

## **‘The shitful body’**

### **Excretion and control**

Rachel Lea

*Excretion has largely been addressed in nursing and medical anthropological literature in terms of incontinence, that is as a problem for people who cannot control their bodily functions in culturally appropriate ways. While excretion poses particular problems for people in certain circumstances such as illness, disablement or old age, it is the premise of this paper that excretion is a continual issue of control for all persons. Scheper-Hughes and Lock's paper *The Mindful Body* is used to show some of the ways that the control of the act and products of excretion functions for and within the individual lived body, the social symbolic body and the body politic.*

*[excretion, excrement, control, body]*

As a meaningful, recurring activity, continually experienced by bodies of all ages, it is surprising that excretion in daily life has not received more attention from anthropologists. The issue of incontinence has been explored from an anthropological perspective in recent years in nursing literature (Lawler 1991, Seymour 1998, Mitteness & Barker 1995) which focuses on the experience of the patient and carer. These experiences, usually described in terms of embarrassment at the loss of bodily control, are juxtaposed to an idea of a ‘normal’ (controlled and contained) body. This ‘normal’ body is briefly described as one which shits discretely, appropriately and un-problematically, and does not involve anyone else in the process. It is used to explain why incontinence is a personal emotional problem as well as a clinical one. Yet an exploration into excretion from a non-pathological point of view shows that the ‘normal’ situation is complex; that excretion is both desirable and despised, valued and degraded, useful and waste. These are the aspects I want to explore here, and to show that focussing on the issue of control can help to understand this ambivalence.

### **The three bodies**

I intend here to focus on the excreting body rather than the product of excretion, and to frame my discussion I will use Scheper-Hughes and Lock's 1987 paper *The Mindful Body*. They use a tripartite schema to analyse the body, moving from the personal, to

the social, to the political. At the first level is the lived, phenomenological body as experienced by the person. In the West, they argue, this body is experienced as part of, but not coterminous with the person. Thus we feel ourselves to be a mind in a body, with the “I” located in the mind, and this can be experienced as a source of conflict. Their second way of analysing the body is what they term the social body. This is the sense in which the body is used as a symbol; in Mary Douglas’s terms, as something good to think with. The exits and entrances to the body and the stuff that comes out or goes in are potentially dangerous as they threaten the identity of the whole and consequently are guarded carefully. Finally, Scheper-Hughes and Lock discuss a third level, that of the body politic, the extent to which power and control is exerted over the body or bodies of particular people.

The idea of the three bodies – the lived body, the social body and the body politic – is a useful starting point to look at excretion in Western society. Excretion is a personal bodily event which can sometimes be experienced in terms of a conflict between mind and body (e.g. as constipation or incontinence). At the same time it is something which involves parts and products of the body that have symbolic meaning for the excretor and for others, and it is also a potential site of conflict. I will look at each aspect in turn, though it will become clear that keeping them separate for the purposes of analysis is an artificial device. I aim to show that at all three levels of analysis, the issue of control is paramount. Quotes supporting my arguments are drawn from interviews carried out by me<sup>1</sup> and by Wendy Seymour (1998) from her book *Remaking the Body*.

### **Better out than in: The embodied experience of excreting**

Excretion is the process of ejecting substances from the body. The immediate bodily perception of this is not of matter inside, separate from the body, waiting to come out, but of some kind of discomfort. To satisfy a need to excrete is to move from a state of discomfort to one of comfort, and this journey is experienced as pleasure (Frankenberg 1992). The body is in the world from the beginning, and the feeling of discomfort is experienced within the context of ideas about excretion. The pleasures of excretion<sup>2</sup> are enhanced in Western society by the widely held view that things are ‘better out than in’ and that body matter not excreted is toxic. It is therefore not only pleasurable, but also healthy to excrete. As one of my informants expressed it,

I feel very clean and pure after I’ve been for a shit first thing in the morning and I feel completely hollowed out and clean ... thinking “that’s it, another load of toxins out”.

