

Life/Death

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The irony that Joe so succinctly captured, that life is after all a terminal illness, is the tragedy of the natural order that we can do nothing to change. But like him, we can so live that, when we depart, we shall have made life that much more bearable for others.

Nelson Mandela at the funeral of Joe Slovo, leader of the South African Communist Party, reported in *The Guardian* 16 January 1995)

This observation from Nelson Mandela summarizes a conclusion reached by thinkers from a variety of backgrounds, religious, philosophical, psychological and sociological, when considering the inevitable fact of human mortality. At a personal level, contemplation of death can provide a remarkable sharpening of one's efforts to live well – as Mandela suggests was demonstrated by Joe Slovo. The purpose of this chapter is to show the central part played by awareness of mortality in human social organization. The chapter will also outline the particular problems posed by death for self-identity in late modern social conditions,¹ where religion and traditional authority no longer provide very effective explanations for death.

It is not pleasant to contemplate our own deaths, particularly if we have no expectation of another life beyond death, as it seems to threaten us with meaninglessness. Indeed, one of the central arguments of this chapter will be that human social organization can be understood as a defence against the flood of despair that can be induced by contemplating death too closely. Just as we avert our eyes from the sun, so we busily fill our minds with matters other than mortality. Paradoxically, however, death is also the

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source of a fundamental desire to give life meaning. This can be demonstrated by considering how our lives would be if we were immortal.

Jorge Luis Borges has written a story in which he considered just such a state of being, imagining a City of the Immortals, where 'a hundred or so irregular niches . . . furrowed the mountain and the valley. In the sand there were shallow pits; from these miserable holes (and from the niches) naked, grey-skinned, scraggly bearded men emerged' (1970: 138). One of these, it transpires, was Homer, who composed the *Odyssey*. However, knowing his immortality, this achievement had lost all meaning for its author as it became clear to him that 'if we postulate an infinite period of time, with infinite circumstances and changes, the impossible thing is not to compose the *Odyssey*, at least once' (1970: 145). As Bauman, who comments on this story, observes, the composition of the *Odyssey* 'loses its lustre . . . [it is] no longer a unique event, and thus not an act of heroism; it is useless as a vehicle of self assertion' (1992b: 32).

Knowledge of mortality and finitude, then, can be seen as a primary motive for participation in human culture, which offers a series of opportunities for people to claim meaning for their lives. Culture, as was shown in the chapter 'Culture/Nature', can involve the production of great works of art such as Homer's *Odyssey*, or it can consist of much more mundane matters of everyday general knowledge or custom. Achieving membership of a particular social group, learning its rules and values and making them one's own, acting to influence others by creating new meanings and memberships that others may aspire to, constitute participation in culture and social life. Ernst Becker, in his book *The Denial of Death* (1973), has depicted this activity as an organized system for the production of heroic self-identity:

society is and always has been . . . a symbolic action system, a structure of statuses and roles, customs and rules for behavior, designed to serve as a vehicle for earthly heroism . . . a mythical hero-system in which people serve in order to earn a feeling of primary value. (1973: 4-5)

Hero myths, such as those of Odysseus, are simply extreme ends of the spectrum of activities in which we daily engage. In our education, our jobs, our families, our leisure activities we draw upon culturally available identities and weave them into a personal identity that we like to believe is 'unique', a set of self-defining activities through which we assert our special place in the world.

But before exploring the problems thrown up in late modern social conditions in this organized 'denial' of death by participation in culture, we will consider the way in which death has been experienced in traditional societies. This will serve to highlight specifically modern and late modern means of dealing with mortality that we now face.

DEATH AND SOCIAL ORDER

'Death presents society with a formidable problem not only because of its obvious threat to the continuity of human relationships, but because it threatens the basic assumptions of order on which society rests' (Berger 1969: 32–3). If we accept what is argued in this quotation, then the prevailing distribution of death in a particular society will have profound consequences for the maintenance of order. In premodern (traditional) societies death tends to be common in all age groups, but particularly amongst infants. Most members of society, before they are very old, will see many deaths of people whom they know well. There is a widespread familiarity with the handling of dead bodies. By contrast, in modern or late modern societies, such as the United Kingdom or the USA today, death is primarily confined to the very old because of increases in life expectancy. It occurs behind the scenes of everyday life, so that most people's exposure to death is via their television screens or other media. Associated with these differences between traditional and modern societies are profound differences in the way in which social order is sustained.

