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Article

Embodied Relationality and Caring after Death

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Abstract

We explore contested meanings around care and relationality through the underexplored case of caring after death, throwing the relational significance of ‘bodies’ into sharp relief. While the dominant social imaginary and forms of knowledge production in many affluent western societies take death to signify an absolute loss of the other in the demise of their physical body, important implications follow from recognising that embodied relational experience can continue after death. Drawing on a model of embodied relational care encompassing a ‘me’, a ‘you’ and an ‘us’, we argue that after death ‘me’ and ‘us’ remain (though changed) while crucial dimensions of ‘you’ persist too. In unravelling the binary divide between living and dead bodies, other related dichotomies of mind/body, self/other, internal/external, and nature/social are also called into question, extending debates concerning relationality and openness between living bodies. Through an exploration of autobiographical accounts and empirical research, we argue that embodied relationality expresses how connectedness is lived out after death in material practices and felt experiences.

Keywords

care, continuing bonds, corporeality, death, embodiment, materiality, relationality

In this article, we draw on feminist work on care, and its underpinnings in the notion of relationality, to consider the particular case of care after death. Through this exploration we develop the notion of embodied relationality to highlight the interpersonal sense of connectedness written into our bodies that can characterise such care.¹ Two still-powerful precepts of western thought and culture comprise the

boundedness and independence of autonomous ‘individuals’, and the pre-social bedrock of the ‘natural’ world in general, and of bodies in particular. Critiques of both of these ideas are widely established in academic, including feminist, work, not least in the pages of this journal (e.g. special issues 16(1) and 16(3) in 2010). Yet, these newer perspectives remain largely marginal to the broader cultural imaginary, with everyday assumptions dominated by notions of separate minds and (bounded) natural bodies. In everyday settings, and in western thought more generally, it is consequently difficult to think beyond these ideas even when we strive to do so (Ozawa-de Silva, 2002). Building on the feminist ethics of care we explore how relationships after death are deeply unsettling for these core precepts of western cultures. We develop an argument about felt experiences of a nondichotomous, material and embodied relationality after death which challenges us to move beyond binary thinking. In bringing the significance of dead bodies and grieving bodies into view, we thus share Blackman’s view of the ‘indeterminacy, contingency and openness’ (2008: 25) of materiality, rejecting assumptions of a ‘natural’ or ‘authentic’ body (Blackman and Venn, 2010: 10).

The starting point for our work is rooted in empirical accounts and autobiographies of relationships after death, exploring the ways in which the dominant western paradigm of the body (at least in contemporary Protestant Britain and the US) plays out in everyday understandings of death in these contexts. These accounts are considered alongside evidence of more relational experiences, with other – muted but discernible – ideas of death and bodies. This testimony suggests that the relationality of caring, in practice if not in dominant discourses, even in contemporary North American and European societies, sometimes incorporates an embodied relational self in which threats to the physical wellbeing of another may be experienced directly as implicating one’s own physical wellbeing. We also draw on empirical accounts of relationality in cultural contexts that frame death and the significance of bodies in very different ways from the dominant western paradigm, throwing into relief the limitations and excluded possibilities of western thinking.

Everyday understandings are, of course, always complex and multi-faceted, not least in contemporary globalised, mediatised and multicultural contexts. Yet understandings of ‘the body’ in western thought are deeply rooted, as seen, for example, in the legal mandate of ‘habeas corpus’ (Cohen, 2008). In this regard, particular cultural formations of the body may become institutionalised, politically (as ‘birthing liberal citizen-subjects’ Cohen, 2008: 122) and economically (through wage labour), while western medicine is also predicated on the notion of a bounded, mechanistic and biologically defended corporeality (Cohen, 2008, discussed by Blackman, 2010a and 2010b). Such institutionalised meanings of ‘the body’ constitute a taken-for-granted bedrock for both expert and everyday understandings of life and death in these cultural contexts.

In our discussion, we move iteratively between empirical and experiential accounts and theoretical ideas that may be brought to bear on such evidence. In particular, we build on the work towards non-binary thinking, to explore theories of relationality, and the significance of bodies in this regard. We see Blackman and Venn’s idea that ‘bodies should be defined by their capacities to affect and be affected’ (2010: 14) as a radical form of relationality, and endorse the framing of affect as a way of naming the dynamism of matter (Papoulias and Callard, 2010), understood as ‘a force or energy

imbricated in the relational' (Venn, 2010: 135). The view of the individual as a co-production, a feature of enacted relationality that can only be understood in that context, also resonates with the role played by the ethics of care in this article, as well as with the work of Gergen (2009) on 'relational being'. Our aim is less to consider how relationality, embodiment and affect are linked, and more to explicate the extent and diversity of experiences of those embodied aspects of relationality that are highlighted through caring after death, while our emphasis on (reported) experiences leads to a focus on conscious rather than non-conscious aspects of relationality.

