THE CHANGING PRESENTATION OF DEATH IN THE OBITUARY, 1899-1999

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ABSTRACT
Obituaries from the New York Times are examined at three points to illuminate changing conceptions of death. The findings are twofold. Changes in the obituary demonstrate how the locus of social control over death has shifted from nature and God, to medicine and most recently to the individual. Additionally, it is shown that descriptions of biophysical aspects of the dying process are marginalized over time and that there is more frequent use of language that emphasizes death-resistant themes in the most recent obituaries. This finding exemplifies the observation of increasing claims to authority over mortality by individuals in recent decades.

The social experience of death, and in turn, the construction and presentation of obituaries, has changed markedly over time. This study tracks the effects of those changes with the aim of illuminating the differing sources of social authority over the cultural scripts that surround death and the conception of what it means to “die well”—concerns that are important in death studies.

The content of an obituary serves a function for the dead and the living. It reports the outcome of the negotiation of identity between the individual and society by reporting what is considered important about the life of the decedent. Obituaries have always achieved this goal by detailing accomplishments and
relationships. For the living, it reports the news that a death occurred. The obituary can also be part of the bereavement process. (At times it has not been uncommon for relatives to author obituaries and paid death notices are also an example of openly expressed tribute and attachment.) For society, these newspaper eulogies fulfill a cohesive function, reaffirming what is important to society and why cultural practices are normatively legitimate for the times in which they appear. Obituaries make sense of death and dying through available perspectives. The narrative structure of the obituary emphasizes the themes that bind society together. Indeed, that structure valorizes accomplishment by expounding on what should be remembered about a life after death and sometimes about the death itself.

The most recent obituaries considered here (1999) usually do not present death as part of a teleological order. Their authors marginalize the description of the biophysical aspects of dying. Contrast this practice to obituarists working at the beginning of the twentieth century, who (contrary to notions of Victorian prudery) often utilized death-affirming language that provided significant and substantial amounts of detail about the bodily experience of death. This phenomenon helps to signal changes in the way death is conceived for presentation in American obituaries. Whereas mortality had been couched traditionally in bodily, communal and religious terms at the turn of the century, and for more than two centuries prior, it has since been increasingly reported in terms of individual authority and transcendence over the biophysical with death-resistant language.

These differences in presentation suggest cultural changes that may be driven, in part, by shifts in the locus of social control over death. These shifts coincide with the ascendancy of the medical profession, its rational-scientific approach and its emphasis on pain management. Subsequently they coincide with the rise of individual authority over mortality and the validation of the choice to resist death. Consequently, contemporary obituary writers are far more likely to utilize language that valorizes resistance to mortality. These changes in the construction of the obituary are indicative of an increased emphasis on the authority of the individual in many aspects of contemporary society, not only the experience of death (Giddens, 1991; Walter, 1996).

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1 Obituaries have always appeared in American newspapers. Discussions of the history of obituaries and death reporting can be found in Fowler (2005), Haley (1977), and Hume (2000).

2 Nord (1990, p. 10) contends that early American journalism of the seventeenth and eighteenth century is rooted in cultural meanings and “forged in the fires of cultural convention, interpretation and power” of a society whose reporting was placed in a teleological framework, i.e., God’s plan. Hume (2000) demonstrates how these themes remain prominent well into the latter part of the nineteenth century as obituaries continue to emphasize the religiosity and endurance of the dying individual.
PRESENTING AND REPORTING DEATH

To further elucidate the issue at hand and to demonstrate that obituaries can provide answers, consider Theodore Hall—the prodigy, physicist and spy—who died at the age of 74 in 1999. In the New York Times story of 1,123 words, his obituary chronicles a number of the important biographical elements of his life, such as his role in the development of the atomic bomb and in the course of the Cold War. In the entire obituary, only thirty-nine words (3.47% of the total text) are spent describing the actual death itself. We know that Hall “…died on Nov. 1 in Cambridge, England, where he became a leading, if diffident, pioneer in biological research. He was 74. The cause of his death was cancer, said his wife, Joan Hall” (New York Times [NYT], November 10, 1999, p. C31). Aside from the actual cause of death, details about the dying process are completely omitted from the newspaper report. This is typical of the manner in which the biophysical aspects of death are treated in contemporary obituaries.

In 1899, the details that would allow the reader to more fully construct a narrative about a decedent’s end-of-life experience were often printed with generous specificity. George Smith, a banker, was eulogized in 1899 and a fifth of his 977-word obituary describes this experience:

George Smith, who once made his home in Chicago, died yesterday in his rooms at the Reform Club, where he had lived thirty years, and which he had not left for almost a year. Some time since Mr. Smith had a slight stroke of paralysis, but recovered sufficiently to be able to work with his secretaries. He was conscious to the last. In later years, growing deafness caused Mr. Smith to withdraw from all but his most intimate friends. He rarely spoke, and preferred to pass the time in reading Scott’s novels, or to be talked to. Although he had recovered almost entirely from the effects of the paralytic stroke, he resisted all attempts of his friends to induce him to leave his room, despite the fact that a few months previously he had defrayed the expense of erecting a luxurious elevator. He had a constant and intense desire to rest, but continued to see his secretary daily, and occupied himself with the management of his property until within a few days of his death (NYT, October 9, 1899, p. 7).

This relatively substantial selection is a detailed medical narrative of Mr. Smith’s final years, weeks, and days. Of course, what follows and what is unquoted here is the biographical information that is more familiar to readers of contemporary obituaries. But given the above information, one can make reasonable conclusions about his physical experience that we are simply unable to make in the reading of contemporary obituaries.

