 2019).

In addition to some of the beauty brands' health-related backgrounds and the mixed retail outlets which combine the sale of healthcare and beauty products, perhaps the most important reason for assuming a continuum relates to the underlying reasons for participating in beauty practices. Sullivan (2004, 5), for example, claimed that "all body customs" – from tweezing eyebrows to cosmetic procedures – "are forms of self-creation". Moreover, as Jones (2008, 35) has argued, cosmetic procedures and 'other' beauty products and services are both "connected to ideas about self-love, body-maintenance and psychological wellbeing". Of course, it needs to be noted here that this connection – especially its construction and validation – has been contested, particularly by feminist scholarship (cf. Gill 2007; Orbach 2009).

Despite the reasons presented above for the adoption of a continuum on which cosmetic procedures and (other) beauty products can be placed, several arguments that support a distinction or at least a dissimilitude between the two have been put forward. One of these arguments was proposed by Sweetman (2000) who, similar to Featherstone (2007), classifies cosmetic surgery as a body modification practice alongside tattoos and piercings.[3] According to Sweetman (2000, 62), one major distinction between body modification practices and other 'free-floating commodities' relates to the former's "physicality of … production". In other words, tattoos, piercings, and cosmetic procedures all require a process and cannot be bought as an end product – they "**demand** one's presence as producer, consumer and living frame for the corporeal artefact thus required" and are part of the body "rather than simply an adjunct to it" (emphasis in original, *ibid*, 64). Whereas Sweetman's argument may sound convincing, it must be questioned here whether this does not just describe the difference between products and services relating to the body – for example, getting a haircut or receiving a massage, albeit less permanent than some cosmetic procedures, also demand one's presence in much the same way as body modification practices, but instinctively may feel different from going under the knife, needle, or laser.

Some other, perhaps more obvious, differences between beauty products/services and cosmetic procedures that have often been presented relate to expense and risk. Concerned about marketing materials' minimization – or even total disregard – of risk, several industry-led organizations have introduced campaigns to emphasize the reality of cosmetic procedures and the risks they may carry. In 2015, for example, Save Face, a UK register of accredited practitioners who perform non-invasive cosmetic procedures, launched an advertising campaign which depicted a tear of blood, symbolically trickling down a woman's face. The campaign urged people to choose an accredited physician in order to be "safe, not sorry". Moreover, in 2019, the UK Department of Health and Social Care launched the campaign, 'Clued up on Cosmetic Procedures', which highlighted the importance of reliable information and choosing a reputable, qualified practitioner; in addition, the campaign aimed to "make sure people know the risks of cosmetic procedures" (British College of Aesthetic Medicine 2019).

In addition to differences in price point and risk, the (semi-) permanence of cosmetic procedures also sets them apart from most 'other' beauty products and/or treatments. Capturing this difference well, Ogilvie and Mizerski (2011, 660) note,

… makeup represents an inexpensive and non-permanent means of 'trying on' a new image and testing society's response to it. Unlike more permanent plastic surgery procedures, it offers a quick retreat should the new image not meet with approval or be congruent with the image the individual is trying to create.

A final point to make with regard to the distinction between cosmetic procedures and beauty products/services relates to people's perception. Returning to earlier observations on the perceived normality of cosmetic procedures, it must be reiterated that most of the studies which found that people increasingly thought of cosmetic procedures as a "matter of maintenance" were conducted in North America or Australia. Moreover, in her recent book on the marketing and perception of Botox in the US, Berkowitz (2017, 129) points out that most women make a distinction between 'normal', or even normative, socially expected beauty techniques and non-invasive procedures: "[for] some women, Botox is situated within the standards of concealer, but for most others, it does not fit within the normative realm".

In line with Berkowitz's findings, and despite the industry's active attempt to align itself with 'other' beauty treatments, several market research reports have found that people in the UK (used to) perceive a distinction between (non-) surgical cosmetic procedures and beauty products and services. Mintel (2006, 32), for example, found that "[with] regard to the concept of the complete makeover, the UK masses have embraced the elements of beauty treatments such spray tanning, sun beds, highlighting, manicures, facials and body treatments … But currently the concept of surgery still appears to be one step too far".

[3] This classification has been contested. Harris-Moore (2014, 161) juxtaposed cosmetic procedures with 'other' body modifications; whereas "plastic surgeries are often made to look natural, body modifiers want their bodies coded in a way that is exposed and expressive". Moreover, whereas cosmetic procedures emphasize the result, the 'product', the "individual experience" of the process is paramount in body modifications (*ibid*, 159).

1.1.2. Concept of boundaries

In a discussion of establishing similarities and boundaries, it is helpful to reflect briefly on the problematic nature of categorization and the distinction of boundaries, particularly from a philosophical standpoint. Varzi (2013, par. 9), for example, has argued that, although boundaries are essential to construct a commonsensical, shared view of the world, the concept is highly problematic as "it may be observed that ordinary objects and events, as well as the extensions of many ordinary concepts, may have boundaries that are in some sense fuzzy or indeterminate". Particularly 'fiat boundaries' – "which exist only in virtue of the different sorts of demarcations effected cognitively by human beings" (Smith 2001, 135) – are hard to define as they are socially constructed and may vary across times and cultures. Furthermore, although concepts may have prototypes, a concept is generally not fixed and may adapt over time to include new examples (cf. Lakoff 1999).

