

Trinity University

Digital Commons @ Trinity

---

Sociology & Anthropology Faculty Research

Sociology and Anthropology Department

---

9-1990

## Religion and the Body: Rematerializing the Human Body in the Social Sciences of Religion

Meredith B. McGuire

Trinity University, mmcguire@trinity.edu

Follow this and additional works at: [https://digitalcommons.trinity.edu/socanthro\\_faculty](https://digitalcommons.trinity.edu/socanthro_faculty)



Part of the [Anthropology Commons](#), and the [Sociology Commons](#)

---

### Repository Citation

McGuire, M. B. (1990). Religion and the body: Rematerializing the human body in the social sciences of religion. *Journal for the Scientific Study of Religion*, 29(3), 283-296. doi: 10.2307/1386459

This Article is brought to you for free and open access by the Sociology and Anthropology Department at Digital Commons @ Trinity. It has been accepted for inclusion in Sociology & Anthropology Faculty Research by an authorized administrator of Digital Commons @ Trinity. For more information, please contact [jcostanz@trinity.edu](mailto:jcostanz@trinity.edu).

# Religion and the Body: Rematerializing the Human Body in the Social Sciences of Religion\*

MEREDITH B. McGUIRE†

The social sciences of religion could be transformed by taking seriously the fact that humans are embodied. A new conceptualization of a mindful body has the potential to lead to profound shifts in how we view our subjects and their worlds. Our research strategies need to take into account that believers (and nonbelievers) are not merely disembodied spirits, but that they experience a material world in and through their bodies. Greater awareness of the social and political uses of human bodies should guide our research and theory.

**T**he human body probably seems like the most unlikely imaginable theme for a presidential address to this society, but this focus may lead us to some considerations that are central to social sciences and to religion today. Let me begin with an apocryphal creation tale:

The Lord was planning for life on earth one day. She'd already done the mountains and streams part, and finished birds, beasts, flowers, and veggies, sunrise and sunset — lots of work — and the Lord saw that it was good.

Now the Lord was concerned that the arrangements for human life should be just perfect, so She summoned all the top angel social scientists of religion for consultation [and in heaven, social sciences of religion have a lot more respect than we're used to, so there were plenty of highly trained experts to consult].

The conference lasted for weeks, and the Lord had to jettison the plan to have the whole job done in less than seven days. Angel social scientists presented an entire detailed proposal, anticipating human opinions and beliefs, human emotions and attitudes, human social organization and roles — every theme ever raised in the *Angel Journal of Social Sciences of Religion*.

The Lord seemed impressed by much of the proposal but kept having difficulty envisioning some central aspects about what humanity was going to mean. At first, the angels thought maybe the problem was social science jargon, but then they reminded themselves that the Lord's omniscience could overcome that obstacle. So, maybe something was omitted from the plan.

Finally, the Lord said: "Colleagues, these ideas are very promising. These findings about humans having opinions, attitudes, values, and ideas are certainly going to be useful. Something seems to be missing, though; it all seems a little unreal — and I want this earth project to be real. So, what if — I mean, try to imagine for a moment, just what if these humans had *bodies*???"

Now that is a key question for us: *What if people — the subjects of our research and theorizing — had material bodies?* Present social science conceptions of our subjects are peculiarly disembodied. Whether we are analyzing individual believers or religious organiza-

\*Presented as the Presidential Address to the 1989 meetings of the Society for the Scientific Study of Religion.

†Meredith B. McGuire is a professor of sociology and anthropology at Trinity University, San Antonio, TX 78212. She is immediate past president of SSSR.

tions or religious ideas, the relationship of humans to their own bodies and to the bodies of others is remote or altogether absent from most of our work. How might our understanding of religion be different if we proceeded as though the people involved had bodies?

This brief sketch of some connections between religion and the body is meant to *make the body matter* in two senses of the word. First, the body should be an important component of our consideration of social aspects of religion. Bodies are important; they matter to the persons who inhabit them, and religions speak to many of these body-oriented human concerns. Part of the reason our bodies matter to us is that we strongly identify our very selves with our bodies. We experience things done to our bodies as done to our selves.

Our *agency* as active personae in society is accomplished through our bodies. Merleau-Ponty (1962:37) has reminded us, "Consciousness is in the first place not a matter of 'I think that' but of 'I can'." Thus, loss of that agency (for example, through disability, enslavement, or repression) is experienced as a fundamental assault upon our selves.<sup>1</sup> Because of this intimate linkage, attention to how people's bodies matter to them can give social scientists valuable clues to the nature of the connection between individual and society.

Second, bodies *are* matter. The material reality of our bodies is part of the grounding of human experience in reality: The "lived" body is our vehicle for perceiving and interpreting our world. As material reality, human bodies also vividly experience the material conditions of social existence. Society inscribes itself upon the concrete bodies of its members. For example, it is not abstract lungs that are filled with fluid after years of working in a textile factory; nor is it merely an idea of a famine-stricken child who dies of malnutrition and dehydration.