Yet, even as these projects seek and develop various theoretical resources for rethinking existing categories and frameworks, they paradoxically reconstruct and thus reaffirm the 'marginalised status' (Blackman, 2010a: 163) of these 'other' ways of thinking. Blackman, for example, returns to aspects of the work of the early psychologist, William James, which she argues merit revaluing as routes into thinking about non-conscious relational processes and taking them seriously (such as hearing voices, or suggestibility). In this, Blackman suggests that James's concepts connect up to 'metaphysical questions about the nature of consciousness, humanness and spiritism' (2008: 29). Venn's discussion also points to dimensions of 'spirituality' in the questions raised: 'Spirituality is the meaning of the relation of the individuated being to the collective and thus also the foundation of this relation . . .' (Simondon, quoted in Venn, 2010: 148). In seeking new ways to think about bodies, then, spirituality may indeed prove significant with regard to both older and newer forms of spirituality in western contexts, and diverse religious and faith communities. And, indeed, attention to 'the ethereal' and 'the intangible' is apparent in recent empirical research in the UK, including family and kinship studies (Mason, 2011) and death studies (Bennett and Bennett, 2000; Lunghi, 2006; Valentine, 2006), which we return to below.

Nevertheless, in this article, our primary focus is upon material and embodied challenges to dominant understandings of bodies after death in western cultures, rather than the more 'mystical' or spiritual challenges. At the same time, we do attend to the latter insofar as the split between 'the material' (including the body) and 'the spiritual' is itself a very deep-rooted and long-standing feature of western understandings and philosophising. This split may, then, be viewed very differently from the point of view of other faiths and/or cultural perspectives, even as western New Age movements may struggle over how to reconcile spirituality and materiality without reinstating the AQ 2 divide (Hanegraaff, 1998).

We begin below by setting out the problem, before introducing autobiographical materials and other research evidence concerning the loss of the living body, and the role played by various forms of materiality in care after death. Such accounts provide powerful evidence for the felt experience of continuing embodied relationality after death, despite the apparent material loss of the other. The third section of the article then develops a reconceptualisation of care after death, drawing upon meanings of relationality, embodiment, materiality and the significance of an 'enfleshed' connection (foregrounding 'the living, breathing body' [Woodward, 2009: 23]). We bring together a particular view of the materiality of embodiment, with a notion of relational experience as a field of care and of intensity concerning 'you', 'me' and 'us'. Relational embodiment in these terms is crucially understood as socially situated and culturally constructed. While the idea of intercorporeality (Csordas, 2008) goes

some way to capturing the meaning of relational embodiment between living subjects, our exposition of embodied relationality accounts for the felt persistence of an enfleshed and material relational connection with a loved one after their death. This section provides an alternative to the binary mind/body thinking that leads to an overly biologised view of the dead person along with an underestimation of the significance of the physicality of grief. We demonstrate that what is missing is the understanding that the embodied relationship with the other does not die with the person, but can be inscribed in the body of the living.

In the fourth section we again draw on autobiographical and other evidence to examine further themes of embodied relationality experienced through the body of the living, and consider how the material embodied connection can continue when the ‘enfleshed’ other is gone. This includes the authors’ own experiences – Jane’s experience of widowhood in 2000 and Raia’s experience of the death of her son in 2010. The materiality of death has received significant attention in the recent literature through a focus on the ‘remains’ of loved ones and other associated ‘matter’, but less attention has been paid to the materiality of the bodies of the living, which we bring into view here in particular ways. In the process, some key issues are underlined about how we may theorise relationality itself. The powerful experiential testimonies of embodied relationality in the second and fourth sections are thus brought into iterative dialogue with the rethinking of the third section, expressing methodologically the authors’ commitment to theoretical discussions that can illuminate, and respond to, everyday experiences, and to develop a non-dualistic, situated and grounded account of the body. In the conclusion we return to the broader debates and consider how our discussion contributes to understandings of relationality.

Setting out the Problem

no one gets up after death – there is no applause – there is only silence and some second-hand clothes. . . . Dying isn’t romantic . . . death is not anything . . . death is . . . not. It’s the absence of presence, nothing more . . . the endless time of never coming back . . . a gap you can’t see. (Stoppard, 1967: 89, 90–1)

In this quotation from the play *Rosencrantz and Guildenstern Are Dead*, Stoppard’s character expresses a widely held view in western countries. Death most fundamentally would seem to concern the absence of presence, with the loss of the living embodied other as the hard inescapable truth to be faced. This brings sharply into relief the part that bodies play in our relationships, and in caring for others. There have been significant developments in formal UK care practices since the time of Stoppard’s writing. Palliative care of the seriously and terminally ill has been established and institutionalised (e.g. National Council for Palliative Care, 2011), and bereavement care has followed on (e.g. Cruse Bereavement Care, 2011). And, while sociology was for many years complicit with the post-Second World War cultural marginalisation of death and dying in England (Jalland, 2010), the latter decades of the 20th century also saw the development of historical and sociological analyses of these issues (Kellehear, 2007), along with some sociological discussion of grief and bereavement (Howarth, 2007; Walter, 1999). Such analyses have theorised bereavement as a threat to the social bond, with continuing debate about sequestration

and the extent of associated ‘taboos’ around death and dying (Lee, 2008; Stanley and Wise, 2011).

