

Moral ambiguity in media reports of dying alone

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More older people are living alone in the UK, thereby increasing the prospect of dying alone at home. Lone deaths tend to be regarded as bad deaths, in that they contravene notions of accompaniment and open awareness espoused in UK end of life care policies. We describe a media analysis of dying alone conducted in two phases. First, we revisited a previous media analysis to examine whether news reporting of dying alone has changed. Second, we focussed on a single case study to explore how an account of a lone death unfolded during the days following its discovery. We found that dying alone remains a threat to individual and collective moral reputations. However, we also identified reports in which dying alone was presented as acceptable in some circumstances, and as congruent with aspects of a good death. We suggest that dying alone can be made good through media reporting, reflecting the individual choice and autonomy associated with a good death. There is potential for news media to revise cultural scripts of dying, largely based on the experiences of people dying under medical supervision.

Introduction

Each year in the UK an unknown number of people die alone; that is, no-one is physically present at the moment of their death. Dying alone can occur in any setting, for example; in a hospital or care home (Cagle et al., 2017; Fridh, Forsberg and Bergbom, 2009), at home (Adams and Johnson, 2008), or on the street (Hassanally and Asaria, 2018).

The prospect of dying without others present tends to be regarded as a ‘worst case scenario’ (Gott et al., 2004: p. 463), associated with personal failure on the part of the deceased individual, or with social decline (Caswell, 2013; Seale, 2004). Often the body of the deceased person will be found soon after death, but in some cases it may remain undiscovered for an extended period of time. There may be a particular risk of delayed discovery when an individual who lives alone dies alone at home (Nomura et al., 2016). We

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refer to this manifestation of dying alone as a ‘lone death’, in order to distinguish it from other forms of unaccompanied dying described above.

Cases of dying alone, and lone death in particular, often attract the attention of news media since novelty, scandal and human interest increase the news value attributed to dying (Hanusch, 2010). News coverage not only disseminates information but can also help to shape public morality in relation to death and dying through attaching value to particular modes of dying (Frith, Raisborough and Klein, 2013). Media reports provide guidance for the public in how (not) to die in the proper manner, and can generate public pressure to enact policies aimed at exerting more control over how we die (Walter, Littlewood and Pickering, 1995).

In this paper, we report on a media analysis of dying alone/lone death carried out as part of a research study exploring the social circumstances of lone deaths in England. Individuals who experience a lone death may appear to be instances of Elias’s ‘homo clausus’; shut off from the social world and living without engagement with others (Elias, 1978). However, it may be that some lone deaths are of people exercising reflexive agency, who choose to die alone (Caswell and O’Connor, 2015; Kellehear, 2009). In examining the social circumstances of lone deaths, our research aims to engage with debates about the place of agency and autonomy in decisions made which have consequences for the end of life.

Media reports form part of the social context that informs public understandings of dying alone. We conducted the media analysis for this study in two phases. Firstly, we examined media reports of dying alone published during one month in 2019 to explore how dying alone is constructed through these accounts. Secondly, we focussed on a single case study to examine in more detail how an account of a lone death unfolded in news reports following its discovery. Drawing on these two sources, we argue that whilst news coverage continues to reflect a dominant construction of dying alone as a bad death, it is possible to identify ways in which a solitary death can be ‘made good’ (Seale and van der Geest, 2004) through media reporting, thereby opening up the potential for a more nuanced interpretation of dying alone to emerge.

In the following section, we begin by briefly discussing the concept of a good death as represented in policy approaches to end of life care across the UK.¹ We examine the role of

¹ Each country of the UK has responsibility for its own healthcare policy. Further information on UK end of life care policies can be found at:

news media in reflecting and reproducing the good death as social discourse, with particular reference to news coverage of dying alone. We then consider social responses to older people who are living alone as they approach the end of life, who may be anticipating a lone death.

Making a death good

The factors that lead to a death being defined as good or bad are not fixed, but vary culturally and historically (Kellehear, 2007). Making a death good requires physical labour to tend to the dying body, and also cultural labour to make sense of the experience of dying by drawing on available scripts (Walter, 1994). Seale (1998) describes how cultural scripts of dying enter the social domain through portals such as expert testimony, public policy and media reporting.

Notwithstanding variation between cultural scripts, certain elements of a good death appear to demonstrate consistency; a good death is pain-free and peaceful and occurs at the end of a long life, in the individual's home, surrounded by family and friends. The dying person is aware of, and accepts they are dying, has put their affairs in order and made decisions about their preferred treatment and care (Cottrell and Duggleby, 2016).

Borgstrom (2015) examines how patient choice in relation to care and treatment is constructed as a moral imperative in English end of life care policy. The iteration of a good death as subject to individual control acts as a moralising discourse, in that people who are dying and their associates are held accountable for their 'choices', even if these are highly constrained by factors such as the feasibility of treatment, or the availability of family care. According to Pollock and Seymour (2018), the dominant construction of a good death 'writes out alternative possibilities and preferences from the cultural script' (p. 329). In doing so, the good death functions as a form of social control, promoting a particular mode of dying and limiting the repertoire of legitimate choices available (Cottrell and Duggleby, 2016). Individuals are therefore simultaneously responsible for their choices and constrained by the array of socially approved options.