Essentially, a question of categorization is evoked here. Reflecting literature on (market) categories and category positioning (cf. Kennedy Lo & Lounsbury, 2010), it is not surprising that the 'category' of cosmetic procedures, which is in flux and draws on aspects of both medical and consumerist frameworks, is still being negotiated. Echoing Hsu and Grodal's (2020) analysis of the development of the categorization of e-cigarettes, there are several ways in which a new – or dynamic– category can relate to more established ones. As Hsu and Grodal (2020, 2) discuss, to establish support for a dynamic category, it can be helpful to create associations with existing categories. This is exactly what the previously discussed marketing strategies by Mintel (2006) and Place (2010) demonstrate. As will be seen below, the discursive presentation of cosmetic procedures draws on the discursive presentation of beauty products and services and vice versa.

1.2. Regulation advertising cosmetic procedures

Concerned with the normalization, or even trivialization, of cosmetic procedures, several attempts at regulating the marketing of procedures have been proposed. In recent years, echoing the French ban on cosmetic surgery marketing, several UK organizations have called for a ban on cosmetic surgery advertising. In 2012, the British Association of Aesthetic Plastic Surgeons (BAAPS) called for an overall ban on the advertising of cosmetic procedures. Amongst the advocates of the proposed ban were Labour MEP Linda McAvan and Labour MP Ann Clwyd, who introduced a Bill to establish 'minimum standards for the practice of cosmetic surgery'. As part of this Bill, Clwyd proposed to "[prohibit] advertising cosmetic surgery and cosmetic intervention procedures" (House of Commons 2012, section 3). However, the 2012 Bill did not pass its first reading in the House of Commons and was therefore discarded.

Although the 2012 Bill was not successful, MP Kevan Jones presented a different Cosmetic Surgery (Standards of Practice) Bill in October 2016. In the Bill's first reading, Mr. Jones criticized adverts for cosmetic procedures, describing some of the marketing techniques as "more appropriate for selling double glazing than cosmetic surgery"[4], and called for a ban on "such aggressive marketing". The Bill was scheduled to have its second reading on the 12th of May 2017; however, following the announcement of a General Election, Parliament was dissolved and, with no possibility for a second reading, the Bill was annulled.

Marketing materials for cosmetic procedures in the UK are regulated by the Advertising Standards Authority (ASA), which has published specific guidance on the topic. For example, the ASA deems it irresponsible and unethical to offer cosmetic procedures as a gift or prize, particularly when these offers are time-limited. Moreover, the ASA is critical of the 'trivialization' of cosmetic procedures in marketing materials and posits that "ads should not trivialize cosmetic interventions or suggest that they be undertaken lightly…" (CAP Code 33, 2016, 10). Concerned with the potential negative effects of cosmetic surgery advertising on young people in particular, the ASA launched an investigation in 2020 to see "whether regulatory change is necessary to ensure that children and young people's exposure to ads for cosmetic interventions is appropriately limited" (ASA 2020, par. 8). In their recent assessment of several national regulatory systems of cosmetic surgery markets, Latham and McHale (2020) propose a Cosmetic Procedures Act which would prohibit cosmetic surgery advertising aimed at young people. As Glenday (2020) has noted, it is important that any additional regulations would apply across media outlets, including online content aimed at under-18 s.

2. Materials and method

To examine the representation of cosmetic procedures and 'other' beauty products within UK women's lifestyle magazines, a diachronic sample of 24 issues of *Cosmopolitan* (*Cosmo*) and *Marie Claire* was selected. *Cosmo* and *Marie Claire* were selected as they both have a clear focus on beauty, but the magazines' aim, tone, and target audience differ.

Cosmo was launched in 1972 by Hearst Magazines UK and has attracted considerable academic interest over time (cf. Machin & Thornborrow 2003; Vestergaard & Schrøder 1985; Winship 1987). The magazine's values revolve around 'independence', 'fun' and 'power'; the 2021 US media kit for prospective advertisers highlights these values and states that *Cosmo* encourages its readers to "celebrate their individualism" and – in line with current 'love your body' discourses – to "embrace their quirks and flaws" (cf. Elias Gill & Scharff, 2017).

Marie Claire was introduced in the UK in 1988 and, compared to *Cosmo*, targets a slightly older woman; the median age of *Marie Claire* readers is 45 (Hearst 2020), whereas the median age of *Cosmo* readers is 28 (Hearst 2021). Moreover, *Marie Claire* readers are generally more affluent than *Cosmo* readers; the US media kits for the magazines stipulate that the average income of *Marie Claire* readers was $129.265, compared to $70.101 for *Cosmo* readers (Hearst 2020, 2021). *Marie Claire's* target audience of middle-aged,

[4] As no official documents were released for the Cosmetic Surgery (Standards of Practice) Bill, the transcript of the 'Motion for leave to bring in a Bill' which was put forward on the 19th of October 2017 is used.

'economically privileged' women is significant here as cosmetic procedures are most popular amongst this group of women (cf. Smirnova 2012).

To compile the corpus, I selected the February, June and October editions of *Cosmo* and *Marie Claire* from 2001, 2006, 2010 and 2015. The months were selected semi-randomly; after excluding the September, December and January issues which have a very specific focus – the September issue is devoted to fashion and the December and January issues tend to revolve around Christmas – I put pieces of paper with the remaining months in a bowl and took them out one by one. When a month was selected (e.g. June), I eliminated both the month before and the month after the one that was selected (i.e. May and July in this case) so that the magazines in the corpus would represent different times of the year. This was done to account for any seasonal marketing messages, such as the focus on 'beach bodies' and suntan lotion in summer versus the 'new year, new you' rhetoric between November and February.