What is less apparent in such cultural contexts is the notion that care may continue past death, despite the apparent loss of the other. Rather, in 20th-century western theorising and medical frameworks, and broader ‘advice’ literatures (whether religious or therapeutic), the emphasis has been on stages of grief culminating in a ‘letting go’ of the deceased in order to reconnect with the living. From this point of view, an inability to form new relationships is seen to signify a halt in the mourning process and a clinging to the dead person. Such views have been challenged, however, from within the bereavement and grief literatures since the 1996 publication on ‘continuing bonds’ edited by Klass and colleagues. Empirical studies have found continuing bonds to be significant after death through activities, thoughts and conversations, with the deceased person her/himself experienced as either passive or active in the relationship (Howarth, 2000; Klass 2001; Meyer and Woodthorpe, 2008).

Yet the idea of caring for the other as an embodied practice after death may seem like a contradiction in terms, a hollow, even macabre, mockery of what is no longer possible. The boundaries of acceptable mourning are shown in the popularity of public rituals in the UK and the US to ‘honour the dead’, as expressions of respect and ‘caring’ for soldiers deemed to have died heroically in foreign wars. More everyday memorialisation is also apparent in specific locations such as cemeteries and crematoria, although the meaning of such activities is contested (Woodthorpe, 2011). But a broader notion of ‘caring after death’ may appear to be anomalous, except in some amorphous sense of remembered affection or nostalgia. The prevailing social imaginary suggests that, when the other is removed from the needs of corporeal being, the notion of ‘caring after death’ is rendered meaningless at best and pathological at worst. Contemporary autobiographical accounts from the UK, as we go on to explore, bear witness to a powerful cultural assumption that death of the body entails complete loss of the self, with some consequential painful dilemmas.

This view – that loss of the physical other is a loss of the whole other – has powerful underpinnings, in the biological understanding of bodies associated with the medicalisation of death, and the integral connection between the body and personhood found in liberal-democratic socio-political processes (Cohen, 2008). Consequently, from this perspective, the death of the biological body is taken to be an absolute loss of embodiment, reciprocal bonds and agency, removing any basis for embodied relationality and offering no scope for the agency of the deceased to be expressed. However, there are good reasons to question whether – even in these contexts – the death of a loved one marks an absolute break with their materiality, and to support the view that relational bonds of care after death can retain a material dimension, albeit that the corporeal loss may be deeply and painfully felt in the bodies of the living.

Caring For and About the Dead – The Loss of the ‘Enfleshed’ Other

The bereavement experiences of one of the authors (Jane) developed most powerfully from the illness and death of her husband Peter in 2000, leaving her as a single parent to their 5-year-old daughter. Unlike some autobiographical sociology (Ellis, 2009), Jane is not offering an extended experiential account, but rather using specific

features of her remembered story to ask questions of others' published autobiographies of bereavement (Ribbens McCarthy, 2012a). Raia's son took his life in August 2010 while detained in hospital, after experiencing mental illness for over a decade. He had made several suicide attempts before, but had previously recovered well when stabilised under medication. This experience has caused Raia, among other things, to reflect upon her previous research on the meaning of body, mind and emotion (Prokhovnik, 2002).²

Autobiographies centring on the bereavement of a close family member have expanded considerably in recent years, mostly written by women (often women already in the public eye) about the loss of their husband, although some provide insights from other perspectives. These powerful and personal accounts enable a consideration of how grief raises issues of embodiment and relationality in caring after death. Such publications are explored below, alongside research regarding experiences of death in various contexts as we consider the significance of the absence of the 'enfleshed' other.

This first discussion of autobiographical evidence attests to the desire for ongoing connection. It explores how the pain of the loss of the embodied other, culturally shaped as the end of personhood, may entail yearning for the other's body which is gone, signifying the total loss – even annihilation – of the other. At the same time, materiality may also provide strategies of solace mitigating the loss, testifying to the desire for material connections in the form of caring for the departed through the embodied activities of the living.

After death, as these accounts demonstrate, 'the enfleshed self' becomes unsustainable such that the continuing corporeal presence becomes de-personalised. It is 'the' body, 'the' remains, such that the person is somehow no longer 'there' and what is left is no longer seen to constitute them – even as mourners may rail against this 'reality'. Lunghi (2006) describes this as the fundamental ontological dilemma of existence and non-existence faced by the bereaved, though the form of the dilemma is at least partly framed by particular cultural resources such as language. Lunghi suggests that this dilemma may lead many bereaved people to denial in western contexts, along with a 'resort to magical thinking' (2006: 31), although he does suggest that mysticism may be more acceptable in some western contexts than others. Drawing on the work of Hanegraaff (1998), Lee considers ideas of the 'subtle body', which provide for more possibilities than a simple dichotomy between dead and living bodies, or between body and spirit. Nevertheless, Lee does not cite empirical evidence about how widespread or marginalised such ideas may be, and Lunghi argues that in western medical perspectives, such 'magical thinking' may be framed as a type of medical deviance that requires curing. Indeed, it could be argued that the more spiritual or 'transcendent' challenges to such dominant perspectives may themselves, ironically, re-instate mind/body dualisms (Hanegraaff, 1998; Lee, 2008).