The discursive power of the good death is further demonstrated by circumstances in which the exercise of choice in relation to dying is less socially sanctioned and may be met with

<https://www.gov.scot/policies/death-and-end-of-life/palliative-and-end-of-life-care/>
<https://www.england.nhs.uk/eolc/>
<https://socialcare.wales/research-and-data/research-on-care-finder/palliative-and-end-of-life-care-delivery-plan>
<http://www.transformingyourcare.hscni.net/tyc-in-action/palliative-and-end-of-life-care/>

resistance. Examples include abstaining from eating and drinking at the end of life (Pool, 2004), and choosing an assisted death (Hendry et al., 2013). Choice and the role of agency in making a death good may therefore be more complex than the dominant cultural script implies, and merits further investigation.

Media accounts of dying

Death is a common feature of daily news coverage, challenging the view that in the UK, death has become sequestered from public view (Woodthorpe, 2010). In the past few decades, there has been an upsurge in representations of individual experiences of dying in the public domain (Bingley et al., 2006). Often, these accounts are written by well-known individuals, who serialise their passage through the final stages of life in newspaper and journal articles. However, new forms of social media have made the opportunity to provide a public account of living with dying more widely available (Andersson, 2017). Typically, the narrator describes their struggle to maintain hope and a sense of biographical continuity as illness destroys the body and damages relationships with others. Forms of dying that resist the dominant narrative of 'heroic self-affirmation' threaten the moral reputation of the narrator, and are less likely to appear in this format (Seale, 1995: p. 611).

Deaths which have not been witnessed by a real or virtual community, but have taken place unaccompanied, tend to become newsworthy when the circumstances raise moral concerns about the antecedents or outcomes of the death. There has been little analysis of media reports of dying alone since Seale (2004) noted 'dying alone is represented as a fearful fate and a moral affair' (p. 967). Seale found that the deceased person is often depicted as having character defects. It is inferred that, in being unable or unwilling to form the positive social attachments that may have saved them from dying alone, they are somehow deserving of their fearful fate. The actions of those who may have been in a position to prevent the death are also called to account. Individuals, institutions and wider society are scrutinised in news reports for failings that may have led to someone dying alone.

Seale concluded that the news media operates by drawing moral boundaries around how people *should* behave when confronted with an act of dying. The moral messages conveyed reproduce and reinforce the dominant construction of a good death as one which entails accompaniment. A duty to protect those at risk of dying alone is evoked; one such vulnerable category being older people who are living alone.

Living and dying alone

In a rapidly ageing society, more older people than ever are living alone. In 2017, 3.8 million people aged over 65 in the UK were living alone, 58% of whom were over 75 (Office for National Statistics, 2017). Living alone into an extended old age is a prospect for growing numbers of older people, yet singlehood is often represented in the media as an undesirable state, especially for older women. The pejorative stereotypes of the ‘cat lady’ or ‘old maid’ are often applied to engender moral panic about the consequences for women of living alone (Hafford-Letchfield, Lambert, Long and Brady, 2017). A growing public health concern about loneliness amongst older people is widely reflected in news reports, although the distinction between being alone and being lonely has been explicated in the research literature (Klinenberg, 2016; Weeks, 1994).

The negative associations attached to singlehood preclude the possibility that for some older people, living a solitary life may be a choice. Studies have found that for many, maintaining independence even whilst living with a terminal illness is important (Aoun, Kristjanson, Oldham and Currow, 2008; O’Connor, 2014). The fear of losing independence may outweigh any apprehension about dying alone at home, leading some older people to develop contingency plans to ensure their body is discovered soon after death (Caswell and O’Connor, 2017; Lloyd-Williams, Kennedy, Sixsmith and Sixsmith, 2007). It appears that, for older people living alone towards the end of life, choice in relation to certain parameters of dying may be constrained. In particular, older people may be required to accept restrictions on their autonomy in order to make death good, or otherwise risk the reputational damage associated with dying alone for both themselves and their associates.

So far, we have considered how the ideal of a good death as informed by end of life care policy in the UK is endorsed through media reporting of dying and death. Previous research suggests that news reports present dying alone as a moral breach of our individual and collective responsibilities to the self and others. The social processes we use to manage dying and death restrict the socially acceptable choices people can make in relation to how they die. As unprecedented numbers of people are living alone into old age, it appeared timely to re-examine media coverage of dying alone in order to explore whether it remains a fearful fate; capable of exciting moral panic and bringing influence to bear on the development of policy and practice in end of life care.

