

## Review Article

### IN DEFIANCE OF AN AGEING CULTURE

Mike Hepworth\*

Margaret Morganroth Gullette, *Declining to Decline: Cultural Combat and the Politics of the Midlife*. Charlottesville and London: University Press of Virginia 1997, 276pp, \$29.95 cloth ISBN 0-8139-1721-2.

#### **ABSTRACT**

Margaret Morganroth Gullette is one of America's foremost critics of the concept of ageing as a universal and comprehensive process of decline which begins in the middle years. She is a formidable critic of biological essentialism, defender of social constructionism, and opponent of 'middle ageism'. Her most recent book, published in 1997 and not yet available in the UK, has been widely acclaimed in the USA. This review article describes Gullette's analysis of the social construction of decline in the context of her previous writings on midlife and outlines her strategy for combatting the decline model of ageing into old age.

**KEY WORDS** – Ageing studies, social construction, entrance, midlife, midlife crisis, middle ageism, decline, positive ageing, postmodern selves.

Ageing is simultaneously an academic problem, a pressing social issue and an urgent personal concern. In her most recent book, *Declining to Decline*, Margaret Morganroth Gullette explores these close links in the ageing process between the cultural, the social, and the subjective. Her spirited blend of original scholarly research, autobiographical commentary, and political polemic has been widely acclaimed by reviewers in the USA and she was recently presented with the Emily Toth Award for the best single-author feminist study of popular culture and American culture.

Gullette is a dedicated critic of the concept of ageing as a universal and comprehensive process of decline. The author of an increasingly influential range of publications on the social construction of ageing, she describes her

\* Department of Sociology, University of Aberdeen.

work as ‘ageing studies’ or ‘an educated sensitivity to age-related cultural clues’ (1997: 204). Ageing studies is an interdisciplinary perspective ‘inspired...by feminist fiction and theory, critical social science, cultural studies and postmodernism...’ (1997: 18). Ageing studies are informed by an age theory which does not focus exclusively on older people but explores the pervasive influence of cultural constructions of ageing on people of all ages.

Her work has two major concerns: the first is to trace out the socio-economic and cultural interests constructing decline as a process which begins during the middle years. The second is to develop a strategy for an anti-decline programme of ageing or positive commitment to alternative ‘resistance discourses’ (1997: 113). Since the publication in 1988 of her first book, *Safe at Last in the Middle Years* (with the significant subtitle, *The Invention of the Midlife Progress Novel*) these two concerns have been closely interwoven into a series of publications offering a detailed cultural history of changes in western beliefs about the nature of middle age since the later years of the 19th century. *Declining to Decline* is therefore a two-pronged attack on negative theories of middle ageing which justify social programmes of discrimination against older people.

The attack opens with the fundamental questions: how do we ‘enter’ into old age and why is old age so closely associated with decline? Biographies of famous people who reached later life often include photographs of, for example, ‘Kenneth Grahame *in* old age’ or ‘Janey *in* old age’, a popular phrase for describing older people which implies that old age is a kind of site of physical being: ageing as embodied in both time and space. ‘Entrance’, as Gullette argues, is a spatial metaphor derived from the traditional linear model of life as a series of inevitable ages and stages, each one grounded in a stage of biological change (Featherstone and Hepworth 1998*a*).

The question of ‘entrance’ is closely bound up with the positivistic approach to ageing where the view is taken that old age has an observable existence as a specific stage of life with definable points of transition and exits. From this taken-for-granted perspective middle age is usually defined as the stage of life when we first become aware of physical deterioration or decline and the finite biological nature of our existence. Indeed, it is usually described as the stage of life when it is *appropriate* to acknowledge physical deterioration and a reducing life span. The classic definition of midlife is as the time when we first become aware of our own impending death (Hepworth and Featherstone 1982). Description is closely interwoven with *prescription*. Gullette’s concept of entrance ‘depends on accepting the positivist claim of age ideology: but there’s a real category of being there, separable from earlier stages or age classes, and discontinuous from continuous processes as well. The midlife now is localizable. Through familiar spatial metaphors like “transition” or “entrance”, time becomes a space; the midlife, a bad space...much of this happens through the trope of entrance’ (1997: 159). Entrance is a structural metaphor which generates a specific psychological orientation to ageing. It is laden with emotion: ‘an extorted confession of an internal event: that moment when a subject is forced to “recognise” simultaneously that he (sic) has suffered a loss and that this is what “no-longer-being-young” means’ (1997: 165). We can therefore regard middle