At the same time, as Klass observes, '[s]urvivors' physical relationship with remains can be very complex' (2006: 850). Some may want to encounter the corpse in order to confront the reality of its lifelessness or emptiness, while in other cultures or historical periods physical proximity and care of the remains may constitute a sense of continuing closeness, as with 'Greek village women who cradle the skulls of their dead' (Holst-Warhaft, 2000, cited by Klass, 2006: 850). Such practices demonstrate

continuing relationality through the lifeless remains which may also constitute a focus for continuing care for the dead. Thus, in a different religious tradition altogether, Zivkovic discusses the mortuary rituals of a Buddhist lama in Tibet. Using the Buddhist idea of the three bodies, disciples can connect to the lama after his death, both through sacred sounds and spoken mantras, and through ‘ingestion of his sacred bodily remains’ (2010: 137), such as the salt used in the preservation of the lama’s body. The author argues that:

The literal ingestion of relics is a reciprocal practice of intercorporeality as practitioners’ awareness of being a self-existing entity is transformed and diffused by an all-pervading presence of the lama. (2010: 137)

In the UK context, a study of cremated remains after removal from the crematorium, describes how the living may use the ashes to maintain their relationality with the dead, including the retention of ashes for future mingling with the ashes of the living once they have also died, the incorporation of ashes into jewellery (a very visible form of embodied relationality), and ‘ashes ground into the interiors of pubs’ (Hockey et al., 2010: 17; Prendergast et al., 2006). Francis et al. (2005, discussed by Klass, 2006) researched people visiting cemeteries in London, and highlighted the strong sense of a continuing physical connection that was present for some. For instance, a Cypriot widower would not return to live in Cyprus because his wife was buried in London. Yet, while care of plots above ground in London cemeteries is important for many, comfort in caring directly for the remains is not apparent, and Woodthorpe (2010) suggests that the remains below ground are treated as taboo.

Care of the dead through the medium of material objects, other than the corporeal remains or the site where they are deposited, is readily apparent in many cultures around the world (Asai et al., 2010; Klass, 2001). For the Japanese the rituals associated with the family buddha altar in the home may comprise a felt experience, as much as an active or cognitive one, of just ‘being with’ deceased family members and ancestors – ‘like waving to a friend across the street’ (Klass, 2001: 748). These accounts resonate with Venn’s discussion of affect between living beings, where he draws attention to:

the concrete, experiential forms of non-conscious and proprioceptive communication that take place through touch, smell, the gaze, movement, sound, taste occurring directly between bodies, and sensed as a tacit knowledge of oneself and the world that doubles as an embodied way of being-with others. (2010: 156)

Although, of course, we might not view such communication as necessarily non-conscious. Rather more menacingly, in the context of care after death, traditional Chinese beliefs require the living to continue to care ritually for the dead to help ransom the deceased from hell (Chan et al., 2005).

In (generally secularised) autobiographical accounts in contemporary western cultures, responsibility for the care of the departed soul is not generally apparent; rather, it is the separation from the ‘enfleshed’ other – alive and newly dead – that is railed against. Certainly Jane knew what it was to want to jump into the grave, since the loss of Peter’s body was experienced as meaning that all was lost. The sense of relationality – and consequential traumatic loss – bound up with the physical body is expressed here by Wolterstorff on the burial of his son:

I buried myself that warm June day. It was me those gardeners lowered on squeaking straps into that hot dry hole . . . It was me on whom we shovelled dirt. It was me we left behind, after reading psalms. (1987: 42)

It is evident from autobiographical accounts and from bereavement research that, alongside such ‘leaving behind’, yearning for the dead may be strongly focused on the desire for their physical presence. As Saga recounts after the death of her father:

Something is tearing and tugging at me inside, demanding that I rush off and throw myself into his arms. But I will never be able to do that. Daddy is no longer there to catch me. (Sjoqvist, 2007 [2005]: 98)

Hancock describes how, after the death of her husband, ‘I wanted him in the present, in the flesh. Especially the flesh, as it happens. To caress and cling to’ (2008: 10). Hancock also describes another evocative sensory experience:

That night I had a vivid dream that John was there with me. I reached out and touched him. I felt the roughness of his bristles. . . . I went to hold him, but he turned deliberately and drifted away. I tried to call out to him but my voice wouldn’t work. (2008: 24)

Such sensory connections of voice, touch and smell can also be indicative of a material relationality which may persist, such as the reminders encountered after the death of a child:

I see her, and I can also, you know, smell her. She smells like cleanness. I can also . . . just taste . . . cause she liked cheese and I can just taste it. Whenever I eat something that’s cheesy I remember her. It makes me feel closer to her . . . (Sibling quoted in Foster et al., 2011: 433)

Bennett and Bennett describe widows’ continuing sense of presence of a dead spouse:

At its weakest it is a feeling that one is somehow being watched; at its strongest it is a full-blown sensory experience – olfactory, auditory, visual, and occasionally tactile. (2000: 140)

Their studies offer accounts of ‘ineffable experiences’ with a spiritual dimension, set in ‘the daily round, the common task . . . with spiritual strength, practical help or emotional comfort being gained from the experience’ (2000: 152).