Media analysis part 1: Constructions of dying alone

We began our exploration of media responses to dying alone by adapting Seale's (2004) search of the news media database, NEXIS. Our aim was to examine how dying alone is constructed through contemporary news reporting. Like Seale, we searched for items containing the terms 'die alone' or 'died alone', to which we added 'dying alone' and 'lone death'. We limited the search to articles appearing in UK publications during January 2019. The focus on UK publications reflected our interest in understanding how media constructions of dying alone engage with cultural scripts of dying, including the notion of a good death enshrined in UK end of life care policies. Our initial search retrieved 49 items; after removing items that were duplicated in both the print and the on-line version of the same newspaper or in sister papers (e.g. daily and weekend editions), 28 items remained. The 28 items covered 21 cases of dying alone; 5 cases were reported by more than one media source.

A thematic analysis identified four key concepts in contemporary reports of dying alone. Dying alone was associated with; an act of violence, the absence of family, an (un)deserved fate, or an independent life.

An act of violence

In ten of the 21 cases of dying alone, a cause of death was given, with murder being the most frequently cited cause (n=4). For example;

The heartbroken mother of a man stabbed to death by the partner of the woman he was sleeping with in a fatal "love triangle", said the worst part was her son dying alone (O'Riordan, 2019).

The deceased person in this case did not die alone in the most literal sense, since the assailant and another witness were reported to have been present. Instead, 'dying alone' is used to denote dying in the absence of anyone to offer care and comfort in the final moments. The mother of the murdered man went on to say, "It kills me I had no time with him to tell him how much I loved him and to comfort him in his last breath (O'Riordan, 2019). Dying alone is constructed as the worst possible outcome of an extreme act of aggression towards the victim and those closest to him, whose duty of care for their loved one has been violently breached.

In one case, which consisted of a review of a television programme, the writer described how a mortally-wounded character tried to make his way to a friend's house 'so he wouldn't "die alone"' (Debnath, 2019). It is taken for granted that dying alone is to be avoided as a fate worse than death, even following a violent attack.

Dying alone may sometimes be the outcome of an act of violence, and/or may provoke a strong, emotional response to the circumstances of death. In this respect, dying alone can be seen as an assault on the notion of a good death, since it robs the dying and their associates of the solace of accompaniment at the end of life. Family members in particular are deprived of the opportunity to fulfil their duty to be present at the moment of death, and must bear the moral consequences.

The absence of family

Our analysis suggested that media reporting of dying alone tends to attribute family members with primary responsibility for accompanying the dying. In two cases, the reported death took place in a care home or healthcare facility. Individuals were described as having died alone, although staff may have been present or at least nearby. A doctor interviewed in an item on a HIV clinic stated;

The number of people that we watch die alone, with no one in the room with them, surrounded by no family, is one of the greatest tragedies of our time (Buncombe, 2019).

The article implied a tacit moral judgement of family members for their rejection of a relative due to the stigma associated with their medical condition. The business of being present to enable a good death is understood to be a family affair, to the extent that the 'legitimate excuses' (Finch and Mason, 1993) of absent family members were sometimes explicated in media reports. One case concerned a 'lone death' as defined in our study; a 46 year old man who lived alone was reported to have died alone at home of a heart attack. His body remained undiscovered for several days until neighbours noticed he had not put his refuse bins out for collection. The reporter explained that when he failed to respond to telephone calls, the deceased man's family had assumed he did not want company. His mother said;

He was minimalistic, he was happy on his own and we thought he just wanted to be alone. I spoke to him regularly on the phone, but he didn't always answer and [brother] lived closer to him (Grove, 2019).

The reporter emphasised that the deceased was ‘close to relatives’, who were described as ‘broken’ by his sudden death. The attribution of blame is deflected away from family members by focussing on lone death as a potential outcome of choosing to live a ‘minimalistic’ life. The mother hoped her son’s death would ‘encourage other relatives and friends to always check up on those who like to lead solitary lives’. It appears that wanting to live alone risks undermining the moral reputation of relatives should a lone death occur. This can be avoided by more closely monitoring people who live alone, whether this intervention is welcome or not.

In a lengthy feature on a support group for mothers of people who died of a drug overdose, often alone, or at least without family members present, mothers are presented as accepting a degree of culpability for their child’s death. The reporter described the motives of one mother for setting up the group;

Staying busy with other mothers means she doesn’t have to think about what she didn’t do for her own son (Galofaro, 2019).

Later in the article the same mother is quoted, saying;

Oh God, if only I’d understood. Why didn’t I spend more time with him? Ask him what was going on in his mind? Why? Why? Why?

Dying alone is the final, tragic detail in an emotive account of individual and family lives blighted by drug use. Whilst mothers are not explicitly blamed, the article draws on the testimony of mothers who appear to blame themselves. Mothers are presented as the bearers of a family’s moral compass who must be held to account, or hold themselves to account, for any loss of moral direction, including the ‘bad death’ of a family member. In these examples, dying alone equates to dying in the absence of family members (especially mothers), who are not available to fulfil their moral obligations to offer support and comfort at the very end of life.