Because bodies are matter in this second sense of the word, they are linked with other material realities. Let us remind ourselves that real bodies conceive, bear, and nurse children. Real bodies suffer illness, pain, chronic disabilities, and death. Real bodies experience hunger and cold. Real bodies also experience pleasure — aesthetic pleasures, sexual pleasures, and sensuous pleasures, such as the embrace of a friend, a view of a breathtaking sunset, the sound of a lullaby, a gentle caress, the aroma of fresh bread. Real bodies labor and are shaped by their work, whether by the constraints of the mine shaft or the video display terminal, whether by toxic chemicals or the stressful workplace. In addition (and this is also relevant to an understanding of religion in the world today), let us remember that real bodies are victims of abuse, torture, and war. As social scientists of religion, we could greatly expand the depth of our understanding of society if we were to "re-materialize" the human body.

Our discipline has been impoverished by the fact that it has been so heavily influenced by an epistemological tradition, itself a cultural and historical construction, in which things of the spirit have been radically split from material things, and in which mind is considered separate from body.<sup>2</sup> We have neatly divided our subdisciplines along the lines of this

---

1. Note that Giddens's (1984) structuration theory also emphasized the importance of the active embodied subject (i.e., "agency"), reflexively engaged in concrete social / spatial / temporal contexts.

2. See Gordon 1988, for a succinct discussion of the impact of Enlightenment naturalism on contemporary Western societies' operant cosmologies and ontologies; see also Comaroff 1982; Schepper-Hughes and Lock 1987; Kirmeyer 1988; Osherman and Amara-Singham 1981.

dualism: The “mind / spirit” part goes to the social scientists and religious studies scholars, while the “body” part (translated by some as “really real”) goes to the biologists and medical scientists. It is counterproductive for us, individually and professionally, to continue to accept uncritically the assumptions of this mind / body dualism. Rather, let us assume that the human body is both a biological and a cultural product, simultaneously physical and symbolic, existing always in a specific social and environmental context in which the body is both active agent and yet shaped by each social moment and its history. To remind us of this unitary quality, Schepper-Hughes and Lock (1987) have referred to it as the “mindful body.” We must reconceptualize mind, body and society, not as merely connected, but indeed as deeply interpenetrating, meshed as a near-unitary phenomenon.

This essay is but a brief sketch of some suggested directions for how the social sciences of religion might come to a better appreciation of this mindful body. These suggestions are here organized along three broad themes:

- 1) the body’s importance in *self-experience* and self’s experience of others;
- 2) the body’s role in the production and reflection of *social meanings*;
- 3) the body’s significance as the subject and object of *power relations*.

These three themes draw from various theoretical approaches, with diverse epistemological assumptions, but collectively they suggest both the importance of considering the mindful body and some possible directions for future inquiry.

This preliminary agenda indicates aspects of special importance for the scientific study of religion, for we are already keenly interested in religion’s relationship to individual selves, to socio-cultural meanings, and to the theme of power.

### THE BODY AND SELF EXPERIENCE

The living body is our fundamental phenomenological basis for apprehending self and society. Each person’s body as it is concretely experienced, as it is “lived,” is fundamentally different from the body as it is objectively observed (cf. Schrag 1979). For example, my hand, as a part of me, is not the same as the entity which my doctor sees when observing it for signs of injury; it is not the same as the object of my music teacher’s attention when advising about my fingering; it is not the same as the object of my students’ attention when I am writing on the chalkboard. My hand, as an integral part of the living body, is identified with my self. As Marcel (1952:315) emphasized, “I do not make use of my body. I *am* my body.” We experience actions done to our bodies as done to our very selves.

Our bodies are manifestations of our selves in our everyday worlds. At the same time, embodiment is our way of knowing those worlds and interacting with them. Through our bodies, we see, feel, hear, perceive, touch, smell, and we hold our everyday worlds. While each individual is uniquely embodied, the experience is also profoundly social. For example, our experience with our bodies is mediated by learned roles and other expectations; it is shaped by the immediate social context, as well as by historical antecedents of which the individual may not even be aware; and it is apprehended and communicated indirectly through language and other cultural symbols.

If we abandon our dualistic notions of how humans relate to their worlds, we should consider the possibility that the body has a direct role in *knowing* (see Csordas forthcoming). Exploring the somatic component of ways of knowing may give us a better approach for understanding alternate states of reality, religious healing, the effectiveness of ritual, and such spiritual modes of knowledge as “discernment,” “prophecy,” “anointing,” and so on. For example, a number of years ago, a colleague of mine, Peter Freund, was studying some of the somatic features of meditation in the Divine Light Mission. He was frustrated that, as a sociologist, he could not deal with “premises’” reports of actually tasting spiritual “nectar” and seeing lights during meditation, without implicitly disconfirming the somatic reality of those experiences.

My examples of how our understanding of the body and self-experience might inform our analysis of religion are drawn from two very disparate fields: (a) the study of illness, pain and suffering, and (b) analyses of gendered bodily experience.

