Christopher Hitchens’ Public Dying:

Toward a Secular-Humanist Ars Moriendi?

Abstract

This paper explores the public dying of journalist, writer, provocateur, public intellectual and renowned atheist, Christopher Hitchens. It does so primarily through an analysis of television interviews given by Hitchens following his diagnosis with esophageal cancer in June 2010. Four key themes are identified as emerging from analysis of the interviews: 1) Hitchens’ explicit sense of mission in challenging myths and superstitions surrounding cancer, dying and death; 2) the personal experience of terminal illness and dying, and the particular way (or style of dying) by which it is approached; 3) issues of regret and a life well-lived; and 4) questions surrounding religion, the afterlife and possibility of deathbed conversion. In light of Hawkins’ (1990) claim that ours is a culture in search of an ars moriendi, the article examines what we can learn from Hitchens’ auto-pathographic interviews (and writings) and the extent to which this rational-humanist, atheistic and stoical style of dying provides a useable “template” for others nearing the end of life.

Keywords: Ars Moriendi, Auto-Pathography, Cancer, Christopher Hitchens, Public Dying

Introduction

In the summer of 2010, English-born journalist, best-selling author, provocateur, public debater, and well-known atheist, Christopher Hitchens, was diagnosed with esophageal cancer. This diagnosis, with the same type of cancer from which Hitchens’ father had died, came in the middle of a promotional tour for his latest book, Hitch-22—a memoir in which, rather presciently, Hitchens recalls reading an erroneous newspaper report documenting his own death (the report
Hitchens’ dying is significant in several key respects, not least because it is in keeping (though not entirely, as I will discuss below) with the Zeitgeist and recent cultural tendency toward a public dying that is both highly visible and accessible (Woodthorpe, 2010, 2014). Such a tendency is at odds with the wider modernist cultural and historical trajectory in the West. Amply documented (e.g., Ariès 1974, 1981; Bauman 1992; Elias 1985; Giddens 1991; Kellahear 2007), this suggests that death and dying (and the human body) have been sequestered by the institutions and discourses of modern bio-medicine (e.g. Illich 1976; Foucault, 1973, 1977; Mellor, 1993; Mellor & Shilling 1993); gradually pushed out of public view (and indeed of the public square of discussion and debate), first, into the private familial realm, and more latterly, confined to the relatively secluded sphere of hospice, hospital or residential care facility (Taylor & Field 2007; ONS, 2012).1

Hitchens’ public dying is significant in this respect because it threatens to force discussion of issues surrounding death and dying (of, for example, what constitutes a “good death”, the
possibility of life-after-death, the experience of facing terminal illness, among others) back into
the public square, where they become a focus for debate within the public sphere (Habermas
1962/1989). McGuigan (2000, 2005) has further extended this concept to include the cultural
public sphere, whereby elements of aesthetic and affective communication are also played out,
alongside or in contention with communicative reason.

Part of this cultural public sphere, I want to suggest here, is today concentrated online—in, for
example, the “talk back” fora of video sharing social media platforms such as YouTube. Together
with the recent proliferation of death cafés (whose provenance itself lies in the 17th century
European salons and coffee shops that were the locus of literary and philosophical discussion),
these fora can be seen as part of the cultural public sphere first theorized by German sociologist
Jürgen Habermas (1962/1989, 1964). More precisely, and in a pluralistic late (or reflexively)
modern society (Beck, Giddens, Lash, 1994) in which the public sphere is increasingly diffuse,
these fora represent a particular public, among several, in a multifaceted public sphere(s). From a
research perspective, the discussion contained in these video sharing fora by viewers/users of the
television interviews that are the focus of this paper are themselves a rich and untapped source of
data that provide scope for future study.

Public dying, of the sort described here, is, it seems, qualitatively different from the heroic,
sordid or beautiful public dying (and death) documented by historical sociologists (Elias 1985)
and social historians (Ariès 1974, 1981; Vovelle 1983). The tendency toward the de-privatization
of dying can first be identified from the 1970s onwards (Walter 1994) in the burgeoning genre of
auto/pathographic literature (Hawkins 1990), by which the terminally ill or their carers have
narrated their experiences. The trend toward a de-privatized or more public dying has been
hastened and facilitated by new technologies (portable tablet devices and a web-based social media infrastructure) that now allow individuals too ill to maintain physical contact with others to maintain (and extend) a virtual presence by blogging, tweeting and “Facebooking” with others, often until the very end of their lives. These technologies have had the effect of democratizing the opportunities for narrating one’s experiences of illness and dying through the provision of new-found platforms and audiences willing to listen and consume these auto/pathographies. Yet if this new kind of public dying marks a definitive break with the past, it also heralds a revival, albeit modified in terms of content, of an older tradition of *ars moriendi*; only this time the deathbed is digital, crossing continents and inviting a potentially limitless community of mourners (and mockers, if we include today’s internet “trolls”).

Hitchens’ public dying is also significant because it marks an apparent point of departure from the hitherto existing examples of public dying to date. Many of these auto/pathographies, as Walter (1994, p. 127) notes, have tended to be written by middle-class white females. More than this, many of these auto/pathographies have tended toward a “revivalist” tradition by which the experience of illness/dying has been understood through the invocation of new-age spirituality and (an American-influenced) post-1960s culture of expressivism (and expressivist therapies), whereby talking or writing about one’s inner-most experiences is considered to be a “healthy”, necessary and normative means of coming to terms with, and making sense of, mortal sickness. More recent high profile examples of public dying (and the public response to it) have illustrated the neo-modern revival and purchase of 18th and 19th century Romantic, sentimental and anthropomorphized visions of death, dying and the afterlife upon the contemporary cultural imagination (Walter 2009, 2010, 2011). In sharp contrast, and consistent with the avowedly rejectionist and contrarian attitudes that Hitchens embodied as an iconoclast, Hitchens’ public
dying appears stoical, rationalist, and atheistic—rejecting any suggestion of contrition, repentance or last-minute deathbed conversion.

Hitchens’ public dying appears therefore markedly different from earlier pre-modern forms of public dying as well as from contemporary (neo- or post-modern) public dying. It does so not least because of Hitchens’ rejection of religious and expressivist and/or therapeutic frameworks, but also because of his defence of humanist, Enlightenment principles, chiefly reason and science, for making sense of death and dying. If, as suggested by some (e.g., Field & Walter 2003), media representations of dying, death and bereavement are a key means by which people in contemporary Western societies learn about and make sense of these experiences, to what extent does Hitchens’ public dying provide an alternative, hitherto under-articulated, “script” that others in a similar predicament can identify with, and draw upon, in their own (and others) dying? Commensurately, if ours is a culture in search of an *ars moriendi* (Hawkins 1990), does Hitchens’ public dying provide one model among several from which we may now choose in an increasingly pluralistic and consumerist society? It is these questions, among others, that this paper will attempt to address.

**Christopher Hitchens**

Christopher Hitchens was born into what Wilby (2011) claims his hero, George Orwell, would have described as a lower-upper-middle-class family in Portsmouth, England in April 1949. He died of pneumonia, a complication of the esophageal cancer with which he had been diagnosed in June 2010, in December 2011, at the M. D Anderson Cancer Center in Houston, Texas, where he was being treated. His death, according to his wife and fellow journalist, Carol Blue, was in the end rather unexpected, coming after what was expected to be a short hospital admission, after
which he would return home and resume his writing (Blue, 2012).

In the intervening 61 years between his birth and death, Hitchens' established a successful career as a journalist, author and public speaker, first in his native England, and later in his adopted home of the United States. Hitchens was an Anglo-American (replete with an American wife and children), occupying a liminal space between Britain and America, which he shuttled back and forth between, never fully embracing an American identity and citizenship until the fateful events of September 11, 2001. The terrorist attacks of 9/11, Hitchens' later claimed, helped to crystallize his views about everything he hated (tyranny, dictatorship, theocracy) and held dear (democracy, liberty, freedom, and their embodiment in the United States and its culture/institutions). It was as if, as Hitchens put it—describing the huge 'bellowing cloud' of 'filth' and 'ordure' that emerged from the wreckage of ground zero on 9/11—Charles Manson was giving orders on that day (ABC Australia, 2010).

