The Body in Society
An Introduction

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Introduction

Just for a moment, think about your own body. Where do you start? With your appearance (the spot that has materialized from nowhere, the bad hair day)? With its shape and size (the diet you keep meaning to go on)? With its aches, pains and reminders of daily physical struggles? How do you feel about your own body? Are there parts you would like to change? Do you feel the need to keep in shape, or try to be healthy? Are you more aware of your body at some times rather than others, such when you trip over your feet in a crowded room, belch unexpectedly or break wind in company? How do you feel when you become aware of your body in these circumstances? Now think about the bodies of other people. What seems most obvious to you is probably the appearance of others – how people look – but think a little harder and soon you will find that the bodies of other people become conspicuous in other ways – smell, size and shape, personal habits. Many of us expect people to smell ‘fresh’ or be devoid of odour, to refrain from touching us until we feel we know them sufficiently well and to demonstrate ‘good manners’ in public places. When you stop to think about it, it isn’t hard to become conscious of the human body, yet in much of our daily life we tend to take our own bodies and the bodies of others for granted. The intention of this book is to examine those taken-for-granted aspects of the human body and what they reveal about the social organization of everyday life.

It may not seem obvious why a sociologist should be interested in the human body. After all, sociology is a social science that is interested in rational actors (Weber), collective conscience (Durkheim) and social structure (Marx). Yet sociologists have become increasingly aware over the last twenty years or so that the human body is
central to the establishment and maintenance of social life. First, people experience and engage with the social world and with other people from an embodied perspective. Put another way, this means that the physical characteristics of our own bodies, our mannerisms, shape, size, habits and movements, contribute to and shape our perceptions and interactions with others in everyday life. Indeed, we see the world and operate within it from the particular vantage-point of our own body, and so **embodiment** is a critical component of social interaction. Second, in order to be competent social actors we need to be able to conduct ourselves in particular, socially prescribed ways. To secure the smooth flow of social interaction we have to pay particular attention to **bodily conduct**. In Western contexts such conduct typically refers to controlling the natural rhythms and urges of our bodies. When we are unable to do so, **bodily betrayals**, such as breaking wind, belching or expressing emotion inappropriately, break the flow of interaction, and we need to work hard to recover that flow and repair the damage to interaction.

Third, to present ourselves as competent social actors, we all engage in **body work**, activities and practices associated with grooming and hygiene, as well as forms of body maintenance such as exercise and dietary management. These activities help to maintain our bodies (according to scientific standards of nutrition, growth, development and hygiene) and, because of their aesthetic component, help us to present ourselves as particular kinds of people. Hence our participation in certain kinds of body work helps us to create an identity for ourselves. But such work is also morally charged. For instance, research suggests that physical appearance, body shape and size influence entry to all kinds of occupations. Put another way, labour markets favour particular kinds of bodies and, by implication, people. Finally, the rules of bodily conduct and norms of appearance that accompany everyday life are socially shaped, have changed over time and differ from culture to culture.

**Issues, perspectives and conceptual frameworks**

In the 1980s, there were very few sociological texts that focused exclusively on the human body. Yet it is not as though sociology was not interested in the human body. After all, medical sociology focused on health, illness and disease, all of which are located within and affect human bodies, and feminist sociology emphasized practices and processes that oppressed women by directly constraining or controlling aspects of embodiment (physical violence, for instance). Yet it was not the **gender** or the **sex** of the body that was the focus of this discipline. Rather, the body was seen as an extension of mind and emotion.

Though the body has been living in our minds, it has rarely been a central concern in sociological explanation. There are, of course, many other disciplines, such as psychology and biology, and consciousness and emotion, whose premise is the distinction between mind and body, or the latter (the body) as secondary to the former. A classic statement of this perspective can be seen in Descartes's famous dictum, which would reduce the human body to a kind of machine: "We live in the body, not the body in the self." Indeed, the body as the site of the self is seen as simply a contamination of the mind.

