Jade and the Journalists: media coverage of a young British celebrity dying of cancer

Abstract

In contemporary western societies, dying usually occurs in old age, out of sight in hospitals and institutions; how then do lay people learn what dying is like? Since the 1970s, one source of information in Anglophone societies has come from individuals who have chosen to publicise their dying of cancer. This article examines the most high profile case of this to date in the UK; in 2009, celebrity Jade Goody publicised in tabloid newspapers and celebrity magazines the final weeks of her dying of cervical cancer. What did she and her media say and write about dying? In print coverage of her final weeks, four different voices are identified: those of Goody, of journalists, of her publicist, and of photographers, each representing her dying somewhat differently. Two major themes are discussed: Jade’s struggles to retain autonomy (challenged by her disease and by other people), and the framing of her final weeks not primarily as a typical media cancer story of heroism, but as one of redemption in which she attained social respectability through dying.

Keywords: UK; dying; celebrity; journalism; Jade Goody; pathography; heroism; redemption
In contemporary western societies, dying usually occurs in old age, out of sight in hospitals and institutions; it is something with which many people are, to quote Philippe Ariès (1983), ‘unfamiliar’. Since it is hard to promote citizen engagement with something with which citizens are unfamiliar, the UK government’s End of Life Care Strategy for England includes a Dying Matters coalition, launched in March 2010 to promote public awareness around death, dying and bereavement (http://www.dyingmatters.org). The coalition’s strapline is: ‘Dying Matters – let’s talk about it’. In recent times in Britain, the person who talked most publicly and extensively about dying was Jade Goody, a young woman whose seven year celebrity career had been based on a personal and often crude ‘telling it like it is’ (Gies, 2009: 27); in 2009 she chose to publicise her dying from cervical cancer in a range of popular media, with high profile day by day accounts of her final weeks. This article analyses what Jade and her media told the British public about what it is like to die of cancer. After sketching some previous research findings into Anglophone media reporting of cancer dying, I document the unprecedented coverage of Jade’s dying. I then note the different voices in the media coverage: those of Jade herself, of her hired publicist, of journalists, and of photographers, before going on to examine how these four different voices represented her experience of dying of cancer.

**Cancer pathographies and media representations of cancer**

Though death is a popular topic for the mass media, coverage of dying is mainly fictional (movies, soap operas, drama series), while most news coverage concerns death and its aftermath rather than the process and experience of dying (Howarth, 2007; Kitch, 2008; McIlwain, 2005; Woodthorpe, 2010). Since the 1970s, however, published personal accounts of dying have developed as a sub-set of illness narrative
(Frank, 1995) or pathography (Hawkins, 1990). Although the internet has broadened the range of writers, most are still professional writers, journalists and academics (Bingley et al, 2006), examples including columnist Harold Brodkey in the *New Yorker* and Oscar Moore in the *Guardian*, both of whom had AIDS (Small 1998). More recently in the UK, columnist John Diamond continued to write for his newspaper (the London *Times*) as he was treated for and then began to die of throat cancer, subsequently producing a book (1999), as too did *Observer* columnist Ruth Picardie (1998). Actress Farah Fawcett produced *Farrah’s Story*, a television documentary about her treatments for cancer, screened in 2009 in both the USA and the UK; British actress Wendy Richard did likewise, producing *To Tell You The Truth*. American photographer Hannah Wilke’s final 1994 exhibition, *Intra-Venus*, comprised a series of life-size self-portraits documenting how cancer and its treatment transformed her physically and mentally

(http://www.feldmangallery.com/pages/exhsolo/exhwil94.html). Though some of these autobiographers had AIDS (Small, 1998), most had cancer. Other terminal conditions such as heart disease, lung disease and dementia generate very few pathographies (Bingley et al, 2006). Cancer is typically what dying people write about.

Armstrong-Coster (2001, 2005), analysing a television documentary and the writings of John Diamond, argues that autobiographical accounts of dying may show commonalities, not so much in what is included, but in what is left out; even so-called ‘warts and all’ portrayals tend to sanitise dying, omitting rage, anger, and the more unpleasant details of incontinence and vomiting. Armstrong-Coster wonders whether there is an implicit collusion with an audience that would rather not know such details. This is one question the current article addresses.
Hawkins (1990) examined three cancer pathographies that were published in the USA from 1978 to 1980, and concluded that they displayed different moral tales. She suggests that if pathography is today’s ars moriendi, then there is now no one art of dying, but several. According to Seale (2001, 2002a, 2002b), however, third person accounts by journalists have a preferred narrative; he analysed 2419 articles published in the English-language press in the first week of October 1999 containing the words ‘cancer’ or ‘leukemia’. The vast majority of Seale’s quotes are from journalists rather than persons with cancer, and his exhaustive analysis of their themes is informative. He shows how the press provides a ‘spectacle of ordinary people displaying exceptional powers when threatened by illness’ (Seale, 2002b: 166). The articles rarely mention finding strength in religion (Seale, 2001), nor do they portray women with cancer as victims as earlier studies by Lupton (1994) and Clarke (1999) had argued (Seale, 2002a). According to Seale, print media portray secular women and men finding within themselves the strength to face cancer, and for some, the strength to face dying of cancer. They become ‘ordinary heroes’ (Seale, 2002a).