The sensation of relieving discomfort in the context of ridding the body of something potentially toxic means that excretion is experienced as a cleansing process. This attitude that body products are ‘better out than in’ is not limited to excreta. For example, Skultans (1988) found among some of the women she interviewed in South Wales the view that “unexpelled menstrual blood becomes poisonous” and menstruation was regarded by some women as a way to clear out the system. “The emphasis in such ac-

counts is on purging oneself of menstrual blood, because this is 'natural' and is a means whereby 'the system rights itself'" (1988: 143-44).

Neither is it only body products that need to be expelled; feelings and emotions are also seen as things that need to come out. The experience of expression is felt as a release from pressure, similar to the sensation of excretion, and the language we use to talk about expressing ourselves is the same as that for expelling bodily waste. Victor Turner once referred to expressions as "the crystallised secretions of once living human experience" (quoted in Turner & Bruner 1986: 5), and the appeal to "get it off your chest" could equally apply to confessing your troubles or having a good cough.

Foucault (1990) discusses the importance of confession in Western culture which, since the Middle Ages has "established the confession as one of the main rituals we rely on for the production of truth". The truth is something inside the body that comes out through confession, either willingly or by force and this "obligation to confess" is so deeply ingrained that – Foucault writes – "it seems to us that truth, lodged in our most secret nature, demands only to surface; that if it fails to do so, this is because a constraint holds it in place, the violence of a power weighs it down, and it can finally be articulated only at the price of a kind of liberation" (1990: 58-60). Like the dangers of not being able to excrete our body products, not telling the truth is experienced as a burden.<sup>3</sup> Vargas Llosa, in *In Praise of the Stepmother*, expresses the relationship between confession and excretion through his character Don Rigoberto, who feels, after defecating, that

There invaded him that intimate rejoicing at a duty fulfilled and a goal attained, that same feeling of spiritual cleanliness that had once upon a time possessed him as a schoolboy ... after he had confessed his sins and done the penance assigned him by the father confessor (Vargas Llosa 1992: 56).

These descriptions of the pleasurable feelings of relief from letting things out of the body recall the concept of catharsis. Aristotle talked about catharsis as being a release of the emotions pity and fear through the performance of tragedy. Scholars have argued for centuries about what Aristotle actually meant by catharsis; whether it is a purification, a purgation or an education, and whether he meant something religious, medical, moral, psychological or aesthetic. At the beginning of his essay on 'Katharsis' Lear makes a dismissive statement:

Now there is a sense in which the interpretation of katharsis as purgation is unexceptionable: having aroused the emotions of pity and fear, tragedy does leave us with a feeling of relief; and it is natural for humans to conceive of this emotional process in corporeal terms: as having gotten rid of or expelled the emotions (Lear 1992: 315).

Lear sees this as an uninteresting use of metaphor which is unhelpful for understanding how Aristotle saw catharsis in tragedy. I am not particularly interested in what Aristotle meant but I am interested in the sense of catharsis dismissed by Lear, and his aside a few lines further on where he comments that "the preponderant use which Aristotle makes of the word 'katharsis' is as a term for menstrual discharge". Lear sees corporeal expulsion as a natural process which is available for us as a metaphor for a more com-

plex (cultural) emotional experience. However bodily processes are not just 'natural symbols' for emotional experiences of the mind; rather as embodied mindful persons we experience catharsis as corporeal and emotional. It is not that we conceive of emotion in corporeal terms but that we are embodied. Excretion is as cultural as emotion, by which I mean that both are historically constituted and arbitrary rather than biologically given and inevitable.

So far I have talked about the value attached to letting things out of the body. The corollary of this of course is the danger of not letting things out, that if the body doesn't rid itself of its waste the toxins will poison the system. One of the informants I interviewed had experienced chronic constipation and described how she felt in the following way:

Basically your shit is all the crap that you have to get rid of because it's toxic and poisonous and I just wasn't getting rid of it, it was just hanging around in my gut, and ... it was coming out through my skin, my nails used to split all the time.

