

Talk of Death

American Discourse in Three Spheres

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Emory University

Dissertation Defense
June 12th, 2019

Thank you

Today's Outline

Overarching Motivations

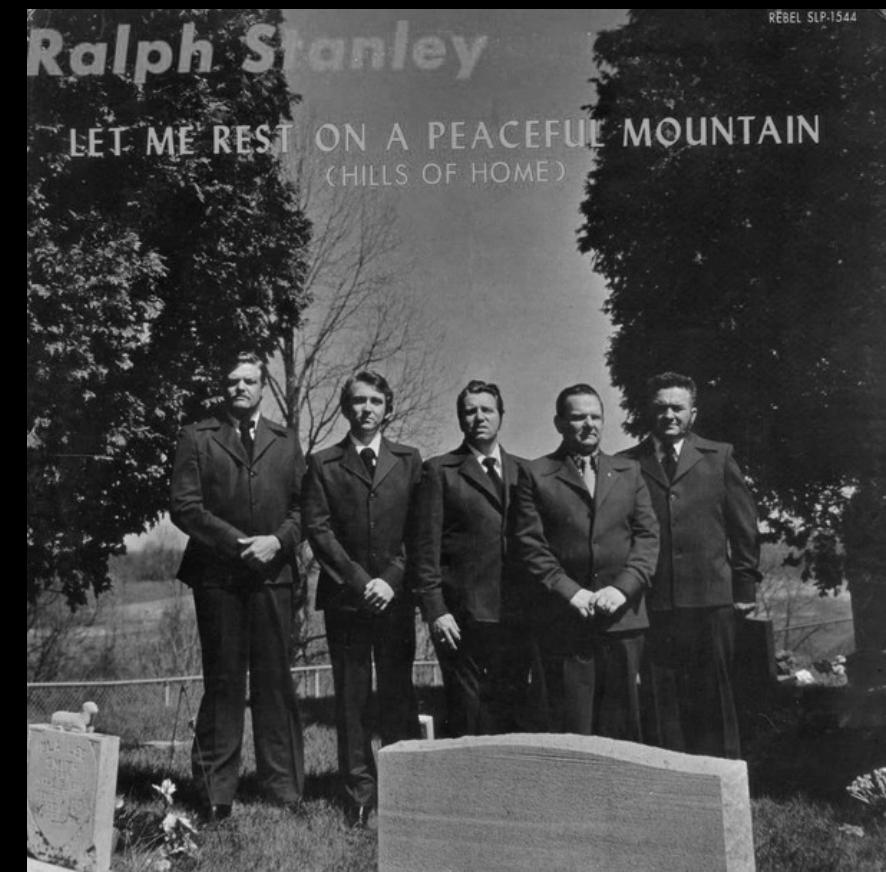
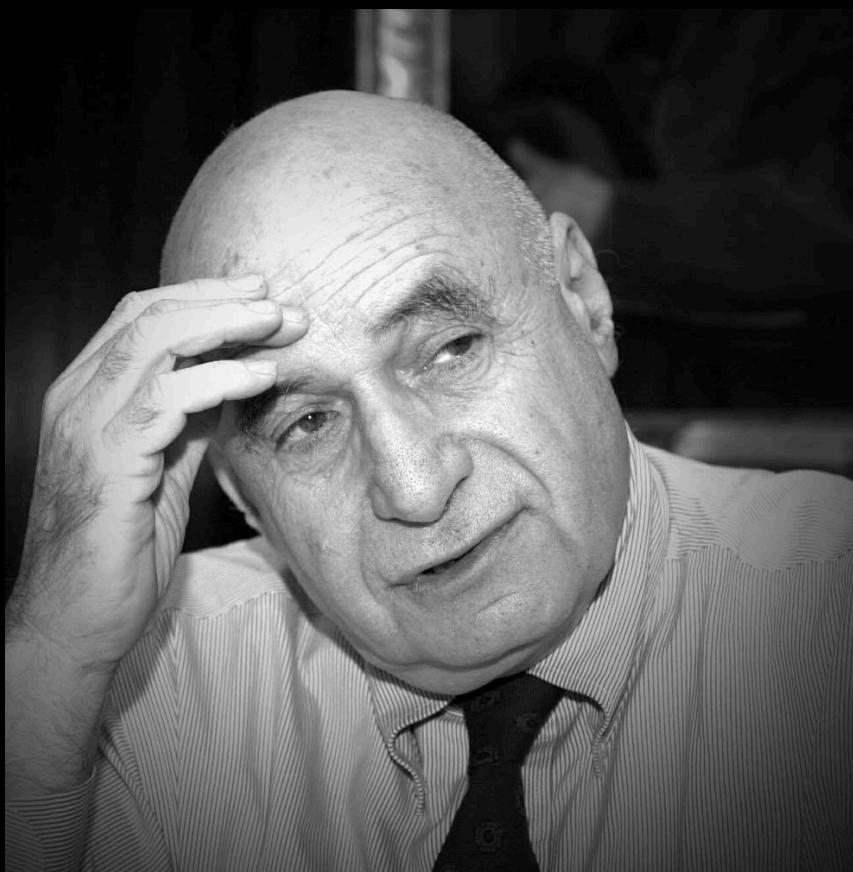
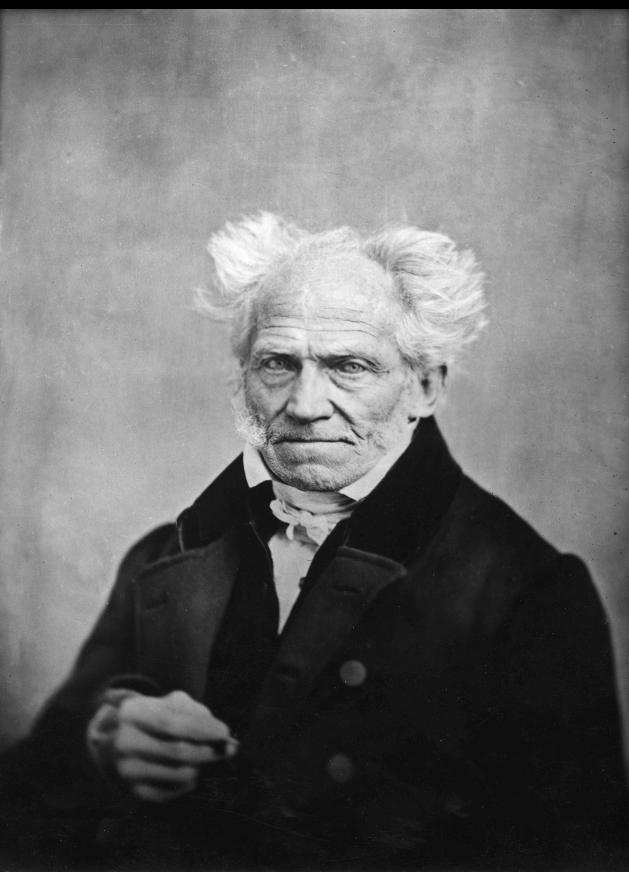
For each study...

