The Terrain of Grief: A Consideration with Ontological
Possibilities

by

Rebecca Deutsch

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Department of Women's and Gender Studies
University of Alberta

Abstract

Grief is an affective state that is currently abjected within Canada and other countries such as the United States. By looking at the historical changes occurring from the eighteenth century through today, it becomes apparent how concrete mourning practices have changed significantly in relation to material processes such as the development of neoliberalism. These shifts have likewise been accompanied with a shift in the way that grief, as an affect, is moralized and contained. While this suggests a uniformity to such a history, factors such as race and gender have also played an important role in creating conditions of precarity. I specifically consider morbidity and mortality within Indigenous communities under settler colonialism and the potential impacts of these factors on how grief is experienced and expressed. Finally, I argue that grief is an affect which reveals an ontology that could potentially have social justice implications particularly when intertwined with the concept of "haunting." Living beings are never fully separated into individuated bodies, rather beings are interconstituted at even the most intimate levels.

Dedication

To my mother, Pauline J. Deutsch. There are no words capable of encapsulating the love I have for you. The way you lived taught me what strength is. When I was starting kindergarten, you told me that even if I couldn't see you, you would be there in my pocket. My feet always found themselves running to you, throwing open the door, casting aside my backpack, and straight into your open arms. Now, you are gone but you are never far. I carry you in my heart. My feet still run to you. My feet will always be running home to you.

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Thank you to Steve Watkins, Nikki Johnson, Kiana Chouinard and Ryn Climenhaga. There are so many individual things that I could thank each of you for (and will, just not here). Thank you for supporting and frankly, tolerating me while I rambled at you with half concocted and disjointed thoughts while sometimes over caffeinated to the point of incoherence convinced there was no way I would ever adequately commit anything to paper. Thank you for reconnecting me to life when I forgot that things outside of this thesis still existed and that the world is in fact bigger than the keys and screen of my laptop. Most of all, thank you for giving me so many reasons to love.

Thank you to Clayton and Caroline Deutsch. Your love and support are my lighthouse. The meals, laughter, and warm moments we have shared over the course of the writing of this thesis mean more than you know.

Thank you to Lynn Dennis for the few mornings when you stayed with Steve and me where we shared such rich and meaningful conversations over coffee. Your thoughts and your encouragements meant so much to me.

I'd also like to acknowledge my companion animals. Russell - without our river valley adventures and snuggles after writing particularly difficult parts of this thesis, this would have been a very different undertaking. You have so much of my heart. Starbuck, Jojo, and Panda – I love you three and promise catnip and sun-soaked naps in the very near future.

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Introduction

The primary contention of this thesis is that grief is an affect with ontological consequences valuable for charting a way through to the "other ways of being in the world, and ultimately new worlds," [1] that José Esteban Muñoz dares to imagine for the future. This contention requires adequate contextualization. As such, in Chapter One, I will situate grief in a historical and social trajectory. I will start with the early 1800s noting some of the ways that grief changed throughout the Victorian era into the present. In Chapter Two, I seek to complicate this generalized sense of how grief has changed by considering precarity in the context of settler colonialism. Contextualized with concrete discussions of morbidity and mortality in Canada, I will argue that settler colonialism, gender, and race determine the materiality of life and death as well as the recognizability of grief. In the final chapter, I narrow in on the ontological possibility of listening to grief adequately. What does grief do? What could it do? Why does it all matter? Chapter Three is an attempt to approach these questions. Haunting, a sociological concept developed by Avery Gordon, will be one of the primary tools I use to accomplish this. While each of these chapters sets out to do something quite different, all together it should convey that something is rotten in the state of Canada where grief is concerned and this is not natural, normal, nor unchangeable but rather the concrete consequence of social processes that can shift.

Definitions

Grief is a complicated term. The Merriam-Webster Dictionary defines grief primarily as "a deep and poignant distress caused by or as if by bereavement."[2] Yet, grief is not confined to distress.

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[1] José Esteban Muñoz. *Cruising Utopia, 10th Anniversary Edition: The Then and There of Queer Futurity.* (NYU Press:2019): 1.
[2] See: https://www.merriam-webster.com/dictionary/grief

Grief can be a type of madness. Sonali Deraniyagala, after the death of her parents, husband, and two children, writes, "(b)ut this does make me mad with wanting them. I let myself miss them more unreservedly now, at times at least. I rein in my yearning less."[3] It is also physically embodied. For example, Joan Didion, after the death of her husband, writes, "(p)ersons under the shock of genuine affliction are not only upset mentally but are all unbalanced physically. No matter how calm and controlled they seemingly may be, no one can under such circumstances be normal."[4] It can show up in anger, depression, anxiety, yearning, and so many other feelings. Thus, when I talk about grief, it is as an umbrella term. If someone feels it in response to a death, that is an adequate reason to include it under the banner of grief for the purposes of this thesis.

Grief can show up in the disintegration of a relationship, the disappearance of a life so desperately yearned for, and so many other moments both big and small. For the sake of clarity and due to my own positionality, I will exclusively be discussing grief related to death. Further research could potentially consider these additional points of grief in their fullness.

Throughout this thesis, I consider grief as an affect. Capturing a uniform, accepted definition of affect is not possible due to the rich ambiguities that define the field.[5] Although some scholars write about affect interchangeably with feelings or emotions, I choose to use affect largely to align with the way the term signals "force," the "capacity to move,"[6] and encounters.[7] The words *feeling* or *emotion* seem, to me, to signal something more internal and personal that can be depoliticized. Due to how it can move the person experiencing it away from or towards certain bodies in space, affect has a political undertone that I wish to capture. This

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[3] Sonali Deraniyagala. *Wave.* (Vintage: 2013): 94.
[4] Joan Didion. *The Year of Magical Thinking.* (Vintage International: 2007): 58.
[5] Gregory J. Seigworth, and Carolyn Pedwell, eds. *The Affect Theory Reader. Worldings, Tensions, Futures*. ANIMA: Critical Race Studies Otherwise. Duke University Press, 2023.: 4.
[6] Didion. *The Year of Magical Thinking*: 4.
[7] Thinking along the lines of: Sara Ahmed. *Queer Phenomenology: Orientations, Objects, Others.* (Duke University Press, 2006).

aligns with Baruch Spinoza's work, particularly considering his focus on "the infinite potential for connectedness and relationality."[8] Otherwise, however, I do not meticulously maintain a distinction between feeling and affect.

Ethical Considerations

The sudden death of my mother in 2018 orients the entirety of this piece of work even when not mentioned outright. When Sara Ahmed described her desk as an orienting device that led her to certain forms of knowledge production,[9] I realized that my mother is mine. I write in disparate locations: crafting ideas as I tromp down by the river with my companion dog, composing prose as I lie in bed unable to sleep… yet I always wear my mother's ring. I twirl it on my finger and press it against my lips as I think. It directs me as pervasively as the desk directed Ahmed. This orientation will be intertwined and acknowledged throughout the entirety of this piece of work; however, as my mother is not able to consent, no details with which she (or others involved) might be uncomfortable will be included. Unfortunately, but necessarily, there are certain moments where this may impede my ability to accurately explain why I was haunted in a certain way (as in Chapter Three), the possible external source of pathological grief (as in Chapter One), and so on.

Brief Overview

Chapter One largely serves as a backdrop to understand how grief came to be treated in the way that it currently is in Canada in 2024. I begin with the Victorian Era because throughout this time (particularly in England), it is possible to identify how elaborate mourning practices performed

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[8] Seigworth, and Pedwell, eds. *The Affect Theory Reader. Worldings, Tensions, Futures:* 7.
[9] Ahmed. *Queer Phenomenology: Orientations, Objects, and Others.*

important social roles, even while grief itself was strictly managed. To examine these changes, I look at physical mourning rituals and practices. There is a hygienic and moral element to the management of grief that is highly gendered throughout this period. Self-containment and self-control[10] were part of how men were hierarchically defined closer to rationality and the mind. Thus, to demonstrate an overly deep or embodied experience of grief would seem suspect within Victorian society.

Moving closer to the present moment, I will consider the complications of pathologization, and why neoliberalism, despite its inception in economic theory, is key to understanding this medicalization of mourning.[11] By looking at entries in the Diagnostic and Statistical Manual of Mental Disorders (DSM) and considering my own experiences of "pathological grief," I will critique the inclusion of grief as a mental disorder while simultaneously acknowledging the potential necessity of certain kinds of medical support and treatment.

Chapter Two complicates the image of a uniform historical trajectory. Canada is a settler colonial state. There are certain ways that settler lives are materially prioritized over Indigenous lives and these processes impact morbidity and mortality rates within Indigenous communities. I look specifically at medical practices and physical moments of violence to understand this materiality. Using Judith Butler's theory of precarity,[12] which describes the way certain lives are produced in closer relations to death, I argue that there are consequences to these practices that have important implications for how we understand grief. Namely, if it is possible to ask the

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[10] See: Norbert Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*. First edition. Bloomsbury Academic, 2021. https://search-ebscohost-com.login.ezproxy.library.ualberta.ca/login.aspx?direct=true&db=cat03710a&AN=alb.9920685&site=eds-live&scope=site.

[11] New Solutions, "What is the Definition of Neoliberalism," *Sage Publications,* (2010).

[12] Judith Butler. *Precarious Life: The Powers of Mourning and Violence,* (Verso, 2004). Judith Butler. *Frames of War: When is Life Grievable, (*Verso, 2010).

question "what grief is recognizable?," it is likewise possible to ask, "who can grieve?" I consider what the consequences of that formation are.

As a settler in Canada, it is vital that I consider the obligations I have and "histories [I] have inherited."[13] I recognize the ethical complications of studying this from my positionality. I take seriously the risks associated with this type of research. Yet, as someone who lives on this land, I likewise take seriously my responsibility to interrogate settler privilege and the colonial structures that protect and value my life above Indigenous lives.

The final chapter of this thesis turns directly towards what grief reveals about the ontological nature of being alive. "Haunting"[14] is one of the primary theoretical tools that I use to consider how grief can reveal locations where justice is needed. However, haunting does not always provide adequate information. Rather, when it falls short of this, it shows that the condition of being alive is to also be poorly contained. As argued by Norbert Lennartz, in scientific discourses "the skin was always a prominent site of liminality where the interior and the exterior met and where the surface of the body suddenly transmutes into a perilous 'place of permeability and mysterious metamorphoses.'"[15]

I argue that approaching the ontological conditions of life differently could likewise provide a framework to structure ethical relations differently. If living beings are interconstituted and interconstituting, then it is necessary to behave in certain ways in recognition of this. This is not to say that grief is desirable, easy, or simple but rather that it can mobilize and change things in meaningful ways.

[13] Jade Tootoosis, Gina Starblanket, Tasha Hubbard, Lianne Charlie, and Dallas Hunt. "'That's Where the Medicine Comes From': Aesthetics of Anti-Colonialism in Canada." *Journal of Canadian Studies* 56 (2), (2022): 193–213. doi:10.3138/jcs-56.2.010.: 197
[14] Avery Gordon. *Ghostly Matters: Haunting and the Sociological Imagination*. 2nd University of Minnesota Press ed. (University of Minnesota Press: 2008).
[15] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.: 52

Throughout this thesis, I allow space to adequately account for grief's pain and, sometimes, distinctly anti-relational potentiality. This does not deteriorate or invalidate the potential but ensures that my consideration is grounded. To grieve can be to lose ties to all but the one who died. It can mean being truly lost in a sea of bodies and faces, none of which has the capacity to move you in the absence of the person you have loved and lost. To grieve can sometimes mean to die yourself.

Chapter One: Situating Grief

This chapter provides a historical inventory of grief in Western societies. I primarily focus on the eighteenth century onwards due to the substantial changes that occurred in this period. In part, this is a response to Antonio Gramsci's call to situate ourselves "as a product of the historical processes to date, which has deposited in you an infinity of traces without leaving an inventory."[16] The essence of how historical processes have impacted individual lives is obfuscated and normalized when not critically examined. While I certainly cannot track all the invisible shifts, this historical analysis will make starkly visible just how abnormal this moment (2024) in western (white)[17] history is. While elaborate mourning rituals and varying expressions of grief were recognized and accepted in notable ways throughout history across the globe, in this time and place extensive grief came to be considered pathological. The protected amount of time off work for bereavement in Alberta sums a total of three days in a calendar year,[18] in comparison with sixteen weeks of sick leave.[19] Judging solely by amount of protected time, bereavement is the least acceptable reason to miss work.

Throughout the Victorian era, mourning rituals served an important role in society; however, anything considered excessive in grief became entangled with the specter of failure and pathology. Based on literature written throughout this period, Norbert Lennartz argues there was something deeply threatening about the "porosity" of female embodiment and the physical substance of tears as expressed in mourning.[20] These literary conventions reflected and were

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[16] Antonio Gramsci. *Selections from the Prison Notebooks.* Edited and translated by Quintin Hoare and Geoffrey Nowell Smith, (Lawrence & Wilhart, London & International Publishers, New York: 1971): 324.
[17] The use of white here will be fully explored in chapter two.
[18] Government of Alberta. "Bereavement Leave." Retrieved from: https://www.alberta.ca/bereavement-leave#:~:text=Contact-,Basic%20rules,risk%20of%20losing%20their%20job.
[19] Government of Alberta. "Long-term Illness, Injury Leave." Retrieved from: https://www.alberta.ca/long-term-illness-injury-leave
[20] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.: 5.

otherwise entangled with the dominant attitudes during the time. As such, moral concerns

defined what was and was not acceptable in grief according to gender and other social

characteristics, as described later in this chapter.

These moral concerns changed as new forms of material relations emerged. Mourning

rituals decreased around the 1920s and, shortly thereafter, new forms of pathology became

included in the DSM. As evidenced by the extreme brevity of protected bereavement time, being

a productive capitalist subject currently holds a moral impetus that overshadows the potential

need to be "penetrated"[21] by grief.[22] By taking the time to examine this complicated historical

trajectory, as I do in this chapter, it is easier to see the places where failure and porosity can

serve as a rich soil in which to cultivate the seeds for other forms of relationality, other

understandings of what it means to be alive and embodied, and what it means to know. Donna J.

Haraway argues that grief is crucial in halting the spread of cataclysmic environmental

destruction.[23] But, as so compellingly articulated by bell hooks, theory can be "healing,

liberatory, or revolutionary" but "only when we ask that it does so and direct our theorizing

towards this end."[24] So, enlivening this brief historical inventory is the sense that the threatening

elements of grief can be directed towards justice but only if done so intentionally.