This view of autointoxication fits in with the current emphasis on the importance of a high fibre diet for the prevention of cancer. It also refers back to earlier ideas of a humoral conception of the body which dominated for centuries and was shared by virtually all sufferers and healers certainly until well into the seventeenth century. In this theory internal balance was the state of good health and frequent purges were necessary to maintain this balance. Fluids and winds were therefore expected to pass in and out of the body. A small treatise called *Hygiasticon: or, the right course of preserving life and Health unto extream old Age*, published in 1634, stressed the dangers of a build up of excess humours:

Now these humours in tract of time do corrupt and putrifie, and cast a man upon mortall infirmities; and are the very true ground why most men die so much before their time ... This danger therefore may in great part be remedied by purging seasonably, at least twice every yeare (Lessius 1634: 95-96).

The importance of purging to release superfluous humours is also shown vividly in the diary of Ralph Josselin, a vicar in Essex who kept a diary in the seventeenth century. In April 1648, for example, he wrote "this weeke I had a great looseness and griping of my body, avoyding thereby much choller, which I looke upon as a good providence of god towards me", and later in the same year during one of his many colds he wrote that "after above 30 hours illness in my stomach I fell into a great looseness which I conceive did me much good" (Macfarlane 1976).

We may no longer subscribe to a theory of humours, or welcome diarrhoea as Josselin did, but that we retain the view that cleaning out the body is beneficial can be seen by looking at, for example, women's magazines which periodically have articles extolling the benefits of colonic irrigation and detoxification.<sup>4</sup>

The extreme problems of not being able to excrete is vividly described by the men and women in Seymour's study of bodily paralysis. Having lost bowel sensation and muscle control due to illness or accident, there is a major concern with the problem of defecation. Most of Seymour's informants rely on manual enemas which were de-

scribed as “awful”, “distressing”, “vile”. One woman said “swear words don’t even cover the vicious feelings I have”, and another said “I’ll have a baby anytime rather than go through this process.” For these people the pleasure of excretion has been lost and the process is one of discomfort and distress. One woman described this loss in terms of missing the feeling of wanting to go to the toilet. She said “I dream about it all the time. In my dreams it’s so real, it feels like it’s real” (Seymour 1998: 154-176).

Added to the physical distress caused by an out of control body, Seymour’s informants also expressed the embarrassment of having to involve other people in the process. Because we live in close proximity with other people we have developed complex systems for dealing with excretory products and processes. There are culturally appropriate ways and means of getting rid of our wastes and the transition from a feeling of discomfort to one of comfort can be impeded by many things. To excrete in a culturally inappropriate way can lead to uncomfortable experiences of embarrassment and social exclusion.

Norbert Elias (1978) traces through books on etiquette the changes in attitudes towards excretory practices from the twelfth century to the nineteenth. He notes that in Western Europe we have become increasingly less tolerant of evidence of the body and its products. While in etiquette books of the sixteenth century bodily products and functions are freely mentioned, by the end of the eighteenth century such comments are omitted altogether. This omission is itself significant, as Elias comments:

The greater or lesser discomfort we feel toward people who discuss or mention their bodily functions more openly, who conceal and restrain these functions less than we do, is one of the dominant feelings expressed in the judgement ‘barbaric’ or ‘uncivilised’ (Elias 1978: 58).

Elias talks of a process by which the threshold of repugnance and embarrassment was raised gradually over the centuries necessitating an increasing containment of the body. The bodily functions came more and more to be regarded as distasteful and unpleasant and hidden away ‘behind the scenes’.<sup>5</sup>

Part of the process of growing up concerns moving from experiencing excretion as an activity which involves and interests our parents to it being something personal and private and hidden. Once hidden, it is then an activity always in danger of being exposed. In the interviews with my informants, concern was expressed about defecating in any toilet where other people may see, hear, smell or even just know what you are doing. We cannot control the smell or the sounds or what we look like when we defecate: it is a time when our bodies are open and vulnerable. This openness which could be experienced as pleasurable (cleansing, purifying, relaxing) and under bodily control in a safe situation, can also be experienced as embarrassing and uncomfortable. There is also a concern with being exposed to other peoples’ excrement, expressed in terms of germs and worries about hygiene. Feeling vulnerable and open also implies being open to invasion by other peoples’ germs.