Obituaries from the New York Times in 1899 often detailed (1) the time of death, sometimes precise to within five minutes, (2) the names and treatment strategies of attending physicians, (3) the strength and condition of the deceased, (4) the discussion of complications from medical procedures, (5) attempts at
recuperation and resuscitation, (6) levels of pain, and (7) levels of consciousness. This kind of information is marginalized in contemporary obituaries.

As examples of journalism, most obituaries allow the reader to discern what obituarists consider important about individuals. For instance, there is discussion about the normative value of temperate living in Smith’s obituary. Normative statements are often made in obituaries, regardless of the date of publication. But there has been a noticeable shift toward the valorization of active resistance to death as opposed to the endurance of the dying individual. The depiction of Smith notes, through a quoted observer, that he had “lived temperately” and “hung on to life.” Often, the normative discussion of death in the earliest period considered here is couched in religious language, with praise for those considered dutiful or with reverence for the endurance of the decedent. The fact that there is repeated emphasis on Smith’s attempt to continue to manage his business affairs is also not unusual and reveals a normative conception of how death should be most appropriately experienced—with due concern for one’s worldly obligations, as well as for the plans of God and nature.3

Today obituaries still discuss death with normative themes, only the focus of the discussion has changed, with the themes of resistance and self-actualization increasingly emphasized. There is markedly little reference to the actual description of biophysical processes. Factually, the death is relayed but ordinarily unexplored. Certainly subjects continue to be praised for their struggle for life but the core concern of the most recently published obituaries studied here is the reporting of individual biography, accomplishment, and personality.

Consider the 1999 obituary of Rick Fields. A poet who died of cancer, Fields was quoted in his obituary, “I don’t have a life-threatening disease. . . . My life is threatening my disease, in that it is keeping the disease from taking over. I have a disease-threatening life” (NYT, June 11, 1999, p. A31). His words exemplify death-resistant language as defined below.

There is no description of Fields’ last moments and little biophysical narrative is provided. Aside from the fact that he had lung cancer for at least five years, there is no other information provided about Field’s physical experience. We do know, however, that Fields, also an expert on Buddhism, approached the disease from a Buddhist perspective. Indeed, any discussion of illness in this obituary is considered in its relation to Buddhism and not to medicine or the body. Fields is lauded for transcending his long-standing medical challenges while Smith was lauded for enduring them.

3 Parsons (1963, p. 62) writes about the attempt to interfere with natural processes, i.e., the plan of the cosmos, especially as it relates to the young, “Thus the loss of a large proportion of young children before maturity is, in some societies, considered normal, and it would even be thought of as interfering with Divine Providence to attempt to save them. The line between inevitable disaster, and the possibilities and rightness of its avoidance, is a subtle one.” It is clear that in the traditional type of death, there is a significant role for God and nature in the comprehension of the dying process.
DEATH AND CULTURE

Work by sociologists and historians helps to make sense of the changes described above. Ariès (1974, 1981, 1985) demonstrates how architecture, artwork, literary works, and funerary rituals are constructed differently with greater social changes in the European context, asserting that the human desire and the ability to control death would lead to its recession in cultural expression. He writes, “Death, so omnipresent in the past that it was familiar, would be effaced, would disappear. It would become shameful and forbidden” (Ariès, 1974, p. 85).

Numerous scholars further develop this theme, envisioning three types of death: the traditional, modern and postmodern. In crafting his own analytical approach, Parsons (1963) wrote about transitions between the traditional and modern. The traditional type is characterized by, among other considerations, the primacy of family, the importance of communal life and communally informed identities. It is asserted that the greater relative role of religious institutions, teleological explanations, and the capriciousness of nature, i.e., higher rates of mortality, including child mortality, are instrumental in shaping the social understanding of death. The traditional Western death, often presided over by the priest, is controlled by God and nature. The modern type, in contrast to the traditional, is influenced by technological and medical changes, including high levels of trust in the competence of medical practitioners, the establishment of the medical profession in Western societies (Seale, 1998; Starr, 1982), lower rates of child mortality and longer life expectancies. Attitudes toward death necessarily changed with such transformations (Parsons, 1951; Parsons & Lidz, 1967). The medical profession provided a rational-scientific approach to the biophysical attributes of death and provided tools that greatly augmented human control. As a result, the normative emphasis on endurance that preceded the modern conception of a “good death” recedes and the management of pain and disease becomes the main concern of physicians, who have replaced priests as the presiding figures at death. In the modern type of death, the authority of medicine is ascendant.

4 See Walter (1994, 1996) for an excellent and concise theoretical treatment of these types. The traditional, modern and postmodern types of death are, of course, ideal categories—not only in the manner in which they are evinced in obituaries, but in the times when observers would expect to see attributes of the various typologies. The use of those categories in this analysis should not be construed as an assertion that the traditional period ended around 1959 and that the postmodern period began around 1999. Of course, as will be asserted, the sampling of obituaries is constructed in such a manner as to reflect major cultural changes in the institutions that generally surround death and dying. Some might argue that postmodern sensibilities can be discovered at various points over the last several centuries for instance.