Within the two magazines, a total of 744 adverts were found; 301 of these promoted cosmetic procedures and the remaining 443 advertised 'other' beauty products and/or services. To determine what (advertising for) cosmetic procedures to include, I adopted the categorization of cosmetic procedures by the NHS (see footnote in Introduction). Moreover, in line with the U.S. Food & Drug Administration (FDA), beauty products – 'cosmetics' – were defined as "product[s] … intended to be applied to the human body for cleansing, beautifying, promoting attractiveness, or altering appearance" (FDA 2021). For the purposes of this paper, 'other' beauty products and services included a wide variety of products, including cleansers, moisturizers, toners, serums, and makeup items such as mascara, eye shadow, foundation, blush, highlighter, bronzer, and lipstick.

Although the magazines included a great variety of adverts, there was only a small number of editorial features on cosmetic procedures. For this reason, a second, 'broader', corpus was created to gain a better understanding of the discourses presented in editorial discourses in women's magazines (see Table 1 for an overview of the magazines included in the broad corpus).

After photographing all relevant editorial and marketing materials in the magazines, i.e., content which related to cosmetic procedures and/or 'other' beauty products/services, the data were transferred to NVivo, a useful 'data management package' (Zamawe 2015), which allows for the simultaneous analysis of both textual and visual data. As Hoover and Koerber (2011, 68) have argued, NVivo enhances the efficiency, multiplicity, and transparency of qualitative research.

The method of analysis adopted here was inspired by various studies with a focus similar to this project (Berkowitz 2017; Moran & Lee 2013; Smirnova 2012). Firstly, as indicated above, this study was inspired by some of Smirnova's (2012) earlier work. The focus on anti-ageing in cosmetics discourses and the themes of 'science', 'medicine' and the implementation of cosmetic surgery terms in beauty advertising were also detected in this current analysis. Moreover, several themes found in Moran and Lee's (2013) analysis of promotions of female genital cosmetic surgery – such as the problem/solution format; emphasis on consumers' individual choices; and the presentation of cosmetic surgery as quick and easy – were identified in my sample.

The first step in the analysis was to conduct a corpus linguistic study of the copy of the adverts for both beauty products/services and cosmetic procedures. To aid this process, Wmatrix, a software tool developed by Paul Rayson, was used. The tool is particularly appealing as it offers semantic tagging in addition to the more standard functions that are available in other corpus tools, such as frequency lists, concordances, key words, etc. The Semantic Analysis System (USAS) enabled a close look at the semantic fields related to, for example, 'medical treatments' and 'personal care'. An important caveat of the semantic tagger is that it cannot account satisfactorily for a word's contextual or genre-specific meaning, although attempts at disambiguation have been made (cf. Rayson Archer, Piao & McEnery, 2004). For this reason, Rayson (2008, 528) emphasizes the importance of the researcher's qualitative examination of the tags that the software assigns to a particular text.

Subsequent to this monomodal corpus linguistic analysis, I adopted a discursive thematic analysis approach to analyse both the textual and visual elements of the data. This approach was inspired by Moran and Lee's (2013) thematic analysis of Australian cosmetic surgery websites; Smirnova's (2012) content and discourse analysis of adverts for over-the-counter skin creams; and Gleeson's (2011) Polytextual Thematic Analysis method. The initial step was to familiarize myself with the data and to gain an overview by repeatedly going through all the pictures of the magazines' editorial and marketing materials. Whilst reading and viewing the data, I wrote down potential themes, or 'pro-themes' (Gleeson 2011). These themes were not only based on previous studies into the marketing of cosmetic procedures and beauty products, but they also developed in an inductive manner. The preliminary themes were presented, discussed, and reviewed several times[5]; the final thematic map can be found in Appendix 1.

Reflecting a discourse analytical approach, the context in which the editorial and advertising features appeared was taken into account. This focus on context is particularly significant in a discussion of advertising as adverts "[acquire] meaning not only by [their] content but also [their context]" Hackley (2009, 57). The immediate context of the lifestyle magazine is important to consider here as this context is not independent or separate from advertisers' interest; on the contrary, as media are reliant on selling advertising space, advertisers shape the medium's focus and perspective (Gill 2007, 73, 181). Moreover, as Fairclough (2003, 63) argued, the external relations between the materials under study and the wider social structures, social practices and social events in which these materials are found need to be considered. For example, it was necessary to incorporate national and international discussions of the popularization of cosmetic procedures and the regulation of cosmetic surgery marketing when interpreting the data.

3. Results and discussion

First, it needs to be noted that the number of adverts for cosmetic procedures has decreased significantly since 2001; moreover,

[5] Special thanks here to Professor Guy Cook and Professor Gabriella Rundblad who patiently engaged with my analyses and who aided the development of the final thematic map.

Table 1
Overview of Women's magazines included in broad, cross-reference corpus.

Magazine	Year	Issues included
Cosmopolitan	2014	October - December
	2016	January - December
Marie Claire	2005	January – June
	2014	December
	2016	January – December
	2017	January
Elle	2015	April – December
	2016	January – June
Harper's Bazaar	2014	December
	2016	January, July – December
	2017	January
Red	2015	March, April, November
	2016	January, February, July, August, September
Glamour	2014	June, December
	2015	March – December
InStyle	2015	February, June, September, October
	2016	June, July, November

advertising for beauty products has also declined in *Cosmo* (see Fig. 1). This overall decline in the number of adverts is unsurprising; as Hackley (2010) has indicated, audiences have, to a great extent, moved online for the type of content that lifestyle magazines offer, which means that an increasing amount of marketing budgets is now spent on online advertising.

