

Esther Klingbiel
Advertising Consumerism
Final Paper
12/20/2017

At the turn of the twentieth century, as the Industrial Revolution was well underway, a particular paradigm shift occurred among the consumer population in the United States. Disillusioned by the life of luxury that burgeoned from an increasingly bountiful and “interdependent”¹ economy, urbanization and the secularization of culture left the Victorian upper class feeling increasingly depersonalized. The educated bourgeois became ever more anxious and depressed, and were plagued by a “paralysis of will.”² The solution to this, in the eyes of advertisers, was the dissemination of the ‘therapeutic ethos,’ a single-minded, totally “self-referential”³ pursuit of health and vigor of life.

The definition of the therapeutic ethos was from the start vague—and achieving lost physical and mental ‘health’ was ultimately impossible, for advertisers and therapists alike constantly pushed the pursuit of the future self—the self that *could* be—but never the present self. Consumers always had more to buy and more to conform to in an ever-increasing market of ‘therapeutic’ goods and lifestyles.

At the same time, as jobs became more specialized and upward mobility became increasingly jeopardized, another social shift occurred. Success came to depend less on hard work, skill and talent. It now had everything to do with social skills, physical

¹ T. J. Jackson Lears, “From Salvation to Self-Realization: Advertising and the Therapeutic Roots of Consumer Culture, 1880–1930,” *Advertising and Society Review* 1 no. 1 (2000): 6.

² *Ibid.*, 7.

³ *Ibid.*, 4.

appearance and “personal magnetism.”⁴ People with this highly coveted magnetism could change their behavior and looks to conform to others’ expectations and values.⁵ Thus, as T.J. Jackson Lears writes, “Americans began to imagine a self that was neither simple nor genuine, but fragmented and socially constructed.”⁶

The popularization of the therapeutic ethos and the obsession with the outward self created room for a competitive new niche in the American marketplace. Advertisers could now target individuals by narrowing in on their insecurities and constantly forcing consumers to compare themselves to others. Moral standards and codes, beauty, youth and hygiene: if you weren’t doing it right, you would never get married, be healthy and live happily ever after.

Delayed gratification and denying the self of pleasures (in order to have a pleasurable afterlife, according to the Puritan ethos) was out. Abundance therapy⁷ and buying were in. With the therapeutic ethos, there was no realistic end goal.⁸ The only pursuit was to grow, to “elevate becoming over being.”⁹ Thus the consumer could never be truly happy or healthy, for they were oriented singularly toward the future self (which

⁴ Ibid., 8.

⁵ Ibid.

⁶ Ibid.

⁷ Ibid., 12.

⁸ Ibid., 15.

⁹ Ibid.

never actually existed and thus could never be attained) instead of focusing on the present self. This “coerciveness of the ‘ought’”¹⁰ is what kept (and keeps) people buying.

The future self was also advertised as how others would have you, rather than how you would have yourself (if one could even pinpoint such an introspective expectation). People started to view themselves from the gaze of the other. This was especially true for women, who were constantly encouraged to approach their looks, character and overall quality (i.e., their worthiness of attention from men) from the perspective of the male gaze.

The first two advertisements I will be analyzing in this paper are oriented towards women and both utilize the therapeutic ethos. Having surfaced sixty-five years apart, they certainly differ as culture has inevitably changed dramatically between the mid-twentieth and early twenty-first centuries. But their implicit expectation is the same. A woman needs to buy products in order to be beautiful, happy and healthy. However, while these advertisements’ central selling point may be the same, their modes of delivery are substantially different. The therapeutic ethos still exists in contemporary consumer culture, but it is now much more subliminal, aversive and imbedded in cultural symbols.

The third advertisement I will be discussing is directly pointed at male consumers. Interestingly, no significant male figures appear in the advertisement—in fact, a woman is the spot’s main focus. The advertisement still carries the age-old (but contemporarily redefined) aspects of the therapeutic ethos, identical in subject to its Victorian origins but revamped and restyled to fit twenty-first century consumer culture. The advertisement

¹⁰ Ibid.

also reinforces a strict, heteronormative gender binary—the female body is associated with display, and the male body is associated with production. In the context of male-oriented advertising, the implicit assumptions for women are the same as the other ads I discuss: women must make themselves beautiful for men, and it is not only socially acceptable but socially expected that men possess, objectify and consume women’s bodies for their own pleasure.