If this Anglo-Americanism suggests a dualistic dimension to Hitchens' thinking and character, then other aspects of this duality can be found in his politics and professional identity. For Hitchens was a journalist, with a talent for delivering pointed editorial copy in an incredibly short space of time, as well as the author of a veritable library of serious-minded books of non-fiction (some 23 in all) on topics ranging from religion, atheism and the monarchy, to the art of mentorship, political and moral corruption, and the Palestinian question. Hitchens was also a fierce polemicist (in the mold of George Orwell) and public debater (in the Socratic tradition), as well as a public intellectual (having served as professor of liberal studies at the New School in New York and as visiting professor at UCLA-Berkeley), casting a critical eye on contemporary events in ways that threatened to disturb conventional wisdom and established political
orthodoxies.

Hitchens embodied the spirit of the public intellectual described by his long-time friend and colleague, Edward Said, who defined the public intellectual as possessing the quality of "being set apart, someone able to speak the truth, a...courageous and angry individual for whom no worldly power is too big and imposing to be criticised and pointedly taken to task" (Said, 1994, cited in Jennings & Kemp-Welsh, 2003, p.1). Chief among Hitchens' targets for criticism were former U.S Secretary of State, Henry Kissinger (whom Hitchens argued should be indicted for war crimes for his role in U.S foreign policy), Mother Teresa, whom he criticised for her retrograde Roman Catholicism (accusing her of sponsoring poverty and the oppression of women because of her condemnation of contraception), and former U.S president, Bill Clinton (for his sexual abuse of power during his affair with White House intern Monica Lewinsky).

Curiously, Hitchens became the scourge of both the conservative religious right, for his attacks on organized religion and its evangelical leaders (such as the late reverend Jerry Falwell, whom he described as "a nasty little charlatan"), while simultaneously incurring the wrath of the liberal political elite (for providing information which almost helped indict former Clinton aide, Sidney Blumenthal, for perjury during a House of Representatives investigation of the president in 1999, earning him the unflattering epithet "Hitch the snitch"), as well as the wider political left (for his support of the U.S-led invasion of Iraq championed by president George W. Bush). Hitchens' rancorous split from many on the left—including former comrades such as Noam Chomsky and Howard Zinn, whom he worked together with on The Nation, a flagship journal of the left—revolved chiefly around what Hitchens perceived as their latent anti-Americanism and failure to defend Enlightenment values against groups committed to their ideological destruction.
All of this made Hitchens a fabulously intriguing and enigmatic personality, never afraid to cross party lines in the cause of deeply held moral and political convictions. Hitchens' cerebral prowess in public debates, allied to deliberate attempts to court controversy, also made him a hugely entertaining public figure. Hitchens' infamous "put-downs" of opponents—labeled the notorious "Hitch-slap" by commentators—became the stuff of legend. In the Internet age, recordings of Hitchens' performances on television and in public debates have become legion on the video sharing social media site YouTube; so much so that Hitchens himself quipped that it wasn't YouTube but "MeTube." Hitchens' abrasive style and caustic rebuffs of opponents won him friends and enemies in equal measure. His persona, as McGuigan (2000, p. 14) puts it, was "of the kind, colloquially speaking, that you either love or hate."

That, however, which, above all else, propelled Hitchens to intellectual stardom and notoriety, especially in the United States, was his searing criticism of organized religion in his best-selling book *God is Not Great: How Religion Poisons Everything*. Somewhat paradoxically, as a vehement advocate of atheism, Hitchens' book, his public appearances, and associations with fellow public intellectual atheists—chiefly, Richard Dawkins and Sam Harris—assured him an almost cult-like status among followers and fans. Such “popularity” gave Hitchens a certain cross-over appeal, making him something of rock-star celebrity intellectual by virtue not only of his Bohemian lifestyle and penchant for parties (and for drinking and smoking heavily), but for daring to puncture taken-for-granted assumptions and for slaying many scared cows in society, including the role of religion itself.

Hitchens first came to my concentrated attention for attempting to slay one such scared cow - the
public mourning in the United Kingdom following the death of Diana, Princess of Wales in 1997. In a made for television documentary (Diana—The Mourning After) written and narrated by Hitchens for Channel 4, Hitchens set about dismantling a widely held assumption of the time, namely, that an entire nation was united in its grief for the death of Diana. Instead, Hitchens traveled the length and breadth of Britain gathering dissenting recollections from people who did not feel moved to mourn the death of woman they did not know and had never met. For Hitchens, this impression of "a nation in mourning" was a false one, a result of "the media's ideological unification of what in reality was a very diverse set of responses" (McGuigan, 2000, p. 14). Hitchens was also critical of the media for venerating, valorizing and even beatifying a woman that, only weeks earlier, had been vilified by sections of the British tabloid press. Equally disturbing for Hitchens—as self-proclaimed heir to an Enlightenment tradition founded on reason, rationality and skepticism toward all deities and their worship—was the perceived descent in the days following Diana's death into a vacuous, facile and sentimental type of emotionalism, where to emote publicly and ostentatiously became ostensibly de rigueur (c.f. Anderson & Mullen 1998).

Like so much other academic research and scholarship, there is, then, a personal (or biographical) angle of interest here: in Christopher Hitchens, as the referent of this project on public dying, as well as in public dying itself as a corollary of my previous research on public mourning (Author, 2008a, 2008b, 2008c). In addition to death in popular culture (both fictional and factual) and public mourning identified by Walter (2008), Woodthorpe (2010) has added a third dimension—public dying. Hitchens' television documentary is part of my own intellectual biography and entry-point to the field of thanatology, capturing quite succinctly at the time my own personal experience of the "Diana events" in the UK in the late summer of 1997 in a way that seemed to speak to me quite directly (Hitchens' editor at Vanity Fair, Graydon Carter, has noted how
Hitchens perfected a style of writing in which "you felt as though he was writing to you and to you alone" [Carter, in Hitchens (2012, p. xvi)].

This is significant because, for a time following Diana's death, to occupy a position outside the prevailing orthodoxy within mainstream circles felt untenable, counter hegemonic. So to hear the articulation of an alternative perspective was liberating; providing not only a "subject position" with which I (and others) could identify, but validating the absence of grief for Diana which so many appeared to feel. This, then, was an inversion of disenfranchised grief (Doka, 1989), where the "not mourning" for Diana was licensed, validated and made available within public discourse. We might even say, using the language of post/structuralism, that Hitchens' intervention represented a moment by which individuals were "interpellated" by the discursive or symbolic order; a "hailing" or "Hey, You!" moment by which a certain constituency of the population were conscripted to a particular "subject" or "audience position."

**Pathography**

The term "pathography" refers to published, first-person accounts of illness, bereavement or dying. Aronson (2000) has traced the origin of the term to Dunglison's Medical Lexicon of 1853, through Freud's (1910) essay, "Leonardo da Vinci and a Memory of his Childhood", to Oliver Sacks' (1990) book Awakenings, where it has been used to refer to the medical patient's own experience of illness or drug use. In thanatology, most scholarship and research takes Anne Hunsaker Hawkins' (1990) usage of the term as its starting point, where, as a sub-set of illness narrative (Frank, 1995, cited in Walter, 2010, p. 853), it is limited to "the personal narratives that describe what it is like to lose a child, a spouse, a parent" (Hawkins, 1990, p. 301). Most pathographies are auto/biographical, either documenting the experiences of bereavement and of
caring for an intimate other, usually after a long period of illness; or recounting the personal experiences of illness by individuals who are themselves facing a terminal condition. Hitchens' public dying—as manifested in his columns for *Vanity Fair*, television interviews, and posthumously published book *Mortality*—fits the latter of these descriptions.

This genre of auto/biographical writing has grown tremendously since the 1970s (Bingley et al, 2006; Hawkins, 1990; Holloway 1990; Walter, 1994). Hawkins (1990), for example, notes the "efflorescence" of books on death and dying in this period, including pathographies, which represents a "striking reversal of the absence of writings about death in the first half of the twentieth century" (Hawkins, 1990, p. 301). Walter (2009) has elsewhere suggested that the burgeoning corpus of auto/pathography casts doubt on the sequestration thesis (Mellor, 1993; Mellor & Shilling, 1993), whereby death, and the dying body, are concealed from public view; the experience of dying and of death are cut off from everyday routines; and dying people are themselves left to make sense of their experience (Walter, 2009). Today, the genre of auto/pathography extends beyond traditional book length accounts (such as posthumously published personal letters and diaries not necessarily intended for public consumption) to include emails and micro/blogs, Facebook updates, television interviews and magazine articles.