These media genres and stock narratives provide the context for Jade Goody’s public dying. That said, non-fiction media coverage of death tends to be post-mortem, while cancer autobiographies focus more on the disease and its treatment than the final terminal weeks. The Jade stories, by contrast, were biographical and/or autobiographical, and provided intimate detail of the period so often missing from published accounts: the terminal weeks. Her coverage is thus of significance to scholars of media, illness and death.

1) Jade Goody’s public dying
Born in London in 1981, Jade Goody was unknown to the British public until in 2002 she appeared on the British television reality show, *Big Brother*, where she was ridiculed for her loutish behaviour, crude language and ignorance. Media stories about her, then and later, alluded to her poor and dysfunctional upbringing and to her lack of education. If public humiliation is one of the purposes of reality television (Kompare, 2009), she fitted the part well. At the same time, her underclass dimwit persona endeared her to many (Holmes, 2009), and she was subsequently more successful than other reality show contestants in developing a media and business career, launching her own line of prominently advertised perfume. Appearing in *Celebrity Big Brother* in 2007, however, she was accused of racism toward upper class ‘Bollywood’ housemate Shilpa Shetty, resulting in 45,000 complaints; her perfume was removed from sale in shops, and company sponsorship withdrawn. (Gies, 2009; Holmes, 2009)

Attempting to re-launch her career, Jade appeared in August 2008 on *Bigg Boss*, the Indian version of Big Brother, during which her medical consultant in London telephoned to tell her – with the cameras running - that she had cancer, and that she had to return to England immediately. After a number of treatments, it was confirmed on 4 February 2009 that the cancer was terminal. On 22 February 2009 she married twenty one year old Jack Tweed, then on bail for assault, in a glossily reported celebrity wedding; worsening pain led to palliative surgery in hospital, where on 7 March she and her two sons, aged four and five, were christened; she chose to go home, where she died on 22 March.

Why did Jade invite the media in to witness her dying? Three reasons were widely reported (Clifford and Parris, 2009). First, she made her living, a very good living, simply by being herself in the public eye; authenticity is greatly prized in stars (Dyer, 1979), and Jade saw no reason to develop a private self just because she was
dying. Second, she signed lucrative media deals for her story, notably with the weekly OK! celebrity magazine and Living TV, to boost the funds available to pay for her two young sons’ education; she wished them to have a better start in life than she had had. And third, she wished to encourage young women to have cervical cancer smear tests. To these ends, she hired controversial publicist Max Clifford to manage media coverage of her dying.

Front page coverage was particularly prominent in redtops (the most downmarket UK tabloid newspapers), especially The Sun, the largest circulation UK newspaper, and the Daily Star, the fifth largest, though sparse in non-redtop tabloids such as the Daily Mail (second largest circulation). Coverage was also prominent in the UK’s best selling Sunday paper, The News of the World. iii

Jade’s dying was both qualitatively and quantitatively more public than that of others who had publicised their cancer. First, there was no escaping the coverage, especially for redtop readers. Jade’s dying made the front page of several redtops most days for several weeks and, unlike most book-length pathographies, did not stop when the terminal stage was reached. Second, Jade’s media image – in dying as in living - was based on candidness, on the lack of any perceived division between public persona and private self. The ghost writer of one of her autobiographies commented, ‘The Jade I got to know was more open, honest and candid than any celebrity I’d ever met…. Jade wore her heart firmly on her sleeve in a way no-one else, especially those in the public eye, would dare.’ (Cave 2009: vii). Third, most autobiographers of their own illness have been middle class and even cerebral (Bingley at al, 2006; Thomas Couser, 1997), whereas Jade was portrayed and portrayed herself as coming from the opposite end of the social and educational spectrum. This prominence makes her dying relevant both to the research literature on
media coverage of death and dying, and to the UK government agenda to educate the public about dying. Here was information about what it is like to die of cancer that it was hard for audiences to avoid; like Jade’s own forthright public persona, it was ‘in your face’.

