FULL PAPER: Dark Tourism in Contemporary Society: Mediating Life and Death Narratives

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Dark Tourism in Contemporary Society: 
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Abstract

Death is universal, yet dying is not. Thus, within secularised contemporary society, the process of dying has largely been relocated from the familiar environs of the family and community to a back-region of medical and death industry professionals. In turn, it is argued that this institutional sequestration of death has made dying ‘bad’ against a Romantic portrayal of a death-with-dignity – or a ‘good’ death. Consequently, the structural analysis of death reveals issues of ontological security and mortality meaning for the Self. This paper, therefore, adds to that analysis, and specifically examines the construction of mortality meaning within the context of dark tourism consumption. Particularly, the paper empirically interrogates the Body Worlds exhibition – a touring attraction of real human corpses – as a reflective space to mediate mortality. In so doing, the paper concludes that dark tourism is a new mediating institution that allows the Self to construct contemporary ontological meanings of mortality and to contemplate both life and death through consuming the Significant Other Dead.

Key words: dark tourism, death, mediation, Body Worlds, thanatology
Dark Tourism in Contemporary Society:
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He drew near, and whispered hoarsely, “I've got a couple of skulls down in the crypt,” he said; “come and see those. Oh, do come and see the skulls! You are a young man out for a holiday, and you want to enjoy yourself. Come and see the skulls!”

Then I turned and fled, and as I sped, I heard him calling to me:

“Oh, come and see the skulls; come back and see the skulls!”

(From *Three Men in a Boat* by Jerome K. Jerome, 1889)

**Introduction**

In 1889, the writer and humorist Jerome Klapka Jerome published an account of a boating holiday on the River Thames between Kingston and Oxford, England. Intended as a serious travelogue, Jerome’s *Three Men in a Boat* became a humorous yarn depicting the intricacies of Victorian life and death for three men (and a dog), whilst travelling on the river. As part of their trip, the three men are propositioned to view real human skulls in a church crypt located on the banks of the River Thames. The central character and narrator – ‘J’ – flees from the scene, as noted above, appalled by the fact that human remains are used as a visitor attraction. However, ‘J’ goes on to state that his friend Harris was quite enthralled by the prospect of gazing upon the dead:

‘Harris, however, revels in tombs, and graves, and epitaphs, and monumental inscriptions, and the thought of not seeing Mrs. Thomas's grave made him crazy. He said he had looked forward to seeing Mrs. Thomas's grave from the first moment that the trip was proposed - said he wouldn't have joined if it hadn't been for the idea of seeing Mrs. Thomas's tomb’. (Jerome, Chapter vii, 1889).

Even though Jerome was writing about the ‘attraction’ of death over 120 years ago, deaths, disasters and atrocities in touristic form are becoming an increasingly pervasive feature within the contemporary visitor economy. Arguably, therefore, it could be suggested that there is a seemingly desire amongst some within a post-conventional society to witness the work of the Grim Reaper up close and personal but, within apparent safe confines of tourism. Consequently, for the individual who wishes to journey and gaze upon real or recreated
death, a plethora of sites, attractions and exhibitions are now emerging across the world to cater to the ‘darker side of travel’ (Sharpley & Stone, 2009). Thus, the phenomenon by which people visit, purposefully or as part of a broader recreational itinerary, the diverse range of sites, attractions and exhibitions that offer a (re)presentation of death and human suffering is ostensibly growing within contemporary society. As a result, the rather emotive label of dark tourism, and its scholarly sister term of thanatourism, has entered academic discourse and media parlance (Seaton, 1996; Foley & Lennon, 1996; Lennon & Foley, 2000), and may simply be defined as ‘the act of travel to sites associated with death, suffering or the seemingly macabre’ (Stone, 2006:146). Generally, though, the concept of dark tourism, in its various manifestations or ‘shades’ (see Stone, 2006), has generated a significant amount of academic and media attention over the past decade or so. Certainly, the increasing weight of coverage with regard to dark tourism over the past few years from both press and broadcast media, including news, travel features and guidebooks has been striking (e.g. Adfero Ltd, 2005; Press Trust, 2005; Stone, 2008). As a result, Seaton and Lennon (2004:63) suggest that dark tourism as a contemporary ‘leisure activity’ has been ratcheted up by the popular press from the status of myth to meta-myth, subsequently allowing the media to ‘depict it, not just a genre of travel motivation and attraction, but as a social pathology sufficiently new and threatening to create moral panic’ (but, see Stone 2009a).

However, the point to be emphasised here is that, prior to the mid-1990’s, dark tourism, as a generic term for travel associated with death, atrocity or disaster, had not previously featured in the academic literature as a specific element of consumption in periodic typologies of tourism. An encyclopaedia entry by Seaton (2000) elaborated the range of sites and places which may be included as dark tourism. Therefore, the rapid acceptance of dark tourism as an academic field of study and a distinct area to scrutinize tourist motivations and meanings is, according to Seaton and Lennon (2004:63), ‘rather akin to astronomers agreeing to recognise the existence of a new planet in a solar system, thought to have been pretty comprehensively mapped and delineated’. Meanwhile, Ryan (2005) suggests a significant level of research interest has been expressed in dark tourism, whilst Preece and Price (2005:191) observe that ‘dark tourism is a relatively new area of research, unrecognized by scholars until the mid-1990’s, and many aspects of dark tourism still require further investigation to reveal the intricacies of the phenomenon’. Sharpley and Stone (2009) also recognize the complexity and multifaceted nature of dark tourism. They argue that dark tourism research within a broader
socio-cultural and political framework has remained limited; hence, the literature continues to be eclectic, theoretically fragile and thus inconclusive. Similarly, Seaton and Lennon (2004:81) note there are more questions than answers in relation to dark tourism, and ‘its extent and motivations, and above all the identities of its pursuants, have yet to be revealed’. They go on to suggest that there is clearly a need for a much fuller exploration of the consequences of dark tourism in both general and micro-populations. Likewise, Reader (2003:2), whilst noting the distinction between dark tourism and the processes of pilgrimage, suggests ‘the dynamics through which people are drawn to sites redolent with images of death… and the manner in which they are induced to behave there… [means] that the topic calls out for discussion’.