Hawkins (1990) asserts that our contemporary interest in death at the end of the twentieth century, in comparison to an earlier generation, for whom it was taboo, is "bordering on [...] obsession" (Hawkins, 1990, p. 301). More than this, if, as Hawkins suggests, "ours is a culture in search of an ars moriendi", then in late modern, highly pluralistic Western societies, there can be no single universal art of dying to which we can all aspire. Instead, and as increasingly reflected in the diffuse proliferation of auto/pathographies that have emerged at the end of the twentieth and
beginning of the twenty-first century, there are a multiplicity of illness and dying narratives to cater for a broad range of social/cultural tastes and identities. While the provenance of these auto/pathographies lies in an earlier religious tradition (Houlbrooke, 1998; Simonds & Katz Rothman, 1992; Stannard, 1977) that dominated Medieval and Renaissance Europe, contemporary auto/pathographies are often largely secular, reflecting the attenuation of traditional forms of authority and uniquely elevated authority of the self (Seale, 1998; Walter, 1994).

The auto/pathographies that emerged in the anglophone world toward the end of the twentieth, and beginning of the twenty-first century, have tended to be written by professional writers, journalists and academics (Aronson, 2000; Walter, 2010); people not only endowed with the "writerly" skills necessary for communicating their experiences—for whom writing is their raison d’être—but with already established audiences willing to hear them and contacts with publishers willing to publish them (Armstrong-Coster, 2005). For the most part, and with some notable exceptions, the writers of auto/pathography have tended to be white, female and middle-class, mirroring the demographic make-up of readers who consume them (Walter, 1994). The illnesses about which these writers have written have tended to be those with a long "career" trajectory for which the designation of "dying" is more easily applied and which enable the individual to enter the role of "aware dying" (Glaser & Strauss, 1965, 1968). Cancer is the most typical illness about which auto/pathographies are written, largely because it carries with it a reasonably long dying trajectory, while at the same time not compromising a person’s cognitive functioning and ability to think and write to the same extent as some other conditions, such as stroke or Alzheimer's disease (Bingley et al, 2006).
Notable examples of this genre have included those of two British journalists, John Diamond, who used his weekly column in the (London) *Times* to chronicle his experience of throat cancer, and Ruth Picardie, who used her column in the UK newspaper, the *Observer*, to chronicle her experience of breast cancer. Other notable pathographies of this type include those of Harold Brodkey and Oscar Moore, both of whom were novelists who chronicled their experience of living with (and dying from) HIV/AIDS in the columns of the *New Yorker* (Brodkey) and UK *Guardian* newspaper (Moore). All of these chronicled weekly or monthly accounts were later published, sometimes posthumously, in book form (Brodkey, 1996; Diamond, 1999; Moore, 1996; Picardie, 1998). It is perhaps no coincidence that these pathographies emerged at approximately the same time in the mid- to late 1990s, where together they created a synergy suggestive not only of a wider "confessional culture" (Grinyer, 2006) now increasingly at ease in talking about death and dying, but also a specific audience or readership now willing to hear accounts that, a quarter century earlier, would have remained largely unheard and been considered unpalatable and not fit for human consumption.

Significantly, these auto/pathographies generated considerable public attention, sympathy and mourning (see Small, 1998) from wider members of the public for whom these individuals were "unknown" at a face-to-face level. Such interest was manifested largely in the letters and emails (sent either directly to the authors or to the letters pages of the newspapers/magazines for which they wrote) which this public dying generated. Not only does this public reaction suggest an erosion of the distinction between public and private mourning (Small, 1998), but it reveals the intimate link between between public dying and public mourning. Here both Johnson (1999) and Walter (1999, p. 26) note how the depth of emotion and meaning in the public mourning for an individual known "only" through the media is not invalidated by the lack of traditional physical
proximity but can be just as meaningful and enriching, if not more so, than in some face-to-face relationships.

More recently, in the first decade of the twenty-first century, narrative accounts of illness and dying have been democratized through the user-led, participatory nature of social media (witness, for example, the huge worldwide media/public interest generated by Stephen Sutton's blogging and charity activism during his terminal illness) and the rise of celebrity television through which "ordinary" members of the public are transformed, overnight, into celebrities—or what Rojek (2001) has coined "celetoids." In the UK, the most visible and "hard to avoid" (Walter, 2009) example of public dying to date has been that of Jade Goody, a former housemate, and winner in 2002, of the reality television show Big Brother. Appearing in 2008 in the Indian version of Big Brother, Bigg Boss, Goody received the diagnosis of cervical cancer from a London doctor live on television in the BB "diary room." This erosion of public and private scaled new heights (or plumbed new depths, depending on your perspective), making Goody's dying "unprecedently public" (Walter, 2009).

Recent trends in auto/pathography have also seen a diversification in their "form", where they are no longer confined to the pages of printed books (nor the preserve of professional writers), but are widely available in magazines, television interviews and made for television documentaries. The physical decline of actors Paul Newman, Patrick Swayze and Farrah Fawcett was widely covered in popular magazines and on popular entertainment television channels (Woodthorpe, 2010), while British playwright, Dennis Potter, and Christopher Hitchens, both gave extended television interviews that were explicitly pathographic in nature. In 2014, British television's Channel 4 broke new ground by screening a four-part reality-TV-documentary, "Our Last
Summer”, in which five terminally ill people were brought together to share, and talk candidly about, their experiences of dying while living together in a rural retreat provided by the producers (Harrod, 2014).

The motivations behind the decision to chronicle one's experience of dying are ostensibly as multifarious as the pathographies to which they give rise. Goody, who was famously poorly educated and came from a humble working-class background, sold her story to fund her sons private education. While this is an obvious example that illustrates the commodification of dying, the market for what sells is also an implicit "driver" of demand for book-length auto/pathographies from publishers (Armstrong-Coster, 2005). This clearly dictates the content of such auto/pathographies, helping to determine decisions about which aspects of dying can, and cannot, be given public airing. Woodthorpe (2010), for example, has argued that Goody helped simultaneously sanitize and sensationalize what dying is actually like, through concealing the more unsavory bodily aspects of dying, while also amplifying dying as both shocking and entertaining.

Another motivation for publicly sharing one's experience of dying may come from the apparent sense of agency, control and symbolic mastery (Doka, 2003) that comes from writing/telling (Wyatt-Brown, 1995) in a situation of terminal decline otherwise characterized by the absence or loss of personal autonomy and control. The seemingly human impulse to narratively record and share one's experience with others may also stem from a desire to make sense of (Arendt, 1968; Bruner, 1986, 1987; Neimeyer, 2005), and to reconstruct (Seale, 1998), an otherwise senseless and disordered experience of personal disaster (Bury, 1982; Mairs, 1993, cited in Wyatt-Brown, 1995). The felt need to bear witness (Ahmed & Stacey, 2001), through auto/biographical
testimony of this sort may well be another motivational factor in the production of auto/pathographies. The net result of this may well be therapeutic, whether deliberately intended or not. The motivation underlying auto/pathographic writing and telling may also be altruistic, governed by a desire (and responsibility) to help others; to make the pain "count for something" (Klass et al, cited in Grinyer, 2006, p. 213) by finding benefit (Neimeyer & Sands, 2011) in an existential plight (Doka, 1993; Weismann, 1980) that may be shared by others.

No less plausible an explanation is that while ours in an increasingly "confessional culture", there may well be a reluctance and inability on the part of those closest to the dying to actively listen and "hear" their stories, thereby necessitating a need to find a wider audience more readily able to bear or withstand their experiences, precisely because it is death and dying experienced at a distance or "removed" (Field & Walter, 2003; Walter, 1991, 2009). Talk of death and dying in contemporary society may no longer be taboo (Walter, 1991) but may well be limited to particular times, places and audiences (Walter, 2014).