Death in traditional societies

The term 'traditional society' groups together societies that may in fact be different from each other in various respects, but it is a convenient umbrella heading to indicate certain common features of 'non-modern' societies. In both medieval European states, for example, and many contemporary hunting and gathering groups, the sort of direct personal knowledge of death described above is common. In small, traditional communities most individuals meet each other regularly and there is a relatively simple division of labour. In hunter-gatherer groups, for example, institutions (such as the Church, the state, medicine and education) are relatively undeveloped and undifferentiated. A single individual may combine the role of chief, priest, healer and educator of the young, or these may be distributed amongst only two or three individuals. The manner in which these roles are carried out will be heavily dependent on the personal idiosyncrasies of individuals, something not easily codified or passed on to others by some method of education or training. Should one of these people die, social order is therefore radically disrupted. Elaborate funeral rituals (described later) are constructed to help repair this damage.

Additionally, the intense grief that we now feel at the death of children is less likely to be allowed to disrupt social order. The death of children in traditional societies is and was far more 'normal' than in modern societies.

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A woman could expect to bear ten or fifteen children, and perhaps have fewer than half of them survive to their teenage years. The French historian Philippe Aries has commented on the way in which this was managed in medieval Europe. Then, people did not recognize infants as people until they reached puberty, when they participated in a variety of rituals that affirmed their 'rebirth' as full members of society:

No one thought of keeping a picture of a child if that child had . . . died in infancy . . . it was thought that the little thing which had disappeared so soon in life was not worthy of remembrance . . . Nobody thought, as we ordinarily think today, that every child already contained a man's personality. Too many of them died. (1962: 38)

A key feature of the death of adults in such societies is that the dead have a social presence. This is revealed in cults of ancestor worship or stories of ghosts and spirits of the dead, which are felt as real. The dead inhabit another world, which may be ordered in a manner similar to the world of the living, reflecting status divisions and involving property rights and so forth. The feelings of the living about the dead vary between fear of their malevolence and pleasure at their benevolence. This is reflected in the treatment of physical remains. At certain points the corpse may be feared as a source of pollution and danger; at others skulls or bones act as protective talismans, as they did for the head-hunters of Borneo, or the religious reliquaries beloved of medieval Catholics.

The task of funeral **ritual** is to transform the malevolence and danger represented by death into something more positive and secure. If the dead can be understood as benevolent spirits who guard and aid the living, death itself is potentially less fearful and disruptive. If they are perceived to lead an orderly life after death, with predictable and controllable relations with the living, they can be integrated into the social order of the living. The void that is left by the person's departure can be filled, at least for a time, with the person's 'spiritual' presence, until such time as a living person can inhabit the role.

Some early Durkheimian sociologists and social anthropologists paid particular attention to funeral rituals in traditional societies, the most original of whom was Hertz, who was himself killed in the First World War. He summarizes the threat posed by death: 'When a man dies, society loses in him much more than a unit; it is stricken in the very principle of its life, in the faith it has in itself' (Hertz 1907: 78). Hertz's study of the Dayak people in Borneo described a feature of their mortuary rites subsequently found to be quite widespread in other parts of the world, that of 'double burial'. Amongst the Dayaks the corpse was initially seen as extremely dangerous, and was sealed in a box for some months until it had decayed (the first burial). The close family of the deceased were also seen as potentially polluting influences, and were considered socially 'dead' for a

period, living at a physical distance from the rest of the group, and being obliged to show affection to the corpse by physical contact with its decaying products in order to protect others from its influence.

When the bones were dry, a second burial took place, which was the occasion for a transformation of the identities of both the dead person and the close mourners. A feast was prepared, and this was the point at which it was safe to distribute the dead person's belongings without fear of retribution. The head of the dead person could be kept and fed to maintain the spirit's benevolence. The close family mourners became free of the taint of death, and began to participate once more in social life. For Hertz, such mortuary rites assert social solidarity – a sense of holding together – in the face of death. Illustrating the precarious nature of this solidarity, however, is Hertz's observation that the deaths of chiefs were sometimes kept secret until the bones were dry, as the danger represented by a chief's corpse was too great to be successfully deflected. Today, we may see parallels in the secrecy that still can surround the illness and deaths of political leaders, such as Deng in China. Rumours of their deaths abound as the individual is less frequently seen in public: the assertions of officials that the leader remains healthy are increasingly questioned, but serve to give these officials time to ensure a smooth transition of power.