In 1951, Dorothy Gray Salon published an ad in the *New York Herald Tribune*¹¹ (Fig. 1) with the headline, “Does Your Husband Look Younger than You do?” Atop the headline is a large, black and white image of a woman, elegantly dressed and touching her hand to her mouth in apprehension. Looking over her shoulder, we see a couple, presumably her husband with another woman (we can infer this from the ad’s headline). The other woman is flirtatiously touching the man’s bicep, smiling with half-closed, lustful eyes. He is obviously enjoying the attention, as indicated by his body language and smile.

The implication here is that the wife’s beauty isn’t enough to keep her husband’s attention, affection or devotion. Maybe if she were just a bit younger looking, he wouldn’t have that wandering eye. The subhead of the ad reads, “You may side-step the tragedy that overtakes so many wives.” This is a suggestion that her husband’s wayward loyalty is common and perhaps even inevitable. The solution? Dorothy Gray Cellogem Cream.

¹¹ Dorothy Gray Salon, “Does Your Husband Look Younger than You do?”, 1951, *New York Herald Tribune*.

A defining aspect of the therapeutic ethos in advertising is the presence of medical authority.¹² This ad has such an authority in the version of a small picture depicting a bespectacled man in a white lab coat, looking at an Erlenmeyer flask with some kind of dark liquid in it. Who he is, or what he is doing, is not explained, but that's not the point. The copy of the ad goes on to explain, "Noted specialists have proved that estrogenic hormones applied to the skin can help women look younger." What specialists? And *how* do these hormones make one look younger? It doesn't matter. Since the rise of the therapeutic ethos at the beginning of the 1900s through today, advertisers have been betting on and winning with the assumption that the consumer will inherently trust the advertiser, maybe even especially because they are not able to understand the finessed, complicated science behind this miracle product.

Like many ads during the first half of the twentieth century, this ad displays explicit "Reason Why"¹³ advertising: a simultaneous promise and threat. Buy the product and you'll be happily reunited with your husband (as evidenced by the small images of the husband and wife embracing and happily smiling at each other). Don't buy it and you'll be the pariah in your friend group; the lonely, prematurely aging woman whose husband left her because she was too old for him.

The second ad analyzed in this paper, a commercial spot for Botox Cosmetic (skin fillers to fight signs of skin aging) and aired in 2014¹⁴ (Figs 2 – 2.5) is almost identical to

¹² Lears, 6.

¹³ Ibid., 18.

¹⁴ Allergan, "Botox," 2014, <https://www.youtube.com/watch?v=2DJTKO-y0cI&t=21s>.

the Dorothy Gray ad in its use of the therapeutic ethos. The difference here, as with most modern-day advertising (especially those that are gender-directed), is that the explicit messages voiced in the earlier ad are significantly refined here—so much so that their mere presence seems totally aversive. On the surface, the ad seems harmless. But upon closer inspection, its implicit messages are just as insidious and threatening to the feminist struggle for autonomy that women have worked so hard to achieve since the mid-twentieth century.¹⁵

The visual content of the advertising isn't particularly noteworthy, containing only close-up images of beautiful, late-thirties women in a nondescript (but nonetheless modern and high-end-looking) location (Figs 2–2.3). They blink, smile suggestively and beckon you towards them. *Get Botox and be one of us*, they seem to say. The central narrative of the voice-over in this ad is the same as the Dorothy Gray ad in conjunction with the “Reason Why” advertising methods of the therapeutic ethos. “Relook. Rethink. Reimagine,” a sultry woman’s voice says. “Because right here, right now, it’s time to take a closer look at Botox Cosmetic.”

Here we see the collapse of symbolic structure outside the self that Lears so eloquently explains in his essay. ‘Rethinking’ and ‘reimagining’ are future-oriented actions—they beckon you to look at yourself in the future. But the ‘right here, right now’ aspect of the following narrative contradicts this ‘re-’ action. The line between reality and the fantasy-world of advertising becomes blurred as the present and future are no longer totally discernible. The narrator goes on to exclaim, “See what real results can really look

¹⁵ Lears, 27.

like,” as the beautiful women pose and smile directly at the camera. The subconscious association that one automatically makes is that these ‘real results’ are evidenced in the faces of the impossibly beautiful models, and that the consumer, too, will be beautiful like them with Botox. Women viewing the Dorothy Gray ad were enticed much in the same way as women are with the Botox ad. They look at the ad’s gorgeous, happy, smiling people, and implicitly expect that they will be just like them once they buy this product.