An (un)deserved fate

The theme of dying alone as ‘a consequence of bad behaviour’ was noted in Seale’s (2004, p. 973) media analysis and was consistent in our contemporary sample of media reports. We have considered how accounts of dying alone adjudicate the moral reputations of family members; other items included references to individual factors such as drug use, depression or a history of mental illness when describing a solitary death. However, deceased individuals

were less likely to be held responsible for personal issues associated with dying alone. Instead, media reports often displayed empathy for the deceased, and sometimes indicated broader, social factors that may have contributed to their death. For example, two articles dealt with the deaths of homeless people on city streets. One stated;

The loss of this human life is no less a tragedy than the loss of any other. Nobody dreams of being homeless and without shelter. To die alone in a doorway is a terrible way to leave this world (Meredith, 2019).

This death took place in Northern Ireland, which has been without a functioning legislature for the past two years. The writer continued 'It is appalling that Stormont is standing empty while people are dying on the streets of Belfast', linking the death to a lack of government action on social housing and other forms of social support.

Nevertheless, people who died alone were sometimes depicted as having made bad choices; in particular, refusing to engage with services. In the second report on the death of a homeless person, an outreach worker commented;

She was a character. No angel - and managed to get herself into a few scrapes...I don't know how she got into the situation she did, but it doesn't really matter. Lots of people tried to help her over the years but she always ended up back on the streets (Kirkham, 2019).

However, another item pointed out that making the 'right' choices does not guarantee a good death. In a review of a book about working as a domestic cleaner for wealthy clients, the author recalled visiting the 'Sad House' belonging to an older man who lived alone. She wrote;

He'd done everything right; good job, gorgeous house, married a woman he loved and travelled with, but despite all this he was still dying alone (Delloye, 2019).

There is a suggestion that some people do not merit the fearful fate of dying alone, whilst others may have been, at least in part, responsible for the manner of their death through making poor decisions during their lives. Dying alone can be seen as more, or less, deserved; it appears that the 'right' to a good death is not automatic, but depends on choices made.

An independent life

Notions of choice and personal responsibility could also be detected in some media accounts of living alone into older age. One review of a television programme discussed an interview with an older woman who had chosen to live alone and embraced the possibility of a lone death;

Practical to the end, she has a large brown envelope on the mantle with clear directions on the front: “When I die please follow these instructions.” She says she is not afraid of death, but expects to die alone and to be found some time later, perhaps by a stranger (Foley, 2019).

In contrast, a humorous feature on reasons for persisting with internet dating stated;

Time is short. And no matter how much my logical brain protests, the fear of dying alone surrounded by cats and Joni Mitchell records is a pretty powerful motivating force (Robinson, 2019).

These items offer divergent perspectives on living alone as an older woman; in the latter, living alone is conflated with fear of isolation leading to a solitary death. In the former, living and dying alone is discussed in more pragmatic terms as a viable option for someone who values their independence.

A report on an ex-serviceman who died alone in a care home focussed on the efforts of neighbours and former colleagues to give him ‘the send-off he deserves’ (Morris, 2019). The reporter explained that after an appeal was made via social media, over one hundred people were expected to turn up to see him buried with full military honours. The report echoes the themes of dying alone as dying without family members present, and as (un)deserved depending on how the deceased chose to live. A description by the landlord of his local pub read;

He was a loner, but he wasn’t lonely. He had a wide circle of friends and angling was his life. He was part of the Angling Society for over 30 years. He was a very independent and private man who would talk and listen to others. He had a great rapport with our bar staff and he was always very kind and helpful. He was a good man, I really liked him and we were his family for the last ten years or so (Morris, 2019).

Although he died alone, the deceased was far from isolated, and his death appeared to be less a tragedy and more an extension of the independence he valued in his life. Furthermore, in this example, dying alone is made good by honouring the dead with a ‘proper’ funeral, in which associates rally round to accompany the body to its burial.

Overall, our analysis of media reports suggested that dying alone is still regarded as a fearful fate. Whilst the place and mode of death in our sample varied, media reporting tended to draw on a number of inter-related themes in constructing a narrative of dying alone; accounts emphasised the shock and horror associated with the subversion of acceptable modes of dying, and attributed family members with a leading role in preventing a solitary death. The actions of deceased individuals, their associates and wider society were weighed up in determining the extent to which dying alone could be represented as a justified end to an individual life. In some cases, dying alone could be constructed as a valid outcome for someone who had chosen to lead an independent life, although the moral reputation of associates might still be called into question. Taking restorative action, such as calling on relatives to pay more attention to people living alone, or arranging a dignified funeral, could help to repair any reputational damage incurred.

In order to further investigate notions of choice, independence and moral accountability in media reports of dying alone, we decided to examine in more detail a single case study of a lone death, where someone who lived alone died alone at home. A number of cases have attracted media attention due to an unusual feature of the death, such as the relatively young age of the deceased person. We chose to focus instead on a lone death which in all other aspects could be classed as ordinary. Isabella Purves was an elderly woman who lived alone and who died alone at home at the age of 85. Her death was assumed to be the result of natural causes. In examining how news coverage unfolded following the discovery of her body, we aimed to shed further light on media constructions of dying alone and to explore social responses to a lone death that took place in more mundane circumstances.