This perspective has been largely isolated, and the study of the body within fields of Western sociology has remained scientifically rational and medical. This is because the emergence of biopolitical thinking in claiming that the body as the site of observation is simply a contamination as it is part of the mind, not an independent entity.
not the body that was the focus of this work, rather medical expertise or gender relations. So, this introduction sets out to do three things. First, it explains the relative neglect of the body in sociology (and other social science disciplines) and, second, it develops some of the reasons for this disregard. Third, the chapter provides a brief outline of the field of the body in sociology, including key issues, established perspectives and emerging conceptual frameworks.

Though sociology is supposed to be a discipline concerned with living, breathing human beings, at first glance, sociological writing has rarely acknowledged the significance of the human body in explanations of the emergence of modernity (Freud 1988). Like other disciplines emerging in the nineteenth century, the historical and conceptual development of sociology has in large part been premised on the Cartesian legacy, which claims an ontological distinction between mind and body and privileges the former over the latter (Turner 1984). René Descartes developed what is regarded as a classic statement concerning the relationship between mind and body – a statement that reflected a widening belief – that personhood must be seen as distinct from the human body (see Hollis 1997 for an excellent and accessible philosophical introduction to Descartes). Descartes argued that, if we stop and reflect on ourselves, we cannot reduce our sense of who we are (or identity) to our bodies or to parts of our bodies. If our bodies were to be altered or damaged in some way, our sense of who we are would not disappear. This understanding of the self has three aspects. First, mind and body are considered distinct from each other and, second, body is subordinate to mind, where the former resembles a machine or an object in which the self is located. Third, the mind is considered the source of thought through which the self is produced via cognitive rationalization and through which we view the world as external to us. In a Cartesian view of the world, though vision is privileged as the sense that connects the self to the physical and material environment in which the self is located, bodily sensation is not seen to influence or contaminate perception.

This philosophical dualism between mind and body, between an isolated, rational self and a world external to that self, forms the basis of Western epistemology and has informed the development of scientific rationality. This is especially marked in the example of the emergence and consolidation of modern medicine, which succeeded in claiming the human body as an object amenable to scientific observation and manipulation. Similarly, the autonomy of sociology was initially dependent on this distinction between mind and body, as it sought to distance itself intellectually from psychology and
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anthropology (Freund 1988). Indeed, the subject of sociology, the rational actor, was disembodied in the sense that rational thought was located in a mind, already disconnected from the body (Morgan 1993; Burkitt 1999). This meant that the body was neither perceived as a source of personal knowledge or understanding, nor deemed relevant to the production of sociological knowledge. Finally, the body's association with nature and, concomitantly, with femininity (Sydie 1987) further distanced it from sociological analysis.

Unlike those of today, sociology textbooks written twenty years ago have (almost) nothing to say about the body and its significance in everyday life, yet increasingly sociologists have acknowledged the body's presence in classical sociological texts. We depend on our bodies to engage in productive and reproductive work labour (Marx); the body is central to religious ritual and social classification (Durkheim) and is regulated and rationalized in modern life (Weber). In the last quarter of the twentieth century the body acquired greater significance within sociology. In 1990 Arthur Frank noted that bodies are 'in' (p. 131) and provided a valuable overview of the body in sociology. There are now numerous new journals and conferences dedicated to sociological study of the body, and there has been a rapid growth in books that provide sociological treatments of the body in one way or another. As many commentators have noted (Turner 1984; Shilling 1993; Williams and Bendelow 1998) there are a number of factors, external and internal to sociology, that help to explain this interest. Sociology is a discipline that is uniquely responsive to social change, and the body has become more interesting to sociologists because of social developments that force us to think about it.