Thus, as part of that discussion, and despite the diversity of sites, dark tourism has been suggested as not presenting death per se, but representing certain kinds of death (Walter, 2009). As a result, dark tourism has been referred to as contemporary mediating institution between the living and the dead (Walter, 2009; Stone, 2011). Moreover, Stone (2011:25) proposes that ‘dark tourism provides an opportunity to contemplate death of the Self through gazing upon the Significant Other dead’. Whilst this hypothesis may form an integral part of a complex consumptive jigsaw, there is a lack of empirical evidence to support such a claim. The purpose of this paper, therefore, is to address this gap in the literature. Focusing upon the thanatological condition of society, that is – society’s reactions to and perceptions of mortality – this study examines dark tourism experiences within the confines of a specific ‘dark exhibition’ (after Stone, 2006). In particular, the research highlights the Body Worlds exhibition – a touring visitor attraction displaying real human corpses – as a spatial, if not temporal, vehicle for the Self to explore contemporary death and dying. Drawing upon extant concepts within the literature, the study sets out empirical evidence to suggest dark tourism consumption, albeit to varying degrees, provides for contemplative experiences of modern-day mortality. Therefore, the paper now provides an overview of the thanatological condition of contemporary society as an underpinning framework, before turning to the empirical research at Body Worlds and subsequent synthesis of conceptual considerations.
The Thanatological Condition of Contemporary Society

La Rochefoucauld’s famous seventeenth century quote, ‘One cannot easily look directly at either the sun or death’ (Charmaz, 1980: 84) perhaps still holds true, in part at least, for the present-day. However, whilst astrophysics has now revealed the intricacies of our nearest star, something that provides for the basis of all life, because of the intellectual rationale founded in psychoanalytic theory, facing or contemplating death still elicits a natural fear. According to Harrison (2003), it is this natural fear that results in a denial of death for the individual self. Whilst the psychology of this latter point is beyond the scope of this paper, the actual implications are not. In short, it is the apparent inability to ‘look directly’ at death, which occupies a curious position within contemporary sociology. Consequently, studies of death and death anxiety have provided one of the building blocks for the field of inquiry that is often referred to as thanatology (Kastenbaum, 1996). It is thanatology that draws upon the study of death and mortality within discipline areas such as medicinal technologies, philosophy, the arts, political science, history, religion, and sociology, which is allowing an interrogation of death as a central dynamism underlying life, vitality, and the structure of social orders. Thus, it perhaps makes sense to examine dark tourism, with its central features of death and mortality, within a thanatological framework. Put another way, dark tourism, despite its typological, interpretative, political, and moral dilemmas has (real and reconstructed) death at its nucleus (Stone & Sharpley, 2008) Hence, it is death and its contemporary depiction that calls out for further scrutiny and academic inquiry (Stone, 2005).

Of course, death is not only the muse of our religions, philosophies, arts, political ideologies, or medical advancements, but also death and mortality pervades our living world in various guises and pretexts, including, but not limited to, dark tourism representations. For instance, death sells newspapers and books, yet we guard against it through (life) insurance policies; death invigorates television and cinematic production and, indeed, is a staple ingredient of contemporary news reporting. Death is also used as a barometer to measure the adequacy of social life and progress. Indeed, death in the form of murder rates can infer the stability of social structures, whilst cross-socio/cultural comparisons of mortality can ascertain social inequalities. Conversely, death, especially untimely or violent death, can influence political policy and governance in the form of official enquiries and subsequent report.
recommendations (for example, mortality incidences because of domestic violence, child neglect, or accidents).

Evidently then, death is a fundamental underpinning to life and to the order of life. As Metcalf and Huntington (1991: 2) aptly note, ‘life becomes transparent against the background of death’. In other words, death (and its thanatological analysis) can reveal the most central social and cultural processes and values and, consequently, becomes a catalyst that, ‘when put into contact with any cultural order, precipitates out the central beliefs and concerns of a people’ (Kearl, 2009: 1). On a more individual level however, death exposures – or mortality moments – can crystallize and invigorate the Self’s own life pathway (Kearl, 2009). Hence, for the purpose of this study, it is assumed that individuals’ death anxiety and experience of dying and grief are strongly structured by their own social environment and personal life-worlds (Tercier, 2005). Thus, the logic moves from the cultural order, that is, the broad realm of social reality that augments and shapes our collective cognitions, emotions, and behaviours, to that of the institutional orders, such as religion, politics, mass media, or indeed dark tourism. It is these institutions that (in)directly filter and mould our (mortality) experiences and actions and, which directly influences the individual order. Thus, the institutional influence on death has a long historical pedigree. In particular, Phillippe Aries’ classic history of death – The Hour of Our Death (1981) – describes dominant deathbed paradigms in Western societies and cultures since the Middle Ages. Specifically, though, two chronological periods of the structural analysis of the deathbed have implications of how, on the one hand, death is portrayed within contemporary society and, on the other hand, how mortality is managed within the present-day. Consequently, the evolution of the modern (Western) deathbed may shine light on the construction of meaning for present-day dark tourism experiences.