Media analysis part 2: Case study of Isabella Purves

The search term ‘Isabella Purves’ identified 58 items in the NEXIS database, one of which concerned another individual with the same name. The remaining 57 items were published between 3rd July 2009, when the police notified the press of the discovery of Isabella’s body, and 31st January 2016; the most recent being a review of a novel inspired by Isabella Purves. We focussed our analysis on the 34 items that appeared during the week 3rd-9th July 2009 in

order to examine the immediate response and emerging presentation of a lone death in media reports. We explored narrative features in the accounts of Isabella's death, paying particular attention to tracing the language and imagery used in news reports as events unfolded.

Breaking the news

The discovery of a body in a flat on an Edinburgh estate was reported in 20 accounts published on 3rd-4th July 2009, often under the headline 'Pensioner dead in flat five years'. Initial reports drew attention to the age of the deceased, with terms such as 'pensioner' or 'elderly woman' suggesting someone who was encumbered by age and dependent on the state. The other salient fact contained in the headlines was the length of time Isabella's body was thought to have lain undiscovered. Initial reports referred to 'the grim discovery' of 'badly decomposed remains', or to 'a grisly find', evoking the horror engendered when cultural practices and taboos surrounding the corpse are transgressed (Douglas, 1966).

Reports described how police officers had to break down the door and 'force their way past a pile of mail and newspapers three feet deep' ('Pensioner', 2009) after a neighbour in the flat below reported water dripping through the ceiling. The image conjures up a siege, with the body barricaded in and resisting discovery, or else evokes the lack of competence and neglect associated with living in a house filled with garbage. It was noted in some sources that when the door of the flat was opened, a smell was released, which hung in the air all day. The material traces of smell, unopened letters and the 'very slight shape' of the body seen by a neighbour as it was removed from the house (Philip, 2009) are all that remained of Isabella. News media quickly turned to the local community to try and resurrect the person who was Isabella Purves and unravel the circumstances of her death.

Resurrecting Isabella Purves

Some news reports applied common stereotypes of older women to their portrayal of Isabella; The Mirror referred to her as a 'Granny' even though she had never had children (White, 2009), and in the Daily Record she was described as 'a lonely old lady' although her state of mind could not have been known (Davidson, 2009). Other sources relied on local people to form an impression from what was known about Isabella, in which she emerged as a good citizen who contributed to the upkeep of the neighbourhood and retained her fitness by walking everywhere;

She was always cleaning her brasses and keeping the stair clean and would go out hiking. She was very fit and only became frail in later years. She was an old-fashioned lady, quite a Miss Marple, always very well turned out. (BBC News, 2009)

Although one neighbour reported that Isabella never had visitors to her flat, she was well-known in the community and was a regular user of local shops and services. The nearby florists described her as ‘a pleasant and independent woman’; she would always say hello and occasionally stop to talk.

Local residents may have had a vested interest in presenting Isabella as a solitary but capable woman as this would deflect attention away from any failure on their part to act as good neighbours. Nevertheless, the picture that emerged from news reports was not one of a woman who was unable to take care of herself or manage her affairs. Media reporting of Isabella’s death did not find fault with her character or suggest that her own moral failings contributed to her dying alone. It was to the local community and to wider society, then, that news reports turned in seeking to account for her lone death.

A neighbourhood under scrutiny

Neighbours who were interviewed by news reporters spoke of their shock at the discovery of her body. The local postman commented;

There was no smell from her door. I am very shocked and saddened that she has been lying there so long (BBC News, 2009).

It was not so much Isabella’s death alone at home that affected those who knew her, as the failure to recover and attend to her body after her death. A number of local residents offered their own explanations for why her body remained undetected for five years. One neighbour commented;

There are a lot of people moving in and out all the time in here and it’s not easy to get to know the neighbours that well (Henry, 2009).

Isabella’s next door neighbour is reported to have said he thought her flat was up for rent, and others assumed she had moved away or gone to live in a care home. Some news reports were quick to suggest that the circumstances of Isabella’s lone death provided evidence of ‘Britain’s broken society’. The Daily Record expressed moral outrage at the fact that ‘a pensioner can be left dead in her flat for five years’ in the capital city of Scotland;

No neighbours cared. No shopkeepers cared. No postman cared. No utility workers cared. No health or social workers cared. No one cared at all for Isabella Purves, who would have been 90 had she lived (Editorial, 2009).

The people who lived and worked in Isabella's local community are presented as evidence of a society which no longer functions as a safety net for those who may be vulnerable to dying alone. Douglas McLellan, a spokesperson for Age Concern in Scotland, said it was a 'tragic case', adding;

Society is fractured. We're not in the same units as we used to be. People might not phone their own gran more than once a month (Henry, 2009).

Perhaps unsurprisingly, some local residents resisted this negative portrayal of their community. One neighbour is reported to have said;

It may appear that with that lady lying dead for so long that this community isn't close knit, but there wasn't really anyone who knew her. Another elderly person passed away on this street and there was a huge turn-out for that. People will say, no-one looked out for her, but I don't think she wanted to be reached out to (McCracken, 2009).