First, demographic changes (such as increased life expectancy) mean that a greater proportion of the population live for a longer period of time; however, they do so in circumstances of poorer health and in the likelihood of disability. This kind of change raises important questions about the life course and how it is changing, and about how Western societies ought to respond to and manage the ageing body. It also raises questions about the care and management of ageing bodies, as physical competencies are potentially transformed over the life course and bodily betrayals increase. However, processes and experiences of ageing also raise questions about the significance of the physical appearance and capacities of the body for maintaining self and social identity. Second, late modern – or postmodern – societies are characterized by their consciousness of and anxieties about the human body. Because bodily conduct has become an important way of socially classifying and categorizing people in Western societies, our bodies are etched with social life. Finally, we all have our own bodies; we are, for instance, tormented by the influence of others on our looks and modifying our bodies to exaggerate or change the looks and nature of our bodies in key ways. (This is not just a third, ethnically justified.) Surgery and cosmetic treatment of my own body are, for some people, xenotransplants that have developed in me, but what are we to make of purpose driven surgery? Organ transplant and xenotransplant not only transform the body, but the public body. The historian of American medical analysis. For example, has shown that the body is not even thought of in the same way the women, men and children, have drawn upon the objectified...
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expecancy) for a longer ucer health raises impor- tance; and about the ageing the ageing management of transformed er, processes significance maintaining utomodern - and anxieties become an able in West-
ern societies, we spend a lot of time, effort and money on maintaining our bodies. The presentation of the body is an important part of social life, and we may often feel that we can exert control over our own bodies in ways that we cannot over other aspects of life. For instance, we might not be able to control our personal relationships but we can control how and what we eat. We might not be able to influence global politics but we can exercise hard and show our friends how disciplined we are. And we can influence the response of others to us by manipulating how we look, perhaps even by modifying our features to conform with current ideals of beauty or exaggerating our features to sharpen the contrast between our own looks and those of fashion norms.

Third, the expansion and availability of new technologies such as gene therapy or xenotransplantation mean that we can manipulate bodies in unprecedented ways, but these technologies also challenge key assumptions about the human body, such as what is possible and ethically justified in terms of intervention. We can manipulate genes (this causes considerable anxiety); we can replace body parts (with parts from other humans or even animals); we can reshape our faces, tighten skin, build limbs. We live longer and there are more of us on the planet. These new developments influence the meanings people attach to their own and others’ bodies. What will it mean if I have someone else’s heart? Will I still be the same person? If I have plastic surgery am I merely pandering to the beauty myth or taking control of my own life? Is it demeaning or empowering? The reactions of some people in terms of disgust or disbelief to practices such as xenotransplantation (animal organs in humans) suggest that we have developed boundaries between humans and animal bodies – but what are these boundaries and where do they come from? What purpose do they serve? Hence technological developments, such as organ transplantation and cosmetic surgery, offer the potential to transform and redefine the physical body, and in doing so raise questions about the boundaries between nature and culture. Fourth, the publication in English of the work of the French philosopher-historian Michel Foucault has directly influenced a largely Anglo-American audience and made the body more amenable to sociological analysis. His analysis of the relation between body and society has shown that we can take nothing for granted about the body, even though we live in ways that take it for granted. Finally, the women’s movement and feminist thought has made visible the significance of the body in the oppression of women. Feminists have drawn attention to the ways in which the female body is objectified through medical, legal and representational practices. In
sociology, sociology of knowledge, and sociological thought lines, such as Foucault's notions of the 'body/affect', the body and technology, or the 'lived' experience of the body. However, sociological interest in the body is also in part a reflection of the development of the discipline itself and its openness to influence from a range of perspectives. Intellectual currents associated with cultural anthropology, social psychology, psychoanalysis, continental philosophy and contemporary feminist theory influence many practitioners of sociology. These twin forces of responsiveness to social change and sensitivity to intellectual change mean that body has become what Frank refers to as a 'reference point in a world of flux and the epitome of that same flux' (Frank 1991: 40). To put it another way, in the context of contrasting forces between modernity and postmodernity, the body provides a physical and conceptual space in which the recurring issues and tensions of sociology are revisited and reworked. On the one hand, the impulses of modernity to control and contain have reduced the body to a knowable, anatomical object (Morgan and Scott 1993), which is amenable to sociological scrutiny in terms of how society acts upon the body. On the other, the impulses of postmodernity render the body unstable and establish an explicit challenge to the dualisms inherent in Cartesian thinking. This tension between the body as a known and knowable material object and the body as discursively constituted has led some commentators to question 'what the body is' (see Shilling 1993). Is it a particular kind of object that can be known and understood or a socially constructed entity, the meaning of which changes over historical and biographical time and which is, therefore, less fixed and stable?