The Botox ad also peddles the medical aspect of the therapeutic ethos by citing the FDA, an ultimate medical authority, with the line “[Botox Cosmetic,] the only FDA-approved treatment for the temporary improvement of both moderate to severe frown lines and crow’s feet.” With all modern-day medicinal products, the FDA’s stamp of approval is a major selling point (despite the fact that the following four minutes of this ad is devoted to possible side-effects). The government risks liability for your safety; you and Botox don’t. It should also be noted that the commercial does not try to go on to prove it’s medical legitimacy beyond the mention of the FDA—another implicit message that the consumer shouldn’t ask too many questions or be too concerned about the possible implications of having bacteria injected into their faces.

The final similarity between the Botox and Dorothy Gray ads is the presence of the male gaze. However, here again, Botox achieves this aversively, passing along the implicit assumption that women should get Botox in order to be more pleasing to men without ever really verbalizing it. About forty-five seconds into the spot, we see one of the models with a man (Figs 2.4–2.5). They briefly smile, flirt, and stand close to each

other intimately. But what is most obvious about this interaction is the man's skin (after all, it's difficult not to note how average he looks when the rest of the ad is full of perfect-looking women). His presence, and his appearance mirror a paragraph in the copy for the Dorothy Gray ad: "Unfair though it may be, the tiny lines, the trace of wrinkles, the loss of skin tone and color, matter very little in the measure of a man's attractiveness...but they can make a heartbreaking difference in a woman's." The presence of this average man, with his deep-set wrinkles, grey hair, and loose skin is the personification of the preceding statement. So much of the therapeutic ethos is the threat of social isolation if one (particularly women, in both of these cases) fails to fulfill their duty by being the liveliest, most youthful, healthy versions of themselves. Yet this message is rarely disseminated without contradiction.

The final advertisement discussed in this essay utilizes the therapeutic ethos to target the male market. Such ethos in this scenario is employed in much the same way as it is in advertisements aimed at women, drawing on 'inventive maladies' to prescribe treatments to problems that are invented along with the product. Also similarly, it features a woman as its visual theme and subject. In this case, the product is for Viagra, a stimulant medication for men with erectile dysfunction. Titled, "Anniversary Night,"¹⁶ this 2017 TV spot—perhaps surprisingly, perhaps not—almost solely features a female character. (Figs. 3.1–3.7)

At the oldest, the actress in this advertisement is in her early forties. The spot fades in on her sitting on a bed in an elegant, royal blue dress, wearing understated yet

¹⁶ Pfizer, "Viagra Single Packs TV Commercial, 'Anniversary Night,'" 2017. <https://www.ispot.tv/ad/A0nN/viagra-single-packs-anniversary-night>

expensive jewelry. She is attractive in the way that most figures are in the fantasy realm of advertising—white, thin, possessing strong bone structure. She looks like she’s aging, but she doesn’t look *old*, exactly in the same way that the models for Botox look like they’re not in their twenties, but their real ages are impossible to pinpoint. She’s at a point in her life where she’s ‘mature,’ but it’s not repulsive to imagine her having sex. After all, that’s the reason she’s there—to sell sex. Also similar to the Botox ad, she is there to be looked at and has about five seconds worth of dialogue (the rest of the thirty-second spot is devoted to a male voiceover listing the legally obligated side effects of the drug).

There is nothing particularly individualizing about the model herself—we can glean next to nothing about her based on mannerisms or speech. But we can infer a lot from her surroundings—essentially, that she is a white, straight, married member of the upper class. In this context, sex is sold in the most consumptive and politically palatable way possible. Depicting even a lower middle-class or gay couple allows for the conceptualization of intimacy to stray from consumer culture’s strict binaries and the denial that there are loving relationships that exist among non-cisgender, non-heterosexual people of color. Advertisers don’t want this¹⁷—in selling an already taboo product, they don’t want to promote or depict ‘non-normative’ relationships. This could possibly alienate and emasculate their consumer base.¹⁸

¹⁷ Kenon Breazeale, “In Spite of Women: ‘Esquire’ Magazine and the Construction of the Male Consumer,” in *The Gender and Consumer Culture Reader*, ed. Jennifer Scanlon (New York: NYU Press, 2000), 233.