Two days after the initial reports of the discovery of Isabella's body, the Sunday Herald published a comment piece on the circumstances of her death;

What emerges is not a picture of a community riven with neglect or selfishness, but rather of an independent woman whose death went unnoticed because it fell through the gaps of a changed Scottish society. Pensions are no longer collected in person, neighbours can change on an annual basis, and family are frequently distant (McCracken, 2009).

Isabella's agency in choosing to live, and die, 'an independent woman' appears to be upheld in this report. Instead of positioning her as frail, vulnerable and in need of care, Isabella is assumed to have been capable of caring for herself, in which case her neighbours could be seen as respecting her right to go about her life without undue surveillance or interference. The expert voices who were brought in to comment on Isabella's case tended to evoke idealised communities of the past in calling for people to be 'more neighbourly'. A spokesperson for one charitable organisation said;

There is not an awful lot you can do about it unless we can get back that sense of community there used to be a couple of generations ago, even 20 years ago (McCracken, 2009)

Iain Grey, the Scottish Labour leader at the time, proposed increased checks on ‘non-responsive individuals’ by health and social work departments (Philip, 2009). Douglas McLellan added;

The question is not just about public services finding people and neighbours checking up, it’s about how elderly people themselves are living their lives. If they’re leading private lives, then how are people going to find them? (Henry, 2009).

The implication of this statement is that older people have a responsibility to open up their lives and deaths to greater public scrutiny. Our media analysis of the case of Isabella Purves highlights the essential paradox between enabling older people to exercise autonomy in choosing how to live as they approach the end of life and avoiding the reputational damage such a choice might incur.

As the media account of the lone death of Isabella Purves unfolded, the image of Isabella shifted from that of a vulnerable older person towards acknowledging that she may have chosen to be independent, and therefore accepted the possibility of dying alone. Some reports clearly implicated the local community, if not in the event of her lone death, then for the improper amount of time her body lay undiscovered. Isabella’s neighbours appeared to absolve themselves of responsibility by pointing out that in life at least, Isabella valued her privacy. A more indirect and generalised sense of responsibility to keep an eye on older people who may be at risk of dying alone was attributed to wider society. However, it is not evident that such attention would be appreciated by all, and there were few suggestions for how public services might reasonably be expected to respond.

Conclusion

We set out to re-examine media analysis of dying alone in the wake of an approach to end of life care policy and practice that has continued to privilege personal autonomy and individual choice. The moral value of the self-directed death has been reinforced by a growth in media representations of a heroic cultural script of dying. The public discussion of individual experiences of dying is framed as a positive act, which in itself becomes a discursive resource that undermines the notion of dying as a private and solitary event.

Our initial media analysis drew on Seale (2004) in examining a snapshot of news coverage of dying alone in the UK during one month. Like Seale, we found that a solitary death tended to be represented as a bad death. However, it was acknowledged that, in some circumstances, dying alone might be the result of choices made by the deceased person, albeit the moral value attached to the assumption of choice varied. Some media reports emphasised independence and autonomy as positive attributes, and suggested that recognition and respect for these values was the proper way for relatives and neighbours to respond. In other circumstances, desiring to live alone could be perceived as a bad choice, which increased the need for others to monitor and intervene to minimise the prospect of dying alone.

Our examination of news coverage following the discovery of the body of Isabella Purves extended our analysis of moral accountability in media reporting of dying alone. The evolving narrative of Isabella's life and death suggested that a death initially represented as bad can be made more morally ambiguous through news reporting. It emerged that Isabella ended her life in the manner in which she apparently chose to live, thereby exhibiting the biographical continuity, individual agency and personal autonomy associated with a good death. These findings reinforce the suggestion that there remains an ambivalence towards notions of choice and autonomy when it comes to choosing the manner of our death, especially if our choices do not wholly comply with the dominant cultural script.

For people who are living alone, the potential for making a wrong choice may lead to a trade-off between maintaining independence and accepting the interventions of others, particularly towards the end of life. However, our analysis drew attention to the precarious dynamic between individual autonomy and social responsibility in a changing urban environment. Media reporting continued to look primarily to family members to monitor the well-being of those at risk of dying alone, whilst at the same time acknowledging that changes in population demographics and the withdrawal of services hamper efforts to sustain local neighbourhoods and maintain supportive communities.

On the whole, news coverage of Isabella Purves appeared less concerned by her death alone at home, which was unremarkable for a woman of 85, than by the length of time her body remained undiscovered. The failure to notice her absence was what made the death of Isabella Purves bad, raising questions about what is at the root of the moral panic about dying alone. One suggestion can be found in media reports that imply a social responsibility to

make death good by properly disposing of the body. It appears that failure to do so may threaten the moral reputation of associates of the dying more than the event of a lone death.