### *Illness, Pain and Suffering*

My focus on the body as a matter of sociological interest grew out of my study of ritual forms of healing, such as Christian or psychic or Eastern forms of religious healing. These healing groups utilized body rituals as ways of transforming their selves.<sup>3</sup> Consistent with its underlying Cartesian dualism, Western medicine treats illness as a pathological condition of the body; illness for which no physiological pathology can be identified is often assumed to be psychosomatic, practically translated as “all in the head,” and therefore is treated as fundamentally unreal. Because these paradigmatic “blindnesses” are so thoroughly learned in medical training, many doctors are unable to deal with their patients’ experiences of illness, pain, and suffering and so they subsequently disconfirm those experiences.

Suspending the dualistic approach of biomedicine, we find that illness is a profoundly human experience. It calls into question normal expectations about our bodies and capacities. When illness is not part of our life, we take the relationship between our bodies and our selves for granted. Indeed, we are not likely to think about our bodies or to be particularly conscious of many bodily sensations. In health, we expect our bodies to be able to function, to sustain a presentation of our selves as normal, reliable participants in social interaction (Dingwall 1976:98). What we call “illness” is a disturbance in body processes or experience that has become problematic for the individual.

The experience of illness, even if only temporary, reminds us of our limitations, our dependencies (present and potential), and our ultimate mortality. Our bodies inform us that they cannot always be counted on to be “able” for what we want them to do. Since our important social relationships, our very sense of who we are, are intimately connected with our bodies and their routine functioning, being ill is disruptive and disordering. We identify our selves with our bodies, as exemplified by one injured person’s introspective account:

What seemed, at first, to be no more than a local peripheral breakage and breakdown now showed itself in a different, and quite terrible, light — as a breakdown of memory, of thinking, of will — *not just a lesion in my muscle, but a lesion in me*” (Sacks 1984:67; emphasis in original).

3. Similar transformation of the body-self can be seen in the ritual process of the pilgrimage, which is a bodily transition in space and time (see Frankenberg 1986).

Most everyday illnesses are not profoundly disruptive, although they, too, remind the sufferer of personal limits and dependencies. Other illnesses, however, are deeply disruptive, threatening important relationships, the individual's exercise of personal agency, and the ill person's very sense of self. Several features of such disruptive illness highlight the intimate connection between body experience and sense of self (see Murphy 1987).

*Loss* is one factor that can make an illness experience profoundly disruptive. People actively grieve, because the loss of body parts (e.g., amputation of an arm) or body functions (e.g., partial blindness) represent a loss of integrity, a disruption of the wholeness of the person (Cassell 1982). People suffer, not only from loss of present capacities and roles, but also from being robbed of their future: the teenager who is paraplegic after a car accident, the young and childless woman who has a hysterectomy, the elderly musician whose arthritis makes playing a beloved instrument impossible.

Chronic illness and pain, in particular, force the sufferer to come to new terms with *time*. Sometimes life-threatening acute illness or a serious accident has this kind of impact, but acute illness is by definition temporary. Chronic illness often leads to a radical reassessment, in light of changed and yet-changing capacities, of one's self in relationship to past and future. The experience of chronic illness involves both a sense of loss and a heightened self-consciousness (Charmaz 1983, 1987). Chronic pain poses basic problems for the sufferer's sense of self. Unlike acute pain, chronic pain is a "somatic reminder that things are not right and may never be right. This reminder, phenomenally situated in one's own body, is inescapable" (Hilbert 1984:370). The body as subjectively experienced is transformed into an *object with pain*, resulting in a form of alienation from one's own body. In one "moment one is one's body; [in] the next one has a body" (Bergsma 1982:111).

Illness is also especially damaging to the self when it is experienced as *overwhelming, unpredictable* and *uncontrollable*. Such illness paralyzes the person's ability to manage life, to plan, to act — in short, to exercise agency. Enormous attention must be given, not merely to actual crisis periods in the illness, but also to such minute, mundane worries as: "Can I negotiate the path from my car to the store?" (cf. Kleinman 1988:44). Unpredictability and uncontrollability result in a disjunction between the person and the body; the taken-for-granted functioning is gone and the person experiences, in effect, "I cannot count on my body; 'it' fails me." The body becomes "other," at best an unpredictable ally.

Such experiences of suffering, pain, and illness are not merely "in the body" or "in the mind or spirit"; rather, they are experienced by the whole person as assaults on the self. For this reason, many attempts to identify and measure a person's "well-being" are obfuscated by the extent to which an individual's phenomenal "being well" involves a complex interface of such emotional and social influences in that persons' very bodily experiences.

If we approach pain and suffering from the perspective of Cartesian dualism, we end up with an image of *religious responses* as epiphenomenal add-ons, something the mind was doing after the body was suffering. This perspective has led to a sociology of religion which has focused exclusively on ideas about the body and its suffering: e.g., theodicies (a highly useful concept, but limited by its idealistic assumptions). If, by contrast, we have an image of a mindful body, then spiritual responses may be simultaneously part of the mindful-body responses to pain and illness. Thus, we can better understand the impact of religion on the body itself, not just on ideas about the body.