The Evolving Deathbed: Implications for Constructing Dark Tourism Meaning

Whilst death is universal, dying is not. In other words, dependent upon a variety of socio-cultural and religious factors, both the process of dying and ensuing depiction of mortality is peculiar to specific cultures. With regard to Western culture – admittedly, with an Anglophile bias – it is the period of Romanticism and its subsequent portrayal of mortality that is
important, as well as its influences upon perceptions of death today. The quixotic depiction of mortality was a major subject of Romantic art, literature and travel which ‘turned death into sensibility – not so much a religious and moral mediation in the medieval, memento morti tradition, [but] as an imaginative dwelling on fatality for aesthetic gratification’ (Seaton 2009: 531). Hence, the Romantic death of the nineteenth century, termed by Aries (1981) as ‘Thy Death’ (or ‘The Death of the Other’), evolved through a waning of eternal damnation messages prescribed by priests with advancements in medicines prescribed by doctors. Moreover, with the emergence of the modern family and its new structures of feeling (Porter 1999a), attention became fixed not on the decedent, but on those who continued to live. Consequently, the rituals of death during the 1800’s became much more sentimental (if not morbid), and mourning became a family concern who perpetuated the memory of the deceased. The Romantic death became a death-with-dignity, a good death where calmness prevailed in readiness for a dignified departure from the mortal world. The good death was an illustration of how man paid respectful deference to the laws of nature, and how the time of passing became an opportunity to put ‘things in order’. Indeed, the Romantic death was signified by the writing of wills with final bequests bestowed, sanctimonious instructions given to survivors, forgiveness sought both from companions and God, promises of reunions made, and final words spoken. As Tercier (2005: 12) notes, ‘the business of the [Romantic] deathbed became just that: the tidying and tying up of unfinished business’. Thus, the Romantic reconstruction of the deathbed was nothing more distressing than a final, peaceful sleep. With a darkened room, family and loved ones at the bedside, affairs in order, peace made with both survivors and God, and with a few gentle and quiet farewells, the decedent would dignifiedly drift off into an eternal slumber. Of course, this Romantic death was an ideal, in the mindscape of a Victorian society who came to think of death as simply as a way of ‘expiring consumption’ (Jalland 1996). In its ideal form, the Romantic good death appeared to be a perfect coincidence of both social and biological death, which did not rely (solely) upon ontological continuity. However, whilst spiritual aspects were still important to the good death and religious forms of the death-with-dignity still embraced the hope of an eternal existence, deathbeds that were increasingly secular found solace in relief from pain and discomfort. In short, Romanticism (re)created death and the dead for (re)evaluation and contemplation for the living. In turn, tourism of the day reflected these contemplative aspects and thus involved visits to sites of fatality depicted in Romantic art and literature, and included trips to graveyards, mausoleums, historical battlefields, as well as traumas and disaster sites (e.g. Howitt, 1840; and Hall, 1853).
However, the deathbed has undergone a metamorphosis during the twentieth century that continues to the present day. According to Aires (1981), the period saw the emergence of the invisible death or forbidden death. It is within this phase that Aries reveals his revulsion for modern developments and suggests a waning of faith, especially for an (eternal) afterlife, marks modernity. Kellehear (2007) later characterised the invisible death as the bad death or shameful death for the lack of overt social exchanges between dying individuals and those who (institutionally) care for them. Hence, with the full onset of secularisation, the invisible death is signified by the role of institutions, especially the medical establishment where increasing bureaucratisation and hospitalisation, as Aries alleges, ‘robbed the dead and dying of all dignity’ (1981: 559). Therefore, the invisible or forbidden death, where deaths ‘disappeared’ from the community gaze is largely due to the process of medicalisation.

Certainly, the position of the physician at the nineteenth century (Romantic) deathbed became entrenched and consolidated through advancements in therapeutic techniques and pathophysiology, as well as an expanding pharmacopoeia (Porter, 1999b). Augmenting the position of the physician as an ‘authority over death’ were technical advances and acceleration of the bureaucratic super-structure that became the foundation of the modern (Western) state. With increasing hospitals (and later hospices) and dispensaries, combined with the professionalisation of disposal of the dying through regularisation of death certificates, post-mortems and the storage of dead bodies, the invisible death became almost just that: concealed and obscured behind the façade and machinery of the (new) death, dying and disposal industry. Consequently, with increasingly industrialisation being applied to the deathbed, in terms of both processes and procedures, Porter (1999a: 84) notes, ‘rather as the philosophes rationalised death, modern man has in effect denied his own mortality, and death has become taboo’ [original emphasis]. Hence, as the twentieth century progressed, the physicians’ control over the process of dying increased, and death was move out of the familiar environs of the family and community to become institutionalised under a medical gaze. Thus, the shift of power and emphasis from priest to doctor is now almost complete, as secularising processes have made the world (post)modern. Notwithstanding, the care of the soul and body has moved realms from post-mortem religious ritual to ante-mortem medical protocol. As Tercier (2005: 13) notes: ‘In the ideal modern death, biological, social and ontological death not only coincide but are meant to occur in such an instant that, perhaps, the whole business [of mortality] can be ignored, allowed to slip past unnoticed. Hence the invisibility of death.’
However, it would be naive to suggest that death is wholly ‘invisible’ within contemporary society. Indeed, popular culture depictions of death, including those represented by dark tourism, are near ubiquitous. Thus, it is here where an ‘absent/present’ death paradox lies. *Real death* of the Self has been sequestered (made absent) from the public gaze during the past sixty years or so (e.g. Mellor 1993; Mellor & Shilling 1993; Willmott 2000). However, in its place is *(re)created death*, where the Significant Other Dead cohabit the living world (or made present) through a plethora of mediating channels, including literature, architecture, monuments, the media, and so on (e.g. Harrison, 2003). Stone and Sharpley (2008) augment this sequestration thesis, advocating real death has been relocated to a back region of medics and death industry professionals, and where modern-day mortality, or at least its depiction is revived through a substitute of recreated situations and memorialisation, including those found within dark tourism (re)presentations (also see Stone, 2009b). Consequently, the result is what some scholars have referred to as the institutional sequestration of death, which, in turn, raises potential issues of ontological security and personal meaningfulness for the individual Self within secular society (Giddens, 1991; Stone & Sharpley, 2008). Thus, it is the contemporary consumption of dark tourism that potentially provide ontologically reflective mediating experiences, which link the dead with the living (Walter, 2009). Harrison (2003: 158) notes this linkage, in general terms, and outlines the role of the dead:

The contract between the living and the dead has traditionally been one of indebtedness... The dead depend on the living to preserve their authority, heed their concerns, and keep them going in their afterlives. In return, they help us to know ourselves, give form to our lives, organise our social relations, and restrain our destructive impulses. They provide us with the counsel needed to maintain the institutional order, of which they remain authors...

It is to the contemporary institutional display of the dead that this paper now turns, by outlining the Body Worlds exhibition.

**The Body Worlds Exhibition – ‘From Plastination to Fascination’**

With thirty million visitors to date, the Body Worlds exhibition (or Körperwelten in German) is the world’s most popular touring attraction (Body Worlds, 2010). The exhibition utilises
real human corpses and organs displayed in a variety of poses that depict anatomical intricacies of the human body, disease or specific causes of biological death. Using a process to preserve corpses called plastination; polymer chemistry is used to replace water in human cells with plastic material, which makes it possible to lend rigidity to soft body parts, including individual muscles and organs such as the lungs, or even single nerve tissue. Consequently, whole bodies of both humans and animals can be inherently stabilized and posed standing upright – a feature that was formerly restricted to skeletons.