The prevailing discourse of a good death has particular implications in societies where growing numbers of older people are living, and potentially dying, alone. In future, the necessary conditions for achieving a good death may not be sustainable for many who are approaching death, leading to calls for the good death discourse to be abandoned in favour of a greater recognition of plurality and diversity in dying (Smith and Periyakoil, 2018). We have noted a tendency towards moral ambiguity in news reporting of dying alone when there is an indication that such a death was in keeping with how the individual chose to live. In future, media representations of dying alone could be a means of opening up the debate about what constitutes a good death, which has largely been based on the experiences of people dying under medical supervision, whether in a clinical setting or in the home.

References

- Adams, J. and Johnson, J. (2008) Older people “found dead” at home: challenges for the coroner system in England and Wales. *Mortality* 13(4), 351-360.
- Andersson, Y. Blogs and the Art of Dying: Blogging With, and About, Severe Cancer in Late Modern Swedish Society. *OMEGA Journal of Death and Dying*. Advance online publication. doi:10.1177/0030222817719806.
- Aoun, S., Kristjanson, L., Oldham, L. and Currow, D. (2008) A qualitative investigation of the palliative care needs of terminally ill people who live alone. *Collegian* 15(1), 3-9.
- BBC News (2009, July 3) Body may have lain for five years. Retrieved from <http://news.bbc.co.uk>.
- Bingley, A., McDermott, E., Thomas, C., Payne, S., Seymour, J. and Clark, D. (2006) Making sense of dying: a review of narratives written since 1950 by people facing death from cancer and other diseases. *Palliative Medicine* 20(3), 183-195.
- Borgstrom, E. (2015) Planning for an (un)certain future: Choice within English end-of-life care. *Current Sociology* 63(5), 700-713.
- Buncombe, A. (2019) ‘The number of people dying alone here is a tragedy’. *London Evening Standard*. Retrieved from <https://www.standard.co.uk>.

- Cagle, J. G., Unroe, K. T., Bunting, M., Bernard, B. L. and Miller, S. C. (2017) Caring for Dying Patients in the Nursing Home: Voices From Frontline Nursing Home Staff. *Journal of Pain and Symptom Management* 53(2), 198-207.
- Caswell, G. (2013) Managing death in twenty-first century Scotland. In N. Hinerman & L. Steffen (Eds.), *New Perspectives on the End of Life: Essays on Care and the Intimacy of Dying* (pp. 109-128). Oxford: Inter-Disciplinary Press.
- Caswell, G. and O'Connor, M. (2017) 'I've no fear of dying alone': exploring perspectives on living and dying alone. *Mortality*. Advance online publication. doi:10.1080/13576275.2017.1413542.
- Caswell, G. and O'Connor, M. (2015) Agency in the context of social death: dying alone at home. *Contemporary Social Science* 10(3), 249-261.
- Cottrell, L. and Duggleby, W. (2016) The "good death": An integrative literature review. *Palliative and Supportive Care* 14(6), 686-712.
- Davidson, L. (2009, July 4) Isabella dead in her flat for five years. *Daily Record*. Retrieved from <https://www.dailyrecord.co.uk>.
- Debnath, N. (2019) The Punisher season 2 ending explained: What happened at the end? *Daily Express*. Retrieved from <https://www.express.co.uk>
- Delloye, T. (2019) Dirty secrets of America's Middle Class, revealed by a cleaning lady. *Mail Online*. Retrieved from <https://www.dailymail.co.uk>.
- Douglas, M. (1966). *Purity and Danger*. London: Routledge.
- Editorial (2009, July 4) Shamed by tragic Isabella; Record view. *Daily Record*. Retrieved from <https://www.dailyrecord.co.uk>.
- Elias, N. (1978) *What is sociology?* (S. Mensell & G. Morrisey, Trans.). New York: Columbia University Press.
- Finch, J. and Mason, J. (1993) *Negotiating Family Responsibilities*. London: Routledge.
- Foley, B. (2019) TV review: Living in the wilds of Donegal. *The Irish News*. Retrieved from <https://www.irishnews.com>.
- Fridh, I., Forsberg, A. and Bergbom, I. (2007) Family presence and environmental factors at the time of a patient's death in an ICU. *Acta Anaesthesiologica Scandinavica* 51(4), 395-401.