age as a period of ageing into old age when it is considered 'normal' for each individual to become increasingly preoccupied with the body and its vicissitudes: 'at midlife the mere mention of words like *arthritis* or *tendonitis* or even *tennis elbow* can stimulate endless monologues by people who have decided that this announces their "entrance" into midlife ageing' (1997: 52).

Although 'entrance' is often regarded as an internally generated moment of awareness or raised consciousness, psycho-biological factor, it is in fact a socially structured expectation. 'In' suggests our immersion in a one-way biological process from which there is no return. Old age, as Gullette observes, is defined as 'obligatory' (1997: 163). To describe any individual as 'in' middle or old age is to dispense with the need to offer any further explanation as in the popular cliché 'It's my age'. 'In' presupposes 'the sleepy illusion that age and ageing are ahistorical, prediscursive-natural. All this can happen because age is still at the stage where gender and race used to be: hidden by its supposed foundations in the body.'

Her first book, *Safe at Last*, pursues the argument that 'the decline theory of life' (1988: xviii) is not grounded in a predetermined biological reality but is a master narrative with a demonstrable cultural history. The decline view, as expressed in both non-fictional and fictional western writing puts the reader in the place of victim of the inevitable ageing process. Readers are submerged in a 'corrosive, powerful, negative ideology of ageing' (1988: xiii). In this detailed cultural history of midlife she describes the years 1910–1935 as a significant period in the construction of 'age-related depression' (1988: 23). A time when there is ample evidence that 'Deficiency and disease were becoming the standard metaphors for normal ageing' (1988: 23). Ageing came to be seen as starting earlier in the life course – midlife – than previously. Decline became, she argues, much more central to personal identity. Under the influence of the new hormone theories of specialists like G. Stanley Hall an 'imaginary life course' (1988: 27) was created in literary culture for both men and women: 'One of the most striking phenomena of the new century is that literature... began with some frequency to age its main characters into the middle years and beyond... Suddenly a host of characters in their forties or in some vague middle age began to appear and simultaneously decay' (1988: 27). Thus a connection was made in the imagination between chronological age and decline in strength, energy, self-control, physical confidence and creativity. Writers of fiction, says Gullette, gave 'subjective content to the otherwise empty rhetoric of the ageing manuals...' (1988: 28). And the fear of ageing was exaggerated in the literature of the time beyond the range of everyday experience. As she wryly notes in her essay, *Creativity, Ageing, Gender*, 'The amount of desperation about ageing that was circulating in the culture went far beyond what any writer could personally have experienced of loss through the processes of age alone' (1993: 29). Middle age was accentuated as a period of anticipatory ageing where the central emotion is dread of impending decline and a heightened sensitivity to the 'signs' of ageing/decline.

But this should not be taken to mean that biological ageing is merely a cultural artefact, a product of the social imagination. The body is real enough to Gullette and its vicissitudes (Williams 1996) are fully recognised especially in the autobiographical pages of *Declining to Decline*. Concerning her own