5 American life expectancy at birth for all males at the turn of the nineteenth century was 46.3 years of age and was 48.3 years of age for all females (The Centers for Disease Control and Prevention, 2001, p. 34). By 1959, the life expectancy at birth for all females had risen to 73.2 years of age and was 66.8 years of age for all males; in 1998 it had risen further to 79.5 and 73.8 years of age for those respective groups (The Centers for Disease Control and Prevention, 2001, p. 33). For all Americans, life expectancy was 47.3 years in 1899, 69.9 years in 1959 and 76.5 years in 1999.
The “new” awareness of death that characterizes the postmodern type has been accompanied by an increased assertion of individual identities, rights, and preferences over the circumstances of death (Doka, 2005; Fox, 1980, 1981; Seale, 2000). Coincident with the rise of such sensibilities is the postmodern perspective that emphasizes the augmented ability to resist death and disease technologically as well as socially. This expanding freedom may involve care in a hospice setting, preplanning in the form of Do-Not-Resuscitate (DNR) Orders or fighting through the courts for the right to die. In an environment where individuals are increasingly free to assert their preferences, they may also choose to accede to death, nature’s plan or God’s will (Nakashima & Canda, 2005). Such a choice is not incompatible with postmodern perspectives. As Walter (1994, p. 27) explains, “The good choice is no longer the choice that is right according to external authority, but simply the choice that I have made: it is authenticated simply by me, the chooser.” It is the ability to choose that is significant, and individuals are increasingly free to determine the manner in which they confront mortality. In any event, a “good death” is increasingly seen as a death in which the individual maintains authority, with ultimate control over social, cultural, medical, religious, and legal concerns.

**STUDYING THE OBITUARY**

Obituaries are rituals. They are products of the mores and values of the societies in which they originate (Durkheim, 1912 [1995]). Starck’s (2005) comparative analysis shows how the obituary, as ritual, is constructed differently in the United States, Great Britain, and Australia. Accordingly, if the attitudes and practices that surround death change, we would expect the presentation of death to change in these rituals. So, in the context of this analysis, obituaries are considered a particular form of cultural expression—a product that roughly comports to the prevailing social attitudes toward mortality seen through the available traditional, modern, and postmodern perspectives.

Obituary analyses have not often linked these theoretical arguments to the construction and presentation of themes in obituaries. However, prior research is valuable in that it helps to inform the methodological considerations of this analysis. Certainly the obituary has been justifiably and rigorously studied from a number of perspectives.

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6 Fox (1981, p. 55) writes that the underpinnings of the increased awareness of death and the devolution of social authority to individuals is connected to, “the broad affirmation of individual rights that has been taking place in American society since the 1960s and with organized attempts to expand the scope of these rights. The articulation and espousal of a ‘right to die’—that is, the right to exercise decision-making autonomy and influence over the conditions of one’s death that has emerged in recent years is an integral part of this process.”
Many existing analyses use obituaries to understand other social processes that involve living in the social world as opposed to leaving it upon death. With attention to length, thematic, editorial, and journalistic considerations, researchers have illuminated issues of racism, sexism, homophobia, and ageism (Kastenbaum, Peyton, & Kastenbaum, 1977; Marks & Piggee, 1998; Maybury, 1996; Spilka, Lacey, & Gelb, 1980; Williams, 1997).

Other researchers have used obituary analyses in a roughly congruous manner to the way it is approached here—identifying and comparing widely held cultural views and sensibilities over time. However, those analyses also deal with issues of discrimination, inequality, and marginalized identities (Halbur & Vandagriff, 1987; Hume, 2000; Moremen & Cradduck, 1998). In other cases, researchers have considered the effects of epidemiological concerns—often AIDS or cancer—to determine how society appraises the individual characteristics of a particular class of decedent (Alali, 1994; Cameron, Playfair, & Wellum, 1994).

Hume (2003) has produced an analysis of the *Portraits of Grief* published in the *New York Times* after the September 11 terrorist attacks, illuminating much of what has been theorized here about the cohesive function of the obituary, albeit at a discrete point in time. Moore’s (2002) analysis of *The Economist* demonstrates how the ideology of a publication is projected in both the selection and appraisal of decedents.

In addition to the substantive differences between the obituary literature and this study, few of the analyses mentioned emphasize the longitudinal scope considered here, encapsulating changing historical and cultural orientations to death. However, Long (1987) does examine obituaries for important shifts, viewing changes in the presentation of individual identity through the lens of organizations over the course of 120 years.

**THE PRODUCTION OF OBITUARIES**

As cultural products, obituaries are affected by multiple social structures and considerations, and, hence, must be carefully analyzed lest their meaning be mistakenly inferred (Peterson, 1994). The aforementioned types of death are not mutually exclusive, and the presence of one does not suggest the absence of others. For instance, it would be inaccurate to assert that aspects of the traditional perspectives on death were completely inaccessible by 1999. (In fact, some might consider the postmodern type of death to represent a rejection of modern uncertainties and authorities and an embrace of selected traditional concepts.) Any obituary from any time period studied could exhibit traditional, modern and postmodern characteristics as defined here. Furthermore, the empirical changes reported in this analysis should not lead us to overemphasize the separability of these multiple sources of cultural conceptions. Normative statements found in obituaries may present an idealized type of death, which is not realized or acknowledged by the obituary’s subject. I would assert that these problems of
analysis do not obviate the present study but place its explanatory power in the proper perspective.

The structure and content of the obituary are also affected by a variety of other factors, including the idiosyncrasies of the reporting newspaper (Vernon, 1970) or those of the obituary writer. Interestingly, some people negotiate the details to be included or omitted from their own obituaries (Haley, 1977). There is also further evidence that the reporting of death, in its own right, has effects on society (Phillips, 1974). Obituaries are cultural products, representing both complex and fruitful sources for social investigation.