Although first exhibited in Japan in 1995 at the National Science Museum in Tokyo as part of a centenary celebration for the Japanese Anatomical Society, Body Worlds’ first commercial exhibition was in Mannheim, Germany, at the Museum for Technology and Labour and held during the winter of 1997/98. The initial exposition in Mannheim attracted almost 780,000 visitors and even stayed open twenty-four hours a day towards the end of its four-month viewing to accommodate consumer demand (Kritz, 2007). A combination of flouting social conventions, enthusiastic acceptance by some parts of the public, media and medical practitioners, and a vehement rejection by similar groups of people in perhaps equal measure, characterise this exhibition. Indeed, forceful condemnations by religious organisations and an often highly charged and emotional ‘moral conversation’ about the merits and rationale of displaying real human corpses has been conducted throughout the (European) media, as well as in internet chat-rooms, blogs and forums. Interestingly though, during a Body Worlds tour of Asia, including an exhibition in 2002 in Seoul, South Korea, and in Taipei, Taiwan, in 2004, there was apparently ‘no public criticism whatsoever, and to the contrary, the exhibition in Asia was even officially supported by science and education departments’ (Whalley, 2007: 27). Interesting though, there has been a notable lack of cross-cultural studies with regard to the dichotomy between Western and Eastern experiences of the exhibition. Although beyond the scope of this paper, a contemporary Western philosophy posits a definite break between life and death, whilst an Eastern perspective often suggests that the (dead) human body is a medium containing the co-existent body, mind, and spirit. In short, Western life education tends to focus upon end-of-life palliative care, whilst life education in the East focuses on both lifetime and after-death care. Even so, in an ever increasingly commercialised (Eastern) world, the taboo of death is being broken down, and the human body is often packaged into a variety of discourses and commercial ends (Tsai, 2004) – including the Body Worlds exhibitions.
Despite potential different cultural experiences of Body Worlds, the official aim of the exhibition is ‘to inform visitors and to open up the opportunity particularly to medical laymen to better understand their body and its function’. Clearly, this aim places emphasis upon health education, whereby the exhibition’s official marketing endorses a message of the ‘naturalness of our bodies and recognition of the individuality and anatomical beauty inside’ (Body Worlds, 2009). However, subsequent treatment of human corpses, which are voluntarily donated by the deceased through a scheme set up and run by the Institute for Plastination, an organisation located in Germany and created by Professor Gunther von Hagens – the inventor of the exhibits – has attracted a great deal of controversy. Much of this controversy is focused upon the origins of donated cadavers, many of them allegedly of executed prisoners from China and Kyrgyzstan (Jacobs, 2005; Blackler, 2008), in addition to von Hagens’ refusal for the public to access donation documentation (Jeffries, 2002). Moreover, the technique of plastination to preserve corpses, pioneered by von Hagens in the 1970’s at the Institute for Anatomy and Cellular Biology at the University of Heidelberg, has also attracted controversy. Because of the plastination technique, von Hagens has been likened to a modern-day Frankenstein or to Burke and Hare, grave robbers and murderers who supplied corpses for medical dissection in Edinburgh in the late 1820’s. Even more controversially, von Hagens has been compared, unfairly, to Josef Mengele, a Nazi doctor also known as the ‘Angel of Death’, who inflicted terrible pain, suffering, and death, especially to twin children, during his experiments at Auschwitz during the Holocaust (Blackler, 2008).

However, von Hagens, who has performed public autopsies for live television as well as crucifying a plasinated corpse on a British television programme to illustrate the death of Christ (Wilson, 2006), is quoted as saying ‘it is an honour to cause this controversy’ (Jeffries, 2002: 2); an acknowledgment and a commercial recognition, perhaps, of the appeal controversy can bring to an exhibition such as this. He goes on justify the exhibition as ‘demystifying the post mortem examination’ and likened the medical profession to ‘medieval priests who would not allow ordinary people to read the Bible’ (von Hagens cited in CNN.com, 2009). Nevertheless, because of continuing controversy in his home country of Germany, Gunther von Hagens is based largely in China where he holds a guest Professorship at the Dalian Medical University. It is here where ‘Plastination City’, as von
Hagens has entitled it, is located and where actual plastination of corpses occurs (Whalley, 2007).

Thus, criticisms that focus upon the origin of the cadavers, the process of plastination, or Gunther von Hagens himself, mean that controversy surrounds the portrayal of ‘dead people’ within the Body Worlds exhibitions. Even so, human corpses, as well as animal cadavers arranged in ‘recognisable’ poses and situations, are given decipherable titles, including The Horseman, a rider with his skull chopped in two and his body flayed to show the underlying musculature. As Jeffries (2002: 1) notes, ‘the Horseman sits with his brain in one hand and a whip in the other, astride the posed and flayed cadaver of a horse, frozen forever in its leap’ (Plate 1).

Plate 1: The Horseman Exhibit, Body Worlds (Source: Life in the Fast Lane, 2009)

Other exhibits include cadavers posturing as sportsmen (Plate 2), a couple dancing, a parent and child walking (Plate 3), and corpses with skin left on or with intricate blood vessels
revealed (Plate 4). A particular criticism has not only been levied at the artistic positioning of the cadavers, but also at the seemingly gender inequality between corpses. Specifically, Davidson et al., (2009) notes the dominant masculinity of the cadaver exhibits, whilst Stern (2003) accuses Body Worlds of perpetuating conservative gender representations. Furthermore, Stern suggests male cadaver plastinates, or what Body Worlds refer to, in neutral terms, as ‘anatomical specimens’ (Body Worlds, 2009), are presented in ‘heroic manly’ situations. These include exhibits such the aforementioned Horseman, but also other masculine and intellectual poses such as The Chess Player, The Muscleman and his Skeleton, The Fencer, The Runner or The Footballer. As Berkowitz (2006) starkly suggests to potential visitors – ‘be prepared to see a lot of penises; most of the full-body plastinates are male!’

Plate 2: Male cadavers posing as a footballer (left) and basket ball player (right). (Source: Life in the Fast Lane, 2009)
Meanwhile, Stern points out that female cadaver plastinates are portrayed in terms of beauty, passivity or reproduction, such as the *Reclining Pregnant Woman*, a cadaver whose womb is exposed to show her (dead) unborn child in a ‘pose taken straight from pornographic cliché’ (Stern, 2003:1). Furthermore, Body Worlds opened an exhibition in Berlin in May 2009 that
shows plasinated cadavers having sexual intercourse (Playboy, 2009; CNN.com, 2009; also Plate 5). von Hagens has defended the exhibition, which he plans to bring to London, by suggesting the ‘exhibit combines the two greatest taboos of sex and death and is a lesson in biology [and] is not meant to be sexually stimulating’ (von Hagens, cited in Connolly, 2009: 1). However, the exhibition has attracted protests from a cross-party group of politicians as well as church representatives, both in Germany and the UK, and they have called for the exhibits to be withdrawn, suggesting it was pornographic and an insult to the dead (Connolly, 2009).