Hertz further observes that 'In establishing a society of the dead the society of the living regularly recreates itself' (1907: 71–2). Thus, a system of rewards and punishments in the afterlife (heaven and hell) may develop with direct relevance to the moral regulation of the living. Funeral monuments in cemeteries, for example, contain indications of the social status of a person in life by their height, decoration or expense. Traditionally children were buried in undifferentiated graves in less favoured parts of cemeteries; dead strangers, suicides or victims of violent or accidental deaths – all of which have been used to represent particularly threatening forms of death – may be excluded from the burial ground. Hertz comments that 'the sinister way in which some individuals are torn from this world separates them for ever from their relatives' (1907: 86). Such is the origin of stories of ghosts, who wander the earth seeking to deal with the unfinished business of life.

Later social anthropologists have noted the linkage that is often made between death and fertility in various rituals, with themes of rebirth and resurrection (as in the resurrection of Christ) often being evident. Bloch and Parry (1982), for example, argue that many traditional social groups see life as existing in a limited quantity, with individuals engaging in various practices to possess as much of it as possible. If a person's death can be interpreted as a 'good death' by ritual, it can be seen as generating a quantity of life. As an example, Bloch and Parry describe the ritual death of a Dinka 'spearmaster', who transcends fear of death and provides an opportunity for communal regeneration by presiding over his own live

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burial. Unlike suicide, which is a defeat, this means that the death is 'transformed into regeneration by acting out a victory over . . . the finality and uncontrollability of death' (Bloch and Parry 1982: 18). The actions of Japanese kamikaze pilots or Palestinian 'suicide' bombers have been interpreted by their communities in a similar light. These individuals attain heroic status as having magically transformed a more 'normal' fear of death. They therefore induce in some onlookers a feeling that they too might perform a similar inversion when their time comes.

In these studies of traditional societies by social anthropologists and historians, then, it is evident that death can provoke a major threat to social order, requiring elaborate rituals to manage this threat. These rituals are, as Erving Goffman (1968: 24) once remarked in relation to another topic, one of the 'primal scenes' for the sociologist, marking the boundary between human culture and its annihilation. What could be more fundamental than the joint effort in which we are constantly engaged, to turn away from death towards life? Death rites, as Danforth has stated, can be understood as 'concrete procedures for the maintenance of reality in the face of death' (1982: 31). This chapter will now consider the relationship between death and social order in modern and late modern society, where stable images of a single 'reality' have become increasingly difficult to maintain.

Death in modern society

In modern times death is typically confined to the old, who are largely excluded from meaningful social participation by a variety of procedures, including the enforcement of a retirement age and a degree of segregation and social stigma (sometimes called 'social death'). Social institutions are highly developed and bureaucratized, routinely replacing and training their functionaries by hiring and firing procedures. Knowledge and skills are passed on by codified procedures of education and training that do not depend on the personally held wisdom of a particular individual. The death of a particular individual is therefore less likely to pose a threat to social order, unless that individual represents an unusually symbolic or charismatic authority (as in the assassination of J.F. Kennedy or Martin Luther King). Death is more usually experienced as a private rather than a public loss and grief is understood as a matter of personal psychology rather than a community affair.

Additionally, the dead are truly dead in modern society. Science teaches that death is the material end of being. Religion and beliefs in an afterlife are designated as illusory, since there is no proof of them acceptable to reason. Medicine may battle against death on our behalf, but it is ultimately unsuccessful in all cases. Talcott Parsons (Parsons and Lidz 1967) has

argued that the modern management of death rests on a distinction between 'natural' and 'unnatural' death. Painful, premature or violent deaths are designated as unnatural, and a variety of social customs and procedures, including the whole panoply of modern medicine, are devoted to creating a sense of 'natural' death at the end of a similarly 'natural' ageing process. By contrast, in traditional societies, all deaths are 'unnatural' and threaten the group with a sense of evil.