The wider significance of auto/pathographies of the kind discussed here lies in their potential for us, as a wider society, to learn something meaningful from them. Fifty years ago, Geoffrey Gorer (1965) suggested that in an age of increasing secularization, "Anglo-Saxon" societies had abandoned the time-limited, religiously inflected mourning rituals which served to guide individuals through the tumultuous process of grieving the loss of a loved one. So too, in contemporary Western societies, where most of us will reach adulthood without witnessing another person of the same household die (Walter, 1994), where many may not experience a serious or close personal bereavement until their fourth decade, (and where dying has been pushed comprehensively behind the scenes of everyday public life, our understanding of the
experience of dying and bereavement are likely to be attenuated. The media in general (Field & Walter, 2003), and auto/pathographies in particular (Walter, 2010), may well therefore be how we learn about what death and dying are like. The need to educate the public about key end of life issues is an imperative identified and targeted in the UK government's policy agenda, including its 2010 launch of a *Dying Matters* coalition aimed at promoting greater public awareness and engagement with issues of dying, death and bereavement (see http://www.dyingmatters.org).

In this vein, the UK's most celebrated case of public dying to date, that of Jade Goody, served in the role as informal death educator (Walter, 2009), raising awareness about the importance of screening in the early detection and prevention of cervical cancer, as well as how to face death with fortitude. In the context of medical practice, auto/pathographies offer the potential the close up the gap between doctor and patient (Aronson, 2000) first opened in the modern move from "bedside" to "hospital" medicine (Jewson, 1976), helping doctors "to understand their patients better" by teaching "them things they won't learn from textbooks" (Aronson, 2000, p. 1599). Grief counselors too can learning something valuable from auto/pathographies (Holloway, 1990), helping them to understand their clients better, in ways that might help reverse the traditional counselor-client relationship by encouraging the expert to learn from the client (Walter, 1994, p. 128).

**Method**

In all, five television interviews with Christopher Hitchens were selected for analysis. All but one were conducted in the late summer and fall of 2010, each with major broadcasters (BBC, CNN, PBS, ABC Australia, and Sky Arts—UK), and by esteemed journalists and presenters (Jeremy
Paxman, Anderson Cooper, Charlie Rose, Tony Jones, and Laurie Taylor). Regardless of whether these interviews occurred at the request of broadcasters or were initiated by Hitchens himself, they nevertheless reflect Hitchens' purchase and appeal within certain "literary" or "cultural circles" within the English-speaking world—what German Sociologist Jurgen Habermas has termed the bourgeois public sphere and others have elaborated and refined as the "cultural public sphere" (McGuigan, 2000, 2005).

Each of the interviews were accessed from the video-sharing social media website, YouTube, itself increasingly a part of the cultural public sphere (Castells, 2013; Edgerly et al, 2009). Now part of the mainstream media landscape in a post-television age (Burgess & Green, 2013; Strangelove, 2010), YouTube affords users the opportunity to upload, comment on, and share video content, serving as a portal that at once blurs traditional distinctions between producers and consumers, giving rise to the contraction "prosumers" (Toffler, 1980; Ritzer & Jurgenson, 2010, cited in Lee, 2012, p. 472), while also serving as a site for social networking, with users able to interact with others by "liking", rating and/or posting comments relating to a particular video. The advent of Web 2.0, and the participative opportunities it provides, has democratized our 'electronic media surround' (Hoskins, 2006), transforming consumers of media content from passive readers, viewers or listeners into potential speakers and participants in a conversation (Benkler, 2006, p. 213). The "talk-back" comments posted underneath video content on YouTube are themselves a rich source of data worthy of social scientific investigation, providing access to how an audience make sense of and respond to a media product, performance or text (Field & Walter, 2003).

Once identified, the videos were first viewed, in full, minimizing any preconceptions about their
content. They were then viewed a second time, accompanied by detailed note-making afforded by the ability to stop and pause video content posted on YouTube. Following this, each of the interviews were transcribed in full, with careful attention paid to the inflexion of particular utterances, pauses in speech, the use of body language, and turn-taking employed in the interviews - all of which form part of the consideration in the standard techniques employed in conversation analysis (Sacks, 1972). Although time consuming and labor intensive, this iterative process (Barbour, 2008) allowed me unparalleled intimacy with the data that would not have been possible by analyzing either the video content or interview transcripts alone, but only via the interaction between analysis of the spoken word and moving image (Kitzinger, 1999).

Following this, the data were coded; first, in a process of "open" coding (by which the data were "disentangled" or "segmented" into units of meaning in order to attach annotations and concepts to them), second, through a process of "axial" coding (by which links between categories of data were elaborated), and third, by "selective" coding (whereby core concepts and particular themes were focused upon and elaborated) (Flick, 2011; Corbin & Strauss, 1990; Strauss & Corbin, 1990). Together, this process, while not necessarily linear, represents "the operations by which data are broken down, conceptualized, and put back together in new ways" (Flick, 2011, p. 148). This process of coding continued until the data had reached the point of "theoretical saturation" (Glaser & Strauss, 1967, p. 61), whereby the data are able to "illustrate, qualify, challenge or generate theoretical insights and bear the weight of theoretical interpretation" placed upon them (Redman, 1999, p. 129).

The approach adopted in this research draws upon a case studies framework for understanding Christopher Hitchens' public dying as a unique, specific and bounded event (Stake, 2005, p. 445).
In so doing, it makes the assumption, following a wealth of auto/biographical research (e.g.), that a focus on individual lives can illuminate much about the social and cultural structures and processes by which individuals are constituted. Here, as Rustin (2001) suggests, understanding of the social world, while indebted to "abstract general propositions or laws" has "been equally accomplished through the luminosity of single cases" (Rustin, 2001, p. 105). So too, my analysis in this paper is informed by some of the core assumptions underpinning both conversation analysis (where talk is understood as a practical social accomplishment [Hutchby & Woofitt, 2008]), and discourse analysis (where attention is drawn to what the text is "doing" in the social and cultural context in which it occurs [Paltridge, 2012]), without being exclusively reliant on either.

**Findings**

Four thematic categories were identified as emerging from my analysis. The boundaries between these categories are porous, a result of the interpretation of data which emerged from my own coding and analysis. Another researcher, using a different interpretative framework, may of course have identified different categories and reached a different conclusion of the data from that presented below.

1. Hitchens' Sense of Mission

The term "mission" has two typical uses and meanings: referring 1) to a particular assignment or task with which one has been charged or set oneself, and 2) to the notion of a vocation or "calling" by which one proselytizes their faith, usually Christian, in a bid to convert others to a particular viewpoint or perspective. The term is deliberately deployed here to convey the sense that Hitchens' television interviews, writing, and public appearances in the months following his
diagnosis appear to be envisioned with a particular zeal and purpose clearly in mind: confronting the myths and superstitions that have come, in the public imagination, to dominate our fears and apprehensions about cancer. These fears, as Seale (1998) notes, pointing to the work of Susan Sontag (1979), are especially powerful when allied to the use of cancer as a metaphor for social evil. Hitchens' attempt to challenge these prevailing myths using the discourse of reason and science resonates powerfully throughout the interviews and wider body of auto/pathographic work I analyzed; both explicitly (see below), and implicitly, in the energy Hitchens dedicated to writing and to public appearances in the final months of his life.

Early on in the interview with Jeremy Paxman for BBC Newsnight (BBC 2010), Paxman asks Hitchens about his prognosis and whether, "in the old cliché," as Paxman puts it, he was living "day-to-day?" Hitchens responds affirmatively to the question but then, unprompted, shifts the direction of his response by talking about the intentions underlying his auto/pathographic speaking and writing:

PAXMAN: But in the meantime, in the old cliché, you live day-to-day?

HITCHENS: Oh yes, one does – but actually, who doesn't? There is, however, I think, something specifically terrifying which I'm trying to oppose, in my writing and my appearances, about cancer.