METHODS AND DATA

Sampling Methodology

This analysis examines obituaries ($N = 470$) from the *New York Times* at three different periods in time: 1899, 1959, and 1999. The *New York Times* is the only publication used in this analysis, currently considered a newspaper of national record in the United States. Each year is chosen to coincide with predicted changes in the locus of social authority over death. The 1899 sample precedes the zenith of the dominance of the medical profession. Before physicians enjoyed presumptive competence, we should expect a relatively greater emphasis on the themes of community, duty, and religiosity that characterize the traditional type of death. We should also not expect to see the description of processes of death marginalized. The 1959 sample is drawn near the peak of physicians’ presumptive competence and follows important medical discoveries, such as that of antibiotics, which typify the technological advances of the postwar period. Finally, the sample of obituaries from 1999 comes from a period that features the emergence of the postmodern attitudes discussed. The dominance of the medical profession is increasingly contested (Freidson, 1970; Good, 1995) and while the doctor often remains prominent at death, individual authority is increasingly asserted. By 1999, the expansion of claims to individual authority had been well underway for several decades (Fox, 1981; Frank & Meyer, 2002). Consequently, we should expect an increase in obituary content that emphasizes this increased authority, as well as an inclination toward silence about biophysical processes.

Obituaries from the second week of every month were identified in each sampled year. With changes over time in the editorial content of the newspapers, obituaries in 1899 tended to be those articles with identifying headlines and that are generally longer than 40 words. Obituaries from 1959 and 1999 are more

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7 Phillips (1974) shows that the reporting of death in particular cases can actually cause temporary spikes in the suicide rate.
clearly identifiable by their headlines. They are also longer in length, anywhere from 75 to 2000 words or more.

The sampling method presents advantages and disadvantages. In terms of its disadvantages, it does not allow the analysis to fully explore the levels of diversity across publications, including national magazines, local newspapers, and various other periodicals. However, this reduces the need to account for the bias that can vary from publication to publication (Moore, 2002). It is reasonable that there may be cultural differences among obituaries from the New York Times, other large newspapers and smaller regional or local newspapers. Differences in decedent characterization and selection might certainly be assumed. Furthermore, it is possible that word counts may not fully capture the manner in which death can be affirmed in an obituary. However, it is posited here that the analysis of the narratives that underpins this study captures a significant social process.

To examine how changes in the social authority over death are revealed in the presentation of obituaries, this analysis considers two important dependent variables: 1) the relative proportion of words dedicated to the description of death and the dying process which allows the reader to construct a biophysical or medical narrative for the final period of life, and 2) the presence or absence of normative language that emphasizes individual control over death and the active resistance against the inevitability of death.8

The relative lengths or constituent parts of an obituary are a proxy for understanding the relative importance of various obituary themes over time. Basic methodological assumptions of this type can be found in numerous analyses. For instance, the Kastenbaum-Spilka strategy of obituary analysis (see Kearl, 1986) asserts in part that the relative lengths or presence of obituaries about certain types or classes of decedents can be used to make conclusions about the organization of social life. In the case of the Kastenbaum et al. (1977) and the Spilka et al. (1980) studies, the level of institutionalized discrimination in society was explained.9

In regards to death-affirming language—language that describes the biophysical aspects of the subject’s death—the amount of an obituary that is dedicated to such language can inform the researcher about the general orientation of society to themes of death and dying. In the present analysis, the number of total words in a phrase or sentence that features death-affirming language is counted and divided into the total word count of the obituary. To measure the

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8 This measure is constructed to gauge the emergence of the discussed postmodern sensibilities that exemplify the expansion of individual authority in recent decades. This should in no way be construed as an assertion that normative contexts are new to the newspaper obituary.

9 While endorsing the Kastenbaum-Spilka method for limited explanation of institutionalized discrimination, Kearl (1986, p. 77) warns, “[O]ne must take into account the historic period at which death occurs as well as the cohort of the deceased before making any inferences about how age affects immediate postmortem bias.” By fully engaging the historical aspect of the construction of the newspaper obituary as well as other salient factors, it is asserted that this analysis can contribute to further obituary analyses with multiple explanatory goals.
death-resistant variable, only the presence or absence of such language is con-
sidered in the employed logit analysis. The presence of death-resistant language
varies widely in its contemporary usage and the utilization of such language is
considered to be of greater importance for this analysis than the relative amount
of space dedicated to such themes. Additionally, since death-resistant language
is not consistently used across or within time periods studied here, it is asserted
that its presence or absence is the most reasonable way to consider normative
changes in the construction of obituaries.

THE DESCRIPTION OF DEATH AND THE BIOPHYSICAL
PROCESS: DEATH-AFFIRMING LANGUAGE

As the social authority over death is wrested from traditional perspectives,
privileging religiosity, and then is increasingly vested in modern perspectives,
privileging a rational-scientific approach, the utilization of death-affirming lan-
guage should decrease. The use of this language should further decrease as the
individual authority over death is increasingly asserted.

Death-affirming language is any language in an obituary that allows the
observer to reconstruct the final biophysical narrative of a decedent through the
circumstances that ultimately culminate in death. In this analysis, death-affirming
language is constituted by 1) an acknowledgment that the decedent has died,
2) the cause of death, 3) the time of death, 4) the place of death, 5) the attending
physician or other medical professional, religious figure or family member present
at the time of death, 6) the levels of comfort, pain and awareness in the decedent,
and 7) a description of the biological processes that led to the death of the subject.
This language is often grounded in the experience of the body as death occurs.