¹⁸ *Ibid.*

As the spot opens, the woman looks directly into the camera and says, “Whether it’s anniversary night, or just another weeknight, there’s Viagra Single Packs for guys with ED [erectile dysfunction].” As she says this, we see a lonely ‘Single Pack’ perched on a bedside table. There is a man present—but throughout the entire ad, we never see his face and he hovers in the peripheries of each shot. As the voiceover begins detailing side effects, we see slow motion takes of her flirtatiously smiling and looking over her shoulder, standing on a candle-lit terrace in the arms of her husband (although his face is cut out of the shot), receiving an anniversary card during a romantic, private dinner. She then takes his hand and looks at him with a look that can effortlessly be interpreted as sexually suggestive. This leads into the final shot, where she reclines awkwardly on the bed, the Viagra logo on the upper left-hand side of the screen. She says, in a sultry voice, “Ask your doctor about Viagra single packs.”

The therapeutic ethos, as previously stated, is employed in this advertisement in multiple ways. Aside from the obvious (that this advertisement is for a medication), there are multivalent cues that tie the ethos with contemporary cultural male and female identities.

During the Victorian Era, the therapeutic ethos readily replaced the Puritan ethos (especially in the sense of denying the self pleasure and luxury—instead, advocating for the pursuit of delayed gratification one would be rewarded with in heaven). The purpose of Viagra is literally the antithesis of delayed gratification. It’s sole mechanism lies in producing the means by which one obtains instant gratification. Much like the Botox ad, and keeping with the always future-oriented end goals of the therapeutic ethos (always

focusing on the better, possible self), the fantasy world of the Viagra ad depicts people and situations that, according to consumer culture, *could* and *should* exist, for they are the gleaming example of personal fulfillment attainable through the purchase of the product. Such a sanitized experience of reality, however, is most likely impossible to achieve outside a film set. This sanitation flattens the experience of the intimacy of marriage and other commitments by asserting that successful intercourse is the main priority and key to successful, long-lasting relationships.

Such collapse of meaningful emotional and intellectual structures outside of sex also reinforces gender binaries—mainly, that women should display themselves, and men should be producers.¹⁹ Viagra is a productive tool; it is what enables a man to produce an erection and successfully engage in penetrative sex. This mechanizes and medicalizes the act of sex, conflating basic physiology with much more complicated aspects of sexual relationships.²⁰

The use of the female figure in this advertisement reinforces the gender role of women as lookers—the actress here is so feminine, so flirty and enticing, that the only thing that stands between her body and the viewer is a little blue pill. The woman in this situation is fulfilling her part—actively turning you on and offering herself to you. The woman's blue dress also reinforces the role she plays in condoning anonymous sexual fantasies. This advertisement is part of a campaign—all of the other spots, featuring similarly attractive models in bourgeois settings, all have those women wearing blue

¹⁹ Ibid., 226.

²⁰ Ibid., 230.

dresses as well.²¹ It's nary a coincidence that Viagra is a blue pill. In wearing this dress, the women reinforce the cultural standard that women can be commodified into objects that are to be bought, possessed and consumed by men.

This hegemony does not exist solely within the world of advertising. To date, there is no effective female equivalent of Viagra (there is one medication on the market, called Addyi, but it has been met with mixed results)—purporting the assumption that men's pleasure is more important than women's.²² Political and economic institutions also uphold this medical inequality. Consider the fact that Viagra is covered by most health insurances—this serves to cement its place in society as a socially acceptable solution to a recently medicalized problem²³ that is deemed more important than women's sex issues, such as birth control and fair access to abortion.