### *Gendered Bodies*

If our bodies are important in our self-experience, how does it affect my being that I am embodied in the world as a female rather than as a male? Biologically deterministic answers to this question result in incredible, simplistic pictures of “engendered” bodies. Probably only minimal aspects of self-experience are derived solely from biological factors, exclusive of cultural and historical influence. There are very few (if any) self-experiential features, characteristic of all women in all cultures and times, which they share by virtue only of their being embodied as females, and which no men share due to their embodiment as males (Gerber 1979). Culture shapes even experiences of biological events such as childbirth and menopause; the fact of female embodiment is not sufficient to predict the individual’s experience of self even during such intensely biophysical processes.

On the other hand, gender is not irrelevant to one’s self-experience. All features of our embodiment affect our interaction with our social and physical environments. For example, if my body is extremely thin, or if I am exceptionally beautiful, if I am missing a leg, or if I have brown skin, if I cannot see, or if I am tall — all such features of my embodiment affect how I interact with my world and, indirectly, my self-experience. However, as the above examples of experiences of pain and illness show, the influence of this embodiment on people’s self-experience is not simply a matter of individual variation. If my culture teaches its members to respond to blue-eyed persons as highly valued, and I happen to be embodied as blue-eyed, then I have a disproportionate likelihood of experiencing my blue-eyed self as valuable, as honored. Likewise, if my culture holds that femaleness is dangerous, polluting, ensnaring, and I happen to be embodied as female, then my self-experience is likely to be influenced by this cultural evaluation. Note that it is not just that I have an *idea* of negative values about women; rather, to the extent that I have internalized these interpretations, I experience them as part of my experience of *my own body, my own self*.

As influential as these socially constructed gender valuations may be, however, they are not fixed or deterministic. Rather, social constructions of gender are fluid, and the power to control the reconstruction of “engendered” embodiment (for instance, in the context of changing contemporary societies) is specifically *political power* (as described further below; cf., Bourdieu 1977:165-168). One good place to begin an appreciation of that social reconstruction is precisely the realm of emerging religious ritual, myth, and narrative (Cooley 1989). Some interesting research in women’s studies and religion is investigating these attempts to reconstruct integrations of body-mind and culture-nature. Thus, it is tackling central issues, not just quaint little peripheral topics for separate sessions at professional meetings.

### THE BODY AND SOCIAL MEANINGS

Our discipline has been aware, at least since Durkheim, that human bodies are important symbols of cultural and social structural meanings. Body symbolism is important in our cosmologies. Similarly, imagery drawn from the body — its parts, its postures, its functions — is linked with conceptions of the self and its relationship to a larger material and social environment.

Numerous anthropological studies have revealed that often the bodily localization of a particular illness represents culturally meaningful idioms of distress. For example, when an Iranian woman complains of a "pressed heart," her expression of distress is linked with a larger set of social concerns: infertility, attractiveness, sexual intercourse, pollution, old age (Good 1977). There exists also a substantial literature on body imagery, as linked with body boundary conceptions, distortions in body perceptions, perceived locus of control, and so on. Little of this literature has, however, been brought to bear upon the study of religion, perhaps because so much of the focus was upon psychopathological situations assumed to be irrelevant to normal religiosity.

Some 15 years ago, a minor study attempted to identify the salience of traditional Christian body symbolism for a sample of hospitalized persons diagnosed as schizophrenic and for a presumably normal sample. The analysis foundered, due primarily to the author's incorrect assumption that the social meanings of Christian body symbolism could be derived deductively from theology. Nevertheless, some of his conclusion is probably accurate: that none of the traditional Christian body symbols, as defined in their theological purity, holds strong salience for contemporary believers, whether schizophrenic or not (Ruth 1974).

While this finding probably surprises no one, we should not be too quick to assume that therefore no body symbolism or personal body imagery has powerful significance for modern Westerners. Indeed, the prominence of body imagery in media advertizing, in the culture of fitness, in the worlds of popular music, literature, sport and art, all suggest that body symbolism and personal body imagery are of central importance in understanding modern social structure, culture, and personality. Religious and quasi-religious themes are clearly important in this symbolism.

Symbolic and structuralist anthropologists have considered the human body, its parts (e.g., specific organs), and products (e.g., tears, milk, blood) to be something of a cognitive pattern or map, representing important social relations. Mary Douglas (1966, 1970) has reminded us that the body is a "natural symbol" which can be used metaphorically at several levels of meaning simultaneously. She observed how concerns about the body frequently are metaphors for social concerns, such as order and boundary maintenance.