THE LEGITIMATION OF INDIVIDUAL RESISTANCE:
DEATH-RESISTANT LANGUAGE

As it is defined here, death-resistant language is language that editorializes
or places death and the process of dying in a particular normative context. It
can, and does, appear in any time period studied in the sample. Death-resistant
language should be relatively most apparent in the 1999 sample. Death-resistant
language entails the employment, either by the writer or the decedent, of themes
that 1) suggest death is socially, culturally or normatively controllable and appro-
priately resisted, 2) incorporates the discussion of the decedent’s explanations
of longevity, 3) mocks or trivializes death, or 4) describes medical interven-
tions that are successful in preventing death or a major debility. This language
is grounded in the expression of individual identity and in self-actualization.
We would expect these themes to be most common in the most recent obituaries
analyzed, as they exemplify the ascendancy of individual authority and the claim
to power over death in recent decades.
The theme of active resistance by individuals against death can be seen in such obituaries as that of Pepi Deutsch, a survivor of the Holocaust. Her obituary reads, “Very few mothers and daughters . . . survive[d] the concentration camps together. . . . Through all the miseries, Mrs. Deutsch kept her faith, refusing to eat rations of lard and fasting on Yom Kippur” (*NYT*, November 8, 1999, p. B11).

The theme of longevity and the mocking of mortality can be seen in the obituary of Jennifer Paterson, a chef, who was eulogized, “Last year Ms. Paterson said she was in fine shape for her age. ‘Lots of meat, drink and cigarettes and not giving in to things,’ she said . . .” (*NYT*, August 11, 1999, p. C23). And the role of medical intervention can be used to present death-resistant themes, as in the obituary of musician Beau Jocque, “. . . [H]e was attaching a monitor to a chemical container when his pipe wrench slipped and he fell 20 feet to a concrete floor. He was partially paralyzed, and during his 10 months of recuperation he began to play his father’s button accordion and decided to change careers” (*NYT*, September 13, 1999, p. A17).

**CONTROLS AND MODELS**

To show the trends over time in the two dependent variables, an OLS regression on the percentage of death-affirming language and a logistic regression on the presence of death-resistant language, with publication dates as the main independent variables, are employed below. I add, as controls, salient characteristics of the decedent (gender, occupational prestige, and age at death relative to life expectancy at birth in the year of death). Furthermore, I selected variables, namely deaths from cancer and AIDS complications, undisclosed causes of death, and unspecified causes of death, that control for differences in the presentation of disease. In the logistic regression, I add an additional control that considers the total word count of the obituary. These appear as the models in Tables 1 and 2. The variables themselves are described in Table 3.

**RESULTS**

Table 1 demonstrates that the proportion of death-affirming language which appears in obituaries falls over time as hypothesized. Transitioning from the 1899 to the 1959 sample entails a statistically significant reduction in the proportion of obituaries dedicated to such language as shown by the coefficient ($b = -10.239$, $p < .01$) for the date of publication. As the forces of rationalization, embodied in institutions such as the medical profession, come to influence the cultural conception of death, the reporting of the natural biophysical process of dying becomes less salient to the cultural ideal of what it means to “die well” in modern society. The normative value that was placed on endurance is less important culturally than the management of pain and this shift leads to a decrease
in the utilization of death-affirming language as a means to convey that idealized conception.

The second transition from 1959 to 1999 signals a further reduction, demonstrating that information on the natural process of dying is increasingly omitted from the obituary, even when only observed in the postwar period. For instance, many obituaries published in 1959 report on the location of death—very often a hospital. In 1899, it was still not regarded highly for members of the elite to be treated in hospitals (Starr, 1982) and, unsurprisingly, locations reported as the place of death most often included the home, the office, or a hotel. By contrast, contemporary obituaries are vague, with most simply reporting the city or town in which the subject died. This demonstrates how even the most mundane information about the dying process is conceived by different social authorities.

Additionally, two individual attributes which have been considered in other obituary analyses, have little effect on the description of the dying process. Gender cannot be seen to have a significant effect. This statement is not made to insinuate that gender might not be an important consideration in the selection of the persons who are eulogized in the newspaper or that gender might not influence the length

<table>
<thead>
<tr>
<th>Independent variable</th>
<th>Model</th>
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<tr>
<td>Date of Publication (1959)</td>
<td>-10.239*** (1.110)</td>
</tr>
<tr>
<td>Date of Publication (1999)</td>
<td>-3.629*** (.902)</td>
</tr>
<tr>
<td>Decedent Characteristics</td>
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</tr>
<tr>
<td>Age—Life-expectancy</td>
<td>-.107*** (.031)</td>
</tr>
<tr>
<td>Gender</td>
<td>-.023 (.333)</td>
</tr>
<tr>
<td>Occupational prestige</td>
<td>-.038 (.037)</td>
</tr>
<tr>
<td>Epidemiology</td>
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</tr>
<tr>
<td>Cancer or AIDS</td>
<td>-1.739 (1.391)</td>
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<tr>
<td>Cause unstated</td>
<td>-2.259** (.923)</td>
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<td>$N$</td>
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</table>

**Note:** Numbers in parentheses are standard errors.

*p < .10. **p < .05. ***p < .01.

Table 1. OLS Coefficients from the Regression of the Percentage of Death-Affirming Language in the New York Times Obituaries on Date of Publication and Selected Variables
of an obituary, the publication of photographs, or other important editorial attributes. However, in regards to the utilization of death-affirming language, there is no reportable difference between the obituaries of men and women.