Modern social organizations have the appearance of permanence by comparison with the less developed institutions of traditional societies. Although we learn in school that an institution such as the state, or the education system itself, or the police, the law, medicine and so on each have a 'history', that once they did not exist, that they developed out of something else, it is hard to imagine that they will in the future be different, or that they may one day not exist. They seem 'handed down', given things. This appearance of a hard and objective permanence gives the people who take part in making and sustaining them an opportunity to bid for personal immortality. By taking part an individual contributes part of him or herself to something that will continue beyond the person's own death. This is what Ernst Becker meant in the quote from him given earlier when he described society as a symbolic action system serving as a vehicle for earthly heroism.

Hero myths abound in modern society. The media parade a succession of 'stars' and 'role models' for emulation, superwomen populate the pages of women's magazines, supermen strut across our cinema screens. Mythical qualities of courage, fortitude, sexual success and self-sacrifice are routinely exhibited. The traditional masculine hero has recently been joined by newly liberated female heroes. In clothing, leisure pursuits, jobs and family activities people can draw upon a range of these mythical exemplars to construct an apparently distinct personal narrative of the heroic self, so that they can feel that they have made their mark and will be remembered. Children can be particularly burdened with their parents' desires for immortality, perhaps especially where parents are driven by a sense of personal failure.

Social order is less threatened by death, which is itself increasingly hidden from everyday social experience. The dying are placed in institutions, and bureaucratic systems process bodies and control our contact with the dying and the dead. In Western industrialized countries there has been in the twentieth century a steady rise in the proportion of people dying in hospitals. The medical management of death has more or less replaced the involvement of priests in leading the action and interpreting the meaning of the deathbed (as will be shown later). This has led some social theorists to claim that we live in a 'death denying' society.

The denial of death thesis has been strongly argued by the sociologist Norbert Elias, who links this with his theory of the 'civilizing process' (Elias 1939)² which, he believes, involves drawing a veil over the animal-

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like aspects of human life (e.g. violence, disposal of body matter, sex and death). Elias is basically concerned to argue the case for better treatment of the aged and the dying in modern social conditions. This humanistic perspective is shared by others who espouse the thesis of the denial of death, such as the anthropologist Gorer (1965) who bemoans the fact that the grief of the bereaved is no longer channelled by mourning rituals as the meaning of the funeral has atrophied, or Aries (1976; 1981) who argues that discussion of death is 'forbidden'. Elias conveys the loneliness of the dying in modern times in a book which he wrote in his own old age:

Closely bound up, in our day, with the greatest possible exclusion of death and dying from social life, and with the screening-off of dying people from others . . . is a peculiar embarrassment felt by the living in the presence of dying people. They often do not know what to say . . . Feelings of embarrassment hold words back. For the dying this can be a bitter experience . . . It is not always easy to show to people on their way to death that they have not lost their meaning for other people . . . If this happens, if a person must feel while dying that, though still alive, he or she has scarcely any significance for other people, that person is truly alone. (1985: 23, 64)

However, there are a number of problems with this perspective as a piece of sociological analysis (as was observed by Parsons and Lidz 1967 as well as later sociologists such as Kellehear 1984 and Walter 1992). While the subjective experience of dying or grieving may be painful in conditions where there is widespread reluctance to discuss death, this masks a central feature of repression: the thing that is repressed from consciousness is determinedly 'present' – perhaps more so than things that do not 'need' to be repressed. The intensity of organized efforts to deny death are themselves indicators of the pressing nature of the topic. A sociological analysis of modern culture, social life and social institutions suggests that a primary use made of these is to help people 'forget' death, which they do with sometimes greater, sometimes lesser success. As Ivan Illich has argued in his analysis of death in modern society: 'We cannot fully understand the deeply rooted structure of our social organization unless we see it as a multi-faceted exorcism of all forms of evil death' (1976: 205).

Additionally, it can be argued that in *late* modernity the designation of death as a taboo topic has been significantly eroded, as a host of revivalist social movements – such as hospices or counselling services for the bereaved – open up the topic once again. The last part of this chapter will consider how the institutions most closely involved in people's management of death – namely medicine and warfare – achieve their effects. Before this, however, we will consider how death is involved in the production of late modern self-identity.