The cosmology of the Qollahuayas of the South American Andes exemplifies this metaphorical linkage of the social body with the individual body. This people identifies the human anatomy with their mountain environment; both mountain and body have head, chest, breast and nipple, heart, stomach, feet, etc. Illness is attributed to disruptions between people and the land; social conflicts between, for example, the residents of the heart and the residents of the feet must be resolved by healing, a ceremony by which concerned members ritually feed and restore wholeness to the mountain and thus to the group (Bastien 1985).

In a similar vein, Victor Turner (1968) observed that the healing rituals of the Ndembu tribe of Africa acted upon the body of the afflicted metaphorically to heal social conflicts in the larger social group. My own research on spiritual healing among middle-class American suburbanites found remarkably similar metaphorical linkages between individual bodies and social bodies. Healing results were often accomplished through the actual practice of a metaphorical connection or transition. For example, in a Jain yoga and meditation group, the metaphor of a well person as a firmly grounded, erect, and balanced

tree was literally effected through the practice of the "tree pose" (McGuire 1988).

A larger part of the effectiveness of the social meanings of the body is that they do not need to operate at the level of consciousness. In socialization, the individual acquires, to some degree, what Bourdieu (1977:124) has called "a socially informed body," which is structured by its learned tastes and distastes. Its socially shaped senses include not only such senses as smell or touch, but also the sense of beauty, business sense, sense of propriety, moral sense, sense of humor, sense of the sacred, sense of responsibility, and so on. For example, in America, the socially informed body senses both the distinctive odor of the underarm and the culturally appropriate revulsion to it. Similarly, the socially informed body experiences not only the bodily sensation of a burn, but also the culturally shaped sense that this is pain.

As socially constructed reality, however, these senses, along with their practical use in everyday human life, are open to change. Since traditional Western body schemata are no longer taken for granted as givens, a struggle over the power to define these symbols is evident. Bourdieu (1977:165) has reminded us, "The specifically symbolic power to impose [such] principles of the construction of reality . . . is a major dimension of political power."

Religion has historically had a prominent role in such symbolic power. Contemporary official religion enjoys far less power in shaping today's "socially informed body," but religions and quasi-religions are still very much involved in the struggle for symbolic power, and specifically over the meanings of the body and its senses. Good examples are the meanings proffered (both as ideas and as "senses") by such diverse movements as New Age religions, the anti-abortion movement, movements for alternative women's spirituality, Creationism, and the Green movement.

Consistent with our aim of re-materializing the body, however, we must remember that body ritual is not merely the manipulation of abstract symbols derived from the body. Rather, it is always produced in the context of specific ecological, economic, and social conditions (Bourdieu 1977:113ff.) — thus its political significance and its potential role in social change, as well as in social stability. So the social meanings of the body are necessarily linked with the political body.

### THE BODY AND POWER RELATIONS

The expression of specific power relationships in body terms, as illustrated by the writings of ancient and medieval philosophers, is a very old practice. An impressive example of the political uses of body imagery is the medieval fiction of the king's two bodies (one being natural and subject to passions and death, the other being the body politic). Accordingly, the king was incorporated as head with his subjects in the body politic, which was not subject to death or passions (see O'Neill 1985:67-90). In these political uses of the body, religion often figured importantly as a legitimating force for the exercise of power and privilege.

The social sciences of religion have, from the classical formulations of Freud, Marx, and Weber to the present, focused primarily upon religion's role in the *social control* of the body. Much of this theorizing, however, has been flawed by assumptions of a mind-body dualism (and in many cases there has been disproportionate emphasis upon

cognitive processes).<sup>4</sup> O'Neill (1985:48) has suggested that this bias may be due to our preference for imagining ourselves as being controlled through ideas and consensual relationships, since the prospect of being controlled through the body and coercive relationships seems slavish.

By uncritically accepting a body-mind dualism and tending toward cognitive biases in understanding social control, however, the social sciences may be unable to grasp the enormous potency of modern social control mechanisms. O'Neill (1985:152) has argued that we must "think of all technology as biotechnology — to see . . . that *every power over nature is a power over ourselves*. Such power is not only present in our machines but proliferates in the discursive production of the human sciences designed to control life, thought, health, sanity, and knowledge" (emphasis in the original).

The relative lack of importance of explicitly religious legitimations for contemporary social control (at least, in the public sphere) may distract us from awareness of the highly ideological, but masked as rational, elements of potent forms of social control. Modern forms of social control, masked as therapy, masked as medical intervention, masked as workplace incentives, masked as entertainment, are particularly potent, because they operate indirectly upon the person's entire mindful body. Contemporary masks for ideological exercises of power over people make these forms of social control especially insidious.

The following suggests a few concrete examples of how the human body is linked, directly and indirectly, with power relations in modern Western societies.

### *The Body at Work*

At an elementary level, work is something embodied individuals do to sustain themselves. We work to obtain and prepare food; we work to clothe and shelter ourselves and our families; we work to arrange our lives within our physical and social environment. Some crippling of mind and body occurs as a byproduct of all forms of work. For example, when I am bending over a hoe to till a field, my mind and body become tired, perhaps misshapen or broken, regardless of whether it is my field or that of an agribusiness, regardless of whether my labor will feed me and my family adequately or poorly.