2) Representations of Jade’s dying

Since what makes the coverage of interest is its prominence, I selected the print material that was hardest for audiences to avoid: coverage in redtop dailies, the weekly *News of the World*, and the weekly *OK!* and *New!* celebrity magazines, all of which frequently had Jade on their front pages. I examined these sources from her wedding to her death – the last four weeks of her life. I also refer to the most clearly autobiographical production: her published diary (Goody, 2009b), which started with the August 2008 cancer diagnosis on *Bigg Boss* and continued to seven days before her death. Analysis of this material entailed identifying narrative themes (Ryan and Bernard, 2003) that connect to a) previous research findings on media coverage of cancer dying concerning autonomy, heroism, and the sanitising of dying, and b) the *Dying Matters* coalition’s health education concerns. Agency/autonomy, and heroism/redemption, came to take centre stage in the analysis.

Four voices

Before discussing these themes, it is important to note that Jade’s dying was narrated through four very different voices –1) her own words (along with those of intimates such as her mother Jackey and husband Jack), 2) outsiders’ words (primarily journalists, but also others not close to her such as other celebrities), 3) her publicist, Max Clifford’s, words, and 4) photographs. Each tended to represent dying
differently. These differences were most evident in OK! magazine which, because of its contract with Jade, was able frequently to quote her directly and had rights to many photographs, notably of her wedding. (Some newspaper coverage and photos were derived from OK! and relied heavily on statements from Clifford.) Previous analysts have variously portrayed the coverage of Jade as ghoulishly highlighting cancer’s most terrifying symptoms (Brayne, 2010: 16), or airbrushing them out (Woodthorpe, 2010); such contradictory analyses may be partially reconciled by differentiating the four voices:-

1) Jade’s voice. Jade herself frequently spoke of pain (physical and existential), feeling ill, and being scared. To quote her autobiography:

1 March: ‘My skin is flaking and scabby. I feel disgusting. I can’t live like this…. My body is horrible now. I don’t want to be like this.’ Goody (2009b: 248)

5 March: ‘I knew I looked awful. I feel awful. I hate my friends and the people I love seeing me like this.’ (Goody, 2009b: 255)

New! magazine (23 March) referred to her journey home from hospital in which ‘medics struggled to ease her pain’. In the same article, Jade herself was reported as admitting that there ‘is never a moment that I am free of it (pain)’.

In the last week of her life, slipping in and out of consciousness, Jade could no longer write or speak to the press. Her first person story ended, both in her published diary (Goody, 2009b) and in other media, as journalists came to rely on Jade’s mother, husband, and close friend Kevin Adams for first person comment.

2) Journalists’ voices. Journalists, though acknowledging Jade’s pain and fear, wrote of her courage, strength and humour in the face of adversity. Headlines speak of her bravery, examples from 23 February including: ‘Brave Jade’ (News of the World),
‘Brave Jade Goody’ (Sun), ‘Britain’s Bravest Bride’ (Daily Mirror). Whereas a journalist wrote, ‘Jade remained strong and retained her trademark sense of humour.’ (OK! 31 March, p.14), Jade herself was reported as saying, ‘My mum…kept saying I was strong, but I wanted her to tell me that it was alright to be weak.’ (OK! 24 March, p.43). Whereas Jade wrote of of pain and struggling to come to terms with the fact she was dying, journalists framed such matters as trials in the face of which she displayed strength, bravery, and agency:

The incredible strength of Jade Goody was never better demonstrated than during the last days of her life – when, despite being in terrible pain, and struggling to come to terms with the fact she was dying – the brave star set about planning her own funeral. Jack had originally asked one of her bridesmaids to make the arrangements – but the irrepressible cockney girl could not bear to keep her hands off the event. (OK! 7 April, p.5)

Though the journalists’ words conform to established media norms, representing the person with cancer as finding the strength to triumph over adversity (Seale 2002b), Jade’s determination to tell her own, more mundane and more fearful, story regularly broke through, especially in OK! magazine and in her autobiography. As another autobiographer put it, ‘cowards get cancer too’ (Diamond, 1999). Both strength and weakness were there in Jade’s coverage, depending on who was speaking; autobiographical fear and journalistic heroism were intertwined.

There were exceptions. Some newspaper reports from the last few weeks presented a bleaker story. On witnessing her leaving hospital, the Sun (12 March, pp.8-9) reported: ‘She looked forlorn under a red hospital blanket that could not disguise her weight loss. She could not manage her normal wave or smile. And her total silence was in stark contrast to her usual brashness.’
Another exception were many, but not all, headlines. Designed to shock and to keep the story moving, these often announced a frightening new development:

‘Cancer-stricken Jade Goody’s hospital ordeal’ (*Daily Mail*, 16 February, p.1); ‘JADE IN 999 OP DASH: Sick star in “absolute agony”’ (*Daily Mirror*, 2 March, p.1);

‘STAR’S NEW AGONY. JADE’S GOING BLIND’ (*Sun* 10 March, p.1).