Paxman then goes on to ask Hitchens bluntly if he is "terrified by it?" (it is not immediately clear what “it” refers to here—cancer or dying/death?) Hitchens responds with a definitive "no", labeling the myths and misconceptions surrounding it a "superstition"; comparing cancer, and the fear it generates, to conditions that once dominated the popular imagination of earlier generations, such as polio, smallpox and tuberculosis:
HITCHENS: [B]ut none of them have the same...horror as cancer's been allowed to acquire, and I think it's probably because of there being a life inside you, a sort of malignant alien that can't outlive you, but does—in a sense—have a purpose to it's life, which is to kill you and then die. It's like an obscene parody of the idea of being pregnant; in fact, I always feel sorrier for women who have cancer than men. For men the idea of hosting another life of any kind is hard to think about, but for a woman it must be a grotesque, nasty version of being a host to another life. I have a feeling this is why people propitiate it with bogus cures, terrible rumors...scare stories and so on, and I've set my face to trying to demonstrate [that] it's a malady like any other and it will yield to reason and science; and that's what I'm string to spend my time vindicating.

Hitchens' talk in this interview and others, consistent with his wider body of work and thinking, is clearly underscored by a defense of Enlightenment principles, chiefly, reason and science, as providing rational explanation of the physical world based on empirical, evidence-based testing and analysis. Superstitions surrounding cancer foregrounded Hitchens' own diagnosis with cancer of the esophagus, with opponents on the religious right suggesting that this was some form of divine punishment or curse on Hitchens and the organ with which he had blasphemed.

2. The Subjective Experience of Illness/Dying

Descriptions of the experiences invoked by illness and dying (whether physical, emotional, psychological and/or spiritual) are the standard generic fare of contemporary auto/pathographies. Accounts of these experiences do not, however, feature particularly prominently in the television interviews given by Hitchens (at least not in the "expressivist" spirit or style of much contemporary auto/pathography). Reflections on the physical experiences of cancer - of the epic struggle by a nurse to draw blood; of pain and discomfort; and the loss of hair, including chest
and nasal, occasioned by chemotherapy—are dealt with more in Hitchens' writing in his *Vanity Fair* column, and his posthumously published book *Mortality*. When the experience of illness, dying and death are reflected upon by Hitchens in his television interviews, it is in a characteristically stoical and intellectual fashion; reflective of the "intellectualization" of life in modernity (Simmel, 1950/1905) by which emotion and reason are uncoupled.

This is a point, for example, picked up by Anderson Cooper in the interview for his CNN show Anderson Cooper 360 (CNN 2010):

> COOPER: It's interesting hearing you talk about it...I mean, obviously, you are an intellectual, and you seem to be dealing with it in an intellectual way. Does that...make sense? You seem to be looking at this...trying to look at this as rationally as possible. What about the emotional side?

Emotions are not completely absent from the television interviews with Hitchens, though they are configured, and articulated, quite differently from the way in which "feelings" have acquired a particular currency or capital within late modern society. In the genre of "confessional interview", for example, the disclosure of feelings and emotions is often taken as positive sign of human vulnerability and authenticity—the 1995 BBC *Panorama* interview with Diana, Princess of Wales being an exemplar of this genre. In the Hitchens interviews, the one human emotion given significant attention is fear; though it is not couched in terms we might normally recognize as part of "emotions."

Fear, for Hitchens, stems not from the thought of impending death, but from dying; from losing the ability to think and write, of being rendered imbecilic. The following exchange from the BBC
Newsnight interview between Hitchens and Paxman attests to this fear, disentangling anxieties about a fear of death from a fear of dying:

PAXMAN: Do you fear death [delivered softly]? 

HITCHENS: No. I'm not afraid of being dead...There's nothing to be afraid of; I won't know I'm dead, in my strong conviction...One can't live without fear, it's a question of what is your attitude towards fear. I'm afraid of a sordid death. I'm afraid that I would die in an ugly or squalid way; I mean cancer can be very pitiless in that respect.

PAXMAN: That's a fear of dying; it's not a fear of death though.

HITCHENS: Quite. I forget now which you asked; it's a good distinction [pause]...Of death, no; of dying, yes...But no, I think, my main fear is of being incapacitated or imbecilic at the end...that, of course, is not something to be afraid of, it's something to be terrified of.

Hitchens here is articulating an increasingly widespread fear in Western societies, where the cost of extended life expectancy is an increased risk of dementia and incapacity resulting in the loss of mind (Seale, 1998, p. 151).

What is also clearly at stake in Hitchens' illness/dying is the loss of his professional, and by extension, personal identity. Writing in this sense, when serious illness has disrupted personal identity and a sense of self (Bury, 1982), functions as a vehicle of narrative repair through which identity is restored (Small, 1998). Talk itself, as Seale (1998) suggests, is a social institution which functions by reaffirming the social bond threatened by death. Hitchens' interviews can
therefore be seen as a defense against impending death in the face of physical dissolution and social fading. Our bodies, as Seale (1998) suggests, are both the means by which we have life but also the containers that "set material limits to our experience" (Seale, 1998, p. 11). Tantamount to Hitchens' fear of dying is therefore a fear of losing his ability to function as a writer. This can be seen in the interview Hitchens gave to Tony Jones for ABC Lateline, Australia (ABC 2010):

HITCHENS: There were a couple of days when I was afraid I was [not] going to be able to write, and that terrified me very much because a writer is what I am, rather than what I do. It's my— without I hope sounding too affected—my raison d'être.

In his posthumously published book, Mortality, Hitchens elaborates upon his experiences of losing that which is most central to who he is: first, in his loss of voice, when cancer had temporarily robbed him of the ability to speak; and second, in the temporary loss of feeling in his hands caused by injections to reduce the pain in his arms. The loss occasioned by the first led him to write the following:

"And what do I want back? In the most beautiful apposition of two of the simplest words in our language: the freedom of speech" (Hitchens, 2012, p. 55).

The loss occasioned by the second led Hitchens to state:

"I feel my personality and identity dissolving as I contemplate dead hands and the loss of the transmission belts that connect me to writing and thinking" (Hitchens, 2012, p. 71).

At one point in his interview with Charlie Rose for PBS, (PBS 2010) it is almost as if the loss of
Hitchens' ability to function as a writer surpasses the visceral experiences of pain wrought by cancer:

ROSE: Back to living with cancer.

HITCHENS: Yes.

ROSE: What's the worst part of it? Is it that it puts some sense of mortality in your focus?

Hitchens responds in the negative, suggesting that an awareness of our own mortality is always a "useful" attribute; and that we are fortunate enough "to live in a time where you can be healthy until you're 60—as I was." Hitchens then goes on to list some of the worst things about cancer, including a fear of being boring through a preoccupation with the disease. What emerges from this exchange is a sense that the worst part of cancer is that it threatens to stifle or put an end to the two things Hitchens loves most: social interaction and debate, and the ability to write:

HITCHENS: There are days when I'm very afraid it will stop me from writing; there are certainly days when I find it hard to write, and writing was recreational for me, most of my life—it's hard work but I enjoy doing it, wasn't happy not doing it, now it can be an effort. Terrified it would kill my ability to do that...because that would sap my will to live among other things...err...what else is bad about it? [Thinks] [It] makes you feel sick...

ROSE: Physically?

HITCHENS: Yes. Time passes very slowly...everything takes a long time [and] you never feel that
you've done a full day's work. If you've done anything at all you're pleased, so your standards fall.

What is striking here, then, is the sense that for Hitchens the experience of living with cancer is evaluated largely as an impediment to his intellectual labor and professional identity. It is this loss of an essential part of his being that for Hitchens would diminish his will to live.

Hitchens does nevertheless talk about the enormous physical effects of cancer in the five interviews I analyzed: of being, for example, "demoralizingly visited by nausea" (Sky Arts, 2011), of feeling compromised by the "kill-or-cure does of venom cocktail mainlined into me" (ABC, 2010), of "chemobrain" and the foggy-headedness that comes from chemotherapy (Sky Arts, 2011), and of the persistent vomiting, "even when you haven't eaten anything for a long time...and that's very upsetting and also exhausting" (Sky Arts, 2011).

What also emerges as striking is the sense of boredom and passivity that, for Hitchens, characterizes the experience of cancer. Much of this, as seen below in the CNN interview with Anderson Cooper, revolves around the experience of chemotherapy

HITCHENS: [H]aving to sit through chemotherapy...is almost a Zen experience of boredom. You can't do much but read; and you're watching poison going into your arm.