- Frith, H., Raisborough, J. and Klein, O. (2013) Making death 'good': instructional tales for dying in newspaper accounts of Jade Goody's death. *Sociology of Health & Illness* 35(3), 419-433.
- Galofaro, C. (2019) Moms of the dead from drugs: "Where is the outrage for us?" *Mail Online*. Retrieved from <https://www.dailymail.co.uk>.
- Gott, M., Seymour, J., Bellamy, G., Clark, D. and Ahmedzai, S. (2004) Older people's views about home as a place of care at the end of life. *Palliative Medicine* 18(5), 460-467.
- Grove, A. (2019) Distraught Hull mum's message as son tragically dies alone at home. *Hull Daily Mail*. Retrieved from <https://www.hulldailymail.co.uk>.
- Hafford-Letchfield, T., Lambert, N., Long, E. and Brady, D. (2017) Going solo: Findings from a survey of women aging without a partner and who do not have children. *Journal of Women & Aging* 29(4), 321-333.
- Hanusch, F. (2010) *Representing Death in the News: Journalism, Media and Mortality*. Basingstoke: Palgrave Macmillan.
- Hassanally, K. and Asaria, M. (2018) Homeless mortality data from East London. *London Journal of Primary Care* 10(4), 99-102.
- Hendry, M., Pasterfield, D., Lewis, R., Carter, B., Hodgson, D. and Wilkinson, C. (2013) Why do we want the right to die? A systematic review of the international literature on the views of patients, carers and the public on assisted dying. *Palliative Medicine* 27(1), 13-26.
- Henry, S. (2009, July 3) Woman, 85, lay dead in her flat for FIVE YEARS before anyone noticed. *Daily Mail*. Retrieved from <https://www.dailymail.co.uk>.
- Kellehear, A. (2007) *A social history of dying*. Cambridge: Cambridge University Press.
- Kellehear, A. (2009) Dying old - and preferably alone? Agency, resistance and dissent at the end of life. *International Journal of Ageing and Later Life* 4(1), 5-21.
- Kirkham, J. (2019) Heartbreaking final words to homeless woman who died alone in a tent. *Liverpool Echo*. Retrieved from <https://www.liverpoolecho.co.uk>.
- Klinenberg, E. (2016) Social Isolation, Loneliness, and Living Alone: Identifying the Risks for Public Health. *American Journal of Public Health* 106(5), 786-787.

Lloyd-Williams, M., Kennedy, V., Sixsmith, A. and Sixsmith, J. (2007) The End of Life: A Qualitative Study of the Perceptions of People Over the Age of 80 on Issues Surrounding Death and Dying. *Journal of Pain and Symptom Management* 34(1), 60-66.

McCracken, E. (2009, July 4) Shock but little grief for Isabella in neighbourhood where pensioner lay dead in her flat for five years. *The Herald*. Retrieved from <https://www.heraldscotland.com>.

Meredith, F. (2019) Disgrace Stormont Lying idle as people perish in streets. *Belfast Telegraph*. Retrieved from <https://www.belfasttelegraph.co.uk>.

Morris, L. (2019) Old soldier who died alone to get the funeral he deserves. *Daily Post*. Retrieved from <https://www.dailypost.co.uk>.

Nomura, M., McLean, S., Miyamori, D., Kakiuchi, Y. and Ikegaya, H. (2016) Isolation and unnatural death of elderly people in the aging Japanese society. *Science & Justice* 56(2), 80-83.

O'Connor, M. (2014) A Qualitative Exploration of the Experiences of People Living Alone and Receiving Community-Based Palliative Care. *Journal of Palliative Medicine* 17(2), 200-203.

Office for National Statistics (2017) *Families and Households: 2017*. Retrieved from <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/2017>

O'Riordan, A. (2019) Mother of 'love triangle' murder victim can't comprehend loss. *The Times*. Retrieved from <https://www.thetimes.co.uk>.

Pensioner lies dead in flat for five years (2019, 3 July) *The Scotsman*. Retrieved from <https://www.scotsman.com>.

Pool, R. (2004) "You're not going to dehydrate mom, are you?" Euthanasia, versterving, and good death in the Netherlands. *Social Science & Medicine* 58(5), 955-966.

Pollock, K. and Seymour, J. (2018) Reappraising 'the good death' for populations in the age of ageing. *Age and Ageing* 47(3), 328-330.

Philip, A. (2009, July 3) Pensioner 'dead in flat for five years'. *Press Association Newswire*. Retrieved from <https://www.pressassociation.com/newswire>.

- Robinson, S. (2019) The seven deadly sins of online dating. *Wales Online*. Retrieved from <https://www.walesonline.co.uk>.
- Seale, C. (1995) Heroic Death. *Sociology* 29(4), 597-613.
- Seale, C. (1998) *Constructing death: The sociology of dying and bereavement*. Cambridge: Cambridge University Press.
- Seale, C. (2004) Media constructions of dying alone: a form of 'bad death'. *Social Science & Medicine* 58(5), 967-974.
- Seale, C. and van der Geest, S. (2004) Good and bad death: Introduction. *Social Science & Medicine* 58(5), 883-885.
- Smith, A. K. and Periyakoil, V. S. (2018) Should We Bury "The Good Death"? *Journal of the American Geriatrics Society* 66(5), 856-858.
- Walter, T. (1994) *The revival of death*. London: Routledge.
- Walter, T., Littlewood, J. and Pickering, M. (1995) Death in the News: The Public Invigilation of Private Emotion. *Sociology* 29(4), 579-596.
- Weeks, D. J. (1994) A review of loneliness concepts, with particular reference to old age. *International Journal of Geriatric Psychiatry* 9(5), 345-355.
- White, S. (2009, July 4) Granny, 85 lay dead in flat for five years. *The Mirror*. Retrieved from <https://www.mirror.co.uk>.
- Woodthorpe, K. (2010) Public Dying: Death in the Media and Jade Goody. *Sociology Compass* 4(5), 283-294.