Accompanying the decline in the number of adverts for cosmetic providers, the placement of the adverts has also changed, particularly in *Marie Claire*. Whereas adverts for cosmetic procedures were confined to the 'classified' sections at the back of the magazines in 2001 and 2006, they have increasingly been placed within the body of the magazine, close to the editorial content. Reflecting earlier discussions of Allergan's marketing strategy, which Berkowitz (2017) has also described, this change in placement is strategic as the editorial context encourages readers to notice the advert (cf. Winship 1987); moreover, the placement of advertising in a context which is congruent with its themes and message has been shown to have a positive impact on product recall, consideration, and purchase intent (Dahlén Rosengren, Törn & Öhman, 2008; Regan 2015).

Reflecting a wider trend in the advertising landscape, cosmetic providers increasingly use advertorials rather than traditional advertising, particularly in high-end women's magazines. In an analysis of advertorials in fashion and beauty magazines, Hanson (2014), for example, found a significant increase in the prevalence of advertorials. Publishers customize marketing content so that it approximates the tone and presentation of editorial content, which may result in a source-based confusion that imbues the advert with credibility it might otherwise not achieve (Bakshi 2015). The advertorial format appeals to marketers because it attracts greater viewer consideration than traditional advertising (Reijmersdal Neijens & Smit, 2005, 50). Moreover, consumers are more likely to trust content that is perceived as more editorial (cf. Hanson 2014, 195). An example of an advertorial for filler brand Juvéderm can be seen in Fig. 2.

Although the promotional nature of the advertorial is indicated – i.e., see the text 'Red Promotion' in the upper right-hand corner and the inclusion of a logo in the bottom right-hand corner – the advertorial blurs into the (beauty) editorial content surrounding it in terms of its placement, layout, and copy. For example, unlike more traditional adverts, the majority of the Juvéderm advertorial consists of text, which is formatted like an editorial feature; it is presented in different columns and even features a pull quote. Moreover, similar to editorial content in the magazine, the promotion provides information on how to overcome a particular beauty 'issue', namely the appearance of ageing, to (a fictional) 'you', the reader/viewer. Moreover, the use of 'we' is interesting here as it deviates from the established use of 'we' in advertising discourse as denoting the manufacturer (Cook 2001, 157) or advertiser. Rather, the authors use an inclusive 'we' to position themselves as part of the (ageing) female audience of the magazine as they assert, "we're all aware of wrinkles, pigmentation and sagging…". In line with the unconventional adoption of an inclusive 'we', the promotional feature appears to speak of the beauty industry as an 'other', noting how "dehydration is the enemy of skin. Which is why the beauty industry has poured so much time and money into researching a certain little molecule called hyaluronic acid". A final point to make here relates to the statement, "some [people] have likened [hyaluronic acid fillers] to a moisturizer for the deeper layers of the skin". Here, a cosmetic procedure (i.e. hyaluronic acid fillers) is explicitly linked to a beauty product, namely a moisturizer. The construction of this connection will be explored in more depth in a later section.

It is important to highlight the non-surgical nature of the procedures offered by Juvéderm, as non-invasive procedures may be compared to beauty products and services more easily than surgical procedures because of their relatively less invasive and less costly nature. As indicated previously, cosmetic providers are aware of this and have considered the opportunities that non-invasive treatments can offer. Market analyst Mintel (2006, 33), for example, explained how "the blurring of boundaries between what constitutes a facial and what constitutes non-surgical facial procedures, is likely to be a real driver for converting those consumers who already undertake regular beauty treatments and therapies". Note the ambiguous nature of the term 'regular' here; it is unclear whether the author intends it to mean 'common/normal' or 'periodic'. The blurring of boundaries which the authors refer to is aided by cosmetic clinics offering both surgical and non-surgical procedures and by the increasing 'crossover' between beauty salons and cosmetic clinics (Worth 2009, 43).

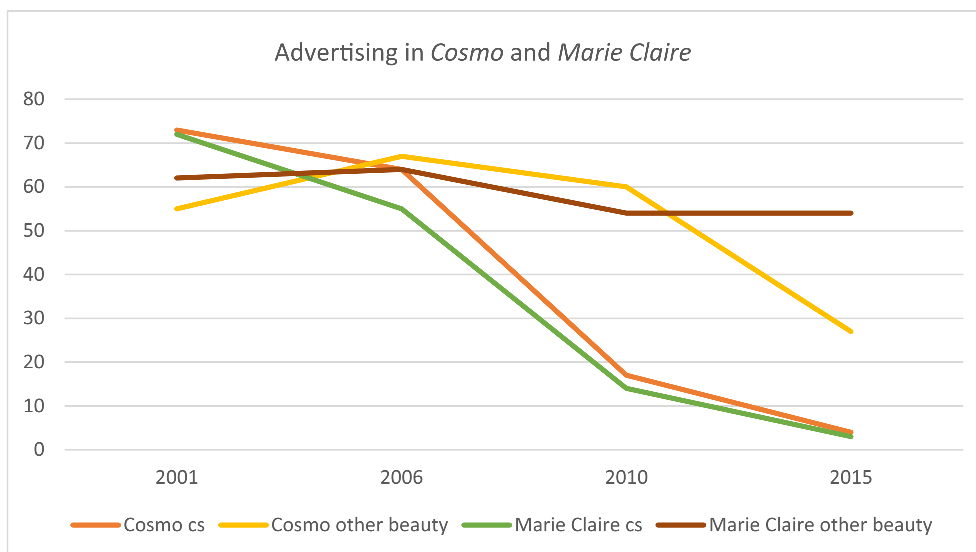

Fig. 1. Decline in number of adverts in *Cosmo* and *Marie Claire*.