Plate 5: Male and female cadavers posed having sexual intercourse (Source: CNN.cm, 2009)

Generally, though, von Hagens’ philosophy of Body Worlds appears to derive from notions of how contemporary society addresses the issue of not only death, but how people may view their own life (and living) in the face of inevitable mortality through an anatomical, if not clinical, gaze (also see Walter, 2004). Indeed, von Hagens states:
I want to bring the life back to anatomy. I am making the dead lifeful again. This exhibition is a place where the dead and the living mix. Yes, some of the specimens are difficult to look at. To see a mutilated body is hard because we have fears about our own integrity. We have a deep-rooted anxiety about when we see the body opened up because in this way we have feelings about ourselves (Gunther von Hagens cited in Jefferies, 2002: 1).

However, despite the controversies that surround this (dark) exhibition, the success of Body Worlds has given rise to several copycat exhibitions that feature plasinated cadavers. Most notably, attractions such as BODIES Revealed and BODIES: The Exhibition, organised by the public traded US company, Premier Exhibitions Inc, replicate the technique and style of von Hagens’ Body Worlds, but unlike von Hagens, Premier Exhibitions Inc do not have a body donation programme. Instead, ‘unclaimed cadavers’ are utilised and Premier Exhibitions Inc admit they are unable ‘to demonstrate the circumstances that led to the death of the individuals [and are] unable to establish that these people consented to their remains being used in this manner’ (Stone, 2007). Nevertheless, Body Worlds, as the original exhibition of real human bodies, continues to exhibit across the world, and as result continue to attract a negative press. For example, when the exhibition was held at the O2 arena in London during 2009, the focus of the subsequent section, a British newspaper pointed out...

...[Gunther von Hagens] is part shaman and part showman; at once an anatomical scientist bent on shaking up a western society that he regards as living in denial of its corporeality and of death, and a PT Barnum basking in the media hoopla of his British reception, aware that part of the appeal of Body Worlds is the same as that which drew our ancestors to public executions and freak shows (The Telegraph, 2008).

Research Methodology

This research arises from a simple, yet fundamental interest in the social reality of death, and how mortality is not only manufactured within contemporary society but also how modern death and dying is contemplated. Thus, this study adopts an inductive phenomenological research philosophy with the overall aim of better understanding the consumption of dark tourism within contemporary perspectives of death. Using ethnographic methods of (covert) participant observations and semi-structured interviews in a progressive and sequential manner, the research was conducted at the Body Worlds and Mirror of Time exhibition at the
O2 arena in London between 20 and 22 April 2009. Whilst participant observation is an ethnographic method that seeks to understand context of everyday life (Hay, 2000), it proved particularly effective for this research by highlighting visitors in relatively unstructured social interactions. Additionally, by directly, and covertly, experiencing the activities under observation – what Scott and Usher (1999) identify as ‘direct experiential value’ – the participant observations provided opportunities to inductively build or guide explanations on the behaviour of people within a specific dark tourism environment. Meanwhile, the second stage of the research utilised semi-structured interviews, which drew from a convenience sample of seventeen adult respondents, of whom were all visitors to Body Worlds. Respondents were from the UK, USA, France and Poland, with a ratio of eight males to nine females. Interviews were conducted within the spirit of ‘co-authored narratives’ and characterised by an appreciation for the interviewee’s responses as a ‘joint social creation’ (Kvale, 1996). In short, interviews were conducted within a context of narrative conception and flexibility, which sought to understand key informants within a complex social and cultural situation.

Of course, this research has particular limitations, not least those that revolve around a relatively limited sample size, as well as issues of respondent life stage, health status or religious / cultural nuances. Moreover, because of issues of subjectivity and generalizability, this study does not generalise its findings to all dark tourism experiences. Rather, the research suggests emergent findings be used as a context to frame future phenomenological research, within a variety of socio-cultural environments, and to illustrate the level of support of dark tourism as a contemporary mediating institution of mortality.

**Body Worlds – An Ethnographic Discussion**

Tourism as an activity constitutes ‘ceremonies of life’ that have the capacity to expand boundaries of the imagination and to provide the contemporary visitor with potentially life-changing ‘points of shock’ (Botterill, 2003). Indeed, tourism may be perceived as a rite of social passage, given its transitional elements (Robben, 2004) and its potential to influence the psychology and perception of individuals (Walter, 1993). Furthermore, tourism occurs within liminal time and space (Sharpley, 1999) and, as such, locates the activity within
constructivist realms of meaning and meaning making. Therefore, tourism in general, and dark tourism in particular, provide a lens through which life and death may be glimpsed, thus revealing relationships and consequences of the processes involved that mediate between the individual and collective Self. In particular, the research at Body Worlds revealed a number of significant issues. Consequently, the ethnographic data provided two discernible data clusters, which have been translated into broad subject themes and, from which a narrative is now offered.

**Promoting Life Narratives**

Promoting Life Narratives as a perceptible theme from the ethnographic data refers to how Body Worlds promotes life by displaying the dead. The exhibition conveys a discourse of healthy living to individuals on how they might potentially extend their lives biologically as well as fulfilling them ontologically. Indeed, as previously discussed, von Hagens has explicitly stated that the exhibition is intended to promote the cycle of life, from birth to death, and in doing so, to create an awareness amongst visitors of how a wholesome lifestyle can be beneficial. Interestingly though, whilst religion and religious places may manipulate a message of spirituality to promote ‘healthy living’; Body Worlds employs a space to promote a message of sound physical health, which consequently, according to the exhibition at least, promotes spiritual well-being. However, although Body Worlds uses plastinated cadavers to illustrate physical health, or indeed, lack of it, the exhibition also utilises philosophy to promote a narrative of a meaningful life and living (Obs, 2009). With philosophical quotations by the likes of Kant, Ameil, and Plato that accompany the displayed corpses, strategically positioned within the overall textual interpretation of the exhibition, the visitor is greeted with not only a sense of visual awe of the cadavers, but also a sense of philosophical wonderment (Obs, 2009). Accordingly, this exhibition takes on a reverend perspective and a more conservative stance, propelling the exhibition back to its museological origins and away from the touristic connotations that seemingly surround Body Worlds as a commercial entity. Indeed, by way of illustration, a philosophical statement by the Swiss philosopher, Henri Ameil, about the psychological nature and difficulties of aging is displayed prominently next to a plastinated corpse that has been posed as a chess player, a deliberate reference, perhaps, to how aging is about not only physical degeneration, but also intellectual insight (Plate 6):
To know how to grow old is the master work of wisdom, and one of the most difficult chapters in the art of living (Henri Ameil, 1821-1881: quoted in Body Worlds and The Mirror of Time Exhibition - Obs, 2009).