Nevertheless, such headlines were often softened with references to Jade’s fortitude rising above the pain and agony: ‘Star in new heartache: Brave Jade’s pain as Jack faces jail’ (*Sun*, 4 March, p.1); ‘I AM SCARED TO FALL ASLEEP. Brave Jade gives her last interview’ (*Daily Mirror*, 11 March, p.1). Brayne (2010: 16), a health educator, has criticised Jade’s ‘screaming tabloid headlines’ for bias in how they represented dying, ignoring palliative care’s ability to control both physical and existential pain. Certainly in the journalists’ voice, it was not palliative care, but Jade’s own bravery that triumphed over pain.

3) The publicist’s voice. The role of Jade’s publicist Max Clifford was indicated in the following *Daily Mirror* headlines (2 March, p.5):

Jade’s 999 dash for emergency op to relieve pain.

‘SOBBING, SHAKING, PETRIFIED.. SHE IS IN ABSOLUTE AGONY’

She phoned me in tears saying ‘I just can’t stand this any more. I’m in agony.’ (PR Max Clifford)

Clifford produced regular press releases and conferences, mediating Jade’s own words to waiting journalists.

4) Photographs. The pictures of Jade in her last weeks often contradicted the accompanying text. The picture dominating the front cover of the *Daily Mirror* for 2 March, whose page 5 headline I have just cited, showed a Jade whose eyes and
complexion do not look like someone in agony. *OK!* magazine (17 March, p.41) ran a feature on the hospital chapel christening, starting: ‘Barely able to move and virtually unable to speak… Despite being weak and in so much pain…’ But the page was dominated by a photograph of a smiling and apparently relaxed Jade with one of her children on her lap. Typically, pictures of her face – often the only part of her body exposed - did not fit common stereotypes of the gaunt, skeletal person in end-stage cancer, nor of the steroid-induced overweight patient. Often it was props – a hospital gown, a bed, a stretcher, an oxygen mask - not to mention the accompanying headline, that indicated serious illness (Thompson, J. 2009). No pictures of Jade showed her looking as ill as fictional Peggy (from the soap opera East Enders) portrayed in *New!* magazine (16 March); the same issue of *New!* had a photo of Jade waving.

Concerning emotional rather than physical pain, the photographs showed Jade’s mother in distress more commonly than they did Jade herself. By contrast, the scared Jade had been dramatically filmed several months earlier in August 2008 when she received the cancer diagnosis. Screened on Indian TV (and still available globally on the internet), she was sobbing with shock, distress and fear (“Jade Goody gets told”, 2008). This was reality TV that was all too real (Walter, 2009). But fear was not reflected in the final weeks’ press photographs.

There were thus mixed messages. Jade told readers that dying of cancer can be frightening and painful, sometimes uncontrollably so; some headlines indicated likewise, though journalists reassured readers of the bravery that ordinary people can summon in such circumstances; many of the photos employed to illustrate the story undermined stereotypes of how cancer ravages the body.

*Agency*
A key aim of palliative care is to empower the dying person to retain agency as long as possible. The Dying Matters coalition is concerned that without full public awareness of the dying process, those near death may not make their wishes known to family, friends or relevant professionals, or may not have them carried out. One purpose of death education in the population at large is to enhance agency in those dying or making preparations for dying. Maintaining agency and autonomy is also a theme in the 63 first-person cancer narratives analysed by Bingley et al (2006). Was it in the narratives of Jade’s dying?

Reality TV provides an uncertain format for fame, leading as easily to disgrace as to celebrity, so Jade’s media career had resembled riding an untamed horse. In her final weeks, however, she successfully used the media for her own ends. She used contacts to sponsor her celebrity wedding, and signed media contracts to pay for her children’s education and to raise the profile of smear testing. It seems likely that she turned around public, and especially female working class, opinion of herself precisely by displaying herself as a working class woman able to control her own fate. Jade portrayed herself as a fighter, and though having ignored early warning signs of her cancer, latterly used the media to urge young women to take responsibility for getting tested for cervical cancer. In this, she challenged stereotypes of working class fatalism in regard to health (Pill & Stott, 1987). Nevertheless, two things threatened this final narrative of autonomy and agency – the disease, and other people.

The disease. Compared to many other fatal conditions, the overall trajectory of terminal cancer can be fairly clear, for example a matter of weeks rather years, yet predicting how the person may feel next week is not easy. The person and her family may not know if improvement or deterioration is due to the disease, or to treatment (whether curative or palliative), or to catching an infection (quite common, as
chemotherapy impairs the immune system); the sufferer cannot necessarily infer prognosis from how she is currently feeling. It is not easy maintaining control of your life – as is necessary when planning a wedding or christening - when you do not know how you will feel tomorrow, or whether you have two weeks or two months left.