Several editorial features in the lifestyle magazines, particularly *Marie Claire*, explicitly compare cosmetic procedures to spa treatments. In a special issue on 'Future Beauty' (October 2010, 30), for example, the non-surgical 'HydraFacial procedure' is described as "[a] great spa-like facial". Interestingly, the comparison may also be reversed as beauty services are compared to cosmetic procedures. For instance, an article on "innovative facials and body blitzes" discusses a 'Luxury Facial' by cosmetics brand Lancôme alongside various non-invasive procedures. Although the Lancôme treatment is not a cosmetic procedure, it does draw on medical discourses as it uses a "skin **diagnosis** probe" and is followed by a "personal **prescription** of skincare products" (*ibid.*). This inclusion of medical lexical choices in beauty advertising is reminiscent of Smirnova's (2012) study which found that the ageing process (in women) was constructed as a 'disease', which needed to be 'treated'. Placing these beauty products within a medical framework may provide them with a higher level of perceived credibility and effectiveness, as will be explored in more depth below.

A different example of the conflation between beauty treatments and cosmetic procedures can be found in an article in *Cosmo* (October 2015, 160–165) on various types of facials. As can be seen in Fig. 3, the article is accompanied by a picture of a model framed by hands in surgical gloves, invoking a medical framework. However, the article discusses only one treatment which can be classified as a cosmetic procedure, i.e., the MC1 Cream which is made from a person's own blood and (re)injected into the face.

Interestingly, in a recent article in *Cosmo* (July 2016, 69), beauty Director Ingeborg van Lotringen calls attention to the equation of (non-invasive) cosmetic procedures and beauty products/services as she notes,

We take an awful lot of risks when it comes to 'beauty'. A lot of that has to do with the warp speed with which 'non-invasive' beauty treatments have gone mainstream, and the way they are represented to us as the equivalent of having your lashes permed.

By highlighting the risks that accompany particular beauty treatments and using scare quotes for 'beauty' and 'non-invasive', Van Lotringen appears to question – and is perhaps even critical of – what constitutes beauty and when and why procedures are deemed 'non-invasive' (cf. Predelli 2003).

3.1. Blurring boundaries – advertising beauty products

This section explores the variety of ways in which advertising for beauty products draws on discourses associated with cosmetic procedures and medicine more generally. More specifically, this section discusses the inclusion of medical professionals in advertising content for beauty products; the use of lexical items – and visuals – associated with cosmetic procedures which are used in (other) beauty advertising; and, lastly, it considers a handful of adverts which draw a direct link between beauty products and cosmetic procedures.

Approximately 9% [$N = 38$] of all beauty adverts mention that a product has been developed or tested by dermatologists. Particularly brands with a pharmaceutical alignment, such as Neutrogena and Clinique, draw on dermatological science. Similarly, several features introduce dermatologists – or other medical professionals – to discuss and evaluate products. This finding is reminiscent of Smirnova's (2012, 1241) work, which found that approximately 27% of adverts for over-the-counter anti-ageing skincare referenced a doctor, dermatologist or other 'specialist'. As Polonijo and Carpiano (2008, 467) have noted, the inclusion of medical professionals as experts on beauty is significant as it defines appearance "in a manner consistent with a medicalization framework – as a problem in need of medical treatment".

In addition to the inclusion of medical professionals, several lexical items associated with (cosmetic) medical procedures can be found in adverts for beauty products. For example, the term 'diagnosis' can be found equally frequently [1%; $N = 4$] in (other) beauty advertising as in adverts for cosmetic procedures. Chanel's Age Delay serum, for example, is to be used "as recommended by your

BEAUTY

EASIEST TAN EVER?

It was one of the big beauty innovations of last year and now St Tropez's In Shower Tanning Lotion (£14.50) is back, only this time it's darker. Sure, the new 'medium' shade still takes a few days to build a holiday-like glow, but the amped-up actives mean you get more bang for your three minutes spent standing there, while the formula gets to work.

I CAN'T IMAGINE ANYONE WHO WOULDN'T WANT TO RECEIVE A BOTTLE OF TOM FORD'S SOLEIL BLANC SHIMMERING BODY OIL (£68). IT'S UTTERLY INDULGENT.

UPDATE

BEAUTY NOTEBOOK

IT'S GENIUS!
Using one eye as a control, I found a few swipes of Diorshow Maximiser 3D Lash Primer (£25.50), followed by mascara, does exactly what it says on the tube. As well as making lashes look huge, it keeps mascara in place, too.

New favourite
I always start with a balm, but for my secondary cleanse I like a foam or wash. Or, as it turns out, Bare Minerals Clay Chameleon Transforming Purifying Cleanser (£18). The soft, red clay works in beautifully, feels deeply cleansing, thanks to the sea salts and papaya, and rinses off thoroughly, leaving skin clean but not stripped.

3 best... new skincare heroes

THE SINGLE-DOSE SERUM: Estée Lauder Advanced Night Repair Intensive Recovery Ampoules (£86). Handy for daytime top-ups.

THE NOURISHER: Elemis Superfood Facial Oil (£45 at QVC) is the latest high-quality face oil. A little goes a long way.

THE MASK: Origins Plantscription Youth-Renewing Sheet Mask (£34 for a box of six) drenches skin with moisture.