This uncertainty about 'what the body is' is reflected in current sociological approaches to the body. On a very broad level, these diverge between naturalistic and socially constructed approaches. The former explores how social and political contexts impinge on the body, retains an ontological distinction between mind and body and tacitly accepts the body as a primarily biological entity. The latter explores how the body itself (shape, size, movement, action and experience) is socially constructed. In practice, the latter approach often means that the focus of study is on how ideas about the body are socially constructed, and, as we shall see, there is much evidence that ideas about the human body and its significance change over time and vary from culture to culture.

Howson and Inglis (2001) identify many broad approaches in the conceptual development of the body in sociology and attempt to 'bring the body in' to the sociological frame. The process of 'bringing
socology in’ has worked productively at the margins of other disciplines, such as anthropology, and has developed a range of perspectives such as phenomenology. Sociological studies of the body have centred on the social and cultural meanings conferred on the body, the body’s symbolic relation to the social world and the body as a ‘lived’ entity. Social constructionism and symbolic interactionism highlight the importance of the human body for social expression and interaction, for making and remaking social life. Such approaches concentrate on the surfaces of the body as an interface between the physical body and the social world and often focus on body images. These approaches, which examine the social conditions in which ideas about the body develop, typically do not question the organic basis of the body and tend to take the biomedical model of the body for granted.

This model emerged in the eighteenth century and monopolizes Western understandings of the body (Illich 1986). The emergence and consolidation of modern medicine as a scientificaly based occupation was enabled via a range of practices that contributed to the mapping, measurement and reduction of the human body to object status. This model of the human body is characterized by the following (Freud and McGuire 1999). The mind–body dualism associated with a Cartesian view of the world detaches mind from body and views the latter as an object which can be manipulated, handled and treated in various ways in isolation from the self. The biomedical model has increasingly assumed that illness is largely a consequence of biological disorder. This physical reductionism locates disease within individual bodies often to the exclusion of the wider environment and social contexts in which disease develops.

The development of germ theory in the nineteenth century further contributed to the biomedical belief that disease was caused by a specific agent. Though modern medical practice is based on more complex and sophisticated theories of disease causation, nonetheless, the development of empirical method to isolate specific diseases underpins the modern Western reliance on and support for ‘magic bullets’ such as antibiotics and other pharmaceuticals. Related to the mind–body dualism associated with the biomedical model of the human body is the assumption of its machine-like status. In contrast to the metaphors in which the body is understood in non-Western cultures, mechanistic metaphors pepper Western understandings of the body (Schepers-Hughes and Lock 1987), such as ‘running like clockwork’ or ‘feeling run down’. As many commentators observe, the machine metaphor assumes not only that the body can be repaired and its ‘parts’ replaced as in any other machine but also
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that it can be standardized and regulated through diet, hygiene and exercise regimes.

In contrast to the biomedical model, anthropological traditions have more explicitly questioned the perception of the human body as a physiological and anatomical object and accentuate embodiment as a relation between the physical body and the social and moral world. In particular, the scholarship of Norbert Elias emphasizes that the body needs to be approached not only as a biological entity but also as an organism that changes across both historical and biographical time in response to social and cultural processes. In doing so, these examples of scholarship challenge the specialist boundaries that divide the human body and social life into discrete and compartmentalized areas for examination and study. Furthermore, recent developments within sociology emphasize the instability of the body as a biological and anatomical phenomenon and question the facticity of the body itself. Post-structuralist approaches have been more influential in the arts and humanities than within the social sciences, though even this broad division of interests is under scrutiny. Such approaches highlight the importance of discourses that constitute the social world. The human body is not regarded as a natural and thus immutable entity that exists outside the language in which it is described or the historical context in which it resides (Benoist and Catheras 1993). Post-structuralist thinking poses the possibility of the body as a text and invites us to consider decoding its many inscriptions (Grosz 1994). The human body in this view or the body we know and understand collectively as a universal category is a product of particular historical contexts and social relations (Laqueur 1990). The human body has also been identified as the focus of rationalization processes, regulatory strategies and technologies of control. The work of Michel Foucault in particular has opened up new means of exploring the ways particular discourses have actively produced bodies and ideas about bodies.