Marx observed, however, that certain work relationships are particularly crippling, such as when the division of labor separates mental from physical labor, and when the conditions of work create an alienation from self and from inner and outer environment. Marx (1977:548) noted, "Factory work exhausts the nervous system to the uppermost, at the same time it stifles and restricts the free expression of mind and body."

Work under early capitalist modes of production required different bodies from those working under other forms of production. One important function of social control then became the development and maintenance of the appropriate bodies for wage labor. Not only within the factory itself, but also in the educational system and (to some extent) within the family, social control mechanisms contributed toward producing bodies ready for work under capitalism: They needed to be docile, capable of being constrained to do

---

4. For a critical review of this literature and a proposed corrective point of departure for further theorizing about the mindful body, see Freund, 1988.

repetitive tasks in a limited range of motion, and controlled enough to take breaks for food, elimination or rest only at times allowed by management. Such bodies must fit themselves to the time, space, and motion limitations of production.

In modern forms of production, social control and the production of appropriate bodies are just as important, but the nature of the desirable worker has been redefined, and increasingly the modes of social control operate internally. A good example is the socialization of flight attendants, as documented by Hochschild (1983). An integral part of the flight attendants' work is the production of emotional responses to customers that are consistent with the company's image of service and friendliness. In training, flight attendants are schooled, not merely to act friendly and helpful, but indeed to try to make themselves *feel* those attitudes and emotions. Modern methods of workplace management often effectively disguise power issues: Well-trained workers come to view social control as merely "self-control." Nevertheless, workers' mindful bodies can be hurt, diseased, or broken, even by these seemingly more benign forms of social control. Indeed, there is impressive evidence that many of today's debilitating chronic diseases are byproducts of harmful emotional and bodily "self-control" (Freund 1982, 1988).

### *The Disciplined Body*

Not only in the arena of work, but also in most major institutional spheres, modern bodies are disciplined bodies. Foucault has argued that contemporary societies have developed numerous "technologies of power" to regulate the body, bodily expression, attitudes, emotions, and emotional expression simultaneously. Accordingly, these forms of social control, because they work subtly upon the body and mind at once, are more potent, not merely assuring superficial compliance but indeed capable of penetrating the individual's "soul." In contrast to simple, repressive social control, these mechanisms are *constitutive*, generating forces (Foucault 1980, 1977).

Bryan Turner's work (1984) has failed to appreciate Foucault's emphasis upon how society acts upon the body itself; however, his analysis does build fruitfully upon Weber's theories of rationalization. Body discipline is, in many respects, a prime example of modern rationalizing tendencies: In the disenchanting world, all aspects of life become subordinated to bureaucratically organized patterns of behavior, i.e., regimens. Turner has examined body regimens like diet, table manners, exercise, and hygiene as rationalization of human bodies consistent with the exercise of power in modern social structures (Turner 1984). He has also noted that modern body regimen aims to reproduce not only disciplined workers, but also disciplined consumers, who have learned to need to consume systematically a vast array of special foods, cosmetics, medicines, clothes, leisure activities, and so on.

The comprehensive discipline of mind and body evident in these regimens becomes a peculiarly modern form of asceticism. Anyone who doubts this role of regimen has but to spend a week trying to practice the fitness prescription of "gung-ho" health spa. Each meal, each muscle group, each pattern of breathing, each posture, becomes subject to its specified discipline. Furthermore, there are ideological supports for these regimens, which transform "bad" body practices into modern forms of sin, for which the individual is held morally responsible (Crawford 1984; Glassner 1989).

These uses of body discipline, and their linkage with modern forms of legitimation of power and modes of social control, suggest that they are certainly appropriate focuses for the social sciences of religion.

### *Power and Female Bodies*

As noted above, gender is one important element shaping how the individual perceives self and the world. The “engendered” body is also both the instrument of power and the site of struggles over power. The most obvious power struggle is in the arena of reproductive control, in which religious legitimations and organizations are prominent. Numerous micro-technologies of power, subtle little practices, also are used to subordinate female bodies; for example, the power to touch or to interrupt another are assertions of power used far more frequently by men towards women than by women or by men towards other men (see Henley 1977).

Following Foucault, Bordo (1989) has analyzed how the cultural definition of femininity is inscribed upon women’s bodies. As with the workers’ bodies, power is exercised over female bodies, not merely by external social controls, but also from within. They become “docile bodies,” “useful bodies,” whose energies and expressions are regulated and “improved” by the organization of women’s regimens of diet, make-up, clothing, schedule, and space. In this context, Bordo has suggested that we might best understand several women’s disorders as political gestures of defiance against the social controls of femininity. Contemporary pathologies, such as bulimia, anorexia, and agoraphobia, could constitute protests.<sup>5</sup> Although they are ultimately self-defeating and counterproductive. They may be viewed as assertions of power and sexuality in the face of modern “technologies of power” which inform women that, to be appropriately feminine, they must control what they eat and limit what space they may occupy. Bordo has suggested that modern feminists need to examine critically their own assumptions that women should manage their bodies to fit a newly defined “politically correct” body. Are women necessarily more free when, instead of practicing walking in high heels and girdles, they now exercise extraordinary bodily management in weight-lifting, martial arts, and marathon running?