experience of osteoarthritis she writes: ‘My back shouted for attention. I spent an unfair amount of time at the office pressing up against a wall with a knee raised, or lying on the floor with both knees raised, and I held conferences with my boss standing in the stork position.’ (1997: 42). As a constructionist Gullette’s central argument is that a significant distinction can be made between the biological body which grows older and is subject to pain, illness and disability and the ‘traditional decline view’ (1988: xiii) of decline as a master narrative of later life encompassing the entire spectrum of human experience from the personal through to the social. It is the connections we make between the biological, the psychological and the social which are culturally prescribed and therefore open to revision and change. The decline is a device for framing a number of essentially diverse and disparate biological processes (she cites tooth decay and loss, the menopause, her own menopause) in order to construct what is essentially an imaginary story of comprehensive and universal decline. In other words, an imaginary narrative produces an integrated experience of disintegration. It is not therefore that biological decline in old age is a figment of the western imagination, it is that the *connections* we make are fictions and are conscious and unconscious reflections of a dominant ideology. Ageing as a narrative provides us with a wide range of spurious links between the variable biological changes which take place as the body ages internally and externally and the result is a series of stereotyped images of what it means to be an old person. A good example is confusion or incompetence, or the assumptions, subtly researched for example by Coupland *et al.* (1991), that older people are excessively preoccupied with their bodies or their health as they grow older. Similar misconceptions surround, of course, reminiscence work, that all older people are preoccupied with the past. Deterioration is therefore ‘a cultural label with a complicated history’ (1997: 157).

The entrance is a process of self-labelling: the point at which the ageing label is applied by oneself to oneself: ‘it must be my age’. Ageing, according to Gullette, is a process of learning to use the prescribed language. Because ageing is a learning process and not one determined simply by biological change we learn to associate the changes taking place in our bodies with the onset of overall decline by means of the self-gaze: ‘by learning appropriate practices and a set of knowledges guiding the age gaze. That gaze sweeps over our imperceptibly changing anatomy and decides *when* to speak, negatively of “changed” looks’ (1997: 169). These shared practices effectively constrain and repress the diversity of experiences of middle and later life within the procrustean bed of a ‘universal wholly biological process’ (1997: 212). In this process of ‘linguistic doctination’ (1997: 212), the multi-faceted ‘age-identity’ (1997: 213) which is the key to resistance to ideological ageing is lost or forgotten. ‘Identity’, a category of difference, is submerged by ‘age’, a positive category of similarity and uniformity. Conformity to ‘age-identity’ turns the subject into a helpless victim of midlife; a process of subordination to culture and the repression of diversity. And a key feature of the cultural subordination that constitutes normal ageing into old age is the belief that it can be resisted through techniques of body modification such as cosmetic surgery. Body modification encourages people to believe that their problems

are 'natural, inevitable, and awful' yet 'controllable', but only within 'the private sector of body control' (1997: 147). Cosmetic surgery confirms the decline model of ageing because it operates on the biologically mutable body and cannot last. Cosmetic surgery is a further endorsement of the decline model because it treats ageing as basically a bodily matter. All the problems of ageing, it is implied, can be solved through surgical and medical treatments. But, again, Gullette argues that the complexities of lived experience – the self – are separated artificially from the body: 'A given and named condition is not thereby *your* condition. Your condition is your reaction, your living with your changed body, and the new state you and it make together. It's really a narrative issue: how do I want to fit this into my life story?' (1997: 45). In recounting her own physical problems of living with osteoarthritis, Gullette is searching for an alternative way of framing bodily experience and of constructing a society in which the hegemony of decline has been dispersed.

Whilst this universal plot is deeply gendered, and there are significant differences between the experiences of women and men, Gullette, in common with a number of other analysts (Benson 1997; Featherstone and Hepworth 1998*b*), also detects significant signs of convergence in midlife. As a biological change, for example, the menopause is the gendered entrance for women into middle age, a quintessential example of a biological change which is regarded as symptomatic of inevitable decline. But it is because many of the negative experiences of the menopause are a reflection of the socially determined position of women as 'feminine' in society, that changes in the socio-economic structure are altering the balance of power and the male experience of middle age. If in the past men, and in particular socially advantaged men, were protected from the negative associations of midlife and were able to present male middle age as the highpoint of 'maturity', in present times this traditional 'male immunity to midlife ageing' is being eroded, 'bringing men psychologically closer to the situation that women are supposed to experience at midlife' (1997: 161).