In the last two decades, sociological approaches to the body have multiplied and fragmented, and overviews of the body identify many different kinds of body. These include the 'discursive' body, the 'material' body, the 'medicalized' body and the 'talking' body (Turner 1984, 1992); the 'individual/social' body, the 'physical' body, the 'communicative' body, the 'consumer' body and the 'medical' body' (O'Neill 1985); the 'sexual' body, 'disciplined' body, the 'somatic' body and the 'corporeal' body (Frank 1990); the 'uncertain' body, the 'naturalistic' body and the 'socially constructed' body (Shilling 1993); and the 'commodified' body and the 'regulated' body (Lupton 1994). Such an elaborate list of bodies underscores Shilling's approach of identifying the list possibilities over the everyday of social categories and practices as a whole.

This discursive and foundational real or apparent social change (Shilling 1988). The human body itself, this body, this body, in which we act and culturalise it, remains a problem of the sociocultural world. It is an academic and even sociological construction from which identity manifests the body.

Sociological approaches to the body in the current climate (1998: 9) of 'postmodern light'. This approach uses and the retelling of these (for instance) challenges the usual association of the writings of a traditional body. According to Morgan and others, many scholars who are taking action and are starting to establish new ideas.

Of particular and the body are suitable to the other, and the multiple perspectives of an establishment...
Shilling's observation about the 'uncertainty that sociologists have in identifying what the substance of the body is' (1993: 39). Moreover, the list points to a recurring tension within the sociology of the body over the existence of the body as an entity independent of processes of social constitution, or whether bodies exist only in relation to the practices and processes that produce them.

This distinction is posed as one between foundationalism and anti-foundationalism (Nettleton 1992) and refers to tensions between the real or apparent body. The tension itself is a product of historical and social change. In late modernity it is difficult to define the body (Shilling 1993) such that its 'beingness' disappears. Though the human body has been produced as a universal category, as 'the' body, this is now under question. In contrast, an embodied sociology begins from a sensitivity to the relation between 'being' and 'having' a body, in which embodiment not only serves as a bridge between action and biology but also alerts us to the 'the practices that conceptualise it, represent it and respond to it' (Crimp 1988; also cited in Frank 1990: 135). Of particular importance to the emerging field of the sociology of the body is feminism as both a social movement and an academic field. Indeed, feminism has forced body politics onto sociological and other disciplinary agenda. The raising of body consciousness and the reclamation of the body as central to self and identity mark a historical turn in the relationship of sociology to the body.

Sociological approaches to the body also seek to rediscover the body in the work of classical theorists or, as Williams and Bendelow (1998: 9) put it, to re-read the classics in a 'new, more corporeal light'. This approach has some parallels with the diffusion of gender and the retrieval of 'herstory' from the vaults of the founding fathers (for instance, see Sydie 1987 or Bologh 1990). Moreover, it challenges the view that sociology has 'neglected' the body. A key claim associated with this approach is that corporeal concerns underlie the writings of the 'founding fathers' and, moreover, lie at the heart of traditional sociological concerns (Williams and Bendelow 1998; Morgan and Scott 1993). Goffman, for instance, is identified by many scholars as a key proponent of the corporeality of social interaction and order, and of the fundamental importance of the body in establishing society (e.g., Crossley 1995a).