So excretion is experienced both as a pleasure and as troublesome. What seems to determine the experience is the issue of control. Crawford (1984), in his discussion of concepts of health, found two dominant and opposing themes, which he termed

self-control and release. On the one hand, self control which meant self-denial and control over what one eats, drinks and smokes, was seen as leading to a healthy body, and on the other hand being able to relax and be free from worry, to be able to let go, was also valued as necessary for health. Self-control is contrasted with a degree of autonomy or freedom from imposed or internalised control. Similarly, Lawrence (1979) writing about anorexia talks about a control paradox whereby anorexics do not engage with other people in such a way as to take control of their own actions but instead turn the power inwards so the battleground is internal. In both these arguments, self-control appears as an internal conflict between the mind and the body, in which the mind denies the body something it desires, and the body is described almost as having a will of its own. Contrasting with this is what Crawford calls "release" and what Lawrence refers to as being the ability to direct the self and take charge of ones own actions. In terms of excretion, too, there is a contrast between the pleasurable experience of being able to excrete when the need arises, which I term having embodied self control, and the uncomfortable experience of conflict between the mind and the body in which we either try to exert self control over a rebelling body in order not to excrete at a culturally inappropriate situation or suffer from a body that just won't let go. Both being able to let go, and being able to hold on are valued and welcomed; just as not being able to let go when necessary and not being able to hold on are sources of embarrassment and discomfort.

#### **Vile and low or real and true? The excreting social body**

Excretion is troublesome when it threatens to become exposed to other people. At these times, our social body is threatened. To be associated with excrement, to be seen excreting, is to expose the evidence of our corporeality to other people. Excrement is low matter. It is, perhaps, the lowest of the low and to be associated with it is to be degraded.

This brings me onto the second of Scheper-Hughes and Lock's bodies, the social body. For Mary Douglas (1978, 1984) the body is a natural symbol with which to understand society. She focuses on the margins of the bounded body as representing any boundaries under threat. The margins are always dangerous because they define the system, and must therefore be protected to preserve the integrity of the whole. Holes in the boundary, therefore, are especially vulnerable, and the stuff that comes out of them is particularly problematic. In most societies, the various body products and their related organs are laden with symbolism and meaning, and are considered more or less polluting and dangerous. The body is also the archetypal vertical structure, in which the highest point is better (more desired, more valued, more powerful, more advanced) than the lowest point. The caste system of the Coorgs of India illustrates Douglas's point:

The whole system represents a body in which by the division of labour the head does the thinking and praying and the most despised parts carry away waste matter (Douglas 1984: 123).

This notion of a topography of high and low is the central concept of Stallybrass and White (1986) in their book *The Politics and Poetics of Transgression*. There is, they argue, an enduring, pan-European image of a vertically hierarchical structure, in which the highest and lowest points are the sites of most conflict and contrast. They focus on four areas in which this high/low opposition is expressed or imagined; the human body, the psyche, geographical space and the social order. In all of these domains the highest and lowest points are respectively transcoded onto one another; prostitutes and beggars at the bottom of the social order are akin to the slum and sewer in the geographical domain, the anus and the genitals of the body, and the evils of the mind or sexual instinct. In the same way there is a linked set of images at the top end: kings, castles, heads and minds, and philosophy or spirituality.

Excrement is of the lowest order in this schema and can bring down to its level all that is associated or touched by it. It has been argued, for example, that the low status of nursing is to do with the association of nurses with the cleaning up of patients' excrement (Lawler 1991). In their struggle to raise the status of nursing, nurses have increasingly dissociated themselves from the handling of bodily waste as part of a nurse's duties.