Jade was not well enough to hold the party-style christening she had originally wanted, but she did manage to attend a christening in the hospital chapel on 7 March. Undeterred, the Daily Star’s front page headline on 5 March announced: ‘Jade: I’ve said my goodbyes… I know I’ve got just hours left’ (though the front page picture showed her sitting up in her bed, wide eyed and with a complexion many women would envy, apparently very much alive). And still, a full six days before she died, the front page of the Daily Mirror (16 March) announced ‘JADE’S FINAL HOURS’.

Jade was clear that she wished to die at home, but on 1 March was rushed to hospital for emergency palliative surgery, which for some days was reported as less than fully successful. The implication was that her desire to die at home might be thwarted. A week later, she persuaded doctors to discharge her, leading to headlines such as ‘Jade makes it home to die’ (New! 23 March pp.8-9) that triumphantly asserted her agency vis-a-vis both her doctors and the illness, though other papers portrayed her as more supplicatory: ‘AILING Jade Goody went home for the last time yesterday after begging doctors to let her die in her own bed.’ (Daily Star 12 March, p.11)

Other unanticipated consequences of her condition threatened her plans. On 7 March, a Sun headline (p.7) announced ‘CANCER STAR’S BLINDNESS AGONY. Jade’s sight is nearly gone… she’s terrified she won’t see her boys again.’ Although the overall narrative is one of Jade heroically battling against the odds, the roller
coaster ride often experienced in terminal cancer was in many ways accurately portrayed.

Other people. Though the home care nursing team was depicted as enhancing Jade’s autonomy, enabling her to come home as she wanted, other people and other events entered the story, complicating her ability to make and abide by decisions. On 4 March, just shortly after their wedding, the *Sun* front page reported Jack’s court appearance in which he was convicted for assault, possibly leading to prison. As Jade’s death approached, a recurring story in the popular press was whether Jack’s curfew would be lifted to enable him to spend nights with his new bride. Jade was also reported as being worried that, as Jack was refusing to gain financially from her death, he would be left penniless.

Another area where clear decision making was compromised involved the question of what and when to tell her four and five year old sons she was dying. Jade was reported as unsure how much information they could take. ‘The heartbroken celebrity… has struggled to find the right words to explain her plight to the children.’ (*News of the World*, 22 February, p.4) ‘After taking advice from bereavement experts, she mustered her strength to explain that doctors could not make her better and that was going to die… She later told friends; “It was the hardest thing I have ever had to do.”’ (*Daily Mirror*, 16 March, p.5)

The final judgement of the popular press, though, was that Jade had tied up her personal affairs, said her goodbyes, and throughout exercised a remarkable degree of autonomy. The *Daily Mirror* (16 March, pp.4-5), under the headline ‘JADE IS READY TO DIE’, quoted Max Clifford:

She’s done what she set out to do – she has got married, was christened and has paved the way for the boys to understand that she is going to
die and will soon be living in heaven. She has put her house in order
and faced up to everything in an incredibly brave way.

Though far from an easy death, this conformed to the palliative care movement’s
concept of the good death, in which full information enables the dying person to take
control of their dying and organise their affairs (Saunders, 1990); and it turned Jade
into the ordinary hero beloved of the news media (Seale, 2002b).

Redemption

The media portrayed Jade Goody as a rags-to-riches story, not just in terms of money
but also in terms of character. Certainly, this entailed the usual features of Seale’s
(2002a) ordinary heroine. Though she was ‘stricken’ by cancer (Sun 23 February,
p.4), she was nevertheless a ‘fighter’ (Daily Mirror 23 February, p.5), and rarely if
ever a ‘victim’. After her operation, Jade was pictured with her thumb up (Sun 4
March, pp.1,4-5), an image reprinted in a range of papers. Her swearing at a nurse
who was talking about her condition, thinking she was asleep, was taken as evidence
of her fighting spirit (Sun, 16 March, p.4). Her mother wrote that Jade showed people
‘how to die with humour, love, bravery and dignity’ (Budden, 2009: 276). Seale
identifies differences in how the media portray male and female heroism in the face of
cancer, emphasising ‘women’s skills in the emotional labour of self-transformation’
while cancer in men ‘is more commonly portrayed as a test of pre-existing character’
(Seale, 2002a: 107). Exley (1999) also discusses the emotional labour performed by
non-elderly women dying of cancer, for example making their impending death less
hard for family members. Jade, however, was portrayed as both drawing on her
underlying strength, determination, cheerfulness and realism, and performing
emotional labour in her relations with friends and in telling her children she was going to die. Hers was a heroism that both men and women could, in principle, relate to.