### *The Political Abuse of Bodies: Torture and War*

Another political use of bodies is to torture and kill them. These are hardly new practices, but contemporary societies seem to spend considerable effort to expand and refine their methods for these tasks. Elaine Scarry’s (1985) difficult book, *The Body in Pain*, has argued that political torture exists to convert the real pain of the victim into the *fiction of power* of the torturer. The structure of torture shows that it systematically robs the sufferer of agency and even of a voice to express the self in pain; simultaneously, the torturer appropriates that agency to its collective self (e.g., a regime). Scarry states:

---

5. Similarly, Lock (1989) has argued that many expressions of illness, such as the culturally wide-spread “attack of nerves,” are political statements, i.e., counter-assertions against the power structures that simultaneously rob the subordinate of an effective voice.

In the very process [torture] uses to produce pain within the body of the prisoner, it bestows visibility on the structure and enormity of what is usually private and incommunicable, contained within the boundaries of the sufferer's body. It then goes on to deny, to falsify, the reality of the very thing it has itself objectified by a perceptual shift which converts the vision of suffering into the wholly illusory but, to the torturers and the regime they represent, wholly convincing spectacle of power (Scarry 1985:27).

While not legitimated by the putative needs of a regime, similar ends are accomplished by rape and spouse abuse: The violence transforms the suffering of the victim into the fiction of power of the rapist or abusive partner. While not explicitly condoning these acts of violence, many religious groups in this society tell the victims, in effect, that they are responsible for their own suffering (for example, that the rape or abuse would not have occurred if the woman had been a "good girl").

Similarly, Scarry has argued that war is an exercise of power over bodies, in part because it takes place between political bodies and between bodies of armies, and in part also because it accomplishes its ends specifically by the destruction of human bodies. When it suits political ends, the casualties of war are glossed over; instruments of destruction are renamed with words like "cherry picker" or "little boy," and the enemy is described as "neutralized," "cleaned out," "liquidated." The physical issue of dead and wounded bodies is translated into verbal issues, such as freedom or fatherland or *jihad* or racial purity or national security, and so on. Scarry concludes:

The dispute that leads to the war involves a process by which each side calls into question the legitimacy and thereby erodes the reality of the other country's issues, beliefs, ideas, self-conception. Dispute leads relentlessly to war not only because war is an extension and intensification of dispute but because it is a correction and reversal of it. That is, the injuring not only provides a means of choosing between disputants but also provides, by its massive opening of human bodies, a way of reconnecting the derealized and disembodied beliefs with the force and power of the material world (Scarry 1985:128).

This discussion is a useful cautionary reminder of the dehumanizing consequences of certain political uses of human bodies. In the past and present, religious institutions have often legitimated (and frequently directly participated in) torture and war. In the face of the horrors of modern warfare and gross abuses of power, religion is also one important source of a prophetic voice for human rights and peace.

## CONCLUSION

The social sciences of religion could be transformed by taking seriously the fact that humans are embodied. A new conceptualization of a mindful body has the potential to lead to profound shifts in how we view our subjects and their worlds. Our research strategies need to take into account that believers (and nonbelievers) are not merely disembodied spirits, but that they experience a material world in and through their bodies. Greater awareness of the social and political uses of human bodies should guide our research and theory.