Methodological Considerations

In line with Jack Halberstam's thinking as he created an inventory of female masculinities, I

recognize the difficulty of crafting such a history from within an institution that atomizes types

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[21] The sexual connotations here, and later in relation to Freud and destabilized libido seem particularly interesting but won't be explored in any fulsome way in this thesis due to space constraints.
[22] Francis Weller. *The Wild Edge of Sorrow: Rituals of Renewel and the Sacred Work of Grief.* (North Atlantic Books, 2015): 52.
[23] Donna J. Haraway. *Staying with the Trouble: Making Kin in the Cthulucene,"* (Duke University Press: 2016).
[24] bell hooks. "Theory as Liberatory Practice." *Teaching to Transgress: Education as the Practice of Freedom,* (1994): 61.

of knowledge production and practices into strict disciplinary lines.[25] I cautiously integrate a variety of theories each with different epistemological and ontological orientations. This lack of loyalty allows space for tracking a history of approaches to grief within Canada and the United States by placing it alongside the shifting landscape of neoliberalism. Crip and queer theories inform how I interpret this map. Questions of pathology intertwine with the exploration of the individuation of grief to force an evaluation of what such a history does. My own story will be brought in throughout. As someone who lives/d with what has been diagnosed as pathological grief, integrating my own experience allows me to actively question the benefits and risks of the diagnosis / cure paradigm as it relates to grief. It also allows me to reflect more deeply on the consequences of individuating grief.

While this short archival piece seeks to render visible concrete material and affective practices around grief and mourning, the very nature of grief makes it uniquely difficult to archive. This morning, I woke up feeling as though someone had scooped the contents of my chest out, like carving a pumpkin for Halloween. The absence of my mother seems to scream out of my fingertips on this keyboard but, were I not writing about grief, it would remain unrepresented as it so often does. Julietta Singh writes, "(t)here is an archival crisis already looming here, because the body's surface is ultimately not stable ground upon which to build an archive."[26] Perhaps, it would be harder to archive the places my mother's death *hasn't* touched, harder to archive where grief hasn't entered than where it has. That recognition of instability is further exacerbated by the sheer quantity of loss occurring within the historical period that I am examining and the number of lives that have been touched by grief. As such, creating an archive of grief seems doomed from the start.

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[25] Jack Halberstam. *Female Masculinity.* (Duke University Press: 2018): 9.
[26] Julietta Sing. *No Archive Will Restore You.* (3Ecologies Books: 2018): 30.

Throughout the remainder of the chapter, I will prioritize mourning rituals rather than grief itself. Mourning rituals will, at times, be conflated with grief because mourning rituals, to an extent, create a space for the material realization of the affective condition of grief. This has a bit more stability from which to archive grief. As we tread deeper into the ontological consequences of the abjection of grief, the murkier affective realities that refuse to be bound to ritual will emerge in ways for which this chapter does not account.

Shifting Grief: From Beautiful to Impolite

Peter N. Stearns crafted a comprehensive exploration of some of the primary historical shifts that occurred within North American approaches to grief post-colonization placing them in comparison primarily with Europe but, to a lesser extent, with the world at large.[27] Some key elements of his roadmap will be instrumental for this analysis; however, in Chapter Two the picture created out of these pieces will be complicated by accounting for one of the locations, settler colonialism, that is otherwise rendered invisible by such a universalized picture. It is necessary to acknowledge that Europe has never had one unified approach to grief, death, or mourning. The majority of the practices that I directly analyze come out of an English context.

Across Europe and North America from the sixteenth to seventeenth centuries, death rates were high and life expectancies were low. According to available quantitative data, thirty-two years of age was the average life expectancy across the majority of Europe and North America largely because of high rates of childhood mortality.[28] What is now defined as an out of

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[27] Peter N. Stearn, *Revolutions in Sorrow: The American Experience of Death in a Global Perspective,* (Routledge: 2008).

[28] Saloni Dattani, Lucas Rodés-Guirao, Hannah Ritchie, Esteban Ortiz-Ospina & Max Roser. "Life Expectancy." *Our World in Data*, (2023). Retrieved from: https://ourworldindata.org/life-expectancy

order death,[29] the loss of a child or a death in childbirth particularly, was built into the very fabric of everyday life.

Rituals, most notable within religious contexts, united communities and simultaneously constructed and reified social roles.[30] From a Durkheimian perspective, the existence of these rituals could be seen as protective against suicidality due to their importance in creating social integration,[31] a point I will return to later in this chapter. In the nineteenth century, the affective expression of grief became more strictly managed[32] while elaborate mourning rituals persisted and emerged.[33] Ultimately, these mourning rituals appear to have largely disappeared around the end of the First World War.[34] Perhaps the management of affective expressions set the stage for the material shifts.

"Good widows" in Victorian society were expected to manage their emotions appropriately.[35] This was particularly the case in England where excessive lamentation was tied to the spectre of "Irish and Jewish" moral failure.[36] Grief and morality were deeply intertwined and exceeding the appropriate limits (either by lack of appropriate grieving practice or by excess) was interpreted as a personal failing in a way that set the stage for pathologization. Thus, none of what can be seen now can be accurately conceived of as unprecedented.

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[29] Abi May. "Coping with unexpected or 'out of order' deaths." *A Valley Journal.* (2021). https://avalleyjournal.wordpress.com/2021/02/12/coping-with-unexpected-or-out-of-order-deaths/

[30] Andrea Brady, *English Funeral Elegy in the Seventeenth Century: Laws in Mourning,* (Early Modern Literature in History, Palgrave Macmillon: 2006).

[31] Emile Durkheim, *Suicide: A Study in Sociology,* trans. John A. Spaulding and G   eorge Simpson (New York: Free Press, 1951).

[32] Stearn. *Revolutions in Sorrow.*

[33] See: Brady. *English Funeral Elegy in the Seventeenth Century: Laws in Mourning.* Grytko. "'The Sweetest Little Thing That Ever Died:' Nineteenth-Century Comfort Books and the Creation of the Immortal Child." Ziv. "Baby's in Black: Mourning becomes collected in a exhibit that blends grief and high style."

[34] Kevin Almond & Judith Smith, "The Decline of Female Mourning Wear: A Case Study Analysis of Fredric Forster's Mourning Warehouse 1849-1923 in Leeds UK," *Costume, 57(2),* 2023.

[35] Brady, *English Funeral Elegy in the Seventeenth Century: Laws in Mourning*: 7.

[36] Ibid.: 182.

Gender structured appropriate grief. For men, to lose control over bodily fluids in tears was to be "in danger of forfeiting his God-given position in the universal Chain of Being."[37] The Chain of Being is a classification system which determines how close someone is to God or how far. It serves to shape relationships and power. In the case of William Shakespeare's *Macbeth*, the character Macduff is guided back to the masculine duty of sublimating grief into revenge rather than tears.[38] Meanwhile, the grief and tears of women could sometimes be interpreted as disingenuous or dangerous.[39] However, when appropriately expressed in "cathartic bouts of weeping and swooning,"[40] certain forms of mourning could be acceptable in a different way than was the case for men at the time.

As medical and hygienic practices evolved, out of order deaths became less common and the way that they were experienced consequently shifted (I will return to and complicate this point in Chapter Two because this presupposes a certain subject). Throughout the nineteenth century "comfort books" entered into circulation and, as argued by Mary Gryctko, "(w)hile the prevalence of these texts may suggest that they upheld earlier notions of childhood death as an unfortunate but common fact of life, they, in fact, did the opposite, framing the deaths of children as great and unique tragedies."[41] In families that lost a child, comfort books and other practices related to grief created a perception that grief was something valuable that could be possessed.[42] The child may be gone but now they could remain a child forever and, in some ways, an object in perpetuity. This affected the expression of grief in complicated ways.

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[37] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.: 2.
[38] Ibid.: 6.
[39] Ibid.: 21-22.
[40] Ibid.: 151.
[41] Mary Grytko. "'The Sweetest Little Thing That Ever Died:' Nineteenth-Century Comfort Books and the Creation of the Immortal Child," *Victorian Review 48(2)*, (2022): 293.
[42] Grytko. "'The Sweetest Little Thing That Ever Died': 304.

The proliferation of these texts was entangled with emerging elaborate forms of grieving.[43] Among those were new middle-class and upper-class forms of mourning attire (e.g. "widows weeds," wearing black for specific periods according to your relationship to the deceased) that were deeply gendered and classed,[44] and postmortem photography that was typically prominently displayed in the home.[45]

Embalming, in the mid-nineteenth century, became a method of preserving a sense of liveliness in corpses. Aesthetically, this served the same purpose as postmortem photography.[46] Both these practices integrated death and the dead in a visible way into the lives of those who remained. It was now possible to use the body to signify rest, comfort, and physical and spiritual relief in the one who had passed. Necrospecialists took on the complicated role of staging final remembrances by slowing any signs of decomposition and reducing the physical appearance of external harm.[47] Arguably, this "eventually [led] to the disappearance of death,"[48] a point I will return to shortly. However, at the time, it was not a disappearance of death as much as a removal of certain comorbidities (decay, insect infestation, etc.) that for Canadians in the twenty-first century would be frightening and unseemly. This also could have been imbricated with items such as death masks which removed a sense of porousness and fluidity (both characteristics associated with moral failure and the female gender).[49]

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[43] Ibid.: 295.
[44] Stav Ziv. "Baby's in Black: Mourning becomes collected in a exhibit that blends grief and high style," *Newsweek 62,* (2014).
[45] Laurel Hilliker. "Letting Go While Holding On: Postmortem Photography as an Aid in the Grieving Process," *Sage Publications 14(3),* (2006): 248.
[46] John Troyer. "Embalmed Vision," *Mortality, 12(1),* (2007): 23 & 30.
[47] Ingrid Fernandez. "American Necrospecialists: the modern artisans of death," *Atlantic Studies, 10(2),* 2013.
[48] Ibid.: 353.
[49] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings.*: 148.

In tandem with the glorification of the nuclear family structure and emphasis on love as the foundation for marriage, grief was at this time praised and seen as of societal value.[50] While marriage for love became increasingly common after the 1820s,[51] the nuclear family did not become commonplace until later in the 1900s.[52] The social importance of grief was particularly poignant in the case of widows who were seen as potential "threats to the social order" due to prior sexual activity and current lack of marital constraints.[53] The fact that women were viewed as particularly prone to "sweating, dripping and oozing,"[54] and an "ominous porousness which was liable to have serious intellectual, moral and sexual implications,"[55] led to an increased need for containment. In this case, mourning rituals reified the social order, protected the nuclear family form, and white middle class ideals of female purity by ensuring that widows behaved in a morally appropriate way. Much as marriage created specific forms of community and ideals around nationhood,[56] grief filled a necessary role in maintaining these communities. Across Victorian society, social stipulations concerning appropriate mourning periods in relation to marriage existed; however, for widows, these stipulations were more extensive. As a result, despite the financial hardships faced by widows, remarriage rates were quite low (particularly when compared to widowers).[57]

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[50] Stearn, *Revolutions in Sorrow*.: 33.

[51] Susie L. Steinbach. "Marriage, free love, and 'unnatural crimes.'" In, *Understanding the Victorians.* (Routledge, 2016): 240-260.

[52] Brigitte Berger. "Era of the Nuclear Family : Early in the Millennium, a New Family Structure Created Conditions Favorable to Political Freedom and the Free Market. It Was, in Effect, Responsible for the Emergence of the Modern World.(Critical Essay)." *World and I*, (November 1, 1999). https://search-ebscohost-com.login.ezproxy.library.ualberta.ca/login.aspx?direct=true&db=edscpi&AN=edscpi.A56341072&site=eds-live&scope=site.

[53] Stearn, *Revolutions in Sorrow*.: 63.

[54] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings.*: 2.

[55] Ibid.: 75.

[56] Jessica Weiss, "The Meaning of Marriage in the Nineteenth – and Twentieth-Century United States," *Journal of Woman's History, 34(4),* 2022.

[57] Cynthia Curran, "Private Women, Public Needs: Middle-Class Widows in Victorian England," *Cambridge University Press,* (2014).

The shifts in morbidity mentioned earlier continued to the point that by the 1920s, most families did not lose a child pre-adulthood.[58] This temporally coincides with Laurel Hilliker's finding that within middle class families postmortem photography had fallen out of vogue by the 1930s.[59] Mourning wear likewise fell out of favor throughout the same historical moment.[60] The First World War may have also played a role in the shift in appropriate expressions of grief.[61] Over a four-year period, around forty million people died.[62] Sustaining existing extensive mourning practices while also meeting the heightened material needs of ongoing warfare was untenable. As such, practices were already shifting. The broad implications of this are beyond the scope of this chapter but what matters here is that contact with dead bodies and signifiers of death (such as postmortem photography) slowly but surely became less common throughout the time of industrialization outside the context of brutal militaristic actions.

As such, by the 1920s, grief in Western society had become largely taboo with etiquette books marking overly intense grief as "impolite."[63] In the words of Stearns, "(a)n emotion once praised was now condemned as useless, counterproductive psychological baggage."[64] This was two years after the First World War concluded. Excessive grief was also linked to such diagnoses as melancholia at this time.[65] According to Sigmund Freud, melancholia represented an abnormal response to "object loss" derived from a "destabilized libido."[66][67] In the words of Freud, "(i)n

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[58] Stearn, *Revolutions in Sorrow*.: 79.
[59] Hilliker, "Letting Go While Holding On": 259.
[60] Almond & Smith, "The Decline of Female Mourning Wear": 225.
[61] Ibid.: 233.
[62] Nadège Mougel, "World War One Casualties," retrieved from: chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.census.gov/history/pdf/reperes112018.pdf
[63] Stearn, *Revolutions in Sorrow*.: 98.
[64] Ibid.: 93.
[65] Ibid.: 174.
[66] Holly G. Prigerson, Sophia Kakarala, James Gang, & Paul K. Maciejewski, "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder." *Annual Review of Clinical Psychology 17,* (2021): 111.
[67] As mentioned earlier, there seems to be an explicit linkage to sexuality occurring here which can be noted in some of the restrictions placed on widows as well. The full extent of this is beyond the scope of this thesis.

some people the same influences produce melancholia instead of mourning and we consequently suspect them of a pathological disposition."[68] While he recognized the importance and validity of mourning, what exceeded the acceptable bounds of such was treated as a character flaw that demonstrated lack of "inhibition."[69]

Christianity (Protestantism more so than Catholicism)[70] saw overly intense expressions of grief as inappropriate and emasculating.[71] This tie to femininity reveals a deep and abiding sense that rationality was the domain of men while emotionality was that of women. Prior to the general disappearance of mourning wear, the vast majority of social norms and expectations around appropriate dress and action during times of grief fell to women.[72] Looking at this through a materialist lens, the growing expansion of economic rationalism and simultaneous value attributed to the concept of calling and rationality more broadly in the shifting landscape of Christianity (considering the emergence of Puritanism, Calvinism, and Protestantism)[73] necessitated a shift in grief.