Research following the deaths of children in the UK (Riches and Dawson, 2000), suggests that support groups may be important places where the bereaved can express their sense of continuing bonds with the dead. This observation would seem to suggest that parents may find it very difficult to express and outwardly demonstrate the experience of continuing bonds in such cultural contexts. Thus, while Bennett and Bennett’s interviewees, discussed above, described their embodied experiences of their departed spouses, at the same time they appeared to feel a need to invoke a more mainstream ‘rational’/materialist as well as a supernaturalist discourse, and to switch between the two, in recounting their experiences of the presence of their departed spouses. Valentine (2006) suggests that social science itself has neglected everyday beliefs and practices of spiritual bonds with the dead – perhaps nervous of being seen as outside of rationality. As Lunghi observes, to ‘see’ the dead as having continued existence may be regarded as ‘a doorway to magic (and madness)’ (2006: 33).

Reconceptualising Care after Death

Feminist theorising of care seeks both to render visible, and value, the significance of care work and relationships, while also exposing their costs, limitations and potential burdens. This work challenges the narrow model of care as caring for babies and children, the sick, and the elderly, and points to fundamental human issues of dependence and vulnerability, straddling (the naturalised but highly political definition of) the divide between the public and private realms. The feminist ethics of care thus demonstrates that our lived, embodied experience and reality is interwoven with others both in close relationships and societies more broadly, such that caring is not the exception but the norm, a labour and a 'being alongside'. At the same time, this work has foregrounded the materiality of relational care, and personal and specific embodied relational connections rather than abstract principles (Noddings, 2003; Philip et al., 2012; Tronto, 1993). This approach demonstrates the importance of the situatedness of perspectives and knowledge, drawing attention to cultural specificities and the significance of context. From this grounded perspective, care is theorised to encompass embodied labour and love, caring for and about, and care receiving. And, because care necessarily involves an openness to others, concerns with the moral theorising of care are seen as inseparable from the role of affective and material relational processes. Further, both personhood and social meanings are forged, found meaningful, and contested, through relationality – the experience of being connected with others, through which lives are made possible and lived (Donchin, 2000; Sevenhuijsen, 1998).

The key insight of relational approaches such as the ethic of care is that the individual is not self-contained but operates at both material and symbolic levels within a self-understanding which builds from and continues to function in relation to others in specific contexts. The self has a mutually constitutive relationship both with significant others and the wider social environment. Similarly, Blackman and Venn – in the context of theorising affect – refer to the 'entanglements' of relationality which subvert ideas of relationships as 'an "interaction effect" between pre-existing entities' (2010: 10). This also points to dilemmas about how to understand issues of selfcare in the context of relationality. On the one hand, by highlighting the labour and costs involved in what may otherwise be seen as (women's) 'natural' capacity for care, the ethic of care brings out the importance of also caring for oneself. On the other hand, theoretical care perspectives point to the interdependence of self and other, suggesting that the notion of self-care is mistaken, being based on the illusory idea of an independent self to be cared for (Ward, 2012). For these various reasons, then, the ethic of care can provide an illuminating analytical lens in conceptualising the death of a loved one in terms of care after death.

As well as the resonances with recent theorising of affect, there are also strong points of contact between theorising about care and early debates on continuing bonds. Silverman and Nickman conclude their 1996 collection, for instance, by suggesting that mourning may involve learning to live with paradoxes, in terms of presence/absence of presence, the feeling of being bereft/not being bereft, and continuity/ disruption. This work raises parallel issues of the blurring of relational boundaries, and the (culturally shaped) experience of deeply close-knit selves. At the same time, continuing bonds are not always comfortable, as Raia experienced with the

sense of her son's hostile spectral presence on the upstairs landing of their family home.

The idea of continuing bonds can also be problematic. The mind/body split of western thinking sets up continuing bonds after death in such a way that the (dead) body becomes perplexing – if the body is dead, what happens to personhood (the question raised by the autobiographical accounts introduced earlier)? Either the dead person is wiped out of existence because without the living body there is nothing left apart from memories and (inanimate) mortal remains, or they are understood to exist outside of the material realm in some way, that is, as ghosts, spirits in the after-world, etc. This is why Jane experienced Peter's death as bringing bodies, and their significance, very starkly into focus. It made no sense that his life force and energy had ceased to exist, but her particular cultural heritage offered no scope for how to understand this. In continuing to relate to Peter, is this a product of her imagination, or is he somehow still 'outside' her? Some of the literature makes sense of continuing bonds through the notion of 'internalisation', which is predicated on the mind/body split – that is, the bond itself is psychologised and located within the individual's psyche. But might there be other ways of conceiving this?