DEATH AND SELF-IDENTITY IN LATE MODERNITY

Modern individuals are from time to time assailed by knowledge that their sense of permanence is illusory. Fantasies about nuclear annihilation, fascination with astronomers' predictions of the end of the world, fears about ecological imbalance and pollution of the environment touch on fundamental anxieties about ultimate meaninglessness. Officially sponsored programmes to combat these things, peace and disarmament initiatives, space travel and ecological initiatives, command widespread support and interest. These suggest that a state of chronic doubt about the truths of modernity – beliefs in the beneficial nature of science, in the possibilities for progress and so on – characterize late modern social conditions. Anthony Giddens (1991) has explored the consequences for self-identity when individuals live in such a climate. Mellor (1993; Mellor and Shilling 1993) has further expanded on Giddens's ideas with specific reference to death.

Giddens argues that there has been a decline in people's capacity to accept authoritative 'answers' to life's questions from either religion or science. This is, in part, because we have become increasingly aware through the media that for every 'answer' there is a corresponding critique. We are, for example, aware that a variety of religious beliefs exist, and so question a blind faith in any single one. We have learned to view science as a potentially destructive force leading, for example, to Hiroshima, the Holocaust and ecological destruction. These have fundamentally eroded our capacity for trust, so that the individual is thrown back on his or her own efforts to gather information about the risks of different actions.

People consult what Giddens calls 'expert systems' such as medicine when they are confronted with situations – such as illness – that demand choices. The competing voices of experts are critically assessed as the individual forms a plan of action. Thus people come to regard themselves as critical consumers of expertise, as is evident in political rhetoric about the advantages of 'consumer choice' across a range of specialist services. There exist also a host of competing 'self-help' guides – often written by psychologists – on how to manage such problems of everyday life as deciding how to raise children, what food to eat, what exercise to take in order to promote a 'healthy' life and avoid unnaturally early death.

Living an increasingly complex and cosmopolitan life, individuals learn that a variety of lifestyles are possible, and the styling of life becomes a consciously managed enterprise, or a 'reflexive' process. Self-identity – that is, a sense of who we are – depends on a continual reordering of narratives of the self, interpreting and reinterpreting one's biography as a series of 'stories' that 'make sense' temporarily before some fateful moment requires that we reorder our lives, gather new information and construct a new personal story to confer meaning upon our biographies. Additionally, the body and its adornment in clothes is increasingly used as a vehicle for the

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expression of self-identity, fashion allowing people to inscribe upon themselves additional narratives of identity.

Chief amongst the fateful moments that provoke reordering of narratives is the event of death. The death of someone close, or the knowledge that we are terminally ill, provokes the most profound anxiety, threatening the security with which mortality is 'bracketed out'. Where there is great investment in using bodily appearance to construct self-identity, the disintegration of the body in illness and death is very disturbing. These anxieties have been felt perhaps most starkly in the case of AIDS, which poses a particular threat because of its jarring association with sex and youthfulness. AIDS has led to a profound re-evaluation of the place of sex in our lives, threatening the capacity of individuals to appropriate the permissive narrative that had been developing since the 1960s, and encouraging narratives of responsibility and safety. A stream of media accounts of death from AIDS, in which dying individuals are paraded across television screens acting out dramas of heroic confrontation with an 'unfair' fate, has helped forcefully to reorientate these narratives.

But fundamentally, death remains as a constant potential reminder that world-building activities and narrative reorderings are a sham. The late modern individual is unusually exposed to the threat of personal meaninglessness and the dread of personal finitude. Sociology has tended to leave things at this point, content to have exposed a fashionably nihilistic sense of despair, a modish exposition of pointlessness. This chapter will now consider the variety of ways in which modern and late modern social institutions have been fashioned in order to kill death itself.

KILLING DEATH

'Death remains the great extrinsic factor of human existence; it cannot as such be brought within the internally referential systems of modernity. However, all types of event leading up to and involved with the process of dying can be so incorporated' (Giddens 1991: 162). Giddens suggests here that there is indeed no 'solution' to the problem of death. This is hardly surprising, nor is it necessarily regrettable if Borges's point about the impossibility of culture without mortality is taken seriously. The task of sociology in this field must be to document the variety of ways in which defences against this great 'extrinsic factor' are maintained. This does not simply involve the study of people's experience of dying – though this may provide some valuable insights. Death exerts an influence on institutions that are not normally felt to be primarily concerned with the management of dying. In this section, some socially organized practices for killing death will be outlined.