Neoliberalism and Grief

Neoliberalism is particularly implicated in the transformations that mourning practices underwent throughout this time. According to some scholars, neoliberalism as a practice began to develop in the 1930s before strategically entering the public view decades later.[74]

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[68] Leticia Glocer Fiorini, Thierry Bokanowski, Sergio Lewkowicz, & Ethel Spector Person. *On Freud's "Mourning and Melancholia."* (Contemporary Freud : Turning Points and Critical Issue. Karnac: 2009): 44.
[69] Ibid.: 47.
[70] Max Weber, *The Protestant Ethic and the Spirit of Capitalism,* Translated by Talcott Parsons, (Unywin Hyman: London & Boston, 1930).
[71] Brady, *English Funeral Elegy:* 183.
[72] Almond & Smith, "The Decline of Female Mourning Wear." Ziv, "Baby's in Black."
[73] Weber, *The Protestant Ethic and the Spirit of Capitalism.*
[74] Ben Fink, "How Neoliberalism Got Organized: A Usable History for Resisters, With Special Reference to Education," *The Good Society 25, 2-3,* (2016): 159.

Academically, the term was first conceptualized in 1938 at a conference in Paris.[75] As

neoliberalism has had such a profound impact on the embodied and affective lives of those living

within its thrall, creating an understanding of what exactly neoliberalism *is* and what it *does* will

prove particularly useful. Defining neoliberalism is a surprisingly difficult task because, in some

ways, it has been used as a catch phrase for all of the ills of late-stage capitalism.[76] Neoliberalism

primarily focuses on economic practices such as rule of market, deregulation, the privatization

(and thus commodification) of more and more, and individualization and responsibilization of

individuals which intertwines with the reduction of public safety nets.[77]

Wendy Brown claims that "neoliberalism casts rational action as a norm rather than an

ontology."[78] The creation of the ideal of a rational human was anything but neutral. As

evidenced from the discussion of widows and grief, for example, rationality was attributed to

men and deeply imbricated with the "Chain of Being."[79] To be close to God was to be a rational

human. To be closer to nature was to be irrational, emotional, porous. From the start, this idea

was gendered, racialized, and animalized.[80] Neoliberalism does not change this rife and

complicated ontological and epistemological territory, rather, it makes it seem less visible by

rendering it a norm. In some ways, this could further entrench the sense that emotion and affect

are places lacking in value, knowledge, or purpose and should be confined to very specific

realms when necessary. Simultaneously, it could make rationality seem aspirational and

necessary for functioning in social and economic life. The concept that the free market is the sole

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[75] William Callison, "The Politics of Rationality in Early Neoliberalism: Max Weber, Ludwig von Mises, and the Socialist Calculation Debate," *The Journal of the History of Ideas 83, 2,* (2022): 274.
[76] Fink, "How Neoliberalism Got Organized."
[77] New Solutions, "What is the Definition of Neoliberalism," *Sage Publications,* (2010).
[78] Brown, Wendy. *Edgework: Critical Essays on Knowledge and Politics*. (Princeton: Princeton University Press, 2006):
[79] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.: 2.
[80] Christine A. James. "Feminism and Masculinity: Reconceptualizing the Dichotomy of Reason and Emotion." *Philarchive,* 17, ½ (1997).

arbiter of knowledge and value and that it arbitrates *objectively* and in a value neutral way exemplifies this point.[81] As Bruce N. Waller explains:

> The market cannot be judged by "social justice" standards any more than we can complain of injustice when a tornado strikes a community. Suffering from a tornado is unfortunate but has nothing to do with social justice; the impersonal operations of the free market benefit some and harm others but like the effects of the tornado that is not injustice.[82]

Clearly this is patently absurd. As Walter recognizes and argues, neoliberalism acts by producing unique sets of vulnerability (as I will discuss thoroughly in the subsequent chapter). However, the idea of an "impersonal tornado" is persuasive when these forces are treated as external and ideal representations of a normative, hegemonic fact. Additionally, doctrines of personal responsibility add a moral element to this formation.[83]

In 1871, before neoliberalism had evolved, Carl Menger had already begun to ask the question of "how formerly 'non-economic' objects take on an 'economic' character."[84] This approach has been named "marginal analysis,"[85] and aligns with the way that I will be considering neoliberalism here. The material foundation and economic roots of neoliberalism are instructive but the impacts on the psyche of those within these conditions should not be understated. The previous discussion of rationality demonstrates this point.

Rationality (or the undue prioritization of such) has been the specter that threatens and calls into question expressions of grief for far longer than neoliberalism has existed. What makes the rationalism within neoliberalism unique is the focus on the individual and on individual responsibility rather than public safety nets. To put this otherwise, pre-neoliberalism, ritualistic

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[81] Bruce N. Waller. *The Deep Roots of American Neoliberalism: A Cultural, Economic, and Philosophical History.* (Routledge, 2022):2-3.
[82] Ibid.: 3.
[83] Ibid.: 48-49.
[84] William Callison, "The Politics of Rationality in Early Neoliberalism: Max Weber, Ludwig von Mises, and the Socialist Calculation Debate," *The Journal of the History of Ideas 83, 2,* (2022): 274.
[85] Ibid.: 274.

mourning practices held an important space within society that perhaps served as a safety-net. In some ways this was material. Practices such as feeding mourners ensures the ongoing survival of those left behind in the face of potentially reduced capacity to meet those needs privately. In others, it was less material. For example, it meant that when you saw someone in mourning attire, certain sympathetic and supportive behaviors were pre-configured.[86] It provided a framework and some generalized recognition of what it means to be in mourning and how that should be responded to. This was not a utopic time for grief, as explored earlier in this chapter, but it was *different* than within neoliberalism. The ritual of the funeral has, somewhat, persisted, although the shift to "celebrations of life" is significant. Other communal practices have faded in ways that appear deeply entangled with individualization.

Max Weber created a hierarchical taxonomy wherein ""purely rational" action sits at the top of this pyramid—that is, in an ideal type of instrumentality."[87] The assumption underlying this was that society was progressing in one direction and that direction was both positive and pointed towards increasing rationality. Thinking through the trajectory of Weber's intellectual pursuits, he certainly took seriously the risk of increasing bureaucracy, and this hierarchy was not an affective one. It is also clear that he was not looking at all the places of "slippage."

> Psychological research has demonstrated time and time again that:
> Common to all is the following syndrome: sensations of somatic distress occurring in waves lasting from twenty minutes to an hour at a time, a feeling of tightness in the throat, choking with shortness of breath, need for sighing, an empty feeling in the abdomen, lack of muscular power, and an intense subjective distress described as tension or mental pain.[88]

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[86] Pat Jalland, "Rituals of Sorrow: Mourning-Dress and Condolence Letters," in *Death in the Victorian Family,* (Oxford University Press, 1996).
[87] Callison, "The Politics of Rationality in Early Neoliberalism": 278.
[88] Prigerson et al., "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder.": 113.

When we talk about even what is classified as "normal" grief, it is not conducive to rationalism.

It is never fully individuated. Grief could be accurately conceptualized as a failure of

neoliberalism. I will return to this idea and explore it much more fully in Chapter Three;

however, at this point it is important to establish that the failure was implicated from Victorian

times through neoliberalism, and it is the shape of that failure that shifted rather than the moral

imperatives. Recognizing this allows space to think ontologically about rationality as neither

natural nor normal.

Pathologization: Grief and the Diagnostic and Statistical Manual of Mental Disorders

This perspective on grief has contributed to the introduction of complicated grief and Prolonged

Grief Disorder (PGD) into the DSM 3 and subsequent volumes.[89] Notably, disagreements have

persisted and caused the criteria and names of the respective diagnoses to shift substantially.[90]

Grief must be short-lived and must not drive one too far from the realm of everyday life in order

to be acceptable.[91] While certain markers of distress are considered normal, as discussed earlier,

"intensity" and "lack of resolution"[92] are the primary diagnostic criteria for PGD. In the DSM 5,

the focus is on ongoing distress and disturbance extending over a year past the death of a loved

one (barring "social, cultural, or religious norms").[93]

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[89] See: American Psychiatric Association, "Prolonged Grief Disorder," retrieved from:
https://www.psychiatry.org/patients-families/prolonged-grief-disorder
[90] Peter Zachar, Michael B. First, & Kenneth S. Kendler, "Prolonged Grief Disorder and the DSM: A History," *The Journal of Nervous and Mental Disease 211, 5,* (2023).
[91] Megan Devine, *It's OK That You're Not Ok: Meeting Grief and Loss in a Culture That Doesn't Understand,* (Sounds True: 2017).
[92] Prigerson et al., "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder.": 114.
[93] Prigerson et al., "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder.": 112.

My ambivalent relationship to the concept of cure as related to grief must be discussed

more fully before continuing to map this history. Approximately six months after my mother's

death I wrote:

> In the months after my Mom first died I had a hard time walking to work because on the route I would have to walk over an overpass and every single time I would think about jumping. I put on music with headphones and cranked it as loud as I could to try and drown out the thoughts, but I would look down at the cars and trucks coursing back and forth and I would want to jump. Sometimes I wasn't sure how I would resist the thoughts. They were that powerful and consuming. They've started again. I will be waiting for the train and see it down the tunnel and I will imagine just stepping off. Nothing so dramatic as jumping, just a step like thousands that I have taken before. A step to end it all.
> I suppose there's logic to this, I am in such pain lately the thought of dying has obvious appeal.

I was on the cusp of suicide. My emotional distress was all consuming. When reading about grief

in non-human animals, I recognized a kinship in the description of a goat named Myrtle who

"ran around the pasture vocalizing all day Saturday… it was a panic-stricken scream that made

your hair stand on end."[94] A young hen upon the death of her older hen companion starved

herself to death out of profound grief,[95] and this behavior has also been noted in rabbits,[96]

chimpanzees,[97] dolphins,[98] geese,[99] and in humans.

As I approached writing this section, I held in one hand the sense that grief was

extraordinarily isolating. I deeply felt the ostensible moral failure and associated stigma attached

to my inability to "move on." It was only within spaces such as a grief support group,[100] and the

podcasts and writings of "What's Your Grief,"[101] that I felt empowered to hold space for the full

reality of what I had lost and what that meant. In moments where I was allowed to express my

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[94] Barbara J. King, *How Animals Grieve,* (University of Chicago Press, 2014): 37.
[95] Ibid.: 6.
[96] Ibid.: 47.
[97] Ibid.: 80.
[98] Didion. *The Year of Magical Thinking.* Vintage International: 2007: 48.
[99] Ibid.
[100]See: https://www.yogaforgriefsupport.com/
[101] See: https://whatsyourgrief.com/ and https://open.spotify.com/show/5MhN8AGI7BtpfbP0FxCBgI

grief within community, I was able to hold the pain. These moments were few and far between. In my other hand, I hold the knowledge that the pain could have killed me. Certain medications were a piece of tolerating that which could not otherwise be held and perhaps I would have survived without them but maybe not. By critiquing and complicating the inclusion of grief (in any form) within the DSM, I hope to draw attention to the structures that perpetrate ongoing forms of harm that can be too easily ignored when isolated into individual bodies. This does not constitute a rejection of treatment or a rejection of support as such.

Perhaps the presence of suicidality in my descriptions of grief and chosen examples can best be understood through Emilé Durkheim's concept of "anomy." Societies characterized by anomy lack social cohesion due, in part, to the erosion of rituals and other creators of collective identity. Durkheim, in his discussion of suicide, writes that "[m]any sorrows can be endured only by being embraced, and the pleasure taken in them naturally has a somewhat melancholy character. So, melancholy is morbid when it occupies too much place in life; but it is equally morbid for it to be wholly excluded from life."[102] The pathology of what I am describing has a distinctly social element. There is something *morbid* about the absence of mourning rituals and socially sanctioned avenues for affective and material expression of grief that cannot be captured in individual bodies.

The localization of the pathology discourse individuates the experience and places it solidly in the realm of cure as considered by Eli Clare.[103] Clare writes about his experience of childhood sexual abuse, "[w]hen it became clear that I had to deal with this damage or end up dead, all I wanted was to be cured."[104] On a different subject, he also writes "I would lose so

[102] Durkheim, *Suicide: A Study in Sociology.*
[103] Eli Clare, *Brilliant Imperfection: Grappling with Cure,* (Duke University Press: 2017).
[104] Ibid.: 159.

much if that imaginary cure pill actually existed. Its absence lets me be unequivocal. It opens the

door to brilliant imperfection."[105] In considering pathological / pathologized grief, both of these

perspectives are valuable. Now, I can unequivocally say that unless cure means the return of my

mother, a type of zombification also discussed by Roger Rosenblatt in regard to his dead

daughter,[106] I do not want it. Like Rosenblatt, "I would gladly walk with a zombie."[107] However,

I cannot reorient to the sense of personal bodily sovereignty I held before. There is no return. In

the words of Lauren Berlant, "when an object breaks into you there's no erasing it."[108] Yet, I

needed individual treatment to remain alive. This is not incongruent with all existing psychiatric

approaches,[109] but it adds important nuance.