Women are also used in this advertisement, unlike the preceding two ads mentioned in this paper, to reassure men with erectile dysfunction that they are still men. Of Playboy magazine, Bill Osgerby writes, “The breasts and bottoms were necessary not just to sell the magazine, but to protect it.”²⁴ Viagra uses women in its advertisements in the exact same way. Erectile dysfunction is seen as embarrassing and emasculating, in the

²¹ “Viagra TV Commercials,” *iSpot.tv*, accessed December 17th, 2017. <https://www.ispot.tv/brands/dWk/viagra>

²² Annie Potts, Nicola Gavey, Victoria M. Grace, and Tiina Vares, “The downside of Viagra: women's experiences and concerns,” *Sociology of Health & Illness* 25, no. 7 (2003): 713.

²³ Barbara L. Marshall, “Climacteric Redux? (Re)medicalizing the Male Menopause,” *Men and Masculinities* 9, no. 4 (2007): 509–529.

²⁴ Bill Osgerby, “Playboys in Paradise: Masculinity, Youth and Leisure Style in Modern America,” (New York: Bloomsbury Academic, 2001): 127.

ways that 1950s bachelors who cooked for themselves were. Women and the promise of sex serve to counteract this embarrassment. They legitimize the problem.

Finally, there is the issue in medical and psychological literature, in concert with the ‘inventive maladies’ of the therapeutic ethos, that Viagra has ushered in an era of unnecessarily approaching ‘the aging male body as a pivotal site of biomedical intervention.’²⁵ Here again a gender binary is reinforced. The ‘science’ surrounding Dorothy Gray and Botox serve to create a discourse that women’s aging looks are a legitimate health problem—a disease. Much in the same way, Viagra purports ED as a fatalistic detriment to a man’s ability to fulfill his role as a producer in life. Such dialogue has been propped up by a billion-dollar industry that funds medical research into lifestyle maladies, going to far as to claim that men also experience a form of menopause (called ‘andropause’) much in the same way as women do.²⁶ Such claims have little to no factual basis.

The fear surrounding the male aging body and his loss of virility is not without historic precedent. As early as the 1930s and ‘40s, clinicians began treating the ‘male climacteric’²⁷ in earnest. The foray into andropause also had significant cultural catalysts—specifically feminism and retirement²⁸—that brought such an unfounded phenomenon into medical discourse. Barbara Marshall writes, “it is precisely the anxiety over aging

²⁵ Marshall, 509.

²⁶ Ibid.

²⁷ Ibid., 513.

²⁸ Ibid., 515.

and masculinity captured by the ‘crisis’ language of the male menopause that grounds its more recent medicalization.”²⁹ The ‘reversal’ of andropause is attributed to “the restoration of men’s productive powers more generally.”³⁰ Here, again, the dialogue surrounding the aging male body returns home to fetishizing it as a productive entity.

Finally, there is the argument that medicalizing the male libido negatively affects women in real life (aside from the physical objectification of their bodies that I have discussed earlier). One study, conducted on the basis that little foray has been made into how Viagra affects the female partners of those who use it³¹ finds women at the sharp end of the stick (so to speak) in such situations. There is no room in the medical or cultural discourse for women to express their possible displeasure at the use of Viagra. The ad reinforced this silence, depicting women as salacious creatures offering their bodies to anyone who takes the pill. Such silencing of women begins from the outset, when men seek ‘treatment’ for erectile dysfunction. The study reports that most women were not involved in their partners’ medical consultations or decisions to start taking Viagra.³² Viagra also widens the gap between autonomous male and female sexuality—some women thought Viagra gave men power over their partners by allowing them to decide when and where they would have sex.³³

²⁹ Ibid.

³⁰ Ibid., 510.

³¹ Potts, et al., 697.

³² Ibid., 701.

³³ Ibid., 713.

In sum, the therapeutic ethos employed in the Viagra commercial employs and depicts women in similar ways as the Dorothy Gray and Botox advertisements—touting their physical attributes and teaching them to aspire to pleasing men. Viagra, aimed towards men, furthers gender stereotypes that have existed in Western culture for centuries. Specifically, it conflates erections with manhood, backed by pseudoscience which claims that along with the ability to achieve and maintain erection comes the vitality and virility of youthful masculinity. Such reinforcements of these binaries serve to silence and scaffold the expectations that women exist solely for men, and that men exist solely to have sex with women.