Other philosophical narratives displayed at the exhibition that focus upon the health of the body (and mind) include a statement by the Lebanese American artist, Khalil Gibran:

Your body is the harp of the soul, and it is yours to bring forth sweet music from it or confused sounds (Khalil Gibran, 1883-1931: quoted in Body Worlds and The Mirror of Time Exhibition - Obs, 2009).

Plate 6: Visitors examining a chess playing cadaver at the Body Worlds Exhibition

This promotion of health and life, through a combination of reverence and philosophical statements, together with displayed human corpses and organs, aims to encourage the visitor to consider sustainable and healthy living. For instance, in the Gibran statement above, he refers to a musicological analogy as the body as a harp of the soul playing sweet music or confused sounds. Put another way, the physical (body) as the manifestation of the spiritual (soul) requires appropriate living to provide good health (sweet music), because otherwise
confused sounds (bad health) will ensue. Of course, this interpretive technique of utilising philosophy to enhance a life narrative within the visitor experience appears not to take into account intellectual capacities of individual visitors. As one male visitor after visiting the exhibition pointed out:

To be really honest, I quite liked looking at the dead guys and all the different organ parts - you know the plastic people, and the hearts and diseased lungs and that – but all that stuff on the walls [referring to the philosophical statements], I didn’t really get (BW Interviewee 3: Interviews, 2009).

Another male visitor also noted the issue of philosophical information to promote the aims of the exhibition, ‘I didn’t really like it… too much information for me – I like people with clothes’ (BW Interviewee 4: Interviews, 2009). Nevertheless, the use of philosophy is a prominent feature of the exhibitions’ interpretation strategy. Similarly, the use of images and photographs, in addition to plastinated corpses and human organs and tissue, are used to illustrate ill health. In particular, the exhibit about blindness and the degeneration of eyesight uses real human eyeballs, dissected and displayed in glass cases to show the intricacies of both healthy and diseased eyes. Augmenting the interpretation of this exhibit is a story of artists Claude Monet and Edgar Degas, who both suffered eyesight and cataract problems in real life. The narrative here is what the artists actually saw of the subjects they were painting and how their failing eyesight may have affected their style of painting. The exhibit goes on to display copies of their original work, specifically the Woman Dying Hair by Degas and The Japanese Bridge at Givery by Monet, but also the exhibit shows technologically altered copies of the paintings of what the artist may have actually seen (Obs, 2009). In addition, an accompanying philosophical statement by Plato: – ‘The spiritual eyesight improves as the physical eyesight declines’ perhaps indicates that whilst the physicality of vision will undoubtedly decline over the duration of life, the ontological aspects of living, with age, can be enhanced. Conversely, this particular exhibit is meant for visitors to learn not only about clinical aspects of human vision, but also to promote the need for health in general. A male visitor who was seemingly reminded of his personal circumstances and was overheard in the exhibition quietly saying to his female partner – “I must go to the opticians” – made this evident (Obs, 2009b).
Similarly, the notion of visitors learning from explicit promotion of life narratives is indicated by a female interviewee who recognised the exhibition as part of a broader pedagogical apparatus, and compared the collective consternation over ecological concerns as opposed to concern for the health of individuals. She states:

This [exhibition] is a really good learning tool that we can share with this generation and the next… these are real people, real muscles, bones, organs that really exist inside all of us, and most of us make no effort to take care of our fragile bodies… so perhaps this [exhibition] will kick people into doing just that… preserving our health as opposed to the environment, which all that people seem ever to go on about nowadays (BW Interviewee 5: Interviews, 2009).

Whilst idealistic and artistic promotion of life narratives is evident within the exhibition, consequently allowing learning to take place and (personal) meaning to be constructed, other more rational endorsements of healthy living are apparent. In particular, the formal sponsor partnerships between Body Worlds and The Mirror of Time exhibition and national health organisations, such as Heart UK and Diabetes UK, promote healthy living in a pragmatic manner. In particular, an exhibit depicts individual specimens of both a healthy and diseased human heart, as well as displaying a whole plastinated corpse with a diseased heart. An internet portal placed next to the exhibit encourages visitors to access online tutorials about the heart, as well as to donate to relevant health organisations (Obs, 2009). Ironically, though, at the time of observations, an ‘out of order’ sign was on the internet portal, denying visitors that day the opportunity to make additional learning connections (Obs, 2009). Nevertheless, other Body Worlds exhibits that formalised life narratives with external health organisations include the British Lung Foundation. For instance, an exhibit of a plastinated corpse with a blackened diseased cancerous lung, evidently resulting from smoking tobacco, is compared with a healthy (deceased) lung from a non-smoker (Obs, 2009). Again, the overall message is one of informed choice, but strong encouragement of the exhibit title ‘Ditch that Pack, Kick the Habit’ sponsored, incidentally, by the British Lung Foundation, clearly directs the visitor towards a smoking-free lifestyle. By way of illustrating visitor engagement with the exhibition, a female visitor, who appeared in her late forties, was witnessed staring intently at the plastinated corpse with cancerous lungs. She muttered quietly to herself – ‘I’m definitely giving up’ – a reference, most probably, to her own habits and an apparent desire to relinquish smoking which, perhaps, is based upon her personal reflective experience at Body Worlds (Obs, 2009).
Death / Life Reflections

Reflections upon life and death, particularly the nature of living and its inherent interrelationship with the inevitably of mortality, was another major distinguishable theme from the Body Worlds ethnographic data. Closely related to the theme of *Promoting Life Narratives*, as discussed above, the theme of *Death / Life Reflections* was discernible by the notion of how the exhibition seemingly compels visitors to reflect upon their own particular life and, perhaps more importantly, their own life-end. This apparent obligatory attempt to provide a reflective space is, conceivably, a deliberate intention by von Hagens who accordingly entitled his exhibition ‘The Mirror of Time’. Thus, the duration of life and the onset of mortality are viewed through a reflective gaze. Consequently, the visitor, immediately upon entering the exhibition, is greeted by a quiet and dark exhibitory space, with walls and ceiling decorated in black (Obs, 2009). Strategically positioned spotlights illuminate individual exhibits and certified interpretation boards and signage ensure visitors are directed to exhibits where they may commence their reflective experience. A female visitor, whilst seemingly recognizing and appreciating the official aim of the Body Worlds exhibition stated:

I was [emotionally] moved much more than I thought I would be, and I feel quite queasy now, especially after reflecting on what I’ve seen…. But I supposed that is what the exhibition is all about, so I don’t think it is totally negative (BW Interviewee 6: Interviews, 2009).

