

## Gender and death

### Introduction

Between 1996 and 2002 *Mortality* published 11 papers which address gender issues. Some make women their focus, others address the relationships between the genders, or make comparisons between them. Some adopt an explicitly feminist perspective; others simply take gender as a variable. Alongside 'gender', they address its cross-cutting relationship with age, race or social class. They might seem, therefore, to represent a highly disparate collection. Certainly their methods encompass large-scale quantitative studies, indepth qualitative interviewing, documentary and media analysis and autobiographical ethnography. What links them is the feminist argument that in privileging gender, we acquire a fresh, usually critical perspective. Thus, for example, these papers challenge our understanding of the boundary between life and death, of death ritual and of awareness contexts. They expose the internal networks of family and gender relations, plus the absence of a gender analysis from much historical work. Their scope also reveals the limits of the death studies literature. From anorexia to acting, a gendered perspective opens up new areas for scrutiny, so re-framing our understanding of death and dying.

The papers address each phase of the trajectory from illness through death and disposal to bereavement. Elizabeth Young, Michael Bury and Mary Ann Elston[1] use qualitative interviewing to show how identity is negotiated through friendship by dying women. Locating themselves within the informal, domestic, sphere of personal friendships, their work critiques theories of awareness contexts, its alternative perspective revealing the specificity and arbitrariness of apparently universal categories and contexts. Glaser and Strauss's definitive work on awareness contexts[2] relates to but one context: the institution. Young, Bury and Elston shift the site to the home and demonstrate women's agency and indeed creativity. Friendships may tend towards either the integration of the impending death, the segregation of that awareness to preserve the existing pattern of intimacy, or the transformation of friendship often via new friendships or 'friends for death'. Interestingly, in terms of critiquing existing positions, these data reveal the positive role of denial in sustaining an earlier identity. While this work provides a typology of friendship strategies, it avoids reifying these modes of social dying, instead suggesting that acknowledgement of death is a fluctuating aspect of dying women's friendships.

Young, Bury and Elston's study does not seek to compare the way dying men manage their friendships. However it does reveal friendship as a practice or process rather than a state or status quo and so contributes to one of this collection's important theoretical positions: that the very category of 'gender'

should not be treated as a fixed attribute, but rather as the outcome of negotiation or performance. Death, as a life crisis, emerges as a key site within which gender—and gendered identities—may be asserted, re-formulated or contested.

In contrast with the ‘light touch’ feminist theory which informs Young, Bury and Elston’s work, Helen Malson and Jane Ussher[3] draw on feminist post-structuralism to revisit the condition of anorexia, not as a slimming disease, but rather as a practice locatable within specific discursive productions of the body. The discourses they identify via interviews with 21 anorexic women are the body as ‘fading’, a strategy adopted as resistance to a ‘disciplinary gaze’ within an ‘economy of visibility’. In parallel, anorexia also emerges as a form of resistance to the mundanity of many women’s daily lives. Anorexia is therefore recast as not simply individual pathology, but rather a discursive production of the female body, situated within a long-standing cultural association between femininity and death.

If anorexia emerges as a form of suicide, Rory O’Connor and Noel Sheehy’s[4] comparative study of the patterning of suicide among women and men, addresses the gendering of self-inflicted death even more directly. Treating gender primarily as a variable, these authors explore its intersection with age to show that young men and older women, as well as single men and married women, are more visible within the suicide statistics. Their work identifies a range of key aspects: for example, the powerful effect of unemployment upon men; men’s use of more violent means, a possible explanation for their greater success. Many women are hospitalised, with either physical or mental illness, prior to suicide—and indeed, as the gender and health literature affirms more generally, women are more likely than men to signal their problems to health care practitioners, another explanation for their lower rate of suicide. Rather than particular ‘stress factors’, however, their appraisal—which might link with particular gendered subjectivities—is identified as a potential key to understanding patterns of suicide. Suicide is also the focus of Mary Bender’s[5] comparison of older white and black women’s beliefs. Rather than interviewing people with a history of suicide attempts, Bender’s cultural approach targets variation in attitudes to suicide between these two populations. Black women, she argues, do not see suicide as a choice, even in intractable illness. This differentiates them most from white women. What remains to be understood, however, is the source of this belief.