Embodied Relationality

In taking forward different ideas of care, relationality and continuing bonds, our focus is upon a quality of relationships between people that goes beyond the notion of a dyad or network of individuals, to encompass a sense of being 'bound up' with others, that may continue after death. Thinking this through in a context where one of the people has died requires us to reflect upon both personhood and self, and the nature of the connections between such persons or selves. Indeed, selves are seen as always already connected and relational in a general sense (Burkitt, 2008), as configured and embedded in a social context right from the start, emerging from and through relationality, and actively seeking meaning – a striving which itself occurs relationally (Gergen, 2009). Venn argues that:

'Being is relation' . . . emphasiz[ing] the primacy of reciprocity and co-production characterizing the process whereby an individual emerges as 'theatre and agent of a relation . . . as activity of the relation, and not a term of the relation' (Venn, 2010: 135, quoting Simondon, 2005)

In focusing, as we are here, on an intense form of relationality occurring in close reciprocal relationships, it is important not to romanticise the relationality of connections, or avoid the associated paradoxes, and to recognise that relationality also raises the possibility of harm and conflict. Furthermore, relationality may encompass a number of forms of connectedness – for better or worse – with differing notions of self and personhood at stake (Kagˆıtcıbası, 2005; Ribbens McCarthy, 2012b). Our focus here is on the ways in which such connections are embodied as well as affective and biographical, in that the self is always embodied as well as always social.

Embodied relationality thus allows us to consider a close, enfolded, relationship as generating an 'us' that helps to shape the 'me' and the 'you'. The 'me' and the 'you' as well as the 'us' are expressed and constructed differently through diverse cultural and personal resources, and vary greatly in how the boundaries between these terms

are understood. While ‘you’ and ‘I’ potentially have multiple identities, the ‘us’ is a field of intensity between ‘me’ and ‘you’, expressed in an embodied orientation which includes but is not reducible to an affective attunement. ‘My’ sense of my own bodily integrity coexists with my strong sense of embodied relationality expressed in ‘us’. With the death of a loved one, the biological body of ‘you’ is buried or cremated, while the material presence of ‘you’ is not wholly erased but remains in significant ways. But also, and crucially, the ‘us’ remains as an embodied relationality, held with ‘me’ in many embodied forms; the ‘us’ is written into ‘my’ body, and continues to have material presence after death. As Lunghi puts it: ‘the person of the bereaved takes possession of, or becomes possessed by, the person of the deceased . . . manifest through the corporeal form of the bereaved’ (2006: 41).

While death is often taken as the ‘natural’ limit of discussion about the body, we propose that this limit need not be accepted, since the mutual constitution of ‘physical’ and ‘cultural’ bodies may continue after the death of a loved one. Thus only some aspects of embodiment are annulled with death. Relationality that works outside the mind/body split thus enables other possibilities, including the continuing bond after death being embodied via the living bereaved. This raises the likelihood that relationality will become less ‘person’-alised over time/generations as the bereaved, who knew the deceased as a living embodied person, themselves die, leaving us with something closer to what Morgan (2011) refers to as ‘embodied traces’. Morgan’s ideas of the deceased/living being ‘relatively disembodied’ also resonates through this perspective, in that it is not an all-or-nothing issue.

‘Materiality’ is also integral in extending beyond the biological body, such that the notion of embodiment includes the ‘stuff’ in the field of intensity between ‘us’, such as the clothes ‘you’ choose to wear and the shape they give you, and beyond that to the ‘things’ associated with you (Barraitser, 2009: ch. 6), such as your watch, your wallet, or your green glass vase. Materiality here recognises the material situatedness and dynamic immediateness of ‘you’, and how those qualities animate the ‘stuff’ habitually associated with you. The autobiographical testimonies above indicate the importance of material ‘things’ associated with the loved one. Materiality here, as in the feminist ethic of care, acknowledges both the reflective and unreflective knowledges deriving from the everyday lived experience and reality of embodiment, and practices involved in attending to the material needs of others. Materiality thus refers to the lived experience and perceived reality of embodiment understood in the light of relations with others and social norms. As Latour puts it:

to have a body is to learn to be affected . . . moved . . . by other entities, humans or non-humans. . . . The body is thus not a provisional residence of something superior – an immortal soul, the universal or thought – but what leaves a dynamic trajectory. (2004: 205, 206)

Within the context of embodied relationality, the meaning of ‘death’ has no essential core. ‘Death’, like all social and political concepts, can be interpreted narrowly or broadly, with boundaries that may be ambiguous and contested (Hockey and Draper, 2005), such that no fixed definition of the concept is possible. The variety of experiences attested to in the materials we present above and below indicates the multiple social and personal meanings of death for different people. The outcome of the non-binary logic is to value more highly the materiality of the lived body, and at the same time to value more highly the dead person as not wholly absent just because

the physical body is transformed. The body of the deceased is no longer animated, having embarked on a process of material change that will indeed erase the boundedness of the 'enfleshed' self, while the living person's continuing experience is as a deeply embodied materiality. Rethinking the lived reality of the material, corporeal, visceral, fleshy, seeping, affective, 'enfleshed' embodiment of the person provides a basis for revaluing all that the now-dead person brought to their relationality, much of which remains.