The therapeutic ethos, although not new in concept, has subtly changed in form and presentation in advertising throughout the past sixty years. Gone are the threatening copy headlines asking if you're too fat, too old, too grey. In their place are now advertisements like those for Botox and Viagra—a netherworld of advertising fantasy made ever more real by the technological innovations of digital film and computer image-enhancement. Neither here nor there, you are encouraged to live vicariously through silent models who rarely speak but definitely have something to say. You are encouraged to 'Rethink' and 'Reimagine'; future tenses in the present world—focusing on who you could be instead of who you are. Gone are all logical thought and explicit language of early advertising (in which companies carefully presented and legitimized their products to you). Here, now, you are enchanted by the fantastical beauty of the women who occupy your screen, silently beckoning you to be them or be with them. You may come to believe in a truth that is half-baked (and in your logical mind, a feeble and

unlikely reality). But maybe, with a little help from your doctor's prescription pad, one day you *just might* get there.



Does Your Husband Look Younger than You do?

You may side-step the tragedy that overtakes so many wives . . .

Glance about among your friends. How many of the wives look older than their years . . . and tragically older than their husbands?

Unfair though it may be, the tiny lines, the trace of wrinkles, the loss of skin tone and color, matter very little in the measure of a man's attractiveness . . . but they can make a heart-breaking difference in a woman's.

Yet thousands of women over thirty have learned to stop living by the calendar. They have found a way to deny the years . . . to combine the poise of maturity with a fresher, radiantly confident younger look. Their secret lies in the daily use of a famous cream—

Dorothy Gray Cellogen Cream. And it can help you side-step the tragedy of the middle years.



A natural way to look younger after 30

Noted specialists have proved that estrogenic hormones applied to the skin can help women look younger. And the hormones in Cellogen

Cream are natural substances, working in the most natural way in the world to counteract the effects of the gradual loss of your own beautifying hormones. They literally get under your skin . . . work from beneath to "plump up" dismayed lines and wrinkles, give skin a softer, fresher, truly younger look.



Happy results reported by women everywhere. Thousands have written gratefully to Dorothy Gray, reporting actual results of Cellogen Cream. Here is a typical comment: "After using one jar of Cellogen Cream, my skin appeared much softer and smoother, the lines were less noticeable . . . my complexion appeared much more youthful and supple."



CELLOGEN CREAM. Every ounce contains 10,000 International Units of natural estrogenic hormones. Smooth Cellogen Cream into your face faithfully every night, leaving on overnight when possible. Very soon you'll see results reflected in your own mirror . . . and in your husband's look of renewed interest.
\$3.50 and \$5.00 plus tax.

CELLOGEN LOTION . . . companion to Cellogen Cream, with the same active hormone ingredient. Smooth over neck, hands, elbows; use as a powder base for effective 24-hour treatment.
\$5.00 plus tax.

HORMONE HAND CREAM. A silky vanishing cream containing both hormones and emollients . . . ideal for telltale hands. Use daily.
\$2.00 plus tax.



DOROTHY GRAY SALON

445 Park Avenue, New York 22, New York

Visit the Dorothy Gray Salon and let our salon experts demonstrate the famous Dorothy Gray beauty methods. Or call PLaza 5-6110 for an appointment.