Killing other people

Killing people in warfare has long been used as a means to triumphant assertion of survival against the odds, and therefore against death itself. This is shown in the sentiments of a knight, Jean de Bueil, in 1465:

War is a joyous thing. We love each other so much in war. If we see that our cause is just and our kinsmen fight boldly, tears come to our eyes. A sweet joy rises in our hearts, in the feeling of our honest loyalty to each other; and seeing our friend so bravely exposing his body to danger . . . we resolve to go forward and die or live with him and never leave him on account of love. This brings such delight that anyone who has not felt it cannot say how wonderful it is. Do you think that someone who feels this is afraid of death? Not in the least! He is so strengthened, so delighted, that he does not know where he is. Truly he fears nothing in the world! (quoted in Elias 1939: 160)

Additionally, in this quote, we see the theme of love, a sense of standing together with others that is the basis of social solidarity.³ The type of love to which de Bueil refers is clearly generated by the identification and conquest of an enemy. The chapter 'Normal/Pathological' analyses the roots of the desire for membership, and the role of stigma in maintaining it. Warfare is an extreme consequence of tribal stigma; stigma itself is a minor rehearsal for killing.

Zygmunt Bauman (1992b) analyses the formation of tribal identities along these lines. Tribalism – the bonding together of people along territorial and kinship lines to form a cohesive group – frequently involves victorious affirmations of rectitude, won by expelling or killing people identified as polluting the tribe. A variety of racist discourses, for example, serve this purpose. Here, notions of racial hygiene are invoked, defences of the purity of blood lines, a fight against germs, filth or degeneration. These legitimize acts of persecution, making it safe – even desirable – to kill others. The formation of tribes whose members engage jointly in the killing of others reduces the need for individuals to contemplate the terrifying prospect of being left alone in the world once all others have been killed. Tribalism is often identified, in public consciousness, as a 'primitive' or 'uncivilized' affair. Indeed, Norbert Elias (1939) accounts for what he calls the 'civilizing process' which has been undergone by European societies as a rise in the level of empathy and consideration for others' feelings, a spreading throughout society of the values of diplomacy and tact, involving widespread disapproval for acts of violence. The sort of sentiment voiced by the fifteenth-century knight above would be considered barbaric if voiced by a soldier today.

Bauman (1989), however, reminds us that the Holocaust of the Nazi era is a product of modern rationality, the application of technology to create a factory-like process, a production line of death, made possible by the

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neutralization of the feelings of those directly involved in acts of killing. One of the ironies of Elias's great work on the civilizing process is that it is dedicated to his own parents, one of whom died at a date unknown to him in Auschwitz. In a sense, though, there is no contradiction between these positions. Modern warfare is subject to calculation to a degree that would have been unrecognizable to a medieval knight, for whom fighting was akin to a blood sport. The nineteenth-century theorist of war von Clausewitz described it as 'a continuation of political commerce . . . by other means' (1908: 85). In late modern times one could almost turn this around to say that political commerce is warfare by other means. One sees this in the macro-economic sphere, where apparently 'non-violent' means of economic exploitation have substituted for the battleship diplomacy that once characterized relations between the 'West' and its colonies. The fundamental desire to dominate and conquer others, to have (metaphorically) their lifeblood, remains at the heart of political activity. The urge to power equates with a strategy of survival and this permeates everyday life as modern individuals adopt the 'rat-race' mentality.

The mastery of nature

Science, and in particular medicine, represents one of the best hopes of the modern individual to kill death. This is seen at its most absurd in science fiction fantasies of 'cryogenics' where people place their bodies (or sometimes just brains!) in deep freeze until such time as science discovers the means to create immortal life. At a more mundane level, medical care holds out the promise to anaesthetize suffering by a variety of technical means. Just as creating stigma can be seen as a rehearsal for killing, so pain and the suffering of illness are a rehearsal of our own deaths. Pain makes the body strange, as it acts against our wishes and reminds us of the limitations of bodily existence. Controlling pain is a routine matter for modern medicine, and for many pains we administer medication ourselves. By thus killing pain, medicine enables us to 'forget' our bodies, or once again see them as vehicles for pleasure and self-expression rather than the bearers of our own deaths.