Much of this passivity, however, for Hitchens, extends beyond simple boredom to a profound sense of impotence and powerlessness: that attempts to personify or animate the cancer as a "malignant alien", or to educate oneself about the disease and "look-up treatments" and potential cures are part of a "pathetic fallacy" by which the sufferer attempts to exert symbolic mastery
over the disease. There is a sense, as Hitchens put it in his PBS interview with Charlie Rose, that the cancer is the one "dictating terms":

**HITCHENS**: You can't really seize the initiative. You can pretend you are - you can go and look up treatments, read books about cancer, look up other protocols, feel that you're trying to steal a march on the thing, but I can't help feeling I'm fooling myself [gulps]...excuse me.

In two of the interviews (for BBC *Newsnight* with Jeremy Paxman and PBS with Charlie Rose) discussion includes the failure and inadequacy of language to fully capture the subjective experience of living with cancer. Within contemporary discourse and news reporting, the experience of cancer is routinely constructed as a heroic quest (Seale, 1998, 2002)—whereby one "battles" cancer—whereas lived experience is often quite far removed from this. In the BBC *Newsnight* interview, Hitchens responds to a question from Paxman asking him about this experience of "battling cancer":

**HITCHENS**: I rather think it's battling me, I have to say. It's much more what it feels like...[It] doesn't feel like fighting at all, possibly resisting, I suppose; but no, you feel as if you're drowning in passivity [camera pans to Paxman, who looks anguished], being assaulted by something that has a horrible persistence that's working on you while you're asleep.

Similarly, in his interview with Charlie Rose for PBS, Hitchens states:

**HITCHENS**: You keep being told it's a battle and you wonder what you can bring to it; all you have to do is wait for the news and respond to treatments. It's appallingly passive, but struggle is a favorite word of mine.
Hitchens' reference to "struggle" here corresponds with his wider politico-philosophical worldview based on the dialectic, in which social change is accomplished not through consensus but oppositional struggle. As I will argue in the discussion section below, Hitchens' choice of vernacular for conveying and comprehending the experience of cancer reflects both his personal/professional identity and the established linguistic conventions of talk surrounding cancer.

Other emotions—chiefly grief and anger—are touched upon briefly in the interviews; though there is very little which we would recognize here in the conventional expressivist orbit of "feelings" or emoting—either verbally or in an embodied sense. Hitchens remains stoical, apologizing at one point in the interview with Tony Jones for ABC Australia for "having surrendered briefly to the blues" for a "misdemeanor" that is in no way discernible to viewers. Elsewhere in the interviews, Hitchens reveals to Charlie Rose sometimes becoming "a bit lachrymose" when he thinks of his children and the possibility of not seeing them grow up. In his interview with Anderson Cooper, Hitchens reveals that, to his own surprise, he "hasn't wept at any point yet. Maybe that's to come. But I've become moist at the thought of my children, for whom it's a nasty shock."

The grief experienced here by Hitchens at the thought of his own death is not ostensibly for himself but for others. This, as Ariès (1974, 1981) has indicated, is a particularly modern incarnation of grief; a shift in the fear of "my death" (and preoccupations over the fate of the soul in pre-Reformation Europe), to "thy death" (and the fear of how, in a secular era influenced by Romanticism, we will manage to live in the absence of significant others with whom we have
forged "romantic" attachments and bonds). Hitchens' anxieties are articulated here as both the grief of his children for their loss, and his own grief for the severance of bonds with off-spring not yet full independent or grown, at not seeing them grow-up or marry—a grief presumably unknown to pre-moderns, for whom childhood and sentimental family ties as we know of them in the West today would be unrecognizable (Ariès, 1962; Laslett, 1965; Shorter, 1975; Stone, 1977).

Anger, where it is discussed, is less an explicit concern initiated by Hitchens himself than it is a focus of interviewer-led questions, reflecting implicit assumptions about stage-theories of grief that, since the pioneering work of Kübler-Ross (1969), have come to be widely accepted in mainstream culture. Jeremy Paxman, for example, asks if cancer/dying has made him angry; while Charlie Rose asks the same question, albeit couched in literary allusion, where it is phrased knowingly—in a conversation between two men of the literati—as "any Dillon Thomas in you?" Hitchens' response to Rose's question is to say "no"; for there is, in his view, nothing to be enraged about, as it is a "very necessary thing" that "people have to die in large numbers everyday so as to make room"—a functional view, in sociological terms, of mortality if ever there was one (Walter, 1993). In response to Paxman's question, Hitchens returns us to a focus on reason and science. Awareness that he is dying does not, in Hitchens' view, make him angry, but rather "sober" and "objective"; both "lucky and unlucky" to know his disease enemy in advance and "to be able to take it's measure." Taking it's measure in this instance, for Hitchens, means putting himself “on the side of those men of medicine, science and reason who are trying to reduce it [cancer] to something that is understandable, assimilable to reason, [and] that will be brought under control." If anything, Hitchens' sense of mission is "to prove to other people that it's not the end of everything to be diagnosed with it [cancer]...[and that] yes, it can be resisted—I
think I prefer 'resistance' to 'battling'.

3. Regrets: A Life Well-Lived?

Awareness of dying provides the opportunity for reflection, to review one's life. The interviews with Hitchens provide just this opportunity for retrospective review; as Hitchens' himself put it, quoting Danish existential philosopher Soren Kierkegaard, to live one's life forward and review it backwards. Questions of regret—and the opportunity, if one had one's time over again, to do things differently, tend to dominate end-of-life reflections. Such reflections are the staple of medieval deathbed scenes, including those recounted in books intended to provide instruction on the art of dying. These books, in which dying was idealized, were of course intended to provide salutary warning to disbelievers and the unfaithful, ensuring more than gentle encouragement of them to repent, confess their sins, and commit themselves to a belief in the almighty, if only to save their soul from eternal damnation.

Hitchens' television interviews provide a contemporary, secular approximation of this deathbed tradition: filmed in Hitchens own home, the TV journalist/interviewer replacing the priest as the dying man's or interlocutor. Issues of regret, as posed in questions put to Hitchens by his interviewers, cluster chiefly around two core issues: 1) regrets over the targets of his invective; and 2) regrets about his lifestyle lived, especially Hitchens' celebrated penchant for drinking and smoking. In the first, Hitchens denies that the experience and awareness of cancer/dying has caused him to regret any of the targets of his polemic. Indeed, Hitchens states in his interview with Laurie Taylor for Sky Arts—UK, that he "hates the idea" that somebody like Pope Benedict XVI or former secretary of state, Henry Kissinger, will be alive to read his obituary "when I had fully intended to be writing theirs...and, I make no bones about it, that's why I don't ask for
sympathy, because I'm not intending to dish it out either." Neither does Hitchens accept the premise of Jeremy Paxman's question when he asks if awareness of his own dying has given him a "mellower view of humanity." Quite the contrary, if anything, Hitchens responds, it confirms his view of human existence as "stark."

In the second instance, Hitchens expresses regret over his louche lifestyle choices, not for himself but for his family, for whom, he tells Paxman, "it's not very nice and I could have wished perhaps to have a led a more healthy and upright life for their sake." Elsewhere, in his interview with Charlie Rose, Hitchens acknowledges that "had I known I was going to live this long I'd have taken much better care of myself." Yet this is offset by Hitchens' insistence that his dalliance with a Bohemian lifestyle was part of a risk worth taking, premised upon a view of life as a "wager", in which cigarettes and alcohol helped enhance, prolong, deepen and sometimes intensify argument and conversation. While not recommending it to others, Hitchens tells Rose that: "it's impossible for me to imagine having my life without going to those parties, without having those late nights." This is also what, for Hitchens, is so demystifying about cancer; that, as he puts it in his interview with Anderson Cooper for CNN: "I came by this particular tumour honestly. If you smoke, which I did for many years, very heavily...and if you use alcohol, you make yourself a candidate for it in your 60s."