## REFERENCES

- Bastien, Joseph  
1985 Qollahuaya-Andean body concepts: A topographical hydraulic model of physiology. *American Anthropologist* 87: 595-611.
- Bergsma, Jurrit  
1982 *Health care: Its psychosocial dimensions*. Pittsburgh: Duquesne University Press.
- Bordo, Susan R.  
1989 The body and the reproduction of femininity: A feminist appropriation of Foucault. In *Gender/body/knowledge: Feminist reconstructions of being and knowing*, edited by A. M. Jaggar and S. R. Bordo, 13-33. New Brunswick, NJ: Rutgers University Press.
- Bourdieu, Pierre  
1977 *Outline of a theory of practice*. Cambridge: Cambridge University Press.
- Cassell, Eric  
1982 The nature of suffering and the goals of medicine. *New England Journal of Medicine* 306:639-645.
- Charmaz, Kathy  
1983 Loss of self: A fundamental form of suffering of the chronically ill. *Sociology of Health and Illness* 4:167-182.  
1987 Struggling for a self: Identity levels of the chronically ill. *Research in the Sociology of Health Care* 6:283-321.
- Comaroff, Jean  
1982 Medicine: Symbol and ideology. In *The problem of medical knowledge: Examining the social construction of medicine*, edited by P. Wright and A. Treacher, 49-68. Edinburgh: Edinburgh University Press.
- Cooley, Paula  
1989 Experience, body, and authority. *Harvard Theological Review*, July.
- Crawford, Robert  
1984 A cultural account of 'health': Control, release, and the social body. In *Issues in the political economy of health care*, edited by J. B. McKinley, 60-103. New York: Tavistock.
- Csordas, Thomas J.  
forth-coming Somatic modes of attention. In *Meaning, context, and experience: Interpretive violence and the living body in a world of contradictions*, edited by G. Bibeau and E. Corin.
- Dingwall, Robert  
1976 *Aspects of illness*. New York: St. Martin's Press.
- Douglas, Mary  
1966 *Purity and danger: An analysis of concepts of pollution and taboo*. London: Routledge and Kegan Paul.
- 1970 *Natural symbols: Explorations in cosmology*. London: Barrie and Jenkins.
- Foucault, Michel  
1980 *The history of sexuality*, vol. 1. New York: Pantheon.  
1977 *Discipline and punish*. New York: Pantheon.
- Frankenberg, Ronald  
1986 Sickness as cultural performance: Drama, trajectory, and pilgrimage root metaphors and the making social of disease. *International Journal of Health Services* 16 (4): 603-626.
- Freund, Peter  
1982 *The civilized body: Social domination, control and health*. Philadelphia: Temple University Press.  
1988 Bringing society into the body: Understanding socialized human nature. *Theory and Society* 17:839-864.
- Gerber, Ellen W.  
1979 My body, my self. In *Sport and the body: A philosophical symposium*, edited by E. W. Gerger and W. J. Morgan, 181-187. Philadelphia: Lea and Febiger.
- Giddens, Anthony  
1984 *The constitution of society: Outline of the theory of structuration*. Berkeley: University of California.
- Glassner, Barry  
1989 Fitness and the postmodern self. *Journal of Health and Social Behavior* 30 (2):180-191.
- Good, Byron  
1977 The heart of what's the matter: The semantics of illness in Iran. *Culture, Medicine and Psychiatry* 1:25-58.
- Gordon, Deborah R.  
1988 Tenacious assumptions in Western medicine. In *Biomedicine examined*, edited by M. Lock and D. Gordon, 19-56. Dordrecht, Netherlands: Kluwer Academic Publications.
- Henley, Nancy M.  
1977 *Body politics*. Englewood Cliffs, NJ: Prentice-Hall.
- Hilbert, Richard A.  
1984 The cultural dimensions of chronic pain: Flawed reality construction and the problems of meaning. *Social Problems* 31 (4): 365-378.
- Hochschild, Arlie  
1983 *The managed heart: Commercialization of human feeling*. Berkeley: University of California.
- Kirmayer, Laurence J.  
1988 Mind and body as metaphors: Hidden values in biomedicine. In *Biomedicine examined*, 57-94. See Gordon 1988. Dord-

- recht, Netherlands: Kluwer Academic Publications.
- Kleinman, Arthur  
1988 *The illness narratives*. New York: Basic Books.
- Lock, Margaret  
1989 Words of fear, words of power: Nerves and the awakening of political consciousness. *Medical Anthropology* 11:79-90.
- Marcel, Gabriel  
1952 *Metaphysical journal*. Chicago: Henry Regnery.
- Marx, Karl  
1977 *Capital*, vol. 1. New York: Vintage.
- McGuire, Meredith  
1988 *Ritual healing in suburban America*. New Brunswick, NJ: Rutgers University Press.
- Merleau-Ponty, Maurice  
1962 *The phenomenology of perception*. London: Routledge & Kegan Paul.
- Murphy, Robert F.  
1987 *The body silent*. New York: Henry Holt.
- O'Neill, John  
1985 *Five bodies: The human shape of modern societies*. Ithaca, NY: Cornell University Press.
- Osherman, Samuel and Lorna AmaraSingham  
1981 The machine metaphor in medicine. In *Social contexts of health, illness, and patient care*, edited by E. Misher et al., 218-249. Cambridge: Cambridge University Press.
- Ruth, David  
1974 The social reference of body symbols in religion. In *Changing perspectives in the scientific study of religion*, edited by A. Eister, 227-247. New York: John Wiley and Sons.
- Sacks, Oliver  
1984 *A leg to stand on*. New York: Summit.
- Scarry, Elaine  
1985 *The body in pain*. New York: Oxford.
- Schepper-Hughes, Nancy and Margaret Lock  
1987 The mindful body: A prolegomenon to future work in medical anthropology. *Medical Anthropology Quarterly* 1 (1):6-41.
- Schrag, Calvin O.  
1979 The lived body as a phenomenological datum. In *Sport and the body: A philosophical symposium*, 155-200. See Gerber 1979. Philadelphia: Lea and Febiger.
- Turner, Bryan S.  
1984 *The body and society*. Oxford: Basil Blackwell.
- Turner, Victor  
1968 *The drums of affliction*. Oxford: Clarendon.