Though hers was a story of heroism in the face of dying, it was even more one of redemption through dying. Redemption narratives appear, especially in N. American media, after disasters such as the Oklahoma City bombing (Linenthal, 2001) or 9/11 (Kitch, 2003), and refer to religious meanings found by others in the disaster or its aftermath. Redemption narratives are also found in American media post-mortem constructions of some celebrities’ lives, which are told “in a remarkably uniform narrative that draws moral lessons from a star’s life difficulties but, in the end, usually forgives and celebrates him or her” (Kitch & Hume, 2008: 77). But Jade’s forgiveness was wrought not through post-mortem re-writing of her life, but through her dying behaviour. That is to say, redemption through dying is a new kind of media narrative, not previously observed or noted by researchers. It is not, of course, new in longer historical perspective, medieval and early modern deathbed behaviour often being scrutinised for evidence of salvation (e.g. Houlbrooke, 2000).

Jade’s redemption occurred at four levels:

a) Bald is beautiful. Earlier in her media career, Jade’s media persona was based on crude language and behaviour, and the tabloid press had made unflattering comments about her weight (Holmes, 2009). In her final weeks, however, the tabloids transformed Jade from a physically and morally less than entirely beautiful girl from a dysfunctional family, into a physically and morally beautiful wife and mother. They narrated in detail her traditional white wedding and the christening. Crucially, at these her last two formal public appearances, widely photographed, Jade opted not to cover her bald head. At a pre-wedding photoshoot, she appeared with bridesmaids wearing swimming caps that imitated Jade’s chemotherapy-induced baldness (News of the
World, 22 Feb, p.5). Glamorous photographs of bald Jade adorned the glossy 10
March OK! wedding issue, as well as two subsequent OK! front covers (24 March, 31
March), the covers of her autobiographies (Goody, 2009a, 2009b), and the tabloid
coverage of her wedding. (“Jade and Jack exclusive”, 2009)

Given the common assumption that women do not welcome baldness as a side
effect of chemotherapy and will wish to wear a wig (“Managing hair loss”, 2007), it is
remarkable that Jade not only chose to display her baldness but also, in conjunction
with her make-up artists and photographers, was able to transform her bald self into
an image of conventional female beauty. Her bald, dying, wedding day body was no
fading of a former glory, but was photographically transformed into her glory,
remarkably represented in three out of the four glossy OK! magazine covers in the
month she died. While acknowledging that cancer can be fearful and terrifying, these
pictures asserted that having cancer is nothing to be ashamed of. As the Metro
newspaper headline put it (23 February, p.1), ‘Bald and proud, Goody gets wed.’
Unlike American photographer Hannah Wilke, whose gaunt 1994 self-portraits of her
own baldness challenged stereotypes of female beauty
(http://www.feldmangallery.com/pages/exhsolo/exhwil94.html), OK!’s glossy covers
transformed Jade’s hairlessness into celebrity glamour. Celebrity magazines function
as an arbiter of beauty, allowing only acceptably glamorous images onto their front
covers. Turning the baldness of terminal illness into this kind of beauty is a cultural
innovation, at least as far as the visual media are concerned. There were complaints
about some media coverage of Jade’s dying (Walter, 2009), but none that OK!’
magazine’s bald glamour photographs were ugly or in bad taste; it seems audiences
accepted these representations of bald Jade as beautiful.
Though there is a literature on the eroticisation both of the dead female body (Bronfen, 1992; Foltyn, 2008) and of female figures in cemetery sculpture (Berresford 2004; Robinson, 1995), Jade achieved something original: she beautified and sexualised the dying female body. The bald images may not be erotic, but – through publication on glossy magazine covers – claim a conventional feminine beauty. She used her condition to assert her feminity through the key rituals – wedding and christening – that celebrate the specifically female roles of wife and mother.

b) The turn to religion. Though Seale (2001) found very few cancer stories that mentioned religion and Armstrong-Coster (2005) noted the secularism in Ruth Picardie’s (1998) pathography, the story of Jade’s dying developed a religious angle, especially in the Sun newspaper. As well as inviting and printing readers’ prayers for Jade, a Sun editorial noted (23 February, p.8):

She has turned to The Bible for comfort – hoping one day that she will hug her boys again in Heaven. With typical honesty, she says: “I want them to try to get to know Jesus because if they get to know Jesus, hopefully they’ll be able to keep in touch in the future.” Jade, you are in ALL our prayers. (emphasis in original)