Sociologists (e.g. Illich 1976) have called the widespread resort to medicine and medical explanations in modern societies **medicalization**. It represents the increasing colonization of everyday life by expertise, a reinterpretation of problems previously perceived as religious or moral matters as medical affairs. Illich writes that then death itself becomes the 'ultimate form of consumer resistance' (1976: 210) against organized medicine.

Linked to medicalization is the perception that death is the outcome of disease. It is not, for example, seen as caused by evil, bad luck or mortality. Doctors do not write such things when asked to complete the 'cause of

death' section on death certificates. Death is seen as the outcome of a medically defined process of 'dying', each stage of which is subject to medical intervention, or can be influenced by health promoting actions taken by the sick individual. A medico-legal system enquires into deaths that are not produced by 'dying', with coroners and pathologists ruling to guard against 'unnatural' causes such as accidents, murder or other violence (Prior 1989).

One of the consequences of this rational way of thinking about death is that it comes to be understood as the outcome of a calculable chance. Indeed, calculating the chances that a given action will increase or decrease the likelihood of death becomes a way of controlling its fearful unpredictability. This is seen most powerfully in statistical tables that calculate life expectancy. The science of social statistics in its early origins was intimately linked to the calculation of mortality rates for different sections of the population (Hacking 1990). Today's mortality statistics reflect and encourage a way of thinking that sees life as a risk business. There are even enquiries made into the causes of accidents or suicides, identifying 'risk groups' or 'risk factors' that can then be manipulated or avoided. As a result there is a widespread social valuing of 'safety' (car seat belts, safe sex, health and safety regulations, anti-smoking sentiment etc.). The other side to the avoidance of such risky behaviour is the promotion of its opposite: health enhancing activity. Thus we see in late modern society a great emphasis placed on the value of exercise, fitness, proper diet and so on, amounting to a near fanaticism about health. The healthy life has become a metaphor for the good life, previously led under the jurisdiction of religious authorities.

The active planning of life by engaging in health promoting activity, calculating and avoiding risk, and anaesthetizing suffering is increasingly threatened as death approaches. This is seen most evidently in accounts of terminal illness. The responses of individuals told that they have terminal cancer, for example, provide unusual insight into the strategies used at more normal moments to neutralize death. Typically, at such moments, people engage in various forms of life planning, which take on a new tinge owing to awareness of their oncoming deaths. Thus they may plan their funerals, make their wills, say their farewells and otherwise be seen as making their peace with life. The person who 'faces' their death in such a way is generally admired, and awareness and the open 'acceptance' of death is now generally encouraged by medical and nursing staff. This is because it enables the reflexive project of the self to continue unabated, whereas 'denial' that one is dying makes a mockery of such life planning. *Death: The Final Stage of Growth* is the title of a book written by Kubler-Ross (1975) in which she extols a process of dying that portrays it as a continuation of a lifelong project of growing self-awareness.

The ability to plan one's life in the face of death is admired precisely because it suggests a sense of mastery over death. The individual unafraid

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of the disintegration of the self is apparently untouched by mortality, and we carry the memory of this with us as an inspiration. Thus Becker writes of the death of Freud that he 'faced up to life and to a fatal cancer with a Stoic heroism' (1973: 22). Modern ways of thinking about death also include more direct attempts to control the manner of dying, as is seen in the increasing support for voluntary euthanasia. This represents an attempt to control the capriciousness of death, wresting the body from the control of nature by administering a final anaesthetic.

It is notable that suicide is less stigmatized in late modern society, as its acceptability as one solution to the problems of living increases. Parsons has indicated that in a society with a 'primary cultural pattern of activism . . . there is a suicidal component in a very large proportion of ordinary deaths' (Parsons and Lidz 1967: 164–5). Controlling the manner of death is linked to a similar approach to life.

RESURRECTIVE PRACTICES AND EMOTIONAL LABOUR

Resurrective practices in traditional societies involve quite literal beliefs in the resurrection of the dead, a sense of their physical presence as spirits. The effectiveness of religious promises of an afterlife is confined in late modern society to sects who insulate themselves against prevailing views. Thus the occasional mass suicides of religious cults evoke widespread derision. The effectiveness with which such cults use the elementary forces of tribalism to engender a fearless approach to death is, however, remarkable. The power of this sentiment depends on the identification of those outside the cult as enemies, with especial vilification being exercised on those who attempt to defect. Occasional declarations of war upon the outside world (for example, the recent release of nerve gas by a religious cult on the underground rail system in Tokyo) are indicative of the dynamics involved. Outside such groups beliefs in an afterlife are only weakly held, if at all.