However, at the same time as the high/low hierarchy, there is also a set of images around deep/shallow in which value is placed on what is deep and hidden as it is believed to be more real or more truthful in the sense of expressing true identity. What is at the surface is not necessarily merely shallow and superficial but it is seen as less enduring, and as concealing something more real beneath it.<sup>6</sup> This has already been seen in my earlier discussion on the value of letting things out of the body.

Excrement in this system of images reveals the true nature of a person. Not in the sense of their individuality – as represented by the image of the heart – but in the sense of their generic animal nature; that we are all the same underneath and are born, as Saint Augustine said, between urine and faeces. Excrement is also linked symbolically to death and decay, and is a reminder that we all return to the same slimy mass of putrefaction in the earth. It is interesting to note that the earth has bowels, but not a heart. This very brief look at the symbolism of shit is presented here to show how, once again, there is an ambivalence towards it. It is both vile and low and real and true.

As for the lived body, control is an issue for the social body. Whether excrement confers lowness or validity onto a thing depends largely on the intentionality of and control felt by the excreting person. Public loss of control of the bowels is usually experienced as degrading and humiliating. However there are situations in which a person is given a validity or depth because of this loss of control. In Taussig's yagé nights, for example, his description of uncontrollable shitting and vomiting after taking the hallucinogenic drug adds to the terror of the event without degrading him (Taussig 1987). As Bakhtin (1984) says, excrement is related to regeneration and renewal and has a special role in overcoming fear. Bakhtin quotes and comments on a passage from Rabelais in which Panurge is mocked for losing control of his bowels from fear. He regains his composure and laughs it off, calling his shit the fruit of a rare and pleasant tree and invites his persecutors to drink with him which, in Rabelaisian imagery means to be in communion with truth. Both Taussig and Panurge are not in control of their ex-

creting but rather than struggling with internal conflict they use their act of excretion to give power to themselves. Another example was given to me by a friend recently. He was standing at a bus stop when a man standing nearby let out a loud fart. My friend felt disgust towards the man, but this turned to respect when the man nonchalantly said to him, "That's what I thought of lunch." Instantly, lunch became the object of disgust, not the man.

### **Shit as power: Excrement in the body politic**

I have discussed the lived bodily experience of excretion, and the symbolism of the social excreting body, and shown how for both bodies a sense of control is a defining feature. In this way I have therefore already talked about Scheper-Hughes and Lock's third body, the body politic. Control of the excreting body and the products of excretion is constant and contested. As previously mentioned, as we move from infancy to childhood we learn to excrete alone and in private. The process of toilet training involves conflict between parent and child, as the parent begins to prevent the child from freely excreting. External control of a person's excretion is not just an issue between parents and children though, but is a powerful tool to control and subdue others. I have been told anecdotally of controls used in boarding schools and other institutions such as the army and airforce where there are explicit rules about when one can defecate as well as where. In such institutions too, excretion is often used in initiation rites to humiliate the newcomer before regenerating him or her as a member of the institution. In hospitals control of excretion is one of the major concerns of both patients and health professionals. To some extent the patient/carer role is a return to a child/parent position. One of Seymour's informants describes his ongoing battle with his doctors over control of his bowels. He said:

... all doctors seem to have this obsession with keeping the bowels open and I believe that they have this obsession at the expense of your normal functioning in society. One of the most demeaning and belittling things is not having control over your bowels. It creates enormous feelings of powerlessness ... I was having accidents daily ... They knew the difficulties I was having every day and the embarrassment that it caused me, and yet their obsession with keeping my bowels open and moving was such that they disregarded all that and kept me on the medication (Seymour 1998: 159-163)

For this patient the issue of control was over whether his body should be open or closed, with the doctors forcing him to remain in a child like state of dependency on another. What defined a healthy body was contested and there was a conflict between the doctors' desire for a flowing and open body and the patient's desire for a contained, socially acceptable body. This struggle was finally partially resolved when the patient took control of his medication.<sup>7</sup>

That it is the issue of control that seems to define excretion as pleasurable or painful is shown dramatically in de Sade's *120 days of Sodom* (de Sade 1990). There is a difference between the characters who are degraded and tortured by the four instigators



through the use of excretion, and the four instigators themselves. The same coprophagic act destroys the victims while regenerating and giving power to the instigators. The difference between the two groups is that those in the first have no control over what is done to them or what they have to do, and their experience as well as their bodily products are appropriated by the instigators for their own pleasure, while the people in the second group are using their bodies intentionally and willingly.