Options cited for treatment range from psychotherapy to medications such as Selective

Serotonin Reuptake Inhibitors (SSRIs), and Naltrexone (a medication primarily used in the

treatment of alcohol and / or opioid dependency).[110] SSRIs have largely been found to be

ineffective for treating grief-related mental health concerns.[111] The argument for utilizing

Naltrexone in treatment plans is based on the supposition that grief is itself a form of withdrawal

leading to complications in the reward pathway in the mind.[112] It is not entirely clear why this

medication has been effective in clinical trials or what that implies about the neurological nature

of grief. Much remains unknown about the nature of the brain. Even in the case of SSRIs, which

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[105] Ibid.: 88.
[106] Roger Rosenblatt, *Kayak Morning: Reflections on Love, Grief, and Small Boats,* (Ecco, 2012).
[107] Ibid.: 18.
[108] Lauren Berlant, *On the Inconvenience of Other People,* (Duke University Press: 2022): 105.
[109] See: Babak Moayedoddin & John C. Markowitz, "Abnormal Grief: Should We Consider a More Patient-Centered Approach," *American Journal of Psychotherapy 69,4,* (2015).
[110] James Grang, James Kocsis, Jonathan Avery, Paul K. Maciejewski, & Holly G. Prigerson, "Naltrexone treatment for prolonged grief disorder: study protocol for a randomized triple-blinded, placebo-controlled trial." *Trials.* (2021).
[111] Prigerson et al. "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder.": 122. & Peter Zachar, Michael B. First, & Kenneth S. Kendler, "Prolonged Grief Disorder and the DSM: A History," *The Journal of Nervous and Mental Disease 211, 5,* (2023): 387.
[112] Ibid.: 121, Grang et al. "Naltrexone treatment for prolonged grief disorder": 3.

have been prescribed for depression since 1987, the neurological reasons for their effectiveness

or ineffectiveness in certain body-minds remains hotly contested as the serotonin hypothesis has

been disproven.[113]

While the association is intended exclusively for therapeutic treatment plans, the

entwinement of addiction and stigma is well documented.[114] While most people may not see a

mental kinship between addiction and grief, there are similarities in how stigma is

operationalized and how responsibilized individuals are for addressing the ostensible moral

failing of their respective condition. The particular intersection of medicalized treatment in grief

and addiction illuminates the nature of this overlap. Research has conclusively demonstrated that

attaching a medical diagnosis to grief creates its own kind of stigma.[115]

Our (western neoliberal subject's) desperate need to keep the vulnerability of our status

as adequately individuated and responsibilized appear far away and, sometimes, abjected into

other bodies, as poignantly discussed by Joanne Limburg.[116] This makes grief (like drug abuse) a

failure that has to be discursively localized in the individuated body and captured under the

umbrella of pathology. While mental health practitioners and academics within the field of

psychology strive to distinguish between the normal and pathological conditions of grief,[117] that

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[113] Sara Gorman & Jack M. Gorman, "We Still Don't Know How Antidepressants Work." *Psychology Today,* (2022).

[114] Hasan Siddiqui & M.D. Rutherford, "Belief that addiction is a discrete category is a stronger correlate with stigma than belief that addiction is biologically based." *Substance Abuse Treatment, Prevention, and Policy,* 18:3, (2023).

[115] Naomi M. Simon, M. Katherine Shear, Charles F. Reynolds, Stephen J. Cozza, Christine Mauro, Sidney Zisook, Natalia Skritskaya, Donald J. Robinaugh, Matteo Malgaroli, Julia Spandorfer, & Barry Lebowitz, "Commentary on Evidence in Support of a grief-related condition as a DSM diagnosis," *Anxiety and Depression Association of America Wiley Periodicals, 37,* (2020): 12.

[116] Joanna Limburg, *Letters to My Weird Sisters: On Autism and Feminism,* (Atlantic Books: 2022).

[117] Babak Moayedoddin & John C. Markowitz, "Abnormal Grief: Should We Consider a More Patient-Centered Approach," *American Journal of Psychotherapy 69,4,* (2015). Prigerson et al., "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder." Naomi M. Simon, M. Katherine Shear, Charles F. Reynolds, Stephen J. Cozza, Christine Mauro, Sidney Zisook, Natalia Skritskaya, Donald J. Robinaugh, Matteo Malgaroli, Julia Spandorfer, & Barry Lebowitz, "Commentary on Evidence in Support of a grief-related condition as a DSM diagnosis," *Anxiety and Depression Association of America Wiley Periodicals, 37,* (2020)

nuance is likely to be lost on the public and is not entirely obvious prima facie. Even if it were obvious and readily accepted, at what point does considering grief as a form of mental illness or mood disorder provide a justification for further individuating the experience and further dismissing the knowledges, needs, and lives caught therein? I will turn directly to the question of knowledge in Chapter Three.

Megan Devine, an advocate for shifting our understanding of grief, writes that "[g]rief that hasn't disappeared… is evidence that you've done something wrong, or that you aren't as resilient, skilled or healthy as you thought you were before."[118] The pathology framework appears to be a rationalized version of the moral hygienic practices that developed and shifted from the Victorian era until now.

In his powerful and thoughtful work entitled, *The Smell of Rain on Dust: Grief and Love,* Martín Precthel writes:

> I don't think the modern person is really saying, "I don't want that kind of freedom for my soul," but they are saying, "There is no village for me, a village who would not only listen but understand. I have no tribe who would admire the depth of my grief as praise of what I have loved and lost, and consider it a tribal asset. I'm sure no one out there in the world will pick me as their hero for the beauty of my courage to express my love and loss in that way, much less comprehend what they're seeing, when they see me crunched down by myself weeping in the streets.[119]

The devaluation of grief does not lead to a lack of desire to express love and loss but rather a lack of space to do so in community. In Chapter Three I will argue that grief is an asset and weeping is not something to be feared or abjected. By ending this section on pathology with this quote, I seek to introduce the concept that grief has communal value that is missed under conditions of neoliberalism.

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[118] Devine, *It's OK That You're Not Ok:* 26.
[119] Prechtel, *The Smell of Rain on Dust:* 43.

Conclusion

Crafting a picture of the historical transformations that grief has gone through de-normalizes approaches that have otherwise been rendered invisible. While medication and therapeutic options can be beneficial in the management of grief-related symptoms that cause intense amounts of pain, the DSM normalizes the sense that grief should be overcome within a certain timeframe with only certain types of expression. By casting rationality as the norm and hero of neoliberalism, the knowledges of affect and the necessity of ritual are intentionally lost. However, even in the presence of ritual, often moral value judgements shape what expressions can and cannot be allowed as seen in the exploration of Victorian era grief.

By beginning this chapter with a quote by Gramsci, I wanted to implicate the concept of "hegemonic apparatus" in understanding how the affective epistemologies of grief are concealed by such processes as neoliberalism. From the outset, my argument has been that there is nothing normal or natural about how grief is treated currently in Canada. However, it is important to also ask *why* grief is understood the way it is now and whether grief holds the seeds for understanding relationality differently? The hegemony of rationality does not hold up to scrutiny.

In the chapters to come, I will complicate and nuance the picture that has been sketched in this chapter. Within Canada, a settler colonial state, certain lives are produced in different relations to death *and* grief. Without examining these processes, it would be impossible to adequately account for why grief is abjected and what it could do if "we ask that it does so."[120]

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[120] hooks. "Theory as Liberatory Practice.": 61.

Chapter Two: Morbidity, Mortality, and Unrecognizable Grief

In order to nuance the historical analysis presented in the preceding chapter, it is imperative to ask who is placed at unique relations to violence, disease, and death. While everyone dies, morbidity (disease in a population) and mortality (death in a population) rates are impacted by people's race, gender, ability, and sexuality, and by material factors. It is not my intention to map all the ways that precarity is operationalized, although such an analysis would be beneficial. Primarily, I will look at the impacts of settler colonialism on Indigenous peoples' life expectancies. As such, I will begin this chapter by defining precarity and settler colonialism. From there, I will turn to specific examples of conditions of death and the questions these raise in terms of grief under colonialism in Canada. I also ask how the conditions of grief are structured differently depending on the one grieving and the life being grieved. When Judith Butler asked which lives are recognizable as lives and, relatedly, which are grievable,[121] they created an ethical space to ask the inverse: Who can grieve? What grief is recognizable as grief? If the recognizability of life is highly contingent, then so too must be the recognizability of grief.

This exploration of material conditions is necessary in understanding the affective landscape of grief. It would likely feel different to lose someone to natural causes after a medical team had provided all possible care and kindness compared to losing someone who was left alone to die in an emergency room of preventable causes (as happened, for instance, to Brian Sinclair, who is discussed later in this chapter). As I am contending that grief holds deep epistemological value, in line with feminist standpoint theories, it is valuable to account for the

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[121] See: Judith Butler. *Frames of War: When is Life Grievable, (*Verso, 2010). & Judith Butler. *Precarious Life: The Powers of Mourning and Violence,* (Verso, 2004).

situated nature of this knowledge.[122] While psychologists, as discussed in Chapter One, have

identified a common range of physiological and psychological responses in so-called "normal"

grief,[123] there is also a recognition that certain kinds of loss (death by suicide, murder, etc.) are

far more likely to cause complicated forms of bereavement.[124] Thus, there is a precedent for

treating experiences of grief as distinct in some notable ways based on the specificities of the

material conditions. Additionally, while grief caused by death is the primary focus of this thesis,

I also want to ask what kinds of grief are compelled by systems of oppression.

Precarity: What does the materiality of death do?

The concept of precarity as delineated by Judith Butler in *Precarious Life: The Powers of*

Mourning and Violence,[125] and *Frames of War: When is Life Grievable,*[126] will provide the

primary theoretical lens through which I interpret the material conditions that make death and

grief under settler colonialism unique. As such, it is necessary to define what precarity is and

what it does. Butler writes:

> In targeting populations, war seeks to manage and form populations, distinguishing those
> lives to be preserved from those whose lives are dispensable. War is in the business of
> producing and reproducing precarity, sustaining populations on the edge of death,
> sometimes killing its members, and sometimes not; either way it produces precarity as the
> norm of everyday life. Lives under such conditions of precarity do not have to be fully
> eviscerated to be subject to an effective and sustained operation of violence.[127]

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[122] Marcel Stoetzler & Nira Yuval-Davis. "Standpoint Theory, situated knowledge, and the situated imagination."
Feminist Theory, Sage Publications 3(3), (2002).
[123] Prigerson et al., "History and Status of Prolonged Grief Disorder as a Psychiatric Disorder."
[124] Mayo Clinic. "Complicated Grief." Retrieved from: https://www.mayoclinic.org/diseases-
conditions/complicated-grief/symptoms-causes/syc-
20360374#:~:text=Factors%20that%20may%20increase%20the,relationship%20to%20the%20deceased%20person
[125] Butler. *Precarious Life: The Powers of Mourning and Violence.*
[126] Butler. *Frames of War.*
[127] Ibid.: xvii-xix.

Following this logic, settler colonialism functionally normalizes close relations to death for certain populations (Indigenous) while simultaneously valorizing and creating unique protections for others (settlers – particularly white settlers).[128] Sometimes this involves obvious violence, as in the case of Missing and Murdered Indigenous Women and Girls (MMIWG) and Colten Boushie (discussed in more detail later). However, often it is insidious, as in the case of medical malpractice and distrust. As a result, a large portion of the violence can be effectively hidden from public view. This could make it far easier to erase "modes of public seeing and hearing that might well respond to the cry of the human within the sphere of appearance."[129]

What interests me here is whether such precarity additionally translates into a precarity in the ability to grieve and have that grief held and recognized. Whose lives are viewed as savable[130] and openly grievable[131] by the dominant society are intertwined and self-reinforcing. This means that a life that is not savable is not openly grievable and, the inverse, a life that is not grievable is not savable. This intertwinement means that each of these elements are precaritized simultaneously. So, *both* elements hold distinct social justice implications and are best considered in tandem with one another. This formulation will become clearer as I look directly to material examples; however, from the outset, it is necessary to highlight that this relationship is why I direct attention to both elements despite my primary interest in grief.

Settler Colonialism

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[128] See Jasbir Puar's discussion of sexual exceptionalism in *Terrorist Assemblages : Homonationalism in Queer Times.* Next Wave. Duke University Press: 2008: 3.
[129] Butler. *Precarious Life.:* 147.
[130] Ibid.: 38
[131] Ibid.: 41.

Canada is a settler colonial state. In the absence of concrete land repatriations (or rematriation as Lana Whiskeyjack would say),[132] colonization will continue to be an ongoing reality.[133] This means when tracking the impacts of colonialism, while it is necessary to recognize and acknowledge historical practices, it is inadequate and inaccurate to treat them as a relic from the past. Colonialism creates "epistemic, cosmological, and ontological" violence[134] while, simultaneously, requiring and perpetuating high levels of material harm for self-continuance.[135] Genocidal intent has underwritten government policies and actions since the inception of "Canada."[136]

The present time in Canada is structured by discourses of "reconciliation." As Amanda Gebhard argues, within these discourses "settler innocence and Aboriginal culpability are (re)produced."[137] In essence, by focusing on historical instances of violence instead of actively acknowledging ongoing structural realities and concrete practices, it becomes discursively possible to outright dismiss land claims and activism directed towards sovereignty rather than assimilation without affective discomfort. This manifests in a variety of ways, including expressions of the sentiment that "we said we're sorry, why are you being so difficult / divisive?" For example, Gebhard describes how asking educators about residential schools allowed them to construct "the racism of residential schools… as belonging to people of another time period."[138] While these questions were intended to provide an opportunity for the educators

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[132] See for example: Chloë Taylor. "Lana Whiskeyjack on Rematriation and Indigenous Genders and Sexualities." *Youtube.* (2023). Retrieved from: https://www.youtube.com/watch?app=desktop&v=MUlicYZLdgc

[133] Eve Tuck & K. Wayne Yang, "Decolonization is not a metaphor," *Decolonization: Indigeneity, Education, & Society, 1(1),* (2012):1-40.

[134] Ibid.: 5.

[135] Ibid.: 11.

[136] Pauline Wakeham. "The Slow Violence of Settler Colonialism: Genocide, Attrition, and the Long Emergency of Invasion." *Journal of Genocide Research,* 24:3, (2022).

[137] Amanda Gebherd. "Reconciliation or Racialization? Contemporary Discourses about Residential Schools in the Canadian Prairies." *Canadian Journal of Education / Revue Canadienne De l'éducation, 40(1),* (2017):4.

[138] Ibid.: 13.

to consider more meaningfully why Indigenous students may face unique issues within the education system, instead the majority of educators used them as an opportunity to demonstrate their own understanding and empathy towards victims of historical injustices while disavowing any possible relation of these systems to the present. Stephen Harper, previous prime minister of Canada, employed a similar temporal distancing in his apology in 2008.[139] The Truth and Reconciliation Commission was "never some naïve injunction to forgive and forget in the interests of unity and stability"[140]; however, media framing has refused to engage substantively with collective responsibility beyond the responsibility to listen.[141]

It is important to acknowledge that my approach runs the risk of perpetuating a certain framework of change. In the words of Eve Tuck, "[i]n a damage-centered framework, pain and loss are documented in order to obtain particular political or material gains."[142] Taking seriously Eve Tuck's call to suspend damage-based research[143] *and* the rhetorical risks of locating colonialism in the past,[144] I recognize the "wisdom and hope"[145] that undercut and interact with "painful elements of social realities."[146] While I will complicate the historical perspective I offered in the previous chapter, I will largely stay in the present out of recognition of the complicated ethical terrain into which I am entering.