Of particular significance to sociological approaches to the human body are such binary oppositions as mind/body, subject/object, self/other, and so on. Hence sociologists may pull together a range of perspectives in order to address conceptual dualisms that place limits on establishing adequate accounts of the relationship between not
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only body and society, but body and self. This framework requires an analytic focus on ‘lived experience’ as a contrast to what some view as abstract and overly theoretical accounts of the body and defines the body as a site of knowledge and experience, action and intention. Moreover, this framework redirects sociological attention from the body as a reified object (of processes, forces, theory) towards the body as lived (Nettleton and Watson 1998; Williams and Bendelow 1998). This shift is described as an ‘experientially grounded view of human embodiment as the existential basis of our being-in-the-world’ (Williams and Bendelow 1998: 8, emphasis in original). Among the concepts deployed in this framework are corporeality, physicality and materiality to emphasize the body as a physical place/location from and through which the person knows and speaks.

This move is one shared by a range of sociologists, including many whose work focuses on issues associated with health, illness and disease (for a range of examples, see the collection in Nettleton and Watson 1998). Williams and Bendelow’s recent text The Lived Body (1998) is typical of the work identified here. It belongs to a strand of thought which seeks to challenge the dichotomous relationship that pertains between the body as a universal (material) object and the body as a variable system of and resource for representation. Part of their concern is to address the way in which sociological approaches to the body appear to privilege either representational/discursive understandings or material/foundationalist understandings. They argue persuasively (as do Mellor and Shilling 1997) that dualist understandings of the body must be placed in their social and historical context. Cartesian concepts are neither universal nor persistent across time. Consequently, dualisms that are part of the contemporary period represent an inheritance from historically specific conditions in which the body became a discrete object of the mind. This observation leads several authors to argue that the binary thinking associated with Cartesian dualism can be transcended.

Such an approach is shared by other disciplines. In social psychology, for instance, Radley (1995) literally reformulates key themes and concepts in relation to the human body; similarly, Csordas (1994) provides extensive argument concerning the implications of reorienting anthropology towards embodiment as a key concept. Although this type of move is explicitly concerned with, and privileges, experience, overall its concern is to develop a framework in which it might be possible to specify and delineate relations between the ways in which the human body is socially shaped in culturally and historically specific terms; the body as a site of knowledge, conscious-
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Social psych- key themes and Csordas implications of the body concept. and privileges framework in relations between culturally and consciousness and experience; and the body as a condition and constituent of intention and action. In social geography too, the body has been rethought as a specific space from and through which we establish ourselves as persons or subjects (Rose 1993). The move is therefore ambitious in the way in which it seeks to accommodate an intentional actor/agent with an emotional, sentient body, in turn shaped by social structures and made visible through the reflexivity of the embodied practitioner.

In summary then, the field of the body in sociology has grown rapidly in the last twenty years. It is no longer a topic of peripheral interest to sociologists but is now a major area of scholarship in social theory (Burkitt 1999), has its own dedicated journal (Body and Society), and provides the principal framework for addressing issues in health, gender, childhood, ethnicity and disability and many more substantive areas. While there is considerable variation in the methods one may adopt in order to approach the body sociologically, there are several features on which many sociologists agree. First, the body in sociology is more than a physical and material frame (Freund and McGuire 1999) and is largely understood as inseparable from culture and society. There may be several aspects of human embodiment that are taken for granted in everyday contemporary life, but these are the products of complex social and political processes and actions that are embedded within history and our social fabric, though they may be subject to change. Second, in modernity the body has increasingly become the target of political control, rationalization and discipline. States and agencies of the state (such as law, welfare and medicine) exert considerable control over the movement of populations in time and space (e.g., in hospitals, schools and prisons) and encourage individuals to discipline themselves in compliance with state objectives (such as improving the nation’s health). Third, the body is not only a material object on which social and political processes operate, but also forms the basis of social experience and action. On the one hand, we attribute meaning to bodies (bodily states such as the production of tears are mediated and interpreted via social categories) and use the visual appearance of the body to mark and codify differences between people. We use the body as a physical symbol of our social worlds. For instance, the Statue of Liberty, gifted by the people of France to the people of the USA in 1886, embodies the social values of liberty and freedom (Warner 2000). On the other hand, bodies create meaning by acting within and upon the physical and material environment in which they exist.