Given the rapid de-Christianisation of British public life (Bruce, 2002), it is remarkable that the country’s highest selling tabloid should invite its readers to pray. Later (16 March), the Sun informed its readers that Jade told her children: ‘Mummy’s going to heaven soon. I’m going to be a star up in the sky, so when you are looking up you will be able to see me and know I’m there, always looking over you.’ The Daily Mirror front page headline (23 March) reporting her death was ‘MUMMY’S IN HEAVEN’.
Jade’s – and the tabloids’ - view of heaven is anthropocentric rather than theocentric (McDanell & Lang, 1988), invoking Britain’s most popular afterlife belief, namely reunion in heaven with those you love (Davies, 1997; Walter, 1996). Davie (1990) argues that ‘believing without belonging’ is the popular attitude to religion in England, reflected in very low baptism rates; even if they believe in God, most English see no need to belong to the church. Jade’s view was different. Rather, she and her children had to belong to the Christian club if they were to be able to relate to each other beyond the grave. For her, affirmed by the Sun, belonging was as important as believing – precisely the idea behind infant baptism, the formal rite of admission to membership of the Church of England.

Most English people, and especially most English women (Davie & Walter, 1998), do have some religious belief. Globally, secularism is restricted predominantly to Europe’s intelligentsia (Norris and Inglehart, 2004), from which emanate the UK’s broadsheet readers, policy makers, senior health care professionals, academics, and many cancer pathographers. Writers of palliative care texts advocate that ‘spiritual care’ be concerned less with conventional, popular religion than with a relativistic, subjective (or inter-subjective), personal spirituality that has no clear consequences for the afterlife (Walter, 2002; Garces-Foley, 2006). Was then Jade Goody a religious anachronism? Or was she, along with the editor of the Sun, more in touch with popular beliefs, especially the popular beliefs of working class women, than are many intellectual commentators and health educators?

c) Care. Tabloid coverage of Jade’s final weeks included many narratives of care: by Jade for others, and by others for her. Selling her story and pictures to the press was portrayed by the tabloids not as the commodification of dying (Woodthorpe, 2010) but as an act of care for her children who would have a better
education than she had had. Her search for the words to tell her children about her condition was reported as the agonised struggle of a caring mother, her final weeks a time she could spend with those she loved. Early stereotypes of Jade had focussed on her ignorance, crudity, racism and bullying; she then partially rebuilt her reputation, but it was representations of her dying behaviour that finally transformed her – not into a saint but into a redeemed person, a caring and cared for wife and mother.

Jack, Jade’s new husband, also found redemption through Jade’s dying. In her final weeks, the popular press changed its verdict on this young man, twice convicted for assault and accused by the media of womanising. The redeemed Jack had grown up, and taken responsibility. He became ‘a more caring character than many imagined and is filling her last moments with love and laughter’ (Sun 23 February, p.6). Max Clifford, whose own wife had died of lung cancer after forty years together, said of Jack (Daily Star 19 March, p.6): ‘He’s been nursing her every hour he is allowed to be there, brushing her teeth, holding her hand. We all know the other side of him but in this he’s been absolutely amazing. To be able to sit there day and night watching somebody you love die, it is very hard.’ The redemption even rubbed off on Clifford, who for many represented the manipulative aspects of tabloid journalism. An email correspondent to the upmarket Daily Telegraph admitted, ‘I fear Max Clifford comes out of this quite well. Jade has redeemed him.’ (Thompson, D. 2009) Redemption also rubbed off onto Jade’s mother Jackiey, portrayed no longer as the dysfunctional, drug using mother but as the anguished mother watching her child die.

d) Racism. Prior to her dying, the charges of racism had been hard for Jade to shake. One apparently minor but persistent character in the media story of Jade’s dying, rarely commented on, was a black man, ‘THE ROCK: good friend and fitness coach Kevin Adams’ (Daily Mirror, 8 March, p.4). He appeared regularly in both text
and pictures. When Jade was discharged from hospital to die at home, Kevin was present at the house, and was there too at Jade’s actual death. To what extent he just happened to play the role of the good friend who added to the matrix of family care, or to what extent Max Clifford ensured he was frequently mentioned and photographed as an implicit final demonstration that Jade was not racist, is something that might be speculated upon. Either way, Kevin played a role in the redemption story.

At story’s end, Jade was cared for by three people: the wayward husband, the dysfunctional mother, and a black friend. Each character, and the care they finally offered, contributed to the story of redemption – not only Jade’s redemption, but also the redemption of husband, mother and publicist.