Malpractice and Distrust: Insidious Precarity

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[139] Elisabeth Paquette. "Reconciliation and Cultural Genocide: A Critique of Liberal Multicultural Strategies of Innocence." *Hypatia* 35, no. 1 (2020): 143–60. https://doi.org/10.1017/hyp.2019.15.
[140] Matt James. "Changing the Subject: The TRC, Its National Events, and the Displacement of Substantive Reconciliation in Canadian Media Representations." *Journal of Canadian Studies* 51 (2), (2017): 364.
[141] Ibid.: 379.
[142] Eve Tuck. "Suspending Damage: An Open Letter to Communities," (2009): 413.
[143] Ibid.
[144] Gebherd, "Reconciliation or Racialization?"
[145] Tuck. "Suspending Damage.": 416
[146] Ibid.: 416.

In my historical analysis in Chapter One, I generalized the observation that death rates have decreased in the light of medical and hygienic advancements. This is not universally the case. While frequently socio-economic factors are cited in medical research as the main contributor to disparities between different demographic groups,[147] medical malpractice and well-earned distrust factor in important notable ways. The key areas where disparities have been noted in recent years are "life expectancy, diabetes and obesity, suicide, and addiction rates."[148] Historically, epidemic diseases massively contributed to lowered life expectancies due to lack of acquired immunity in Indigenous communities and intentional acts of biological warfare undertaken with financial support from the British government.[149] It is estimated that approximately ninety percent of the Indigenous peoples in North America died in-between 1600-1800.[150] In Manitoba, the first recorded small-pox epidemic began in 1781 which was significantly later than when similar pandemics started elsewhere in North America.[151] This is part of why accurately calculating how many people died during initial colonization is so difficult and requires such a large timeframe.

While "medicine and medical care were discussed during many of the treaty negotiations… the promises inevitably failed to appear in written text."[152] This exclusion enabled the Canadian government to avoid fiscal and material responsibility. As treaties were intended to

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[147] Min Hu & Mohammed Hajizadeh. "Mind the Gap: What Factors Determine the Worse Health Status of Indigenous Women Relative to Men Living Off-Reserve in Canada?" *Journal of Racial and Ethnic Health Disparities, 10,* (2023).
[148] Ibid.: 1139.
[149] Elizabeth A. Fenn. "Biological Warfare in Eighteen-Century North America: Beyond Jeffery Amherst." *Journal of American History,* (2000): 1554.
[150] Alexander Koch, Chris Brierley, Mark M. Maslin, & Simon L. Lewis. "Earth system impacts of the European arrival and Great Dying in the Americas after 1492." *Quaternary Science Reviews,* (2019).
[151] C. Stuart Houston & Stan Houston. "The first smallpox epidemic on the Canadian Plains: in the fur traders' words." *The Canadian Journal of Infectious Diseases, 11(2),* (2000).
[152] Maureen K. Lux. "Separate Beds: A History of Indian Hospitals in Canada, 1920s – 1980s." (University of Toronto Press, 2016): 6.

structure mutual relations (between countries) and benefit both groups involved,[153] this refusal of responsibility is telling. In the years that followed the signing of treaties, Indigenous people were discursively constructed as racially dirty, "soaked in tuberculosis," and a threat to the white populations.[154] This is a clear example of how "exception" and "exceptionalism," as considered by Jasbir Puar, act together in producing life chances.[155] Discursively, suspending the medical freedoms of Indigenous populations was an "exception" that ostensibly protected the "exceptional" (superior and capable of making rational decisions) settler's rights and health.

The Indian Act, which legally structured the Canadian government's treatment of Indigenous people between the years of 1876-1955, included a section allowing for the use of force in making Indigenous peoples and communities comply with specific health and sanitation regulations.[156] This allowed medical officials to decide on treatment plans without informed consent.[157] Should the "patient" not willingly comply, medical officials and police officers could legally detain and imprison Indigenous people until compliance was achieved.[158] Under this section, officials had the additional legal entitlement to enter Indigenous places of residence whenever they wanted, ostensibly to ensure proper sanitation.[159] Additionally, violation of this act could result in fines of up to one hundred dollars, which according to an inflation calculator would be valued at approximately 2581.67 dollars today,[160] and / or, imprisonment up to three months.[161] It is difficult to adequately encapsulate how such regulations would have concretely

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[153] Kent Roach. *Canadian justice, Indigenous injustice: the Gerald Stanley and Colten Boushie case.* (McGill Queen's University Press: 2019): x.
[154] Ibid.: 9.
[155] Puar. *Terrorist Assemblages : Homonationalism in Queer Times*: 3.
[156] *The Indian Health Regulations : Made under the Indian Act*. 2014. CIHM/ICMH Digital Series = CIHM/ICMH Collection Numérisée: No.9_10050. Edmund Cloutier ... Queen's Printer and Controller of Stationery: see part 1:4.
[157] Ibid.: 1:7.
[158] Ibid.: 1:8.
[159] Ibid.: 1:15.
[160] See: https://inflationcalculator.ca/
[161] *The Indian Health Regulations*: 1:18.

disrupted traditional forms of healthcare and medicine well established within Indigenous tribes. The significant death toll of early colonization was another contributor to the erasure of certain existing knowledges.

All of this concretely shaped the creation of "Indian hospitals," in which isolation was prioritized.[162] As mourning rituals are typical communal in nature,[163] this (and other locations structured similarly, like residential schools) would have also had profound impacts on the ability to grieve. Indian hospitals are one key location where an understanding of medical distrust must begin. Rather than providing effective treatments, hospitals such as the Charles Camsell Indian Hospital (which was closely associated with the University of Alberta hospital) conducted unnecessary medical experiments without consent on Indigenous peoples' so called "useless bodies."[164] This coercion was considered justified due to the argument that Indigenous people could not be trusted to decide what treatment was most appropriate.[165]

At the University of Guelph (Ontario), nutrition experiments were performed on Indigenous infants up until 1952. Many infants died due to malnutrition caused by these experiments or suffered lifelong adverse effects; however, finding an accurate number is impossible due to inadequate record keeping. There was an obvious incongruency between such experiments and the directives of the Hippocratic Oath.[166] The fact that these deaths went unrecorded is also significant. As queer theorists such as Lee Edelman have argued, rhetoric around children and children's rights have a highly effective political impact due to a sense of innocence in childhood and that children must be protected at all costs.[167] If the possibility of

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[162] Maureen K. Lux. "Separate Beds: A History of Indian Hospitals in Canada, 1920s – 1980s."
[163] See, for one example: Martín Prechtel. *The Smell of Rain on Dust: Grief and Praise.* North Atlantic Books: 2015.
[164] Maureen K. Lux. "Separate Beds: A History of Indian Hospitals in Canada, 1920s – 1980s.".: 13.
[165] Ibid.: 95.
[166] Noni E. MacDonald, "Canada's shameful history of nutrition research on residential school children: The need for strong medical ethics in Aboriginal health research," *Paeditrics Child Health 19(2),* (2014).
[167] Lee Edelman. *No Future: Queer Theory and the Death Drive*. Series Q. Duke University Press: 2004.

harm to a rhetorically figured "Child" can justify and compel action that negatively impacts

queer people, for example,[168] what does the exclusion of these infants from even medical records

signify? Is a life that has not even been recorded grievable? Or does the assumption that the life

was disposable from the outset undercut the recognition of grief for the loss? This lack of

recognition does not equate to an actual absence of grief, mourning or pain, but rather impacts

the ability for the grief to orient and compel action.

While "Indian Hospitals" no longer exist, racism and colonialism within healthcare

persists. For example, in 2008 an Indigenous man named Brian Sinclair died in an emergency

waiting room in Manitoba after not receiving even the most basic forms of care for thirty-four

hours. The condition that led to his death was treatable and, had the hospital staff examined him,

he likely would have lived.[169] While an inquest was undertaken to determine the cause of his

death, the full findings are not available to the public and no charges were filed.[170] What *is*

available to the public is a report called "The Provincial Implementation Team Report on the

Recommendations of the Brian Sinclair Inquest Report."[171] The report includes no reference to

racism or colonization. Instead, recommendations are geared towards such things as charting,[172]

awakening sleeping people in the emergency room to assess their well-being at regular

intervals,[173] and providing adequate breaks for nurses involved in triage.[174] While each of these

steps undoubtedly has value, ignoring the racism that underpinned this particular situation allows

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[168] Ibid.

[169] Aidan Geary, "Ignored to Death: Brian Sinclair's death caused by racism, inquest inadequate group says," *CBC*, (2017). Accessed: https://www.cbc.ca/news/canada/manitoba/winnipeg-brian-sinclair-report-1.4295996

[170] Anonymous, "Disclose the full report," *Winnipeg Free Press,* (2013).

[171] Manitoba Gov. "The Provincial Implementation Team Report on the Recommendations of the Brian Sinclair Inquest Report." *Canada Commons,* (2015). Accessed: https://canadacommons-ca.login.ezproxy.library.ualberta.ca/artifacts/1196330/the-provincial-implementation-team-report-on-the-recommendations-of-the-brian-sinclair-inquest-report/1749454/view/?page=1

[172] Ibid.: 8-9.

[173] Ibid.: 12.

[174] Ibid.: 14.

for the ongoing refusal of responsibility. Even such recommendations as hiring Indigenous elders and bridging potential language gaps[175] fall short of addressing the underlying conditions that allowed for this death.

In British Columbia, an Indigenous woman named Sarah Morrison was refused treatment at two separate hospitals leading to the stillbirth of her daughter in 2021.[176] In 2020, a survey found anti-Indigenous discrimination in health care institutions across the province. In a quantitative study, nearly 84% of all the Indigenous people surveyed reported the experience of discrimination in health care.[177] However, these findings did nothing to prevent the death of Morrison's daughter. In 2022, Joyce Echaquan filmed herself being mocked by nurses in Montreal shortly before her death.[178] The sheer volume of examples that could be drawn on demonstrate the rationality and necessity of Indigenous distrust of health care institutions in modern day Canada is disgusting.

As evidenced by these medical practices, Canadian settler colonialism produces conditions wherein the recognizability of Indigenous lives is deteriorated. Applying Butler's understanding of precarity to the Canadian settler colonial context, it can be argued that Indigenous lives are not recognized within settler structures as lives. Butler writes,

> grief attends the life that has already been lived, and presupposes that life as having
> ended. But, according to the future anterior (which is also a part of ordinary language),
> grievability is a condition of a life's emergence and sustenance. The future anterior, "a

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[175] Ibid.: 21-23.

[176] Melanie Nagy & Ben Cousins, "'They wouldn't do anything': Indigenous woman who lost baby alleges negligence, racism in B.C. hospitals." *CTV News,* (2021). Accessed: https://www.ctvnews.ca/health/they-wouldn-t-do-anything-indigenous-woman-who-lost-baby-alleges-negligence-racism-in-b-c-hospitals-1.5321713?cache=

[177] Todd Coyne, "Report finds 'widespread' anti-Indigenous racism in B.C. health system," *CTV News,* (2020). Accessed: https://vancouverisland.ctvnews.ca/report-finds-widespread-anti-indigenous-racism-in-b-c-health-system-1.5210371

[178] Sidhartha Banarjee, "Family Files $2.7-million lawsuit over Indigenous woman's death in Quebec Hospital," CTV news (2022). Accessed: https://montreal.ctvnews.ca/family-files-2-7-million-lawsuit-over-indigenous-woman-s-death-in-quebec-hospital-1.6089451

life has been lived," is presupposed at the beginning of a life that has only begun to be lived.[179]

This means that in order for a life to be grieved it must be recognized as a life that has or would have otherwise been lived and this relies on a certain form of vision. Butler uses the case of September 11th, 2001, and the subsequent war in the Middle East to situate this argument.[180] In this case, the choices not to provide adequate care across Canada demonstrate a sense that Indigenous lives lack intrinsic value. This overarching approach represents a sense that there is not a life that will have been lived (in a recognized or accepted way) that can be lost.

While medical distrust, a commonly found response in Indigenous communities, is a reasonable response to an institution that actively perpetuates ongoing violence, harm, and death, Indigenous people are statistically far more likely than settlers to die from avoidable causes because of their wariness of hospitals and doctors.[181] In a longitudinal study, medical distrust was found to be independently predictive of early mortality.[182] There are several possible reasons for this finding. In the case of cancer, early prediction leads to the highest likelihood of survival.[183] In conditions that require ongoing treatment, the efficacy of these treatments requires patient adherence.[184] One of the factors that directly impacts patient adherence to treatments is the relationship between the physician and patient.[185] Both early detection and effective treatment thus hinge on adequate trust in the medical system. It would be impossible to quantify

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[179] Butler. *Frames of War.*: 15.
[180] Ibid.
[181] Jungwee Park, "Health Reports: Mortality among First Nations people, 2006 – 2016," *Statistics Canada.* Accessed: https://www150.statcan.gc.ca/n1/pub/82-003-x/2021010/article/00001-eng.htm
[182] Kevin Fiscella, Peter Franks, Carolyn Clancy, Mark Doescher, & Jessica Banthin. "Does Skepticism Towards Medical Care Predict Mortality," *Medical Care 37(4),* (1999): 409-414.
[183] World Health Organization, "Promoting Cancer Early Diagnosis." Accessed: https://www.who.int/activities/promoting-cancer-early-diagnosis#:~:text=Early%20diagnosis%20of%20cancer%20focuses,and%20higher%20costs%20of%20care.
[184] Leslie R. Martin, Summer L. Williams, Kelly B. Haskard, & M. Robin DiMatteo, "The Challenge of Patient Adherence," *Ther Clin Manag, 1(3),* (2005).
[185] Ibid.

how many lives are lost due to lack of timely diagnoses and treatment, so the lives lost to

medical distrust could be subsumed under the banner of "natural deaths." This would negatively

impact the possibility for grief, even if recognized, to orient political action.

Finally, fiscal inequality impacts health outcomes in ways that can be considered

alongside malpractice and distrust. Census data collected in 2006 across Canada has been

extensively analyzed due to the scope of the data collected at the time.[186] The depth of these

analyses makes them invaluable; however, it is necessary to recognize from the outset that

income inequality is on the rise.[187] This inequality could be characterized as a form of

polarization.[188] While the wealthiest get more wealthy, the middle class disappears, and the

lower economic bracket expands. The full extent of that is beyond the scope of this brief

analysis; however, the dataset I am relying on is not current and likely *under*states the issue.