We can now understand that at the root of religious beliefs in the resurrection of the dead is a desire of the living to continue to orientate themselves towards life, and not to give in to the despair of death. A key feature of late modern attempts to resurrect this sense of optimism about continuing in life in the face of death is the belief in the value of care, concern and emotional accompaniment. Routine assertions about the decline in community values, rather like the denial of death thesis, can themselves be understood as incitements to a commitment to the values of a caring community. Government policies of 'community care' recognize this widespread sentiment, although such policies are often experienced as somewhat manipulative. There is a continual public exhortation to care for others, in school programmes that emphasize the values of 'sharing', and in

psychotherapeutic expertise devoted to smoothing the stresses of living with others.

Medicine itself has expanded its jurisdiction over the body to include the psychological and social lives of patients (Armstrong 1983; Arney and Bergen 1984). Patient-centred medicine, organized by a host of professionals, increasingly valuing areas previously relegated to a 'natural' female expertise of caring and nurturing, is widespread. It represents a new form of organized emotional labour (Hochschild 1983) in which nurses play an increasingly valued part. The conception of medicine as simply the scientific mastery of nature is increasingly outmoded and routinely condemned, as people become increasingly interested in, for example, alternative therapies where concern with effectiveness is substituted by concerns for the quality of the therapeutic experience itself. These trends can be seen quite explicitly in the communities of care that have arisen around the terminally ill in recent years. Hospices for cancer and AIDS patients enact a drama of accompaniment and care that evokes widespread admiration, supporting individuals' heroic facing of death described earlier. The professional orchestration of love and care in a variety of sectors represents an attempt to resurrect the hopes of the living in the face of death.

CONCLUSION

This chapter has outlined something of the variety of strategies used by people to orientate themselves away from death towards life. In spite of the importance of the human problem of mortality for understanding social organization, analysis of this topic has not been a priority for many sociologists, who have tended to leave it to psychologists and philosophers. Anthropology has made a more significant contribution to an understanding of the consequences of death for human social organization, as was seen in the section on traditional societies. However, anthropologists, though increasingly interested in studying other aspects of modern societies, have otherwise made few contributions. Amongst sociologists there has in recent years been something of an upsurge of interest in death, as described here in the review of contributions made by Bauman and Giddens, and to a lesser extent by Parsons, Illich and Berger. As the millennium approaches, apocalyptic thinking is increasingly likely to turn on matters of life and death. Coupled with the growing perception that much social theory has lost its way, having lost touch with any sense of moral purpose, we may expect a return to consideration of the social arrangements that enable us to cling together on the raft of life.

This chapter has tended to concentrate on the contributions made by sociologists concerned to draw out the consequences of mortality for the management of social life, and has excluded discussion of the burgeoning

CORE SOCIOLOGICAL DICHOTOMIES

literature describing institutional practices for the management of death. Such work (e.g. Seale 1995; Glaser and Strauss 1965; Sudnow 1967) is of particular interest in revealing practices that exist but are normally less obvious in other areas of social life. The main purpose of this piece, however, has been to emphasize how awareness of mortality acts as a fundamental motive for human social organization.

KEY CONCEPTS

LIFE The condition of the human being which, for sociologists, is inevitably to be understood within the context of social life. Life itself then, becomes a social phenomenon and we fear mortality and grieve the death of others just as we celebrate their lives.

DEATH The condition of not being but also the fracture in a complex of social relationships which are personal, economic, political and moral and all of which have an impact on the wider society.

Ritual Any conventional and formal actions which complete a set pattern and which express a public or shared meaning through cultural symbols. The concept derives from anthropology and can be used ironically in sociology to imply a social process that is out of date or has forgotten its purpose.

Medicalization A new term to describe the way that modern society often places social processes under medical definitions. People today exercise a whole medical vocabulary of explanation and referral to understand child-rearing, eating, self-care, worry, routine minor illness and all of those states of being that were previously contained within the family or the school or the self image.

NOTES

- 1 See chapter 'Modernity/Postmodernity' for a definition of these terms.
- 2 Described in more detail in the chapter 'Normal/Pathological'.
- 3 Romantic love as a denial of death is analysed by Becker (1973).