The body politic here has been examined in terms of control and the person, rather than social control or control over groups of peoples.<sup>8</sup> This would be a further area to consider, following on from Douglas's ideas about social and bodily boundaries and particularly in the context of recent events of ethnic cleansing and political purging, but is beyond the scope of this paper.

### **The shitful body**

What I have tried to show in this paper is that we are simultaneously individual experiencing social bodies in relationships of control and power and a bodily practice such as excreting is historically and culturally constituted. Recognising our ambivalence toward excrement and our mixed experiences of getting rid of it as a daily preoccupation of which we are more or less conscious (depending on changing circumstances) can be useful for understanding the complexity of the problems faced by people in sickness and disability.

Having used Scheper-Hughes and Lock's idea of the three bodies as a framework for this paper, I would also like to borrow their closing statement to sum up the various ideas I have discussed. Sickness, they say,

is not just an isolated event, nor an unfortunate brush with nature. It is a form of communication – the language of the organs – through which nature, society and culture speak simultaneously (Scheper-Hughes and Lock 1987: 31).

I would like to substitute the word 'excretion' for 'sickness' here, as I hope I have shown that shitting is always a meaningful activity, performed and understood by socially and historically constituted embodied persons.

### **Notes**

Rachel Lea completed an MSc in Medical Anthropology at Brunel University, Uxbridge in 1992 for which she submitted a dissertation on *Experiencing Excretion: the Paradox of Control and Release*. She is now continuing this work for a doctorate at Brunel. She works in the Public Health department of a central London Health Authority. 39 Cosway Mansions, Shroton Street, London, NW1 6UE. Email: rachellea@cosway.netkonect.co.uk

Thanks are due to Professor R Frankenberg and Ria Reis for their help with this article.

1. Informants were adults aged between 25-35, white British, living in London. Some interviews were carried out during 1992 for the MSc dissertation. Other interviews were carried out more recently and focussed specifically on experiences of cathartic release such as colonic irrigation and bulimic purging.
2. Freud (1911: 103) notes the pleasurable sensation of excreting for infants in *Three Essays on the Theory of Sexuality*.
3. Conversely, not being able to keep a secret, or the inappropriate releasing of emotions, is akin to incontinence. See, for example, Nigella Lawson's article in *The Observer* newspaper about an MP crying in the French parliament, entitled "Crying in public is a sign of emotional incontinence" (6/12/98).
4. For example, *Women's Journal* April 1995
5. However, Paster (1993) shows that embarrassment and shame were issues of concern, especially for women, in the early modern era, despite people seeming to be more open about bodily products.
6. See also Jeffrey Masten's (1997) article "Is the Fundament a Grave?" in which he notes in early modern literature the image of the rectum as "fundament", i.e. foundational or having depth or as the origin or source of something. This is in contrast to the more usual vertical hierarchical image discussed by Stallybrass and White. Also see Michael Schoenfeldt (1997) whose discussion of the stomach notes that Shakespeare "replaces a hierarchy based on the distinction between low and high with a hierarchy based on the distinction between center and periphery" (248).
7. I am grateful to Ria Reiss for her comments on an earlier version of this paper. She suggests that underlying the issue of control as discussed in this paper, is the conflict between autonomy and dependency. Following Erikson, further analysis along this line would enable more consideration of the social relations in which ideas of excretion arise.
8. As Reiss points out (personal communication) there are possible comparisons to be made, for example, between a society's struggles for self-containment in the face of vulnerability or dependence and sentiments about excretion and bodily boundaries.

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