BEAUTY INSIDER
by ANNABEL MEGGESON

It's not often a treatment comes along that is truly revolutionary. Botox was one, IPL another. Both delivered consistent, provable, visible results – no ambivalent, "It can take three months to see the full effects" true of so many beauty therapies on the market today. Well, now there's another: Cutera Excel V (Cutera, I think, for short, is fine) uses laser technology to target red veins, which gather like tiny spider's legs round both nostrils in my case, but in others take the form of rosacea or varicose veins. With some other treatments, it can be painful and the veins come back, but I tried Cutera two weeks ago and I can confidently report that a) it didn't hurt and b) the veins have pretty much gone. I'll need one more treatment – a top-up to seal the deal – but I've pretty much retired the concealer already. The result is my skin now looks cleaner and creamier overall. It's a small but significant improvement. It's the real deal.
Cutera Excel V is available at Medicetics from £350 a session; medicetics.co.uk

This month I have been...
CREATING a 'background fragrance' for my home with Ila's Incense For An Aroma Of Purity And Peace (£12); **LOVING** the warm scent of Kneipp Grape Seed Massage Oil (£10.95); **WONDERING** whether the world really needs another brow product...

150 REDONLINE.CO.UK JULY 2016

Red PROMOTION

Hyaluronic ACID 101

It's best known for its role in skincare, but did you know that the hydrating benefits of hyaluronic acid work best when it's injected?

Ever wonder exactly what's happening as your skin gets older? We're all aware of wrinkles, pigmentation and sagging, and while all these start to appear as we get older, did you know that they're largely caused by the skin's loss of ability to hold onto water?

Yes, dehydration is the enemy of skin. Which is why the beauty industry has poured so much time and money into researching a certain little molecule called hyaluronic acid.

HA, as it's also known, is a naturally occurring sugar found in our bodies. It attracts and holds onto water molecules, helping it cushion and lubricate tissues and joints.

Skin rich with HA is firm and plump as it holds onto water molecules within. But as we age, the levels of hyaluronic acid start to decrease, meaning skin is less supported and the facial structure starts to 'drop'.

You may have come across hyaluronic acid in your moisturiser or serum, but despite being a much-loved ingredient in skincare, it can only work on the uppermost layers of the skin when applied that way. Where HA really comes into its own is when it's injected into the dermal layers.

Facial fillers like Juvéderm are made of HA and as it occurs naturally in our bodies, the skin takes to it very well. Because they're natural, hyaluronic acid-rich fillers break down over time, unlike permanent fillers, which can give unpredictable results. Instead, you'll look glowing and never 'done'. Some have likened it to a moisturiser for the deeper layers of the skin. And what's not to love about that?

"Hyaluronic acid fillers can improve your complexion, as well as adding subtle volume – they're like moisturiser for the deeper layers of your skin"

INTERESTED?
If your skin needs a little plump and glow, a Juvéderm facial filler could be the perfect solution. There is virtually no downtime and results are visible quickly, lasting up to 18 months depending on the product used. All Allergan (which makes Juvéderm) practitioners are trained to a high standard and can work with you to create a personalised treatment programme, so you can feel reassured that you're making the right choice for you.
To find your nearest clinic, visit locator.juvederm.co.uk

Juvéderm

Fig. 2. Advertorial Juvéderm in *Red*, July 2016, pp. 132–133.

Fig. 3. *Cosmo*, October 2015, pp. 160–161.

Précisión diagnosis”; furthermore, two adverts for L’Oréal also promote a skin diagnosis. Alongside these references to a diagnosis, a few adverts (2%, $N = 9$) for (other) beauty products offer readers a (skin) consultation to find their ‘perfect match’ that is “right for you” (Estée Lauder in *Cosmo* October 2001, 7).

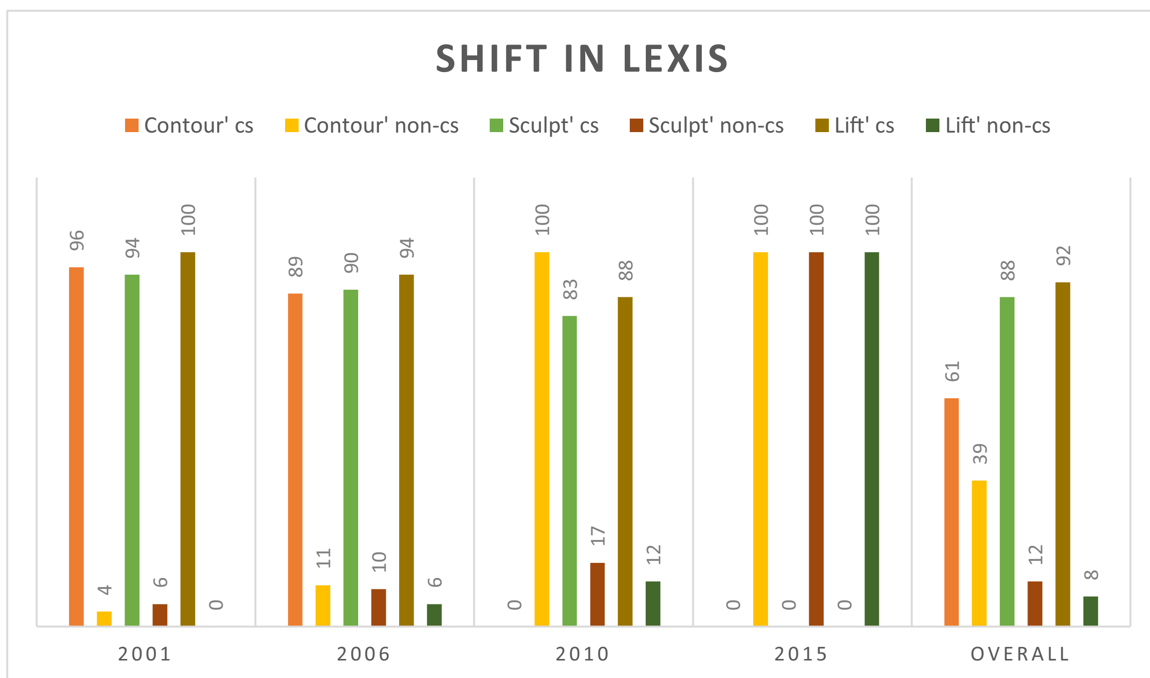

Fig. 4. Relative occurrence of references to lemmas ‘contour’, ‘lift’, and ‘sculpt’ in advertising for cosmetic procedures (*cs*) and (other) beauty products/services (*non-cs*), 2001–2005.