More than this, and contra some suggestions that Hitchens' cancer was divine retribution for his strident atheism and criticism of organized religion, Hitchens suggests a fundamental banality underlies his mortal sickness. It is banal, he tells Jeremy Paxman, exactly because "if you've led a rather Bohemian and rackety existence, as I have, [then] its precisely the kind of cancer you'd expect to get. That's a bit of a yawn." The "sin" visited upon Hitchens here, then, is an abridged
life and hastened death caused by a decadent lifestyle in largely secular Western societies, the palimpsests of an earlier religious tradition are evident in the vernacular by which proposed taxes on fast-food manufacturers are described as "sin taxes", where punishment for "gluttony" is doled out in this life, in the form of an early and often painful death, rather than in the next.

4. Religion, the Afterlife and Deathbed Conversion

Religion is also a prominent feature of the television interviews with Hitchens. This is perhaps to be expected given Hitchens' notoriety as a leading atheist and high profile critic of organized religion. It is especially so when allied to the widespread assumption that it is religion to which people turn in the face of personal crises (Berger, 1967) and life's ultimate problems (Yinger, 1970), chief among which are serious illness and death. The focus on religion, issues of life after death, and the possibility that Hitchens might revise his atheistic beliefs in light of his terminal prognosis is a line of questioning pursued by all of the journalists in the television interviews I analyzed. Charlie Rose, for example, in the interview for PBS invokes an imagined community (Anderson, 1991) of interested parties when he poses the following question:

ROSE: Everybody wants to know the following answer: Has any of this caused you to have any change of your ideas or opinions about religion?

Similarly, Anderson Cooper in his CNN interview asks Hitchens:

COOPER: In a moment of doubt, isn't there...I just find it fascinating that, even when you're alone and you, you know, no one else is watching, that there might be a moment where you, you know, want to hedge your bets?
The issue is raised by Jeremy Paxman in his BBC interview in the following way:

PAXMAN: A lot of people in your position might take Pascal's wager; they might say I don't know whether I'm right or wrong...But if I accept the possibility of there being a purpose and a God, I can't lose either way, because if there isn't [then] I've lost nothing, and if there is, I gain...Why haven't you done that?

The interviews tell us much about the focus of the television interviewers and the widespread cultural assumption that individuals will, in the last instance, resort to any kind of bargaining in order to save or prolong their own lives. Hitchens, however, remains steadfast in his conviction, telling Paxman that any such behavior is not only "hucksterish" but "contemptible", and that "I'm not going to try anything servile, I'm resolved on that point."

Hitchens appears to use the television interviews as an opportunity to put on public record his absolute refusal of the possibility of his own deathbed conversion. In several of his interviews, including with Charlie Rose for PBS, Hitchens tells of the "long" and "very unattractive history" of scurrilous accounts by religious people who have claimed that non-believers re-considered their views at the eleventh hour, just before death. Hitchens suggests that such claims were made about eminent scientists and thinkers, including Voltaire, Thomas Paine, David Hume, and Charles Darwin. In his interview with Anderson Cooper for CNN, Hitchens claims any such deathbed conversion "will only be when I'm very ill, when I'm half demented, either by drugs or pain, where I wouldn't have control over what I say." The dialogue between Cooper and Hitchens concludes with a definitive rebuttal from Hitchens:

COOPER: So if there is some story that on your deathbed...
HITCHENS: Don't believe it [said with conviction].

COOPER: Don't believe it?

HITCHENS: Don't credit it, no. [End of interview].

Asked by Tony Jones in his interview for ABC Australia if he recognizes the comfort that religion may bring to others in a similar situation to himself, Hitchens provides a defiant and forthright response, insisting that to seek guidance in a savior or shepherd is a form of servitude that he finds "contemptible." "Looking death more closely in the eye", he tells Jones, "as I have been doing, doesn't teach you much that you didn't already know, surprisingly enough." This, he suggests, includes knowing that some people "derive great comfort from the thought that they have a savior, that they're a member of a flock." What Hitchens does appear to take comfort in is in knowing that he has made a meaningful contribution to the lives of others. This is indicated to Hitchens in the many letters of support he received from well-wishers. Here, at the end of his interview with Jeremy Paxman, he makes room for one last regret and a case for the social support provided by letter writing:

HITCHENS: [I]n case you are [clears throat] are watching this...and you've ever wondered whether to write to anyone - always do, because you'd be surprised by how much difference is can make [long pause]. I regret—here's a regret—I regret not doing it more often myself.

Attention is also drawn in the interviews to Hitchens' thoughts about the possibility of life after death. This is part of the wider discussion prompted by Hitchens' dying which, as Liesl
Schillinger (2010) has suggested, writing in the *New York Times*, "has spurred one of the most heated discussions of belief, religion, and immortality in years." In the interviews, Hitchens says he takes little comfort from the immortality of the written word and the work he will leave behind—that, as he says to Tony Jones, "it doesn't reconcile you to an early death, no it doesn't." Asked in the same interview with Tony Jones for ABC Australia if the near death experiences (NDEs) of philosophers A. J. Ayer and Daniel Dennett had weakened his own conviction about the possibility of life after death, Hitchens reaffirms his assertion that "there is no persuasive evidence for—or argument—for it." More than this, Hitchens insists that there is "no evidence...that any human being can tell you how you qualify [for the afterlife] or what's meant by seeing some bright light at the end of the tunnel." The interviews are peppered with Hitchens' wit and humor and, in agnostic fashion, he concedes the possibility of life after death when he says:

"I like surprises. If there's to be a second look around with somehow not me and not my brain, but some kind of consciousness, well, that would be more fascinating than many days I've spent in real life."

**Discussion**

All of the interviews are foregrounded by an introductory prelude by which Hitchens' diagnosis is revealed to viewers, accompanied by a potted biographical introduction to his life and work. Each interview, distinguished by varying degrees of directness, opens with a precursory question about Hitchens' prognosis and current state of health. This sets the tone for the interview, while reminding viewers of the parlous nature of Hitchens' condition. The latter is reinforced visually, by both the setting—Hitchens' home in Washington D.C—rather than the typical location of the
television studio, and by the visibly weakened physical appearance of Hitchens—thinner and without hair as a result of chemotherapy. This juxtaposition—of home/private versus studio/public and of the previously healthy versus presently sick Hitchens—serves to dramatize the nature of the interviews: as not only "confessional" but perhaps as the last interview with Hitchens before his death. That Hitchens is afforded a television interview at all is itself testimony to his public influence, for as Davis (2004) notes, in the UK this is a privilege accorded only a few, usually royalty and senior political figures.

Jeremy Paxman opens his interview with Hitchens thus: "Christopher, can we start by talking about the cancer? What is the prognosis? Less directly, Anderson Cooper begins by asking Hitchens: "When did you realize something was wrong?", thereby inviting an illness narrative that begins with a seminal moment of recognition; a turning-point of fatal discovery from which there is no return. Tony Jones invokes an imagined community (Anderson, 1991) of concerned well-wishers when he opens his interview by asking: "And the question that most are going to want to know is how are you at the moment? How are you feeling?" Media in this way speak on behalf of an assumed audience; an imagined community of concerned viewers with a fictive sense of kinship for an individual they have never met (Foster & Woodthorpe, 2012). Laurie Taylor begins his interview in the following way: "I was going to start off with some in-depth political question, but I really should get the shit out of the way—how are you feeling?" This is significant because it suggests that talk about illness and dying is peripheral to a discussion of weighty political matters; the excreta to get "out of the way."

The nature of the interviews—foregrounded as they are by the sensitive issues of serious illness and dying—is itself significant. For here are seasoned journalists—accustomed to interrogating
politicians and public figures, to asking the "tough" or "hard" questions, often in a combative fashion—who are clearly in terrain which is foreign to them. It is perhaps no coincidence either that all of the interviewers are men; men of a particular social background, and one is left to wonder whether the style and scope of the interviews and questions would have been different if conducted by women. There is a real sense in the interviews of the novice learning from the expert; a genuine sense of curiosity on the part of the interviewers about what living with cancer and its side-effects are really like. This in turn serves to elevate the authority of Hitchens, as "story-teller", whose local and subjective knowledge of pain, anxiety and fear demands an audience. This is illustrated when Laurie Taylor asks: "Is it directly related to mood? I mean, you actually feel physically ill and then your mood shifts with it or [searches for word]...?"