Second, socioeconomic status, as measured by occupational prestige, also had no significant effect on the utilization of death-affirming language. The same caveats mentioned above must be reiterated in regards to the occupational status of the subject and the actual decision to eulogize that person in an obituary in the New York Times. Additionally, occupational prestige may represent a poor measure of the true status of the subjects who comprise this sample, as it cannot truly reflect other important aspects of the individual biography that affect the selection of the subject.

Age, however, does have a significant effect on the amount of death-affirming language in an obituary. The coefficient ($b = -.107, p < .01$) suggests that each

| Table 2. Coefficients from the Logistic Regression of the Presence of Death-Resistant Language in the New York Times Obituaries on Date of Publication and Selected Variables |
|---------------------------------------------------|------------------|
| Independent variable                              | Model            |
| Date of Publication (1959)                         | -.589 (.746)     |
| Date of Publication (1999)                         | 1.384** (.567)   |
| Editorial considerations                           |                  |
| Obituary length                                   | .002*** (.000)   |
| Decedent Characteristics                           |                  |
| Age—Life-expectancy                               | .012 (.017)      |
| Gender                                            | .620 (.424)      |
| Occupational prestige                             | -.042 (.019)     |
| Epidemiology                                      |                  |
| Cancer or AIDS                                    | 1.000* (.602)    |
| Cause unstated                                    | .663 (.558)      |
| Cause unspecified                                 | 1.193* (.655)    |
| Constant                                          | -1.735 (1.223)   |
| Chi-square                                        | 55.64***         |
| Degrees of Freedom                                | 9                |
| Pseudo $R^2$                                      | .217             |
| $N$                                               | 454              |

Note: Numbers in parentheses are standard errors.
*p < .10. **p < .05. ***p < .01.
Table 3. Descriptions of Variables Employed in the Analysis

<table>
<thead>
<tr>
<th>Variable</th>
<th>Description</th>
<th>Measure</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dependent Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of Death-Affirming Language</td>
<td>How many words in phrases and sentences are dedicated to the description of relevant biophysical processes that culminate in the death of the obituary subject as a proportion of the total word count of the obituary?</td>
<td>0 to 100 percent</td>
<td>20.18 [1899]</td>
<td>16.22 [1899]</td>
</tr>
<tr>
<td>Presence of Death-Resistant Language</td>
<td>Does this obituary feature language that valorizes the individual's resistance to death and the exercise of individual autonomy in death-related contexts?</td>
<td>0 = No; 1 = Yes</td>
<td>.04 [1899]</td>
<td>.20 [1899]</td>
</tr>
<tr>
<td><strong>Independent Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obituary length</td>
<td>What is the length of this obituary in words, not including headlines or captions?</td>
<td>Sampled obituaries range from 40 words to 2,283 words in length.</td>
<td>189.65 [1899]</td>
<td>140.66 [1899]</td>
</tr>
<tr>
<td>Age minus life expectancy</td>
<td>What is the age of the decedent minus the life expectancy of all Americans in the contemporary context for the decedent?</td>
<td>Age – 47.3 [1899]</td>
<td>17.89 [1899]</td>
<td>14.67 [1899]</td>
</tr>
<tr>
<td>Gender</td>
<td>Is the gender of the decedent female?</td>
<td>0 = No; 1 = Yes</td>
<td>.06 [1899]</td>
<td>.24 [1899]</td>
</tr>
<tr>
<td>Occupational prestige</td>
<td>Consult Nakao &amp; Treas (1994) for the occupational scale employed in this analysis. This scale is a derivation of measures from the 1989 NORC General Social Survey.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Epidemiology**

<table>
<thead>
<tr>
<th>Cancer or AIDS</th>
<th>Did the decedent die of Cancer or AIDS according to the obituary?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 = No; 1 = Yes</td>
</tr>
<tr>
<td></td>
<td>1899</td>
</tr>
<tr>
<td></td>
<td>.00</td>
</tr>
<tr>
<td></td>
<td>.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cause unstated</th>
<th>Was the cause of death for the decedent unstated and was the obituary constructed in such a way as to make an attempt to ascertain the cause of death based only on the obituary unreasonable?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 = No; 1 = Yes</td>
</tr>
<tr>
<td></td>
<td>1899</td>
</tr>
<tr>
<td></td>
<td>.33</td>
</tr>
<tr>
<td></td>
<td>.47</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cause unspecified</th>
<th>Was the cause of death unspecified but the obituary addressed a specific disease or malady that likely did contribute to the death while leaving the precise causal mechanism unclear?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 = No; 1 = Yes</td>
</tr>
<tr>
<td></td>
<td>1899</td>
</tr>
<tr>
<td></td>
<td>.12</td>
</tr>
<tr>
<td></td>
<td>.33</td>
</tr>
</tbody>
</table>

**Note:** All variables were coded solely by the author. The main independent variable is the date of publication. It is coded with dummy variables (1899 = 0,0; 1959 = 1,0; 1999 = 1,1).
year a decedent lives beyond the life expectancy of his or her period there is an accompanying reduction in the amount of death-affirming language employed by the obituarist. This phenomenon might be expected given the theoretical import of age on mortality. Deaths that occur in the young or that occur due to unusual circumstances demand greater explanation in the construction of the obituary as time progresses (Hume, 2003).