Experiences of Embodied Relationality after Death

We return now to experiential and autobiographical accounts to consider how the impact of deep grief as a felt experience in the living body may evidence embodied relationality – an issue so far neglected in the literature on continuing bonds. While our earlier focus on the bodies of the dead revealed important aspects of the continuing bonds involved with caring for and about deceased loved ones, there is much also to be learned about relationality by focusing on the impact of deep grief on the bodies of the living.

Loss may thus be felt as a threat, damage or trauma to the physical body of the living.⁴ Such personal accounts of physical pain and (some) recovery speak powerfully to the experiential strength of the connections – for good or ill – we may forge with those we care about, and the ways in which such connections are physically as well as emotionally embedded to constitute a deeply relational – perhaps close-knit – embodied self. What is striking about such accounts is that the pain may be experienced in quite specific parts of the body. Sometimes this may seem to be related to the circumstances of the death, as with a woman who experienced great pain in her chest after her son was killed in a car crash when the steering wheel impacted into his chest (Parkes, personal communication in 2011).

This physical trauma of the embodied relational self was most apparent to Jane when she was first given the news, when Peter was just coming round from brain surgery, that his brain tumour was a secondary cancer and he would certainly die. At this point she felt as if someone had lobbed an axe into her chest, and that she was then expected to carry on walking around in the world with an axe in her chest and tears pouring down her face. In others' autobiographical accounts, it is clear that she is not alone in such graphic and specific sensations. Barbara Want talks of how, when her husband told her that his cancer was terminal, '[t]he horror of that moment was physical. A bullet of ice seemed to penetrate my body and shoot through my heart, my limbs, every nerve, every finger and every toe' (2010:160). Stott describes, '[a]s with many another woman, the sense of loss sometimes manifested itself in a searing physical pain, somewhere in the guts' (Stott, quoted by Want, 2010: 32). Hunniford repeats what a woman said to her about the death of her own mother when she was a teenager:

'It's like your arm has been chopped off. It's like something physical has happened to you, but nobody can see it. Sometimes you want to scream, "Don't you realise that half my body is missing?"' (2008: 87)

And Saga writes about the death of her father when she was 10:

I . . . can feel in my stomach how I am being torn apart, chewed up from inside. Daddy and I belong together. He has been cut away. A part of me has been amputated. (Sjöqvist, 2007 [2005]: 97).

The pain described in these extracts expresses the embodied manifestation, the continuity and loss, of part of the 'us', and the seeming paradox of embodied relationality after death. Yet such accounts of corporeal loss contrast strikingly with the experiences of bodily integrity with regard to the incorporation – or rejection – of prostheses or organ donations (Blackman, 2010b), even as both phenomena point to the ambiguities of bodily boundaries.

Wolterstorff (1987: 27) discusses the expectation placed on men to be 'strong' in this regard. 'I have been graced with the strength to endure. But I have been assaulted, and in the assault wounded, grievously wounded. Am I to pretend otherwise?' Although such physical pain may subside over time, it may also recur sharply and unexpectedly (Hunniford, 2008), and, as Jane has found, its manifestation can be bitter-sweet, expressing as it does the continuing embodied relationality with the dead.

At the same time it is important to recognise how these dyadic experiences of relationality are embedded in a network of wider connections which will be significant for the bereavement experience. While bereavement is sometimes felt to create a sense of disconnection from the living (Wolterstorff, 1987), Raia has experienced a desire for connectedness through both the living and the dead, which has been very important in allaying the pain. Her mourning has been strongly expressed in a powerful drive to find continuity with her son through connectedness with other living people, as well as through more directly sharing feelings and memories about her son with her partner. The comfort of talking with others about her son, about their bereavements and ways of experiencing grief, or about other meaningful things in her or their lives, and the physical comfort of a hug or a hand on the arm, has been potent and effective. The craving to reaffirm relationality feels as though it is about honouring and remembering the 'me', 'you', and 'us' she had with her son, and also about consolidating the relationality she has with others. One of the points that Raia's experience highlights is the ways in which bereavement can strengthen or weaken our relationality with living others, providing a sense of heightened connection.

Conclusion

Our argument has focused on the experience and phenomenology of intense grief in regard to the death of someone who is personally significant. Dominant social meanings in western societies around the death of a loved one – in parallel with deeply rooted wider cultural formations of bodies and persons – polarise along mind/body lines, leading to the conclusion either that there is nothing left of the loved one but the mortal remains, or that one can still have a strong relationship but without embodied presence. This binary thinking, and the biologisation of death and personhood underpinning it, leads directly to the underestimation of the significance of the physicality of grief and the materiality of continuing bonds. What is missing is the understanding that the embodied relationship with the dead person does not die with the person. The ongoing connection with the deceased is an opportunity to

rethink care after death through embodied relationality, but also to indicate the significance of the latter more broadly.