Once death has occurred, gender plays a part in its management. Lucy Kay[6] and Elizabeth Hallam[7] both address the way women intervene in the process of making sense of a death. Kay offers another methodological approach via her study of media representations of female pathologists. She draws heavily on feminist theory; specifically Julia Kristeva’s notion of the abject. In the female pathologist we have a figure who transcends the ‘frills’ and ‘thrills’ boundary which normally divides the genders. Empowered to open and interpret the dead body, she subverts medical science’s male hegemony and confronts the abjection of the corpse; that which is normally pushed to the margins of ordered existence. Hallam utilizes the documentary resource of the Canterbury church court archives to show women’s roles within early modern will-making at the deathbed. While authority was invested in men when it came to the making and reading of wills,

women's testimonies, as the more constant, informed attendants of the dying, could potentially overturn their statements. Not only does her article make an important feminist contribution to historical work on death and dying, but, like Young, Bury and Elston's,[1] it moves the site of study away from institutional space and into the domestic sphere, revealing the centrality of this gendered environment within the totality of experiences surrounding death. The notion of death ritual as bounded within institutional spaces is thus critiqued and instead we can consider ritualisation, the informal processes which unfold across time within the gendered spaces of the domestic world.

Lisa Kazmier[8] also addresses the reading of the dead body but here reveals, not the role of women in constructing or subverting that reading, but rather how the body of one famous woman, the actress Ellen Terry, was read by the public who flocked to witness her funeral procession in 1928. By richly detailing the social and political context of the event, Kazmier shows how Ellen Terry came to stand for a form of femininity which was felt to be under threat during the period of instability which followed the First World War, 'a decade where flappers served as scapegoats for economic dislocation and uncertainty' (p. 186).

Four papers in this collection address the gendering of mourning and grief. Stephen Handsley[9] provides an autobiographical ethnography of how a sudden death in his wife's family exposed its internal, gendered workings. Existing work on the gendering of grief is developed through an ethnography which shows how a father's grief for his son finds expression only in guilt and abstinence from the alcohol which contributed to the death. Women's responsibility for emotional labour is evident in their concerns about another son's inability to cry. The result of all this is that male family members, in adhering to emotional control, receive less support. And in the process marital relationships become distanced as individuals find no intimacy in their grief. The two papers by Kate Bennett[10,11] provide valuable comparative work on how older men and women respond to the death of an opposite sex partner in the medium to long term. Using social psychological methods Bennett addresses the effects of different variables: ageing, bereavement, grief and loss of marital status. She shows women maintaining their levels of social participation while men's decline. For men, being single, rather than their grief, seems to be an important factor. For women, lowered morale seems to feature within longer term effects of a bereavement, with mental health problems more prevalent during the immediate postmortem period. Another feature of this period which Gillian and Kate Bennett[12] identify is the sensing of the presence of the dead by older women. They identify a continuum of sensory experience: from a feeling of being watched to a comprehensive encounter involving sight, sound, touch and smell. Such experiences may recur for 15 or 20 years after the death. What these authors explore are the ways in which women make sense of such encounters; whether through a medicalized discourse of cognitive dysfunction or a more traditional account of visitations from the souls, spirits or ghosts of the deceased. Their data show women moving between these discourses, albeit with a bias towards the more traditional account.

In summary, these papers demonstrate the breadth of a gendered perspective in terms of its theoretical, methodological and substantive focus. Taken together, however, they each contribute to the capacity of feminist and gender research to re-position us as critical thinkers and practitioners engaged with the challenges of dying, disposal of the dead body and bereavement.

JENNY HOCKEY  
*Professor of Sociology*  
*University of Sheffield*  
UK

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