Softened by the lighting and homely surroundings of Hitchens' apartment in which the interviews take place, the tone of the interviews is affectionate and kindly. Again, this provides an implicit juxtaposition with the formal interrogative style of political journalism in which these men typically ply their trade. There appears to be a shared understanding between the men premised not just on their shared occupancy of literary-political terrain but on a shared social background. At one point in the interview between Paxman and Hitchens, Hitchens employs the colloquial acronym "KBO" (keep buggering on)—a term which, in the specifically British context, can be indexed to the privileged private school education that both men share—without qualification, but which is clearly understood by Paxman. Elsewhere, in the interview by Charlie Rose, Rose refers to Hitchens as "Hitch”—a sobriquet reserved only for his closest friends—when he says: "There is an outpouring, Hitch, of affection for you, genuine affection...you see it everywhere." It can perhaps be assumed therefore that not only were these interviewers deliberately selected but that the pre-existing friendship and trust served positively to foster an intimacy that might
otherwise have been lacking in an interview conducted between relative strangers.

Understood from the perspective of conversation analysis, and the sociological school of ethnomethodology from which it draws theoretical support, the Hitchens interviews can be seen as part of ordinary, everyday talk through which meaning is brokered. While not entirely random or spontaneous, the talk between the two participants in this conversation is nevertheless a "practical social accomplishment" (Hutchby & Wooffit, 2008, p. 12) through which membership of the wider collectivity is affirmed. This is significant given that awareness of one's own mortality is likely to provoke an existential crisis that calls into question the purpose and place of the individual within the broader social and cosmic framework. If conversation analysis focuses on the utterances and turn-taking that are part of the micro ritual of everyday social interaction, discourse analysis explores language beyond the individual sentence, asking what function a text performs in the social and cultural context in which it occurs. Here the Hitchens interviews can be seen as contributing to a wider public debate—about dying, religion, and the nature of a life well-lived, among other issues.

In these interviews, in which Hitchens serves as "chief mourner" presiding over his own "mortuary rites" (Seale, 1998), Hitchens is able seemingly to imbue the experience of dying with meaning, while simultaneously maintaining the social bond which death (and the process of dying) threaten to dissolve. The manner in which Hitchens represents his own dying resonates with the barbed wit, literary and polemical style that were inimitably his. Discussing the last television interview with British playwright, Dennis Potter, perhaps the closest equivalent to the Hitchens auto/pathographic interviews analyzed here, Davis (2004) writes that:
What we see in this interview [with Potter] is not simply the face of a dying man, but rather, the face of a dying author—that is, someone who interprets and represents the experience of facing death in a literary way" (Davies, 2004, p. 44).

Similarly, what we see in the Hitchens interviews is a man facing death is his own way: atheistic and rational, using metaphor and humor to represent and make sense of his own mortality. At one point, for example, in his interview with Charlie Rose, Hitchens says: "I mean, look, I'm not resigned to going yet; I haven't checked out yet either. I'm in the middle of an argument about that", reflecting a worldview shaped by a conviction of the importance of struggle and argumentation envisioned in a dialectical and Socratic tradition. Metaphor, as so often in auto/pathographic writing (Frank, 1995; Seale, 1998), is also employed by Hitchens to represent the experience of illness and dying. Hitchens' speaking voice in the interviews is shaped by, and filtered through, his writerly voice so that some of what he says in the interviews is a rehearsal of what he has already said, in writing, in his Vanity Fair column. Most poignantly, he repeats in words what he has expressed elsewhere, metaphorically, in writing about the moment he realized he was mortally ill, as a journey or transition from the land of the healthy to the land of the sick:

"I see it as a very gentle and firm deportation, taking me from the country of the well across the stark frontier that marks off the land of malady. Within a few hours, having had to do quite a lot of emergency work on my heart and my lungs, the physicians at this sad border post had shown me a few other postcards from the interior and told me that my immediate next stop would have to be with an oncologist. Some kind of shadow was throwing itself across the negatives."

(Hitchens, 2011, p. 85)
Unlike, however, in other illness and dying narratives, which are characterized by a departure, initiation, and eventual return (Frank, 1995; Seale, 1998)—the latter of which is usually represented as atonement—there is, for Hitchens, no sense of transformation or return. Hitchens is resigned to this fate when he tells Tony Jones: "And it's not a journey you can ever forget making and of course not one you can ever fully make back again either." Hitchens' hope lies not in redemption or personal transformation but in the possibility of medical cure, or at the very least, that the gene sequencing treatment for which he was a guinea pig might help others facing a similar plight. In the interview with Laurie Taylor, Hitchens tells of the interesting symbiosis that has come from his relationship with Dr. Francis Collins, a committed Christian and head of the National Institute of Health (NIH), who pioneered the treatment used to map Hitchens' entire genetic make-up and target his own damaged DNA.

What is particularly intriguing listening to Hitchens talk here and in other interviews is the way in which science and technology are themselves invested with extraordinary magical power—almost to the extent that they can be seen as part of the secular re-enchantment of a world robbed not only of Gods (Weber, 1981, pp. 281) but of magical thinking. Here science and technology, as Kristensen (2015) suggests, provide secular strategies through which the rational-material world can be re-enchanted, so that science—in which Hitchens is so heavily invested as atheist/humanist - can be both rational and magical at the same time.

Conclusion

As we have seen in this article, auto/pathographies and the media through which they are circulated are an increasingly important means by which people learn what the experience of serious illness and dying are like. Christopher Hitchens' public dying is significant because of the
potential space within discourse which his style of dying seemingly helped open up—public, yet rational and atheistic, stoical and non-expressivist, an alternative to the "scripts" for dying hitherto made available by other celebrities. Hitchens' public dying is a curious mix of the modern and late- or reflexively modern, seen both in his defense of reason, science and commensurate disdain for religion, alongside the very public nature of his terminal decline, where he contributes to a wider public conversation about illness, mortality and the human condition. The focus here on Hitchens illustrates the magnitude of particular individual lives and their ability to resonate with the experiences of others, often in ways that serve to inspire and guide them in the conduct of their own lives, and indeed, dying. That Hitchens articulates a secular-humanist *ars moriendi* in a culture that has often been openly hostile to atheists as "Other" (Edgell et al, 2006) is deeply significant for those who wish to face death without faith.

This focus on a single individual is not of course without its limitations. For a start, my focus here has been on the television interviews given by Hitchens as media performance or "text." While this provides insight into the "text" as media product, it tells little or nothing about the process by which it was produced or about the audience response to the "text" and how it is used. Further research in this area, although limited in this particular instance by Hitchens' death - in terms of production and the motivations underpinning it—might fruitfully explore the audience response to such a "text"/performance and others like it. The glimpse we as audience are given into Hitchens' dying—whether in his interviews or writing - is selective and partial, raising questions about what we do not see or hear off-screen, between Hitchens' "front" and "backstage" performances (Goffman, 1990). So too, the exposure we are given to another's dying in this context is limited. Not only—as in many other instances of public dying (Armstrong-Coster,
2005; Woodthorpe, 2010)—are the more unpleasant physical aspects of dying not a specific focus of Hitchens' dying, but this is dying "at a remove", distant and abstracted in a way has the potential to invite the viewer as voyeur.

Nevertheless, auto/pathographies of the sort analyzed here are an increasingly rich resource, not only for lay individuals but also for those working in professional practice with the dying and the bereaved. Often more accessible and available than technical "manuals" written on the topic of grief and grieving, these auto/pathographies may be read or consumed by individuals as part of their wider recreational reading, their messages subconsciously "stored away" until needed to be drawn up by those facing an "existential plight." Auto/pathographies provide an opportunity not only to de-sequester dying from the closed private domain of institutional medicine, but also to partially de-medicalize illness and dying by giving voice to the sick and dying themselves.
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Notes
1 This indicates that while hospital as the main place of death in England and Wales dropped below 50 percent for the first time in many years, it is still where the vast majority of people die (49.5 percent) compared to home (22 percent), residential care facilities (20 percent) and hospice (6 percent). If places outside the home are combined, 75.5 percent of people in England and Wales die outside the home (ONS, 2012).