In the past, Gullette argues, male midlife decline tended to be confined to the dissolute classes but it has now expanded to include males as young as 35, often white and heterosexual. 'If men "know" they age, and how, it's partly because representations of altered appearance have become not only ubiquitous but minutely circumstantial' (1997: 162). Whilst consumer culture has fostered more positive images of life after 50 for those with sufficient income and resources to participate in the emerging midlifestyles (Hepworth and Featherstone 1982; Featherstone and Hepworth 1998*b*), middle age for thousands of men is becoming increasingly associated with downward social mobility. In Gullette's view the decline narrative of middle age is getting stronger partly as a result of discrimination against middle aged men in the field of employment. Amongst the negative factors at work she cites reduced income at midlife following from unemployment and redundancy which undermine the status of men whose expectations include steady career enhancement into maturity. One problem is that privileged middle class professional men, who epitomised a gendered vision of midlife as a peak period of prosperity, are now exposed to the insecurity and unemployment that results from the restructuring of the economy. Redundancy and early

retirement reinforce the biologicistic notion of midlife as the beginning or 'entrance' into later life. She therefore predicts a gloomy future for midlifers: not for her the easy optimism of the champions of a free-swinging and liberating consumer culture.

The end of this century therefore heralds 'a new cultural situation' (1997: 139), namely a process of gender convergence in midlife. Men are losing the hegemony they previously enjoyed and as a consequence their gendered insulation against reading bodily change as a sign of comprehensive decline is being eroded. The middle aged male body is no longer a sign of consolidated achievement and security: the 'paunch' or 'corporation' of the past is now a bodily betrayal of weakness and impending disengagement. This shifting balance of power also removes men from the protective care of women who in the past, says Gullette, 'were taught to feel older but not to notice men feeling older...' (1997: 151). Socio-economic change brings the emotions of men closer to the surface and makes it more likely that men will seek to find new forms of emotional expression as they grow older. The male menopause will, Gullette predicts, follow the history of the construction of the menopause, beginning amongst the more socially advantaged, where codes of perfection are stricter, competition keener, and the fear of failure is greater (Featherstone and Hepworth 1998*b*). A key feature is the increasing experience amongst men of 'midlife helplessness': 'In a story of midlife helplessness, the climacteric will soon loom much larger. They'll teach men that *their* ageing results from a hormone deficiency disease and that it can be cured by buying chemicals or implants' (1997: 146). There will be a generalisation of the 'midlife crises' as it diffuses down the social register and changes from the special condition of a few to become 'somehow both pathological and universal, linked to self-loathing and sexual dysfunction' (1997: 147). One is immediately reminded of the impact of the promotion of Viagra for sexual impotency in later life.

At the same time, as was indicated at the outset, Gullette is not content only to deconstruct the history of the dominant ideology of decline. Whereas *Safe at Last* is a cultural history of the intersections between fictional and non-fictional literature, *Declining to Decline* as the title implies is a 'survival manual' and 'guide to resistance', championing the 'idea that we might escape being aged by culture' (1997: 18). Here Gullette offers a 'radical social constructionism that pushes "the natural" out of context after context' (1997: 246 n42). Once we are able to see that a life course oriented around a relentless process of decline is imaginary, that the biological changes associated with ageing do not inevitably produce universal and inescapable decline, then not simply one but a wide range of alternative visions become possible. Once we see that the causal connections between the biological, psychological and social aspects of ageing are narrative connections, which prey on our imagination, then there are defensible grounds for optimism. In Gullette's words: 'The idea that we might escape being aged by culture is breathtaking' (1997: 18). The desire is to discard the 'standard social meaning' of the ageing body and 'hold tight to a complex idiosyncratic narrative of age identity' (1997: 18).