The second hypothesis of this analysis—that contemporary obituaries embody an emerging social context where individual authority is increasingly asserted—is confirmed in Table 2. While all of the historical and cultural conceptions of death have normative perspectives of the ideal experience of mortality, only recent obituaries conceive of it in terms of sovereign individuals actively choosing to resist death and to exercise power over the dying process. Twenty-six (16.56%) of the 157 obituaries sampled from 1999 contained death-resistant language. By comparison, only five (3.94%) of 127 obituaries in 1899 and seven (3.80%) of 187 obituaries in 1959 contained such language.

Table 2 employs a logit analysis and further demonstrates that death-resistant language cannot be seen to occur with any greater likelihood in the 1959 sample than it does in the 1899 sample. However, the coefficient for contemporary obituaries \(b = 1.383, p < .05\) suggests that the eulogies from 1999 are more likely to feature language that emphasizes active resistance to mortality.

**DISCUSSION**

**Death-Affirming Language**

To further illuminate these observations consider the substantial narrative in the obituary of Benjamin A. Gicquel. Mr. Gicquel’s obituary had a total length of 570 words and 85 (14.9%) of those words were devoted to his medical narrative and bodily experience:

Benjamin A. Gicquel, Deputy Chief of the Fire Department, died yesterday morning at his home, 247 West Forty-eighth Street. He reported sick about three weeks ago, but at that time his illness was not regarded as serious. Later a carbuncle on his left hand, resulting from an old injury, rendered necessary an operation. He went on duty after this, but on Oct. 29 he was confined to his bed again, and the surgeons pronounced his condition critical. Death was caused by cirrhosis of the liver (NYT, November 10, 1899, p. 7).

Half of the obituaries sampled from 1899 devote a greater proportion of text to the description of the dying process and many are even more informative than this, but this passage is still far more detailed about the medical narrative than the vast majority of obituaries from 1959 or 1999. (Note also the references to how Gicquel’s illness impacted his attendance at his job.) By 1959, obituaries, like that of Harris Murdock, were increasingly likely to use scientific language to
describe the biophysical processes of death and become more reticent about the medical narrative. His obituary read:

Harris H. Murdock, chairman of the New York City Board of Standards and Appeals since 1932 died today in Richmond Memorial Hospital after a short illness. . . . Mr. Murdock, who was here with his wife on a short vaca
tion, suffered a cerebral hemorrhage Friday (NYT, May 11, 1959, p. 27).

And by 1999, obituaries often provided no insight into the physical process of dying, failing even to mention a cause of death. The obituary of Wilmina Smith is typical in its lack of detail, “Wilmina Rowland Smith, who in 1971 became the first woman to serve as a guest chaplain of the Senate, died on June 5, at a retirement home in St. Peters burg, Fla” (NYT, June 14, 1999, p. B7).

For an obituary of 159 words to devote only a 15 word phrase (9.43%) to the acknowledgment of the death is not unusual for obituaries sampled in this period. Three-quarters of the obituaries from the year 1999 devote an even smaller percentage of space to death-affirming language.

**Death-Resistant Language**

The observations made in regards to death-resistant language are indicative of the cultural orientation that currently exists wherein there is an emphasis on resistance to death and a valorization of individual choice and control in matters of illness and death. This is made clear by obituaries like that of David Seidner, a photographer who died in 1999 from AIDS complications. The type of death-resistant language representative of contemporary obituaries reads thusly:

Mr. Seidner, who had AIDS for 15 years, was a member of the board of the Community Research Initiative on AIDS in New York. Beginning in 1993 his portraits of famous people living with AIDS were used in an advertising campaign for AIDS research. But he was outspokenly critical of certain kinds of AIDS activism.

In *The New York Times* in 1993 he wrote an article about the significance of the red ribbon. Its function, he wrote, “seems to be to alleviate guilt through trickle-down awareness, to make people feel comfortable without having to do anything” (NYT, June 9, 1999, p. A27).

The contemporary death page provides further examples in obituaries where the stated cause of death is cancer or AIDS complications. In these cases, writers take the opportunity to demonstrate the control that individuals exercise in their confrontations with mortality. The coefficient in Table 2 ($b = 1.000, p < .10$) shows with marginal significance, that the mere fact a decedent died from AIDS complications or cancer increases the likelihood that death-resistant language is utilized. In prior years, disease seems not to be considered in the sampled obituaries as legitimate places for the exploration of individual roles or of the assertion of individual preferences in the medical context. However as Good et al.
(1990) demonstrate, in recent decades there has been a shift toward fuller disclosure in the context of American medicine and oncology. Individual patients are viewed as a privileged receptor for medical information from the physician in the treatment of diseases like cancer and AIDS, which have a culturally significant epidemiology in our advanced medical commons. It is also important to note that these diseases are culturally and socially constructed in our society to necessitate a high level of disclosure for the individual and hence the emphasis in this analysis.

Consider the obituary of Robert Swanson, the co-founder of Genentech Inc., a biotechnology firm that is actively engaged in the search for new cancer treatments. The obituary portrays the energy with which he resisted the disease that ultimately killed him. It read in part, “Friends said that after the diagnosis of a brain tumor a little more than a year ago, Mr. Swanson was very aggressive in seeking treatment. But the type of tumor he had is almost always fatal, they said. ‘One of the ironies here is he devoted so much of his life to applying this technology to generate medical breakthroughs, drugs that saved countless lives,’ Mr. [Arthur] Levinson said. ‘But unfortunately, his wasn’t one of them’” (NYT, December 8, 1999, p. B15).