An important element of such re-visioning of relationality concerns the significance of conscious, non-conscious or 'pre-reflective' (Papoulias and Callard, 2010: 40), and more psychoanalytically framed, unconscious, forms of being, experience, connection, intersubjectivity and communication, as well as the various facets of experience explored through notions of affect, spirituality and bodies, and the different theoretical lenses that may be brought to bear. Our conceptualisation of embodied relationality can accommodate 'forms of knowing that exceed rational conscious experience' (Blackman and Venn, 2010: 23), though our focus remains positioned in a social perspective rather than a psycho-social one. Our discussion here started from, and has been focused through, conscious experiences and their expression in words as well as bodies. Nevertheless, it was the embodied impact of caring after death that brought these experiences – to at least some degree – powerfully into consciousness.⁵

We have highlighted the significance of the interpersonal sense of connectedness written into our bodies that can characterise care after death. This has provided a rethinking of embodiment which avoids privileging either mind, body or the boundary between them, and of relationality as lived out in embodied practices and felt experiences. The article has also reconceived the specific connections between an intense form of relationality, and embodiment and materiality in the context of care after death, in a non-binary way that indicates the porous nature of the boundaries of the en fleshed self and manifests the possibilities of relative (dis)embodiment. At the same time, in continuing bonds we do not simply internalise the other into an interior psychic reality. Not only does the embodied connection remain, but a continuing sense of the loved one as a separate being may persist – including, for some, a sense of the continuing (intentional) agency of the dead.

The dual focus of the discussion has been both the persistence of a felt embodied relation of care with another after their death, and the felt impact of grief on or in the body of the living person. The issue at stake is presence in absence, rather than absence, and we have drawn on empirical work from varying cultural contexts to help explicate this. Through these materials, we have developed the idea of embodiment as a non-binary concept, to encompass actively en fleshed beings, incorporating the felt and sensory qualities of experience and its everyday practices and processes. By unsettling the binary divides that stabilise western understandings of life and death, we have also explored how other dichotomies of mind and body, internal and external, self and other, and nature and culture, may be similarly unravelled. We have also developed the idea of relationality as multi-dimensional and variable, in terms of an 'us' in a caring relationship, as a field of intensity operating in an environment that draws in objects, 'things' and 'stuff'. The question of care after death throws these reconfigured meanings of relationality, embodiment and materiality into sharp relief, and we have argued that some, but not all, aspects of embodiment may persist after the death of loved one. In particular, the effect of the death of a loved one on the felt experience of the living person, demonstrates the continuing materiality of the 'us' and the necessary permeability of the embodied boundaries of relational being.

This article has sought to show that examination of care after death in terms of embodied relationality enriches the feminist ethic of care and highlights the value of a relational approach to death and grieving, with the potential to advance our thinking beyond the boundaries of life and death, bodies and minds, me and you, to contribute to rethinking both relationality and embodiment and their inextricable entanglements.

Dedication

We would like to dedicate this work to Conal (1985–2010) and Peter (1949–2000).

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Notes

1. Bringing together embodiment, relationality, care, death and materiality evokes a range of other terms relevant to this cluster of ideas (e.g. agency, temporality, imagination, memory, supernatural bonds) which are beyond the scope of this article. Moreover, we do not address the processes through which relationality may be formed, and the potential role of unconscious processes in this (Hollway, 2009), sometimes referred to as intersubjectivity. This is in part due to our concern with the social self and the social meaning of the death of a loved one, as well as to the need to maintain a focused discussion on ‘relationality’, the main term at issue in this article, rooted in the feminist ethics of care.
2. Auto-ethnography is now recognised as a valuable sociological method for interpreting cultural understandings (Chang, 2008; Ellis, 2009), and the argument of the article goes beyond responses to the ‘ontological dilemma’ (Lunghi, 2006) faced by the authors as a result of personal experiences.
3. Relevant work includes Ogden’s discussion of the ‘third space’ in the dynamic between two people (discussed by Hollway, 2009), and Buber’s discussion of I–It and I–Thou relations (discussed by Crossley, 1996). However, the lack of attention to embodiment limits such work’s usefulness for our present discussion.
4. Our concern here is with felt experience rather than the somatic symptoms of grief; the latter are attested to by other work (Boyle et al., 2011; Foster et al., 2011; Parkes and Prigerson, 2010), pointing to the potentially mortal outcome of loss through death, in particular through heart disease (Mostofsky et al., 2012).

5. Indeed, there is also considerable evidence that grief in many cultures and parts of the world is expressed primarily in terms of somatic effects, rather than conscious emotions (Stroebe and Schut, 1998; Terheggen et al., 2001).

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