At the heart of her work is a pervasive tension between decline and the refusal to decline. For the movement towards a more positive literature of

midlife is not only counterbalanced by the pervasive expressions of the fear of ageing outlined above but also by resilience of decline; indeed, the whole key to Gullette's analysis and polemic is that the decline model lives to fight another day and the watchword must be constant vigilance.

In her studies of the intersections between creativity, ageing and gender since the early 20th century, middle ageism exists alongside evidence of resistance: a 'new ideology of ageing emerging in the 'midlife progress novel': new heroes and heroines 'in their middle years' (1988: xii). In *Safe at Last* these heroes and heroines share the defining characteristic of 'resistances, strengths, or sly timely weaknesses, ingenious mental feints' (1988: xiv). And a clear contrast can be made between 'midlife decline narratives' and the 'midlife progress novel' (1988: xx). In this close literary analysis the central concern is with the ways in which each of the authors she selects 'came to produce one or a few midlife progress narratives' (1988: xxvii), 'a private adventure in *changing one's genre*' (1988: xviii). This is essentially a creative process giving the lie to the belief that creativity in general, and literary creativity in particular, begin to diminish in midlife by providing readers with 'an array of models of how to become in the middle years' (1988: xvi). The key is identification with the 'psychological direction of the genre' which enables each individual reader to construct his or her own version of the story (1988: xvi). 'This identification is the fundamental *condition of possibility*' (1988: xvi). Thus Gullette offers not only a scholarly analysis of the emergence of a new genre in fictional writing about midlife but an exploration of the potential liberatory value of this endeavour. The result is optimistic. Although losses and tragedies occur as people grow older there are also strong grounds for believing in the ability of individuals to recover from these setbacks. The losses associated with later life should not necessarily be interpreted as contributing towards an overall decline.

The tension is therefore between the emergence of a progress novel for the no-longer young and the pessimistic 'decline theory of life' (1988: xviii). The decline theory is underpinned by an appeal to realism; for Gullette the difficulty with the decline narrative is that it poses as a positivist reality of the life course. In literature, both 'high' and 'popular' culture, and the social sciences, the core theme – the point where a connection is made with personal feelings – is with the inevitability of decay and therefore 'systematic disillusionments' (1988: xviii) with life. At work here is what Gullette describes as the 'essentialist illusion' (1988: 20). The essentialist illusion blames biological ageing for all the negative experiences of later life including the decline in literary creativity. It can be added that so pervasive is this view that those in the creative arts who apparently 'triumph' over the decline essentially associated with later life are regarded as unusually heroic. Spectacular examples include the artists Rembrandt, Renoir, Picasso, and the film star and singer Marlene Dietrich. Their performances, in some respects not unlike those of lesser mortals who are seen as 'good for their age', are often described in those tones of awe and wonder which only serve to reinforce the commonsensical belief that decline is 'normal'. In effect such survivors of the 'normal' ageing process simply postpone their entrance into old age. As heroes and heroines of ageing they become, as Goffman (1968) has observed of



celebrities of physical disability, not representatives of a wider population but exceptions to the rule.

In Gullette's version of positive ageing the essentialist decline model is baleful because it rejects the potential for resistance and recuperation: 'For many people today, systematic disillusionment is *the* midlife plot' (1988: xviii). And the problem is complicated by the fact that self-help guides are unlikely to provide an answer because they too are essentially ageist, working with the assumption that growing older is bad news (Hepworth and Featherstone 1982). The majority of self-help manuals are handbooks of a youthful middle age, steadfastly looking forward to the past. As the product of consumer culture self-help guides implicitly reinforce what has been described as the 'deficit paradigm' (Coupland *et al.* 1991: 8). The alternative envisaged by Gullette is that of constructing life 'as a process of losing our false *fears*, our overly *pessimistic* anticipations' (1988: xix). The quality of midlife is enhanced not by facing the past but by facing the future and not losing one's nerve. Thus midlife progress narratives do not end in 'living happily ever after' but, more realistically in terms of the potential of the main character to 'handle whatever [the future]... is likely to bring.' (1988: xx).