The role of medicine and technology in the treatment of disease has had an obvious effect on the culturally constructed appraisal of mortality. Medical advances aid obituary writers in the utilization of death-resistant language. The obituary of Anne Miller, who was the first American patient whose life was saved by penicillin, can be interpreted not only as an obituary for her but as an “obituary” for streptococci, staphylococci, and pneumococci which are the formerly deadly bacteria made treatable by penicillin. Her obituary read, “Mrs. Miller’s life was saved, and so eventually were the lives of all those previously felled by infections of bacteria. . . . Penicillin also saved the lives of an untold number of servicemen and civilians wounded in World War II; in earlier wars, people died by the thousands from bacterial infections resulting from their injuries” (NYT, June 9, 1999, p. A27). Miller’s obituary is about a medical and technological triumph over the capriciousness of nature and in fact, most of the obituary is actually the story of penicillin. Only at the end of the article is Miller’s biography reviewed.

Obituaries that use themes of resistance vary in the contexts in which they employ such language. Essentially, the story that is told is dictated by the experience of the individual and relayed by the obituary author. In recent times, obituaries have used death-resistant language to highlight the self-actualization of the contemporary individual in cultural contexts. As persons are increasingly able to explore multiple identities in contemporary society, obituaries are constructed to relate the stories of their active resistance to death and to focus on their personalities, biographies, and identities, while becoming increasingly reticent.

Good et al. (1990) also note that this phenomenon is not observed in contemporary Japan or Italy where the family of the patient is privileged over the individual in terms of critical disclosure of medical diagnoses and prognoses.
about the physical experience of their bodies. What these examples and the accompanying analysis demonstrate is how increasingly important the portrayal of a death-resistant ideal is in the newspaper obituary. In the cases of Mr. Seidner and Mr. Fields, resistance was social and cultural. In the cases of Mr. Swanson and Mrs. Miller, resistance was technological and medical. The goal of portraying the resistance to death by the individual is increasingly realized and dynamically illustrated by the significant changes in the construction and presentation of the obituaries reported here.

CONCLUSION

Scientifically and biologically inevitable, death cannot be fully vanquished, conquered, or eradicated. However, the increased marginalization of the dying process in death reporting, like the increased sequestration of the dying from the living, as well as the sick from the healthy (Elias, 1985), shows a growing desire to resist death in cultural expression. Obituaries, as cultural products, are rich sources of information but do present problems for analysis. The fact that the presentation has changed so markedly lends great credence to the theory that suggests the past century has seen rapid social changes that affect the cultural conception of mortality. The empirical evidence also supports the suggestion that the sources of social authority over death have shifted. But while the presentation of mortality can be seen in ritual and in cultural forms over periods of history, the ideal conception of death in the newspaper obituary is not necessarily a true appraisal of how the subjects of those obituaries viewed mortality. This is a challenge to cultural analysis but, until now, the empirical linkage between the construction of the obituary and the traditional, modern, and postmodern types of death had not been explored.

Yet some questions do remain unanswered. As has been demonstrated, the attributes of individuals that are shown in other analyses to have important effects on the construction of obituaries do not seem to be salient in the presentation of death-affirming and death-resistant themes. However, it remains to be determined what effects those attributes have on the selection of subjects. In order to enhance the rigorous use of obituaries, the entire productive process must be explored further. The data contained in this analysis is not particularly suited to the resolution of such questions.

However, the analysis does show that obituaries have increasingly omitted death-affirming language. The less frequent use of death-affirming language that is found in obituaries from 1959 and 1999 suggests how the vesting of power in the rational authority of medicine and then increasingly in individuals affects the conception of death. Death becomes an event that can be understood beyond, or in addition to, the physical experience of the body, independent of God and nature. The presence of death-resistant language is a demonstration of the ability of individuals to control the circumstances of their deaths and increasingly, to claim autonomy.
Moreover, changes in the construction of eulogistic content and in the presentation of mortality show the influence that the traditional, modern and postmodern types of death have on their social institutions and on cultural products such as obituaries. Examining the role of nature, God, and family in the construction of individual biographies may provide further useful information as to whither the traditional type of death over time.

If the transition to an increasingly postmodern sensibility continues, a transition not guaranteed, then researchers will want to observe if death is further marginalized. Might discussion of death be made more implicit or entirely omitted, as they were in the *Portraits of Grief* published in the aftermath of the September 11 terrorist attacks? The traditional, modern, and postmodern types of death continue to be in constant tension. They are moved by social, medical, historical, and journalistic changes, among others. But as this analysis demonstrates, obituaries can be a useful tool for tracking the effect of the changing sources of social authority over death and illuminating the reasons for those changes in content over the century.

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11 Hume’s analysis is significant in that it details how a significant and discrete historical shock—the September 11 terrorist attacks—is portrayed in the obituaries of the victims. The obituaries in that study emphasize themes of family devotion, passion and talent exhibited “outside of the office,” strong work ethic, generosity, good health, and energy. Talk of death, unsurprisingly, is highly marginalized even when compared to other obituaries from the same period. Hume (2003, p. 176) writes, “The historical ‘accuracy’ of these portraits is not as important as their cultural function. . . . In one important respect, these portraits were quite different from obituaries historically, and in fact could be considered opposites. While obituaries typically highlight what the deceased did to distinguish themselves, to set themselves apart, the portraits celebrated *ordinary* qualities.” This finding demonstrates the cohesive function of obituaries as cultural products and their malleability at the hands of the forces that shape their production.
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