Generally, Indigenous people have lower incomes than their colonizer counterparts when

controlling for age and education.[189] As argued by Daniel Wilson and David Macdonald, this

trend cannot be understood without recognizing the

> causal relationships, such as the decimation of traditional economies, the movement of
> Aboriginal peoples onto increasingly marginal land and the creation of reserves by the
> colonial administration. Purported to be a solution, assimilation instead decimated entire
> cultures that had other value, both economic and non-economic, without improving
> conditions for the people left in its wake. [190]

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[186] RCAANC-CIRNAC, *Aboriginal income disparity in Canada : Disparité des revenus des auochtones*, Canadian
Electronic Library. Ottawa, Ontario. Retrieved from https://canadacommons.ca/artifacts/1205480/aboriginal-
income-disparity-in-canada/1758587/ on 11 Jan 2024. CID: 20.500.12592/090fz7.

[187] See chart: Charles M. Beach. "Changing Income Inequality: A distributional paradigm for Canada." *The
Canadian Journal of Economics / Revue Canadienne d'Economique,* (2016):1233.

[188] Ibid: 1251.

[189] Aboriginal Affairs and Northern Development Canada, "Aboriginal Income Disparity in Canada." *Canada
Commons* (2011). Accessed: https://canadacommons-
ca.login.ezproxy.library.ualberta.ca/artifacts/1205480/aboriginal-income-disparity-in-canada/1758587/view/?page=1

[190] Daniel Wilson & David Macdonald, "The income gap between Aboriginal peoples and the rest of Canada,"
Canadian Electronic Library. Canada. (2010):11.

These factors impacts a number of important determinants of health outcomes such as access to qualified health professionals,[191] quality food,[192] and clean water,[193] among other factors, and directly impacts life expectancy.[194]

Affect, Grief, and Precarity: How do the pieces fit?

This section is guided by Butler's question: "what is the relation of affect to ethical and political judgement and practice?"[195] As I suggested earlier in this chapter, material conditions only tell one piece of the story where grief is concerned. Since I am considering grief as an affect imbued with epistemological value that is silenced by the prioritization of rationality over emotionality / affects / embodiment, I want to consider how such material conditions could structure and shape grief's presentation and potential. In this section, I will ask a lot of questions, none of which have easy answers, but all of which suggest the possibility that precarity shapes grief in ways that perpetrate epistemological and material harms.

Mayan Shaman Martín Prechtel, who was quoted above, witnessed the death of over eighteen thousand people in his village over 18 years. [196] The monumental losses that comprised this time were impossible to grieve due to the ongoing persistence of violence. Recognizing that at any moment violence could come to your door, another loved one's door, *anywhere,* meant no

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[191] Rochelle Garner, Gisèle Carrière, Claudia Sanmartin, & the Longitudinal Health and Administrative Data Research Team. "The Health of First Nations Living Off Reserve, Inuit, and Métis Adults in Canada: The Impacts of Socio-economic Status on Inequalities in Health." *Canada Commons, Catalogue no. 82-622-X — No. 004* (2010).

[192] Simone A. French, Christy C. Tangney, Melissa M. Crane, Yamin Wang, & Bradley M. Appelhans. "Nutrition quality of food purchases varies by household income: the SHoPPER study." *BMC Public Health,* (2019).

[193] Joe Brown, Charisma S. Acey, Carmen Anthonj, Dani J. Barrington, Cara D. Beal, Drew Capone, et al. "The effects of racism, social exclusion, and discrimination on achieving universal safe water and sanitation in high-income countries." *The Lancet Global Health,* (2023).

[194] Irma T. Elo, "Social Class Differentials in Health and Mortality: Patterns and Explanations in Comparative Perspective." *Annual Review of Sociology* 35 (2009): 553–72.

[195] Butler. *Frames of War*.: 13.

[196] Martin Prechtel, "Grief and Praise 1-3." *Youtube.* (2014). https://www.youtube.com/watch?v=UUwewfPPSbE

energy could be invested into mourning the deaths that had occurred. As such, Prechtel argues that grief can become calcified in family lines.[197] This begs the question: in Indigenous communities, how does the prescience of colonial violence foreclose adequate spaces for grief and what are the consequences of this? In Chapter One, I argued that the First World War contributed to the deterioration of mourning rituals due to the sheer quantity of death and the ongoing necessity of survivance and material reproduction. Logically, settler colonization could contribute to a similar situation wherein survival requires setting aside mourning practices that could otherwise prevent the calcification of grief.

Additionally, how does colonial violence (even when not expressed materially) create grief? Butler explains that precarity does not necessarily require "killing its members."[198] It is not as though precarity immediately every single moment translates into the physical realization of violence, although often it does. Precarity exists in far subtler moments as well, as evidenced by medical distrust. As such, recognizing how grief can be separated from material moments of death could allow for a greater recognition of its scope. As Jenn Ashworth asked, "Can you grieve people you don't know?"[199]

Billy-Ray Belcourt, an Indigenous poet of the Driftpile Cree Nation, writes:

heartbreak is a body that is not bodied.
he is everything that will have happened to him:
he is his mother first
and then his sister, both dead.
heartbreak is an alias.
it is not a name but an enactment of grief
whereby one ropes strangers by the tongue into a collective wounding.
heartbreak lives in the underbelly of a system
meant to world around his body.[200]

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[197] Ibid. & Prechtel, *The Smell of Rain on Dust.*
[198] Butler. *Frames of War*: xvii-xix.
[199] Ashworth, *Notes Made While Falling:* 47.
[200] Billy-Ray Belcourt, *This Wound is a World,* (Frontenac House, 2017): 21.

This poem leads me to a series of questions. If heartbreak can be found in what *will* have (after a certain time) happened to you, in the hidden parts of society, in something collective, in something that worlds in a very bodied way, how is grief temporally and relationally complicated? If grief is more of an enactment than a name, how does the deterioration of material practices of mourning negatively impact the expression of grief? Considering that grievability is informed by a future anterior,[201] how does a recognition of grief that will have been, grief that is, and the grief of being in a society in the same breath highlight the inadequacy of conceptualizing grief through one moment?

It is not my intention to answer these questions. I do not have the sense that these questions necessarily *can* be answered adequately. Constructing grief as an affect rather than an emotion allows for some greater theoretical space, as discussed in the introduction. It sets the stage for a recognition of grief as something that is embodied and directed from and towards something. This orientation interests me particularly when paired with questions of temporality because it presupposes an orientation from now (or the past) *to* the future. This temporality seems to be signaled by Belcourt when he writes about what "will" happen to him as a kind of grief. Additionally, grief can orient towards the past, the moments where the one that is and was so desperately loved walked by your side.

In the previous chapter, I suggested that grief could open up the possibility of doing things otherwise. Grief could be an orientation that allows for material and political changes necessary in creating a society that is sustainable and ethical. By complicating the temporal terrain of grief, what could be and what has been can both be seen as orientations from which

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[201] See above.

grief can envision things otherwise. However, unless the scope of what types of lives are recognized and accounted for in this grief is expanded, this will not be an adequate intervention. Another way of thinking about this is through how grievability relies on a sense that the life would have otherwise been lived in some meaningful way. Had fate, violence, illness, or other source not intervened – a life would have unfurled before the person with all the beauty, sorrow, and possibility that entails. If a life is not grievable, there must be a sense that no future (at least, one worth grieving) existed. Death did not cut anything short. To adequately recognize and orient from grief, that potential future must be seen.

While neither my mother nor I are Indigenous, I want to consider the temporality of that loss to highlight the possibility that precaritization is functionally opposed to a real accounting for and recognition of the nature of grief and loss. I cannot adequately represent every moment with my mom that was lost when she died. There are not words capable of encapsulating every laugh that would have filled the empty space, every touch, every hug, every word, every story… The loss of my mother was not isolated to the moment that she died but imbricated with every single moment that she would no longer inhabit. The depth of my grief reflects this reality. As such, I must believe that the precaritization of certain lives would fall apart with a recognition of the temporality of grief.

Violence

Colonization requires physical violence. This violence can be starkly seen in the epidemic of MMIWG in the settler state of Canada, an ongoing femicide that must be treated as such.[202]

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[202] Melanie McGruder, "Missing and Murdered: Finding a Solution to Address the Epidemic of Missing and Murdered Indigenous Women in Canada and Classifying it as a "Canadian Genocide,"" *American Indian Law Review, 46,* (2022):115-143.

Delineating all of the violence this settler state has perpetrated and continues to perpetrate would be impossible in a chapter; however, it is necessary to situate this violence as productive of spatial boundaries and settler imaginaries.[203] It is a violence that *does* something, discursively masking the fact that it is violence. By spatial boundaries, I refer to the way that certain types of violence keep specific people from entering certain spaces. Given that settler colonialism is about land, this spatial element reflects that prioritization. Additionally, the enactment and framing of violence allows settlers to develop certain perceptions about what Indigeneity means and what Indigenous lives are worth.

Police are uniquely figured in the reproduction of this violence that fails to be recognized as such. Police have been found to "make sense of, justify, and dismiss violence against Indigenous women, girls, and 2LGBTQQIA people" in a number of different ways.[204] Each of these techniques effectively renders the violence acceptable and inactionable.

In discussing the violence documented in photography in Abu Ghraib, Butler actively questions the intentional effects of things such as "camera angle [and] the frame of the posed subjects."[205] These photographs, in essence, determine from the beginning "what will count in the frame."[206] This reading is applicable to the way the media portrays violence against Indigenous and white women in Canada. The media portrayals mirrors police responses and justifications. The materiality of precarity is solidified in the type, or lack, of vision that is produced in locations such as the news which, in turn, creates more material precarity (as

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[203] Leslie Thielen-Wilson, "Feeling Property: Settler Violence in the Time of Reconciliation," *Canadian Journal of women and the law, 30(3),* (2018): 494-521.
[204] Jerry Flores & Andrea Román Alfaro, "Building the Settler Colonial Order: Police (In)Actions in Response to Violence Against Indigenous Women in "Canada,"" *Gender and Society, 37(3),* (2023): 398.
[205] Butler. *Frames of War.*: 65.
[206] Ibid.: 67.

evidenced by the entanglement of which lives can be saved or are even recognized as lives at all).

The case of "missing white woman syndrome," a phrase coined by Gwen Ifil to describe the oversaturation of missing white women in media representations,[207] can create a concrete understanding of livability in relation to these acts of violence. When someone goes missing, media coverage can pressure local law enforcement agencies and lead to financial or material incentives for information brought forward or the release of the missing person. Coverage additionally informs the way that the public perceives the case and the individuals involved.[208] Extensive research has demonstrated time and time again that white women are significantly more likely to be considered newsworthy when compared to other populations (including Indigenous women).[209] There are other factors that impact the value attributed to certain victims, such as socio-economic class, ability, sexuality, and even physical attractiveness that impact the value attributed to certain victims; however, race is fundamental.

Durkheim's view on crime is helpful here. According to Durkheim, crime serves to shore up moral boundaries around what is and is not acceptable within a society.[210] When Indigenous women go missing, they are often portrayed as drug addicts or intrinsically deviant.[211] In this way the moral boundary is tied to their behavior rather than the violence that they potentially experience, which stands in harsh contrast to how missing white women are portrayed.

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[207] Zach Sommers. "Missing White Woman Syndrome: An Empirical Analysis of Race and Gender Disparities in Online News Coverage of Missing Persons." *The Journal of Criminal Law and Criminology (1973-)* 106 (2), (2016).
[208] Sommers. "Missing White Woman Syndrome: An Empirical Analysis of Race and Gender Disparities in Online News Coverage of Missing Persons.": 281.
[209] Butler. *Frames of War*.: 309.
[210] Lark Chang-Yeh. "Missing White Woman Syndrome: A Historical and Sociological Look Into the Case of Gabby Petito." (2022).
[211] Ibid.

While social justice activism has made the cases of MMIWG more visible to the public, less attention has been paid by activists to violence against Indigenous men.[212] Due to a combination of gender and racial bias, it is more difficult to view Indigenous men as possible victims than it is in the case of Indigenous girls and women.[213] Aph Ko, in the United States, aptly explained how the gendered dimension of racial violence against Black men is erased by the "Eurocentric setup,"[214] which equates gender with "white women" and race with "Black men."[215] This does not allow for a recognition of how "racism *itself* is a sexual violence."[216]

While statistical data cannot create a completely accurate picture of the situation due to complications in accounting for missing people in particular, what must be recognized is that Indigenous men die violently at a rate even higher than Indigenous women and much higher than the general population.[217] The discursive construction of Indigenous men as dangerous and violent rather than people with an increased risk of experiencing violence has enabled police brutality, for example, to go largely unchecked in Canada.[218]

One example of how violence against Indigenous men is normalized can be found in the death of Colten Boushie and acquittal of Gerald Stanley. Boushie, a twenty-two-year-old Indigenous man, was murdered on a Saskatchewan farm in 2016 by Stanley. From the start, the investigation was sloppy and prejudiced. Boushie's body fell out of the vehicle he was shot in when the door was opened. His body was left there, on the ground underneath a tarp, throughout a heavy downpour of rain.[219] The interrogation of Stanley in the immediate aftermath was similar

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[212] Robert Alexander Innes, & Kim Anderson, eds. *Indigenous Men and Masculinities : Legacies, Identities, Regeneration*. (University of Manitoba Press: 2015): 3.
[213] Ibid.: 5.
[214] Aph Ko. *Racism as Zoological Witchcraft : A Guide for Getting Out*. Lantern Books: 2019: 102.
[215] Ibid.
[216] Ibid.: 105.
[217] Innes, & Kim Anderson, eds. *Indigenous Men and Masculinities : Legacies, Identities, Regeneration*.: 9.
[218] Ibid: 11.
[219] Roach. *Canadian justice, Indigenous injustice*: 72.

to a casual "chat" (as evidenced by existing transcripts and video evidence).[220] When put in contrast with the false confessions Indigenous people are often coerced into out of fear of greater reprisals,[221] this tone signals a potential sense of kinship between the police and the suspect rather than concern for the victim. In the interview, the RCMP guided Stanley towards the possible plea of self-defense.[222] Additionally, the RCMP treated Boushie's family as suspects or offenders. The RCMP maintained a casual tone with Stanley, who had just shot a young man in the back of the head. However, they accused Boushie's mother of drinking when she appeared distraught at learning of her son's death.[223]

This outrageously racist approach continued into the trial. All people recognized as Indigenous were barred from participation on the jury through peremptory challenges.[224] This meant that people who had actively experienced discrimination within the community and could, perhaps, more easily recognize the flaws of the injustice system were barred from participation from the outset. Stanley's defense largely relied on the claim that the shot that killed Boushie was a hang fire.[225] Whether or not the gun actually did malfunction in this very specific and highly improbable way is beyond the scope of this chapter. Stanley was acquitted. At this point, "[t]he Saskatchewan prosecution decided not to appeal the acquittal. The jury that rendered the verdict cannot under Canadian law explain why it acquitted Stanley either in open court or subsequently to the media."[226] From the moment when Boushie was shot for being Indigenous in

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[220] Ibid.: 73.
[221] Kent Roach. "The Wrongful Conviction of Indigenous People in Australia and Canada." *Flinders Law Journal 17,* (2015).
[222] Roach. *Canadian justice, Indigenous injustice*: 73.
[223] Ibid.: 73-74.
[224] Ibid.: 93.
[225] Ibid. (discussed throughout).
[226] Ibid.: 3.

the wrong spot to the moment when the man who killed him walked free with no reprisals, injustice and indifference characterized the settler colonial response.