The resolution of the shifting balance of power between positive and decline constructions of ageing may be found, according to Gullette, in the vision of the 'portmanteau' or postmodern self (1997: 220). Because the self is not a biological entity but a narrative construct it is possible to explore the rich variety of ways in which biological changes can be accommodated in any personal life story. The master narrative of decline requires a single self going through a linear trajectory, whilst the portmanteau self is 'an active concept of ageing as self-narrated experience, the conscious, ongoing story of one's age identity' (1997: 220). Because decline is constructed as a narrative, the route of escape cannot be *into* the body modified, for example, through cosmetic surgery, or the body of the cyborg – part biology, part technology (Leng 1996) – but into an alternative liberated narrative of the self. As with the self-help manuals of consumer culture, techniques of body modification are grounded in a nostalgic view of the body. Cosmetic surgery and HRT both involve attempts to return to the past of one's younger days. An interesting irony in a society that is supposedly future oriented. In contrast, Gullette's work is a sustained effort to *imagine* a positively ageing self: 'Perhaps a truly described postmodern self will *not* after all, have so much body. If postmodern selves, in a gigantic cultural shift, begin to describe *life* time (in innumerable age-conscious narratives), the culture may finally find itself moving towards a more minimal "body" and an automatic shift within the controversies over mind/body and culture/nature' (1997: 221).

And yet, for all the vigorous constructionism in this account, the problem of the ageing body is not completely resolved. In *Safe at Last* Gullette finds hope in the 'midlife progress narrative' which requires 'readers willing to identify with adult protagonists who are not ultimately haunted by their ageing bodies...' (1988: xx). And yet, as she observes in *Declining to Decline*, human beings 'do not have to love every aspect of their "me" to value their identity... In fact, the people likely to gain most are those who dislike the parts of self that have come to them labelled as "bodily" and "ageing"' (1997: 216).



It is at this point that the mask of ageing (Featherstone and Hepworth 1991) emerges from the shadows and into a more central position in the analysis of the relationship between the ageing body and the self. For one of the difficulties with the ageing body, as Williams (1996) has for example shown, is that it is remarkably obdurate. It cannot under all circumstances be dissolved into an interplay of postmodern narratives and has an unwelcome tendency to intrude upon the social scene.

At the same time there remains a world of difference between the enforced inauthenticity of compliance which is the focus of Gullette's analysis, the space between 'a person's private sense of self-in-time and the stripped and distorted version of age-identity being forced on us' (1997: 217), and the occasional masking of pain, illness, or distress we find necessary in order to preserve our private sense of selfhood. In this respect Gullette gives pride of place to the notion of the core self, defined as 'relatively stable, an outcome of my life at that moment'. A self which is 'within my own control, narratable first of all and most authoritatively by me' (1997: 216). This authentic self is firmly embodied because the body is the biological grounding of stability: 'We need to wake up every day securely still "me". My native body – as is, keeping my smells, my quirky pinky, my laugh lines, scars – I find works for me here as a sign of the continuity and integration of all the rest, everything I currently consider me-ness' (1997: 216).

In terms of breadth of vision, scholarly integrity, and the sheer exhilaration of her writing, Gullette's work is essential reading for all who wish to understand the origins of the transformation of midlife in our times and the possibility of real change in attitudes to ageing – personal and social – under postmodern global capitalism. Her work can be read as a sophisticated development of the original ageism thesis – a subtle analysis of the contradictory nature of an ageing culture which opens up new prospects for the ageing population and yet simultaneously closes them down.

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*Address for correspondence:*

Mike Hepworth, Department of Sociology, University of Aberdeen,  
Edward Wright Building, Dunbar Street, Old Aberdeen, AB9 1FX.