Besides the (occasional) references to ‘diagnosis’ or ‘consultation’ in beauty advertising, a notable trend concerns the increased adoption of terms traditionally used to denote cosmetic procedures by adverts for beauty products. As can be seen in Fig. 4, the lemmas ‘contour’, ‘lift’, and ‘sculpt’ were predominantly found in adverts for cosmetic procedures in the early data but are increasingly found (solely) in the (other) beauty advertising data.

Whereas the 2001 and 2006 references to ‘contour’ were usually found in adverts for cosmetic procedures (e.g., ‘body contouring’), in the 2010 and 2015 data ‘contour’ was used exclusively in adverts for beauty products. Product names such as Barry M’s “Flawless Chisel Cheeks Contour Kit”, L’Oréal’s “RevitaLift Pro-Contouring System”, and Estée Lauder’s “Eye and Face Contouring Kits” present just a few examples of how brands have implemented the term in their recent marketing efforts. Similar to the shift that has taken place in the occurrence of ‘contour’, beauty advertising has increasingly adopted the terms ‘lift’ and ‘sculpt’, which were previously found predominantly in adverts for cosmetic procedures (e.g. liposculpture and breast lifts).

The decrease in references to ‘contour’, ‘lift’, and ‘sculpt’ in adverts for cosmetic procedures is unsurprising when considering that these terms are usually employed to denote invasive procedures, which are marketed less frequently today. In addition to adopting the terms discussed above, adverts for beauty products also market products inspired by ‘fillers’ and ‘peeling kits’. Reminiscent of the chemical peels that some cosmetic providers advertise, several beauty brands offer at-home ‘peel kits’. An advert for Garnier in *Cosmo* (June 2006, 236–237), for example, advertises a ‘Pure Purifying Peel Kit’, a product which includes “a peeling solution”. Moreover, an advert by L’Oréal explicitly compares its ReNoviste anti-ageing glycolic peel and a ‘professional peel’, stating that the ReNoviste peel contains the same type of ingredients as those used by dermatologists, although “at a lower concentration” (in *Marie Claire* February 2006, 46–47).

Similar to chemical peels, dermal fillers are another type of non-invasive procedure used as inspiration for beauty products. Of all adverts for cosmetic procedures – particularly those published in the magazines in 2010 and 2015 – 5% [$N = 15$] feature dermal fillers. Although found less frequently in the beauty product adverts (1%, $N = 5$), the adverts that draw on the idea of fillers are nevertheless interesting to discuss, particularly as brands increasingly appear to launch products inspired by fillers (e.g. see Estée Lauder’s “New Dimension Firm + Fill”, Revlon’s “Youth FX™ Fill + Blur”, and L’Oréal’s “RevitaLift Filler Renew” ranges). It needs to be noted here that all references to fillers in adverts for beauty products were found in *Marie Claire*. This is unsurprising as the majority of cosmetic providers offering fillers also published their marketing materials in this magazine since *Marie Claire*’s target audience – i.e. affluent women in their mid-forties – is in line with that of cosmetic providers. As Berkowitz (2017, p.4) has noted, “Botox is widely marketed to middle-aged women…”; nevertheless, the author also points out that Botox, and other non-invasive treatments, are increasingly

Fig. 5. Advert L’Oréal Paris in *Marie Claire,* February 2016, pp. 84–85.

marketed to women in their twenties and thirties as means to prevent the physical signs of ageing.

The advert for L'Oréal's 'Collagen Filler' – found across all 2006 issues of *Marie Claire* – was the first beauty advert in the corpus to draw on the filler-discourse (see Fig. 5). Evidently, the product's name and copy of the advert refer to 'filler' and 'fill' various times. Moreover, the idea of a 'Collagen Filler' is echoed in the large picture on the left page of the double-spread advert, which portrays a model holding a product – shaped like a syringe – to her cheek, as if ready to inject a substance. Interestingly, Smirnova (2012, 1242) also found an advert in her corpus which featured images of a syringe and even a scalpel. Similar to the advert for L'Oréal's 'Collagen Filler', Eucerin also includes a visual allusion to cosmetic procedures (see Fig. 6); the depiction of marks on the model's face are reminiscent of a practitioner's markings on a patient's face before treatment.

The adoption of visual allusions and lexical items traditionally associated with cosmetic procedures is unsurprising in light of the popularity of these procedures and the "potentially detrimental effect [they may have] on sales of retail cosmetics" (Tutt 2013, 103). By including certain lexical items, beauty brands are drawing a parallel between the effectiveness of particular procedures and the product that is being advertised. However, the discourse associated with cosmetic procedures may also be used to indicate a distinction between procedure and product; an advert by Boots' own beauty brand, No7, for example, claimed how its anti-ageing glycolic peel "removes dull skin and stimulates cell renewal for younger looking skin **without surgery**" (my emphasis, *Cosmo* June 2006, 47). Similarly, an advert for Olay in *Marie Claire* (June 2015, 202) promotes its 'Regenerist 3 Point Super Age-Defying Cream' by stating, "newer skin is revealed **without drastic measures**" (my emphasis).