Similarly, another female interviewee in her mid/late twenties suggested her exhibitory experience and the persuasive nature of the exhibits would have a lasting effect, especially when it came to reflections on her own mortality:

It’s a really compelling exhibit, and it may well change how I think about things, especially about my own death – which is a bit creepy, I know… I’ll certainly be thinking about this for a long time (BW Interviewee 7: Interviews, 2009).

The reflective process of mortality commences very early in the visitor experience. At the beginning of the exhibition, visitors encounter a series of computer-generated images of a boy/man and a girl/woman morphing from their youth to maturity to old age and, eventually, to their demise (Obs, 2009). Consequently, the visitor is summarily transported to a
consciousness of death, whereby individuals consume death of the Other, not only through displayed plasinated human corpses, but also through images of the dead. For instance, the ‘Emerging Skeleton’, an exhibit of a plasinated male corpse seemingly emerging from his own skin and posed above a faux grave, with an associated interpretation board entitled ‘When the Heart Won’t Go On’, illustrates the moment of biological death (Obs, 2009). Moreover, separate photographs of a gravestone, a marker of the dead, and a dead (old) woman in an open coffin, accompany this exhibit, graphically implying that life will inevitably come to a natural conclusion. As a male interviewee pointed out:

I think I walked around the exhibition with my mouth wide open. I couldn’t believe some of the stuff…. It’s made me really ponder my own mortality (BW Interviewee 3: Interviews, 2009).

A key feature of the exhibition verifies this apparent ‘pondering of mortality’. Particularly, the strategic placement of a single large mirror near to the exhibition exit, against an empty uncluttered black wall, with a spotlight illuminating it, coerces the visitor to gaze into the Mirror and upon themselves and reflect, perhaps, on what the exhibition had to offer, namely narratives of both (healthy) living and subsequent dying (Obs, 2009). It is here, at the ‘Mirror’, that visitors have a mortality moment opportunity to consider, however briefly, their own personal circumstances. Indeed, a female visitor in her mid-sixties commented to herself as she approached the Mirror – “What’s that?” She then looked into the Mirror for two or three seconds, and further commented to herself – “Urrh, No!” Of course, this could demonstrate her apparent discomfort at looking at herself. On the other hand, at a more fundamental level, it could demonstrate how she may have already considered her health (and mortality) within the exhibition space. Consequently, the Mirror as a device to enhance the mortal gaze was, conceivably, too cognitively difficult to generate a direct contemplative sentiment (Obs, 2009).

Speculation aside, an elderly male interviewee did comment specifically upon his Mirror experience and his own notions of mortality:

I don’t what it was, but when I came to that big mirror at the end, and with the spotlight shining on it; it seemed to me that the spotlight was actually shining on me personally. When I looked into the mirror, I did think Oh My God, I don’t have that long [he
laughs at this point…but it does make you think, doesn’t it? (BW Interviewee 8: Interviews, 2009b).

Supporting this idea of ‘the reflexive gaze’ (Urry, 2002), research by Leiberich et al., (2006) with a sampling population of 1,078 visitors, examined the emotional reactions of individuals at the 2003 Body Worlds exposition in Munich. They reported 40.6% of visitors were led to reflect upon their own mortality because of their Body Worlds experience. Additionally, 42.6% of visitors were resolved to pursue healthier lifestyles (Leiberich et al., 2006). Considering this apparent self-reflection may occur both during, but especially after ‘walking through the dead’, contemplating notions of individual health and mortality, or put more simply, considering the reality of both life and death, is largely generated by an engagement with real human corpses and their anatomical dissection.

Whilst individuals reflect upon their own life/death at Body Worlds, they also appear to reflect upon the death of Others. Put another way, visitors contemplate the mortality of those who either have had a direct or indirect relationship with them. Notably, visitors to the exhibition, who essentially take a self-guided tour through a temporary resting place of the dead, were witnessed speaking in hushed tones with their partners, friends, and fellow customers. In particular, three female visitors in their late-fifties/early sixties, whilst gazing upon the ‘Emerging Skeleton’ exhibit, talked quietly about a male relative who had recently passed on (Obs, 2009). In particular, these visitors chatted amongst themselves about their relative who had died of a heart attack, and the causes of that cardiac arrest, and for these visitors at least, the exhibition illuminated a particular sad period of their lives upon which they appeared to reflect. Thus, it is here where the living seem to reconnect with the ‘significant dead’, as unidentified public cadavers permit a prompting of memories of those who had gone before and for tales of identifiable dead friends and relatives to be (privately) conveyed. However, it appeared that the exhibition not only stimulated a reflection of death (and lives) of those close to the visitor, but also provoked a consciousness of trauma and death that was much more remote. For instance, two female visitors in their thirties, whilst examining the ‘Foetus’ exhibit, where glass jars of preserved pre-term babies are stored and displayed (Plate 7), recounted to each other a story which had made media headlines (at the time) of a pregnant woman with twins who had collapsed in a hospital toilet and subsequently
died (Obs, 2009). Although the twin babies survived, the dead mother never saw her offspring (see Nugent, 2009). Hence, apparent is the triangulated psychosocial connections between the Foetus exhibit, the recent media portrayal of a tragic death (and birth), and evident empathy with a media reported trauma. This triangulation is triggered not only by the capacity of Body Worlds to project narratives of both life and death, but also by the visitors’ apparent ability to absorb the experience and construct particular (personal) meanings with regard to mortality.

Plate 7: Visitor examining a preserved foetus in a jar at the Body Worlds Exhibition

However, whilst death/life reflections are perceptible within the visitor experience, whether through a philosophical acceptance of inevitable demise, regardless of lifestyle, or a conscious contemplative effort to follow healthy patterns of living as dictated by the exhibition, for example, stopping smoking, eating a balanced diet, or more physical exercise, some visitors appear to take a more pragmatic perspective. For instance, two elderly female
visitors, whilst viewing a dissected plasinated cadaver who had suffered from obesity in life and, which was sliced open to show fat levels around his or her body, began to chat quietly to one another about their own diets (Obs, 2009). Whilst gazing upon the effects of obesity, and reading an interpretation board entitled ‘Battle the Radicals’, a description of various ‘bad chemicals’ that are present in food, one of the elderly females commented to the other, ‘you can’t go through life without something happening to us; I’m still going eat me chocolate and crisps’ (Obs, 2009).