The grief around Boushie's death would likely have multiple layers. The fact that he died so violently and so young is devastating. At twenty-two, he barely would have had the opportunity to discover what life could hold for him. The joys, laughter, passions, loves, and experiences that the years could have held for him will remain unrealized. The lack of reprisals and lack of recognition of the sheer scope of that loss will have in themselves caused grief. By accounting for the materiality of the conditions that shaped his death, this grief can (and has) been oriented towards social justice.

Conclusion

In this chapter, I have largely sought to create an understanding of how conditions of grief track along lines of race. In this chapter, I used settler colonialism to create a sense of one of the places where material, epistemological, and ontological violence directly impacts the materiality of life and of grief. It is important to recognize that this is not the only place where this occurs but only one example. It is likewise important to recognize that this picture of material violence is not exhaustive. However, hopefully this chapter has served to return "to a sense of… vulnerability, to our collective responsibility for the physical lives of one another,"[227] through "establish[ing] modes of public seeing and hearing that might well respond to the cry of the human."[228] In the following chapter, I will turn to the ways people vision their own grief and in doing so, I will be better able to highlight the terrain of grief.

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[227] Butler. *Precarious Life*.: 30
[228] Ibid.: 147.

Chapter Three: Haunting Knowledges and Failed Skin

As a sociological concept, the term haunting originated in the work of Gordon. In this chapter I

invest some time into demarcating Gordon's usage, how it intersects with affect, and how my

own understanding diverges. Gordon explained that haunting describes a "structure of feeling of

a reality we come to experience."[229] This is, necessarily, a symptom of "what is missing."[230]

Often, Gordon's work involves close textual readings; however, she also acknowledges and

explores the way that haunting shows up in her own life and in the lives of historical groups. In

an interview, Gordon described how her textual analysis was intended to explore:

> what mode of knowledge production could understand modern forms of dispossession, exploitation and repression and what kind of writing practice could convey, evoke, conjure those understandings in a way that took those challenges seriously? The epistemological point was first of all to center the "encounter" as an encounter. And each chapter stages this encounter at various levels – I am not the only searcher in the book. My intention was not to "assault" the reader but to bring them into the social scene of haunting where force and meaning meet and to ask them to linger there without the usual academic distancing supports, in the hope that some more sensual knowledge, or what Benjamin called a profane illumination, might emerge.[231]

As such, applying haunting to an understanding of grief is not incongruent with Gordon's aims.

Haunting, like grief, can be conceptualized as a type of affect. Ahmed defined affect as a

type of "contact: we are affected by 'what' we come in contact with. In other words, emotions

are directed to what we come into contact with: they move us 'toward' and 'away' from such

objects."[232] Haunting likewise originates in an encounter.[233] Because of the types of moments

that Gordon analyzes, she specifies she does not mean "individual loss or trauma."[234] Rather,

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[229] Gordon. *Ghostly Matters : Haunting and the Sociological Imagination*.: 9.
[230] Ibid. 63.
[231] Avery F. Gordon, Katherine Hite, and Daniela Jara. "Haunting and Thinking from the Utopian Margins: Conversation with Avery Gordon." *Memory Studies 13/3,* (2020): 338.
[232] Ahmed. *Queer Phenomenology: Orientations, Objects, Others*: xiii.
[233] Gordon. *Ghostly Matters*.: 135.
[234] Ibid.: 183.

Gordon frames haunting as "an encounter in which you touch the ghost or the ghostly matter of things: the ambiguities, the complexities of power and personhood, the violence and the hope, the looming and receding actualities, the shadows of our selves and our society."[235]

Familiar – Now Strange

In some cases, the ghostly matter of things can be found within "those singular yet repetitive instances when home becomes unfamiliar, when your bearings on the world lose direction, when the over-and-done-with comes alive, when what's been in your blind spot comes into view."[236] In the case of settler colonialism, the way that the Canadian injustice system responded to Boushie's death forced a blind-spot into view, particularly for settlers who may have been able to justify and ignore other injustices until then. As Erica Commada so persuasively articulates, "[f]or people shocked or surprised at the verdict they need to wake up and realize that this is the reality. When I heard the news Friday night, I cried myself to sleep knowing that Indigenous lives don't matter in Canada – a country that has false notions of reconciliation."[237] Of course, many people did not choose to be oriented towards this ghostly matter and, as a result, engaged in certain direct behaviors to align with and justify the direction they were already facing. In this case, Boushie was often framed as a thief and potentially violent while Stanley was framed as just "another victim of property theft."[238]

For many, this instance did not make the familiar strange, but was a continuation of a well-perceived broader pattern of injustice. For some, as indicated by the quote above, this was a

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[235] Ibid.: 135.
[236] Ibid.: xvi.
[237] Erica Commada. "Indigenous Lives Matter: Settler Allies Responsibility & Colten Boushie." *Muskrat Magazine.* (2018). https://muskratmagazine.com/indigenous-lives-matter-settler-allies-responsibility-colten-boushie/
[238] Latasha VanEvery. "The Examination of News Media Representation of Indigenous Murder Victims: A Case Study of Colten Boushie's Death." *Wilfred Laurier University: Theses and Dissertations (Comprehensive).* (2019).: 43.

jarring moment where trust in the so-called criminal justice system evaporated. The potential of

haunting to emerge from instances of becoming lost and the unfamiliar becoming strange, aligns

with Ahmed's approach to affect. Ahmed described disorientation,[239] getting lost,[240] and

generally feeling the sense of a failed orientation.[241] When we cannot inhabit spaces in the way

that we once did, suddenly we notice things that we never could have before, like the injustice

that actually defines Canadian "criminal justice." Ahmed directly considers the way that the loss

of a loved one can lead to being unable to stay on course because "love is also what gives us a

certain direction."[242]

Relationality and Haunting

In other instances, the ghost is within "*the shape described by her absence*" (emphasis in

original).[243] For example, in Argentina many people were disappeared (*los desaparecido*) in a

period of state sponsored terror.[244] "The Mothers," as the mothers of *los desaparecido* are

known, who actively engaged in political activism despite the tremendous risk,

> are the ones who understood, better than Amnesty International or CONADEP or the
> radical psychoanalysts and all the rest, what it meant to be *connected* to the disappeared,
> connected viscerally, connected through kinship, connected through a shared social
> experience. They understood this connection not because they were mothers per se, but
> because they made, as AZ begins to make, a special contact with what was missing but
> overwhelmingly present.[245]

This connection is the location from which haunting can be understood. Haunting is relational,

social, and utopic in orientation. To consider something through the lens of haunting is to

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239 Ahmed. *Queer Phenomenology: Orientations, Objects, Others.*: xvi.
240 Ibid.: xviii.
241 Ibid.: 34.
242 Ibid.: xxx.
243 Gordon. *Ghostly Matters.*: 6.
244 Ibid.: 63.
245 Ibid.: 112.

embrace that visceral-ity and the connection. It is to choose not to ignore the affective aspects of knowledge.

> To build on the concept of utopia in relation to haunting, Avery Gordon writes that To be haunted in the name of a will to heal is to allow the ghost to help you imagine what was lost that never even existed, really. That is its utopian grace: to encourage a steely sorrow laced with delight for what we lost that we never had … If you let it, the ghost can lead you toward what has been missing, which is sometimes everything.[246]

The ghost does not only indicate what was and now no longer is, but also something that "*never even existed really."* This signals that things "*could have been* and *can be* otherwise." The way things are done is not static. It is temporal and spatially oriented. Recognizing that things could have been otherwise does not mean failing to account for the way that things are, but rather, disrupting the realism that naturalizes certain form of relations as the only way things could have been or could continue to be. In his book, *Capitalist Realism: Is There No Alternative?*, he Mark Fisher explored the way that capitalism became normalized to such an extent that it is now nearly impossible to imagine a world without that mode of structuring material relations.[247] Capitalism was just one of a myriad of possibilities for how material relations could have been structured after feudalism and it is just one of a myriad of possibilities for how material relations could be structured now. Situating capitalism in time and thus disrupting that sense of inevitability is one way of envisioning a future without such destructive material relations.

Directed Hauntings

Since I am using haunting to understand how grief can direct social justice initiatives, I am going to consider here the moments where that process is relatively straightforward. My consideration of haunting did not begin with Gordon's work but rather began with reading *All My Puny*

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[246] Gordon. *Ghostly Matters*.: 58-59.
[247] Mark Fisher. *Capitalist Realism: Is There No Alternative.* (O-Books, 2009).

Sorrows by Miriam Toews while I did research for this chapter. To briefly summarize, Elfreida, the sister of the narrator, is released from a psychiatric hold and subsequently dies by suicide. The narrator, Yolandi, calls the hospital over and over again asking to speak to her sister and asking where she is because she was not supposed to have been released. Yolandi's mother confronts her, asking Yolandi if she was "trying to haunt the hospital."[248] While in ghost stories, typically it is the person who died who haunts a location or a person, in this case it was the one who has been left behind. Throughout the novel, Yolandi contends with the fact that a psychiatric wing provides such different care than a cardiac wing. Her aunt, who is in the cardiac ward, is treated with kindness, respect, and compassion, whereas her sister is dismissed by psychiatrists[249] and marked as of "little intelligence"[250] because she wants to die. Toews writes, "[i]f you have to end up in the hospital, try and focus all your pain in your heart rather than your head."[251] The injustice is what compels her to haunt the hospital. Elfrieda may always have died by suicide, but her last months could have been characterized by kindness, care, and respect.

> Eli Clare, in his titular work on cure discussed briefly in Chapter One, writes:
>
> Bear, it's been over a decade since you killed yourself, and I still want to howl. I feel anguish and rage rattling down at the bottom of my lungs, pressing against my rib cage. If ever my howling erupts, I will take it to schoolyards and churches, classrooms and prison, homes where physical and sexual violence lurk as common as mealtime. I know many of us need to wail. Together we could shatter windows, bring bullies and perpetrators to their knees, stop shame in its tracks.[252]

Sometimes, the places that led to this haunting, this injustice, are visible. The lives that are lost are identifiable and the violence that led to their loss is equally clear.

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[248] Miriam Toews. *All My Puny Sorrows.* Vintage Canada, 2018: 312.
[249] Ibid.: 174.
[250] Ibid.: 38.
[251] Ibid.: 218.
[252] Clare. *Brilliant Imperfection: Grappling with Cure.*: 63.

It is worth noting here that what Clare reflects on is a need to howl, to wail, to shatter. Imbricated with my discussion of the limit of haunting and the failures that cannot be so easily directed is the sense that some things cannot be adequately represented by words. Elaine Scarry, for example, argued that "physical pain does not simply resist language, but actively destroys it."[253] There is a physicality to grief that allows for questions about how it can destroy language. Likewise, Adichie writes, "[y]ou learn how much grief is about language, the failure of language and the grasping for language."[254] I do not intend to probe the limits of language here, but rather acknowledge that haunting can defy language even in these moments where causality can be located.

Haunting with Direction: Colten Boushie

For many Indigenous people and settlers, the affective response to Boushie's death and Stanley's acquittal was a combination of rage and grief.[255] It was/is not the grief of a single death, although that was an important part of it, it was/is also the grief for all of the Indigenous people trapped in prison cells across Canada after conviction by all white juries and judges.[256] It was/is a grief for all of the lives lost to settler colonization in the past and present.[257] This loss and the response to it made the workings of the settler colonial injustice system visible. Across Canada, people poured into the streets demanding change.[258] Largely in response to the Boushie case and other

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[253] Elaine Scarry. *The Body in Pain: The Making and Unmaking of the World.* New York & Oxford, Oxford University Press, 1985.: 4.
[254] Chimamanda Ngozi Adichie. *Notes on Grief.* Knopf, 2021: 3.
[255] Shree Paradkar. "'Justice for Colten' - Rage over a Verdict." *Toronto Star (Canada)*, (February 11, 2018).
[256] Ibid.
[257] Bill Graveland. "Colten Boushie's Mother Delivers Emotional Message as Rallies Held across Canada." *Canadian Press,* (2018). https://search-ebscohost-com.login.ezproxy.library.ualberta.ca/login.aspx?direct=true&db=rch&AN=MYO324782988418&site=eds-live&scope=site.
[258] Ibid.

cases like it, the Supreme Court of Canada has subsequently revoked the right to peremptory challenges as an attempt to address some of the ways that discrimination shows up in the criminal system.[259] This victory, while important, does not adequately address the issues that led to Boushie's death and the injustices that followed.

From Canada's inception, certain laws have been created or implemented in ways that intentionally serve to uphold the economic and political power of settlers at the direct expense of Indigenous peoples.[260] Simultaneously, the media tends to frame violence against Indigenous peoples through racialized and colonial stereotypes that help maintain this power arrangement,[261] if these cases are portrayed at all.[262] However, in the case of Boushie, the media engaged in two conflicting narratives. In the first, the shooting was portrayed as "racially motivated" and the second, "presented Stanley as a respectable family man who justifiably defended his property from criminals."[263]

Within the rallies, one could also see spontaneous forms of communal tenderness and care emerging to hold some of the grief.[264] Recognizing that grief was the dominant affect and that a very young life had been lost meant that the goal of this activism was not exclusively to effect meaningful change but also to hold the community. The absence of mourning rituals is detrimental to communities,[265] and creating such a public space to grieve and receive communal care by those able to provide it reveals an additional reason to embrace haunting in activism. In

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[259] See: https://www.scc-csc.ca/case-dossier/cb/2021/39062-eng.aspx
[260] VanEvery. "The Examination of News Media Representation of Indigenous Murder Victims: A Case Study of Colten Boushie's Death.": 9.
[261] Ibid.: 12.
[262] Ibid.: 18.
[263] Ibid.: 29.
[264] Alex McKeen. "Thousands Gather to Protest Verdict." *Toronto Star,* (February 11, 2018). https://search-ebscohost-com.login.ezproxy.library.ualberta.ca/login.aspx?direct=true&db=rch&AN=6FPTS2018021144962254&site=eds-live&scope=site.
[265] Prechtel. *The Smell of Rain on Dust: Grief and Praise.*

previous sections, I directly explored how haunting is imbricated with the responses to Boushie's death.