Alongside the adverts for No7 and Olay, several others draw a comparison between the (effects of the) product that is marketed and (the effects of) a cosmetic procedure. An advert for L'Oréal's micro-dermabrasion kit, for example, includes the small print "the ReFinish at home skincare kit is not intended as a replacement for professional Micro-Dermabrasion". Moreover, the advert for Eucerin in Fig. 6 also compares the brand's product with a cosmetic procedure as it indicates, "Hyaluronic Acid injections are key in fighting wrinkles effectively, **but if you are not ready for this**, the same active ingredient is now used in Eucerin Hyaluron-Filler range" (my emphasis). Finally, an advert for L'Oréal's Revitalift Pro-Contouring System claims that the product will reduce the appearance of wrinkles and make skin feel more toned, adding "unless you want a permanent lift, there's always Revitalift" (in *Marie Claire* February 2010, 36–37).

4. Conclusion – implications of a (lack of a) boundary

In concurrence with Hsu and Grodal (2020, 2), this study has illustrated that when a category is new or in flux it may benefit from associations with existing categories and may "strategically employ symbols, labels and metaphors that highlight similarities to [these] existing categories". Interestingly, it seems that both cosmetic procedures and 'other' beauty products/services are dynamic categories, drawing on each other's discourses; as exemplified above, particularly advertising for 'other' beauty products employs discourses associated with (cosmetic) medical procedures. Nevertheless, as discussed above, despite drawing on cosmetic surgery discourses, some beauty brands emphasized the differences between their products and cosmetic procedures, constituting a boundary. In this way, the beauty brands may benefit from the positive associations – such as the effectiveness – of cosmetic procedures but also distance themselves from the more contested aspects of procedures, such as the permanence and risk of more invasive procedures (cf. Smirnova 2012). Hence, beauty products inspired by cosmetic procedures can offer a type of 'procedure-lite'.

The negotiation of categorization and boundaries in editorial and advertising contents in women's lifestyle magazines raises the question whether cosmetic procedures can be categorized under the wider concept of 'beauty products and services' or if we should adopt the concept of a boundary and acknowledge its fuzziness and indeterminacy. Following Wittgenstein's (1980, 108e) argument that "[it] is unnatural to draw a conceptual boundary line where there is not some special justification for it, where similarities would constantly draw us across the arbitrarily drawn line", a clear justification needs to be offered in order to support the distinction between cosmetic procedures and 'other' beauty products and/or services.

The issue of categorization is foregrounded in current debates on the regulation of the cosmetic surgery market in the UK. As none of the cosmetic surgery bills discussed above passed their first reading, the intricacies and practicalities of a ban have not been considered and various questions arise. The main issue related to the calls for a ban on cosmetic surgery advertising is the assumption that cosmetic procedures and beauty products/services constitute different categories. However, as demonstrated above, this notion needs to be reassessed in light of the overlap between the nature and representation of cosmetic procedures and (other) beauty products/services. Moreover, the motivations for a ban on cosmetic surgery will need to be explored as a variety of arguments has been proposed. Whereas some proponents have drawn on the medical nature and risks of cosmetic surgery (cf. Clwyd's 2012 House of Commons Bill), others appear to criticize the wider normalization of cosmetic procedures. In their call to "cut it out", UK Feminista (2012), for example, suggested a ban on adverts for cosmetic procedures as these adverts "[fuel and exploit] poor body image", trivialize invasive surgery and "[normalize] medically unnecessary invasive surgery". However, the question arises whether a ban on adverts would be able to curb the normalization and/or trivialization of cosmetic procedures since the wider discourse surrounding the cosmetic surgery industry is largely positive. Moreover, as indicated in this paper, adverts for beauty products incorporate the discourse associated with cosmetic procedures. If the reasons for adopting a ban are indeed linked to issues of normalization, perhaps it would be more appropriate to advance a 'counter-discourse', reminiscent of recent Save Face campaigns. This discourse could highlight the differences between cosmetic procedures and (other) beauty products and may focus on the risks of cosmetic procedures and the – relatively unregulated – cosmetic surgery industry.

Fig. 6. Advert Eucerin in *Marie Claire*, June 2015, p. 21.

4.1. Limitations and recommendations

This study has focused on constructions of beauty practices in women's lifestyle magazines as women are far more likely to undergo both invasive and non-invasive cosmetic procedures than men (ISAPS 2019). However, although recent history has presumed that (heterosexual) men are largely indifferent to their appearance (Connell 2005; Ricciardelli Clow & White, 2010), masculinities are being redefined and it is becoming increasingly acceptable and expected for men to engage in appearance enhancing practices. For this reason, it would be interesting to see whether the positioning of cosmetic procedures and 'other' beauty products and services for men follows a similar pattern to the one discussed here (cf. Hermans 2021).

Secondly, it needs to be highlighted that this study conducted a longitudinal study of content published in women's lifestyle magazines, a medium which has changed quite dramatically during the time period under study (2001–2015). As mentioned above, consumers have increasingly turned to online channels to read (and view) the information they would previously have accessed through lifestyle magazines. As Montemurro Porcnik, Hedén and Otte (2015) have indicated, the Internet – and particularly social media – now play a significant role in the presentation and perception of cosmetic procedures. Further research could examine whether, and if so how, cosmetic procedures and 'other' beauty products and services are also presented as similar in an online context.

Supplementary materials

Supplementary material associated with this article can be found, in the online version, at doi:10.1016/j.poetic.2021.101610.

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