However, perhaps the ultimate reflective device employed by Body Worlds is at the very end of the visitor experience. As individuals leave the exhibition, a member of staff presents a ‘Life Certificate’ to departing visitors, tangible evidence which is designed to record a personal commitment to ‘live a purposeful life in longevity’. Consequently, the aim of certificating visitors seems to be a clear inducement of individuals to reflect further upon their life and healthy living and, in doing so, to help avoid the early onset of mortality. As von Hagens himself purports in a final philosophical proclamation on an interpretation board at the exhibition exit, (though curiously, it is placed on a wall directly opposite the exit door and where most visitors appear not to see it) (Obs, 2009), states:

The presentation of the pure physical reminds visitors to Body Worlds of the intangible and the unfathomable. The plasinated post-mortal body illuminates the soul by its very absence. Plastination transforms the body, an object of individual mourning into an object of reverence, enlightenment and appreciation. I hope for Body Worlds to be a place of enlightenment and contemplation, even of philosophical and religious self-recognition, and open to interpretation regardless of the background and philosophy of life of the viewer (Body Worlds and The Mirror of Time Exhibition: Obs, 2009).

**Body Worlds and Dark Tourism: Mediating Life and Death Narratives**

Body Worlds display death and dying: the (real) dead are packaged up and sold as an exhibitory experience. Hence, a number of significant themes emerged from the ethnographic research at the exhibition. These themes address how the dead cohabit a world with the living through their continued plasinated existence, and how human corpses are used artistically as well as educationally to convey (commercial) discourses of healthy living. Consequently, emergent themes focussed upon how the exhibition space acts as a reflective place and how
visitor experiences are inextricably connected with ‘mortality moments’. However, the research also revealed how the exhibited dead take on the role of the Significant Other Dead, giving consequence to the ‘reality of Body Worlds’ which ‘surfaces when participants turn their own bodies into interactive displays and refer to them in interaction with and discussion about the plastinates’ (vom Lehn, 2006: 251). This, in turn, brings up notions of mediation and the Significant Other Dead.

The Role of the Significant Other Dead

Throughout history, religious rituals have provided an ontological link between the dead and the living. In turn, religion, which has evolved from ancient practices of praying to ancestors and gods, has constructed ecclesiastical mechanisms that promote public and spiritual ‘traffic with the dead’ (Walter, 2005). In particular, mourning rituals and subsequent prayers for the deceased provide intercession, for many, between those who have passed away and those who are yet to pass away. Indeed, a Christian perspective suggests God ‘is not the God of the dead, but of the living.... for there is one God, and one mediator between God and men, the man Christ Jesus’ (Matthew 22:32 / 1.Timothy 2:5). However, an increasing prevalent secularised ideology suggests the ‘dead have no spiritual existence, so communication with the dead soul is not so much wrong as impossible’ (Walter, 2005: 18). Thus, secularism, as a feature of contemporary society, may be considered a ‘barrier ideology’ cutting the living from the dead soul (Walter, 2005). Augmented with the institutional sequestration of death as discussed earlier, Stroebe and Schut (1999) argue that the contemporary (Western) individual has little choice but to reconstruct a life without the (their) dead. However, to suggest contemporary Western society is wholly cut off from its dead, with no traffic between the two domains, is not entirely accurate. Indeed, Walter (2005) advocates there is considerable traffic, with several professions making a living out of the dead. In his ‘mediator death-work’ analysis, Walter examines those who work within the death, dying and disposal industry, including spiritualist mediums, pathologists, obituarists, funeral directors, and so on. It could be argued those who produce dark tourism (re)presentations may join this list – for example, Gunter von Hagens of Body Worlds. Walter goes on to note Aries claim of modern unfamiliarity with the dead, and states, ‘if Aries is right that it is lack of familiarity that makes death dangerous and wild, then mediator death workers re-tame it and enact this taming in public ritual’ (2005: 19).
It is this notion of mediation/mediator and the *taming of death* within public spaces, that is – making *absent* death *present* – and its relationship with dark tourism consumption that this paper has revealed. Indeed, the empirical research suggests, albeit to varying degrees, evidence of a meaning of mortality for individuals, or at least the construction of mortality meaning within a dark tourism context. The empirical analysis also indicates mortality meaning was attributed to dark tourism (re)presentations of *Significant Other* death. Hence, the Other of Death as a defining feature of dark tourism (Seaton, 2009) is important in the role of mediating between the living and the dead. Consequently, consuming dark tourism provides a potential opportunity to contemplate death of the Self through gazing upon the Significant Other Dead. Indeed, in a secular age of death sequestration – dominated by medicalisation – the good Romantic death, or at least its perception, has been largely replaced with the likelihood for most people to have a ‘hi-tech’ (bad) death that is stage-managed by medics and professionals. Hence, where invisible death has been made visible and (re)created through the Body Worlds experience, dark tourism can provide a contemporary mediating relationship of mortality reflection for the Self through Other death. Ultimately, therefore, dark tourism is a (new) mediating institution within secularised death sequestered societies, which not only provides a physical place to link the living with the dead, but also allows the Self to construct contemporary ontological meanings of mortality and to reflect and contemplate both life and death through consuming the Significance Other Dead.

**Conclusion**

Whilst dark tourism is a contemporary mediating institution, which allows the Self to construct ontological meaning and to reflect and contemplate both life and death through a mortality lens, there are four key reasons that potentially explain why dark tourism is a mediating institution:

- firstly, dark tourism mediates mortality by representing and communicating death;
- secondly, dark tourism mediates mortality by providing the visitor an opportunity to accumulate ‘death capital’ upon which individuals may draw upon to aid reflection and contemplation;
- thirdly, dark tourism mediates the complexity of death whereby contemporary mortality is reconfigured and revitalised through dark tourism spaces;
• and finally, dark tourism mediates the seemingly macabre through symbolically displaying the Significant Other Dead.

Ultimately, this research has particular implications, not least for the management and governance of dark tourism sites, as well as further understanding consumer behaviour of so-called ‘dark tourists’. Crucially, those who are responsible for the management and (re)presentation of ‘Other Death’ at dark tourism sites need to recognise the role of particular sites as potential receptacles of mediation between the lives of visitors and their perspectives of mortality. This is particularly important considering the institutional sequestration of death, which to some at least, may instil a sense of ontological insecurity. To that end, dark tourism, which makes absent death present, is not so much about presenting narratives of death, but about representing narratives of life and living in the face of inevitable mortality.