Additionally, as grief sometimes shows up as anger, recognizing the value of anger in these instances is revelatory. In the words of Lorde, "[e]very woman has a well-stocked arsenal of anger potentially useful against those oppressions, personal and institutional, which brought that anger into being. Focused with precision it can become a powerful source of energy serving progress and change."[266] As I consider grief that cannot easily be directed towards social justice, this sense of affective energy helps center additional potential value.

Hauntings with No Place to Go

In this section, I divest from Gordon's usage of haunting. Gordon did not have a sense that her consideration was the only appropriate application of this theoretical concept.[267] As I am considering what knowledge is encapsulated in grief in terms of social justice and in terms of what it means to be a human more broadly, this extension constitutes an exploration of how complicated it is to be haunted and to not have the means to understand or improve the material conditions. It is possible to feel haunted, to feel disoriented and the pang of something being desperately unjust yet to have no means of redressing the situation.

In *Wave: A Memoir*, Sonali Deraniyagala chronicles a different kind of haunting. Her parents, husband, and two children died in a tsunami that also swept her away. Her brother decides to rent out her parents' house out of necessity, however the loss of her childhood home in this time of tremendous loss and trauma is too much for Deraniyagala to bear. She "smash[es]

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[266] Audre Lorde. "The Uses of Anger: Women Responding to Racism."
[267] Gordon, Hite, and Jara. "Haunting and Thinking from the Utopian Margins: Conversation with Avery Gordon.": 339.

[her] head on the wooden frame of the bed after he told [her] this. Again and again [she] bit [her] arm."[268] Deraniyagala returns to the house many times blasting "There is a Light That Never Goes Out" by the Smiths and pounding on the gates.[269] She phones the new owners late at night and "mak[es] sinister noises when the phone was answered."[270] Her relatives and friends worry that she is "driving [herself] insane,"[271] but Deraniyagala feels a relief in this "chance to act as if deranged."[272]

Like Deraniyagala, I haunted myself after my mother's death. My anger and sorrow were excruciatingly captured in my relationship to myself. Perhaps, it seemed that to externalize these particular affects could lead to greater loss. I had already lost my mother, what more could I stand to lose? I also felt that I deserved to feel this way and to treat myself in a certain way in response to those feelings because I had not been there, had not saved her, had not loved her well enough, had not taken her pain into myself instead of letting her live with it, had not realized the severity of distress she was under, had not responded to her last text message, had not...

This type of haunting can also be seen in the experience of Michelle Zauner, who writes while her mother dies of cancer that "[n]ow, more than ever, I wished desperately for a way to transfer pain, wished I could prove to my mother just how much I loved her, that I could just crawl into her hospital cot and press my body close enough to absorb her burden."[273] While Gordon identifies a utopic potentiality in haunting, it is also a failure that cannot be easily controlled.

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[268] Sonali Deraniyagala. *Wave.* Vintage, 2013: 52.
[269] Ibid.: 53.
[270] Ibid.: 54.
[271] Ibid.: 54.
[272] Ibid.: 54.
[273] Michelle Zauner. *Crying in the H-Mart.* (Knopf, 2021): 89.

A Failure of Skin

Judith Butler writes, "[i]t is not as if an 'I' exists independently over here and then simply loses a "you" over there, especially if the attachment to 'you' is part of what composes who I am."[274] One of the primary failures that is elucidated by grief is the failure to be an adequately sovereign and disentangled subject. It is a failure that reveals a porosity that has long been derided and located in female bodies.[275] Even when, perhaps, inadequately oriented for social justice purposes, this is a revelatory place from which to understand the world.

Didion describes the way that, "[p]eople who have recently lost someone have a certain look, recognizable maybe only to those who have seen that look on their own faces. I have noticed it on my face and I notice it now on others. The look is one of extreme vulnerability, nakedness, openness."[276] Chimamanda Ngozi Adichie observed that, "I have mourned in the past, but only now have I touched grief's core. Only now do I learn, while feeling for its porous edges, that there is no way through."[277] In analyzing Luisa Valenzuala's book, *He Who Searches,* Gordon writes, "AZ is afraid. Afraid of "falling apart," afraid of "becoming one with her in this room," afraid of "exploding and spattering all four walls.""[278]

There is a knowledge about what it means to fall apart, as analyzed below, encapsulated in each of these passages. To experience profound loss and the grief that follows is to also lose the boundaries that neoliberalism suggests should protect you from the world. It is terrifying and rightly so. Less than a year after my mother died, I wrote:

> I feel this strong level of openness with the world, like I have been transformed into a membrane and everything flows in and out of me. With no protective covering all that I am lies exposed and the emotions of those around me have profound effects on my own

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[274] Butler. *Precarious Life: The Powers of Mourning and Violence:* 22.
[275] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.
[276] Didion. *The Year of Magical Thinking.*: 76.
[277] Adichie. *Notes on Grief.*: 6.
[278] Gordon. *Ghostly Matters:* 102.

experience. It is strange because I think somehow this makes me capable of more love. Deeper love. Because while I want to be heard, to be validated in my experience, I also desperately want to hear. (January 3, 2019).

While in the moment that I wrote this particular journal entry, I identified something positive about the feeling of openness, generally the sense of not having a protective covering felt dangerous. Within a couple months of my mother's death, my father did not respond to an email as quickly as I felt that he normally would, and I spent hours contemplating the reality that all of the places my heart lives are out there, out in the world. Anything could happen to anyone at any moment. My dad could be dead or hurt and I could do nothing about it. My agoraphobic tendencies that are identifiable in moments of emotional distress dictated that to be safe from harm, I needed to stay within the boundaries of my home. I needed to control the environment to keep my body from the potential violence of external actors. By shutting out the world, the sovereignty of my body could no longer be intruded open. Yet, now, in the grip of profound loss, I realized this was inadequate because my heart was never just in my own body. As Butler so meaningfully articulated, sometimes the "you" is also a part of who "I" am.[279]

My desire to maintain control, to maintain my boundaries, to be untouchable, melted down in the reality that those I loved would be out there. My own intense fear makes the Victorian fear of porous skin[280] read with a specific tenor. Perhaps locating porousness in specific bodies (not one's own) reflects an internal desire to be self-sufficient and safe from the kinds of harm to which porosity can lead. If what it means to be alive is to be unbounded and penetrable, how does anyone cope? If, as Ahmed writes, "[t]he skin connects as well as contains,"[281] what happens when the containment function is perceived as inadequate? As

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[279] Butler. *Precarious Life: The Powers of Mourning and Violence:* 22.
[280] Lennartz. *Tears, Liquids and Porous Bodies in Literature across the Ages: Niobe's Siblings*.
[281] Ahmed. *Queer Phenomenology: Orientations, Objects, Others.*: 30.

Julietta Sing explained, "[m]olecular we spread into the 'outside' world, mingling with it in ways that are not apparent to us."[282] If it is not apparent, not well understood, not controllable, the mind-body distinction becomes irrelevant to the point of silliness.

Other types of violence, both external and internal, are interlocuters with my thoughts on this particular question. When I developed asthma as an adult after having pneumonia month after month over a period of a year, the fragility of breath and everything tied to that were starkly visible. A walk from the couch to the bathroom and back again could result in hours of gasping. The steroids prescribed for this made me agitated, sleepless, unable to eat, and made chunks of my hair fall out. My sense of control over my body came under question because no amount of will could make my lungs capture the air that was all around me. Much like Julie Devaney, confronting this reality meant that I would "have to accept my vulnerability, my lack of control over the situation. And this is not just humbling; it's more emotion than I even know how to process."[283]

Describing a particularly difficult flare up of ulcerative colitis, Devaney writes, "[t]his back-and-forth lets me out of the truth: I have no control of this leaky mess. My body is doing what it's doing, and I have no idea what it means, what happens next, or how to stop it."[284] Similarly, Jenn Ashworth recounts the madness that followed a severe medical crisis:

> Another symptom that belongs in this category of weak skin and strange thoughts (it is because my skin is weak that the strange thoughts are getting in: I've gone leaky, my border control policy needs tightening up): I have got to avoid knives and scissors and sharp things, which makes me useless in the kitchen.[285]

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[282] Sing. *No Archive Will Restore You.* 3Ecologies Books: 2018.: 30.
[283] Julie Devaney. *My Leaky Body: Tales from the Gurney.* (Goose Lane Publications: 2012).:123.
[284] Ibid.: 41.
[285] Ashworth. *Notes Made While Falling.*: 14.

As evidenced by my brief acknowledgment of the suicidality that followed my mother's death, I identified something quite similar to what Ashworth is saying here. My lack of adequate boundaries was, in some sense, a failure of skin or, if not directly a failure of my skin itself, it was a failure of ability to be contained by skin.

In recent critical disability studies scholarship, questions of what it means to be porous and leaky have been taken up in a variety of ways. The pathologization of certain forms of grief highlights the possibility that it too could be understood alongside these crip knowledges. Additionally, the physicality of early grief and sense of madness solidifies this connection. When I learned my mother died, I pushed open the door at work. I fell into the snow and my lungs became raw with tears, sobs, and screams that may or may not have existed outside my body. My ability to eat, breathe, and perform other basic bodily functions all but disappeared in those early months. Didion writes, "[p]ersons under the shock of genuine affliction are not only upset mentally but are all unbalanced physically. No matter how calm and controlled they seemingly may be, no one can under such circumstances be normal."[286] Adichie writes, "[m]y breathing is difficult. Is that what shock means, that the air turns to glue[…?],"[287] and "[e]nemies beware: the worst has happened. My father is gone. My madness will now bare itself."[288]

Toews writes, "I smell fear and realize that it's coming from me. It feels like I don't have quite enough skin, that parts of me that should be covered are exposed. And we hold on to each other for longer than usual."[289] What if ontologically reorienting towards this admittedly messy and unbearable affective location reveals an ethical responsibility to engage in forms of care that neoliberalist ways of thinking too easily dismiss? The abjection of grief *does* something but so

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[286] Didion. *The Year of Magical Thinking.*: 58.
[287] Adichie. *Notes on Grief.*: 3.
[288] Ibid.: 9.
[289] Toews. *All My Puny Sorrows.*: 104.

too does the *un*abjection or re-integration of grief. By bringing grief to our understanding of the social world, maybe additionally it could locate ways of holding each other longer than usual.

Conclusion

My heart still aches daily for not seeing the depth of my mother's pain. I try not to haunt myself anymore but my grief for what I have lost, and my recognition of the complete and devastating vulnerability everyone is defined by, means that I must ontologically understand the world and my body in it differently. This is not prescriptive, but rather a potential space to develop an understanding that fails at neoliberalism but fails with such possibility. Living beings are not disjointed and fully separated. Different possibilities for ethical engagement with one another, as humans and beyond, seem built into this ontological perspective. While this is beyond the scope of this chapter, questions on how care can structure ethical relationships have been meaningfully approached in feminist studies.[290] These approaches could prove instrumental in moving this consideration of grief into the realm of practice.

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[290] For one example see: Carol Gilligan. *In a Different Voice: psychological theory and women's development.* (Harvard University Press, 2003).

Conclusion

Grief is universal, found in human and more than human animals. Yet, how we understand grief and practice mourning is not natural. Through a historical analysis and an exploration of settler colonialism, I developed a sense that the way grief is understood and operationalized is materially and historically situated. I considered the way that neoliberalism, as an economic system, contributed to the development of normative understandings of what the ideal human looks like (rational and productive) that are directly at odds with how grief tends to manifest in mind-bodies and with grief's ontological possibilities. Additionally, I asked what the material precarity of Indigenous lives under settler colonialism means for grief. When certain lives are materially and discursively produced as less livable, there are political and ethical consequences that directly intertwine with grief. This was the primary focus of Chapter Two.

Yet even though grief is currently abjected, it can haunt and teach people. At times, this is direct: a death is the consequence of an injustice and requires action. There are some circumstances where grief does not provide a social justice impetus but even in these cases, it is communicating something valuable about the nature of being. Namely, people are never fully individuated but are deeply entangled with the lives around us. While I primarily focused on human lives, further consideration could be paid to what grief could teach humans about being in relationship with non-human animals and the environment.

As such, I conclude by asking what kind of conditions would allow for space to mourn and the realization of grief in all its potential? Grief requires an acknowledgement of the value of each life and an equalization of the conditions of morbidity and mortality that otherwise precaritize the ability to grieve alongside the ability to live. Additionally, embracing the

porousness and fluidity of being alive could lead to new forms of mourning rituals. This would

require different kinds of community than those valued under the conditions of neoliberalism.

Jenn Ashworth writes:

Because then she said. 'I am inside it,' and I nodded at the screen,
Yes, I wanted to tell her. Yes, you are. Me too. How precarious we all are. And how to
bear it? There's no shame in not being able to bear it, only the relief to be found in
knowing – and the sharing of the knowing – that we are unable to. We are still falling and
our eggshell selves have not hit the concrete yet, but at least we have a moment or two to
attend to the drop. I wanted to say that: it still hurts and I don't feel normal. I wanted to
say that maybe mid-air could become a good place to write fiction for people like us.[291]

While I am not writing fiction, I wonder about the possibility of acknowledging the eggshell and

watery nature of what it means to be alive. What could be understood by attending to the

affective moments that haunt us, as humans? What is to be learned through the affective relief

identified by Ashworth at the recognition of shared fragility? I began this thesis by saying that

something is rotten in the state of Canada where grief is concerned. I end with another reference

to William Shakespeare, "we know what we are but not what we may become."[292]

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[291] Ashworth. *Notes Made While Falling.*: 194.
[292] William Shakespeare. *The Tragedy of Hamlet, Prince of Denmark.* (The Folio Society, 1954): Act 4, Scene 5.

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