Fig. 1



Fig. 2



Fig 2.1



Fig 2.2

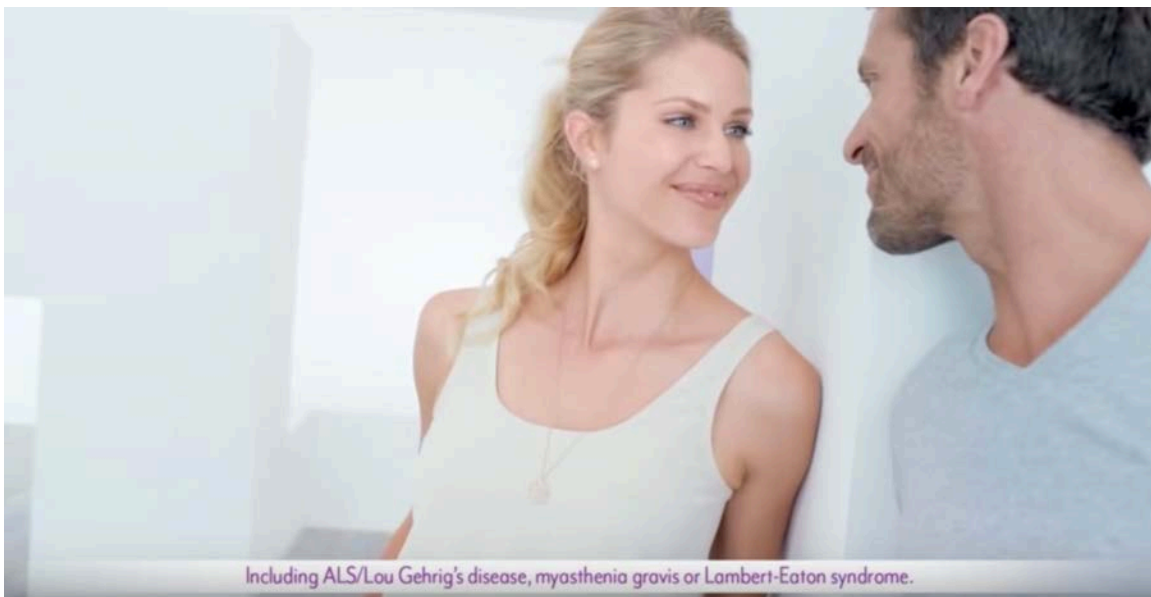


Fig 2.3



Including ALS/Lou Gehrig's disease, myasthenia gravis or Lambert-Eaton syndrome.

Fig 2.4



Including ALS/Lou Gehrig's disease, myasthenia gravis or Lambert-Eaton syndrome.

Fig 2.5



Fig 3.1

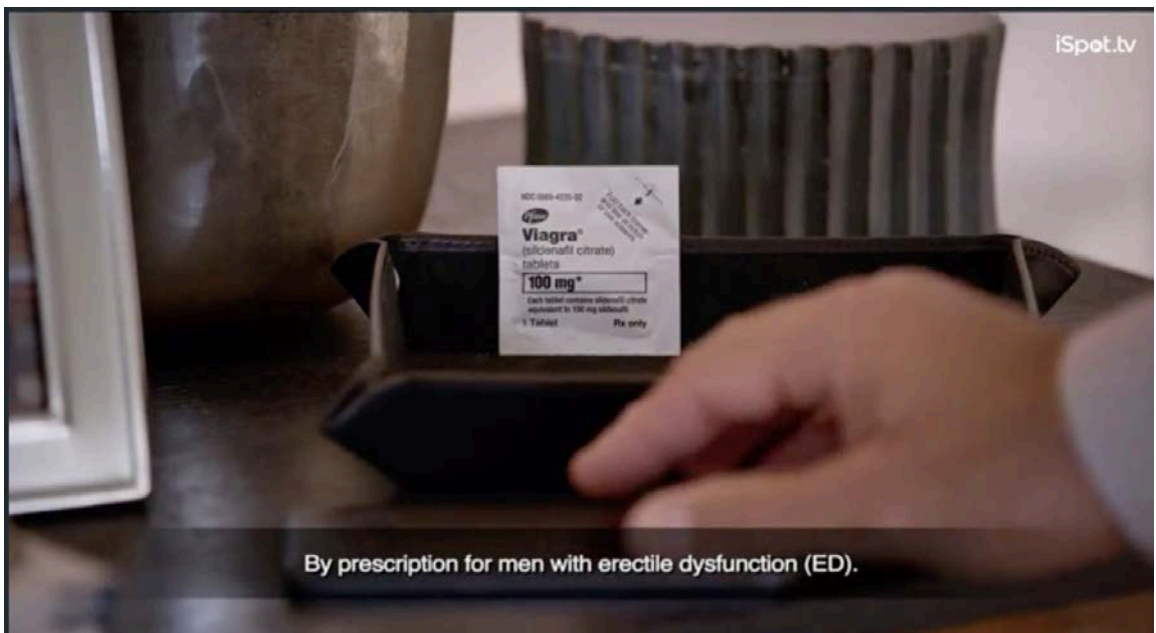


Fig 3.2



Fig 3.3



Fig 3.4



Fig 3.5



Fig 3.6



Fig 3.7