Discussion

The media that once had portrayed Jade in less than flattering terms generally warmed to her in her final weeks; this was true even of broadsheet commentators who had been embarrassed by and had largely ignored Jade through much of her celebrity career. As one seasoned BBC Radio 4 commentator concluded: ‘Jade has reminded us that dying is also a life event, that right to the last moment decisions can be made, steps taken, relationships healed and…redemption grasped.’ (Winter, 2009)

Seale’s (2002b: 28) analysis of heroism in dying draws on Todorov’s analysis (1977) of narrative structure in which an initial state of harmony is disrupted by a villain, but equilibrium is eventually restored through a hero’s action. Seale argues that media health stories, and particularly cancer stories, follow this structure, with cancer playing the role of villain and the sufferer becoming the hero. Even if not all three elements are present in any particular media cancer story, the narrative structure
is so well understood that audiences might be expected to infer the other elements. With Jade’s dying, certainly the villain and the heroine are present, but they are not preceded by initial harmony. Rather, through the cancer she transformed an initial state of disharmony – a dysfunctional childhood, charges of racism, romantic attachment to a scoundrel – into love and affection that are reciprocated: between her and her intimates, and between her and her hitherto fickle audiences. That is what made the media story of Jade’s dying one of redemption more than of heroism.

Formal religion is perhaps the least important vehicle for Jade’s redemption; she portrayed her christening in terms not of salvation but of enabling a continuing bond (Klass et al 1996) with her boys. Redemption came primarily through secular means. Jade, her publicist and her photographers astutely used her hair loss to transform the ugly duckling into the beautiful bride. And her frankness – ‘the absence of a filter between her mouth and her brain’ (Mangan, 2009) that both attracted Big Brother audiences and rendered her vulnerable to disgrace as in the Shilpa Shetty affair - was finally transformed by dying into honesty. In the redemptive narrative, Jade’s deathbed behaviour transformed her liabilities into virtues.

Elisabeth Kübler-Ross (1970; 1975) influentially promoted the ideal of personal growth through dying, an ideal that fits a late modern Zeitgeist privileging the reflexive self (Giddens, 1991). Neither Jade nor the tabloids, however, portrayed her redemption in these terms. Hers was no late modern Kübler-Rossian psychological growth, but a ritual adoption and demonstration of traditional roles (married woman, loving mother, immersion in a loving family and network of friends) and faith (baptism). In a few weeks, she and her media had used her characteristic honesty and humour to claim conventional respectability. She had found meaning in dying, as promoted by the British palliative care movement (Saunders, 1990), and this
was a more social achievement, in terms both of social acceptability and the other actors necessary for its achievement, than the inner growth advocated by Kübler-Ross and by more recent proponents of dying as a time of psychological and spiritual growth.

That this has not been noted before by analysts of cancer narratives may be because, as Seale has noted (2002b: 170-2), many cancer autobiographers have been intellectuals embracing late-modern reflexivity and (in Britain) secularity. Working class Jade, by contrast, presented herself as direct, straightforward and guileless, indeed she flaunted her lack of education and lack of reflexivity, and embraced popular religion. As one 78 year old woman wrote on her tribute card the day Jade died, widely cited in the tabloids, ‘You may not have known where East Anglia was, but you sure knew the way to our hearts.’ (Daily Mirror, 23 March, p.6) Dying Jade’s religion of the heart, reminiscent in some ways of Princess Diana’s (Woodhead, 1999), may have repelled those academics wishing to demonstrate their intellectual muscularity (Brennan, 2008, ch.6). Yet the redemption Jade and her media finally wrought through motherhood, marriage, popular religion, honesty, and mutual affection resonated with the aspirations of many contemporary Britons.

Along with previous analyses of first person narratives of cancer dying (e.g. Bingley et al, 2006), this article suggests that among the most influential raisers of awareness around dying are media-savvy individuals who choose to go public about their own dying. The agenda of such individuals may or may not coincide with formal health education agenda. I have outlined here some key lessons that Jade Goody and her journalists taught the British public about dying from cervical cancer: it can be painful, treatment does not always ameliorate pain, it is a struggle to maintain autonomy and agency, but love can triumph and redemption is possible. Compared to
the good death promoted by the palliative care movement, Jade Goody’s message about pain is rather pessimistic, her message about agency ambivalent, and her messages about love and redemption considerably more social than the inner growth in dying promoted by Kübler-Ross.

This article has analysed what Jade’s media told the British public about dying. What her audiences heard, how they perceived the coverage, and whether it changed their understanding of what dying is like, are matters for future research.

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i The soap opera format of Jade’s dying renders first names appropriate for both her and other characters in the story. Both media and public often referred simply to ‘Jade’.

ii Elsewhere, I have tested representations of Jade’s dying against the sociological thesis that dying is sequestrated in modern societies (Walter, 2009).


iv Online tributes posted by *Sun* readers immediately after Jade’s death were saturated with words of intimate affection: [http://www.thesun.co.uk/sol/homepage/mysun/article2335754.ece](http://www.thesun.co.uk/sol/homepage/mysun/article2335754.ece)