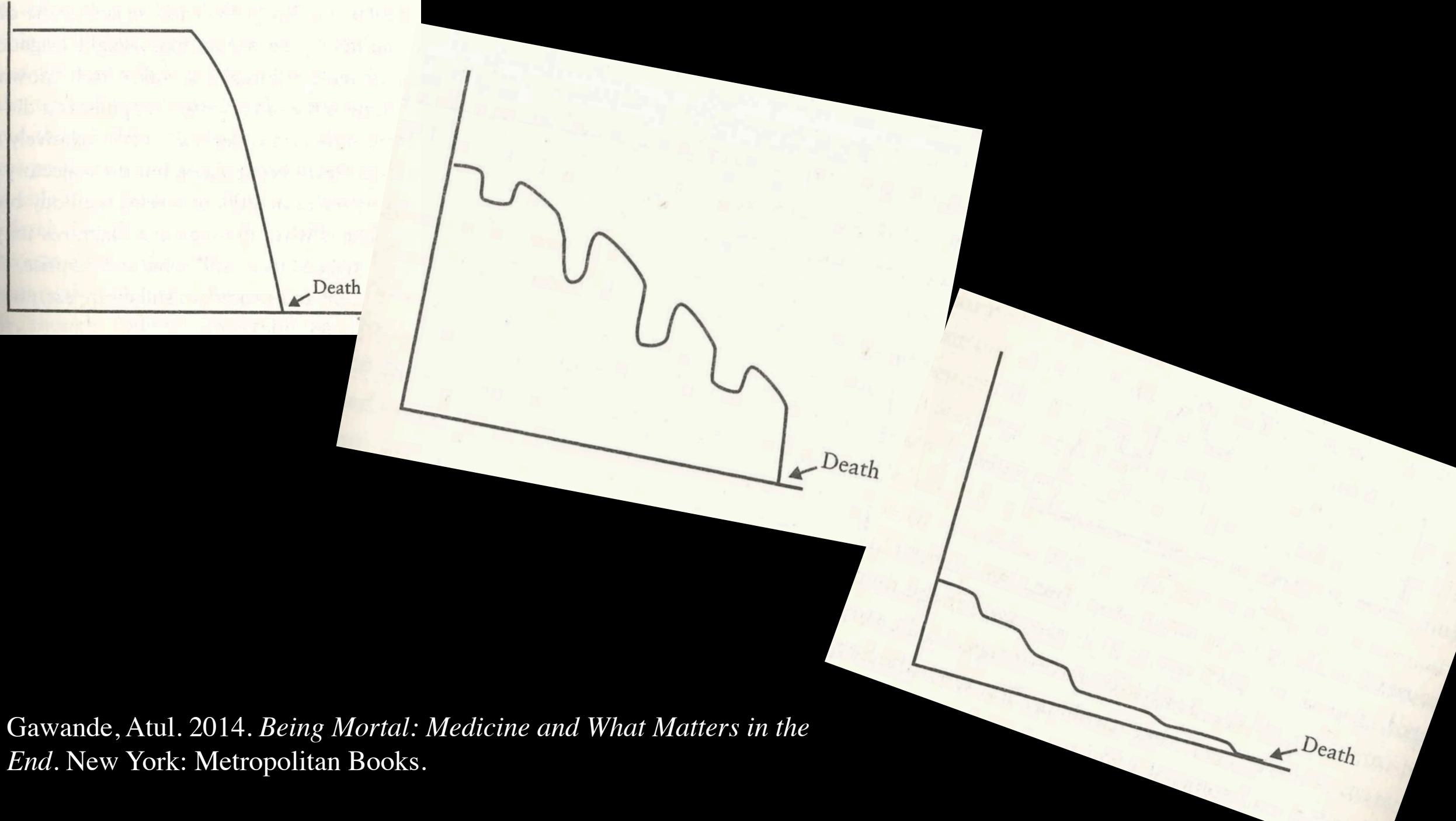
- Theory
- RQ
- Data
- Method
- Conclusions

Questions, comments, and future directions

Epigraph

Metaphysical, sociological, and religious understandings of death and dying





Gawande, Atul. 2014. *Being Mortal: Medicine and What Matters in the End*. New York: Metropolitan Books.

“I wasn’t even sure what the word ‘dying’ meant anymore. In the past few decades, medical science has rendered obsolete centuries of experience, tradition, and language about our mortality and created a new difficulty for mankind: how to die...And talking about dying is enormously fraught.”

- (Gawande 2014: 158-168)

NEW YORK TIMES BESTSELLING AUTHOR OF
THE CHECKLIST MANIFESTO

Atul Gawande

Being Mortal

Medicine and What Matters in the End



ON DEATH & DYING

What the Dying
Have to Teach Doctors,
Nurses, Clergy &
Their Own Families

ELISABETH KÜBLER-ROSS, M.D.

foreword by TRA BYOCK, M.D.

Study 1: The Institutionalization of Kübler-Ross's Five Stage Model of Death and Dying

Theory: Diffusion studies predict an S-shaped curve, while institutional theory predicts unique reception according to context-specific logics of legitimization.

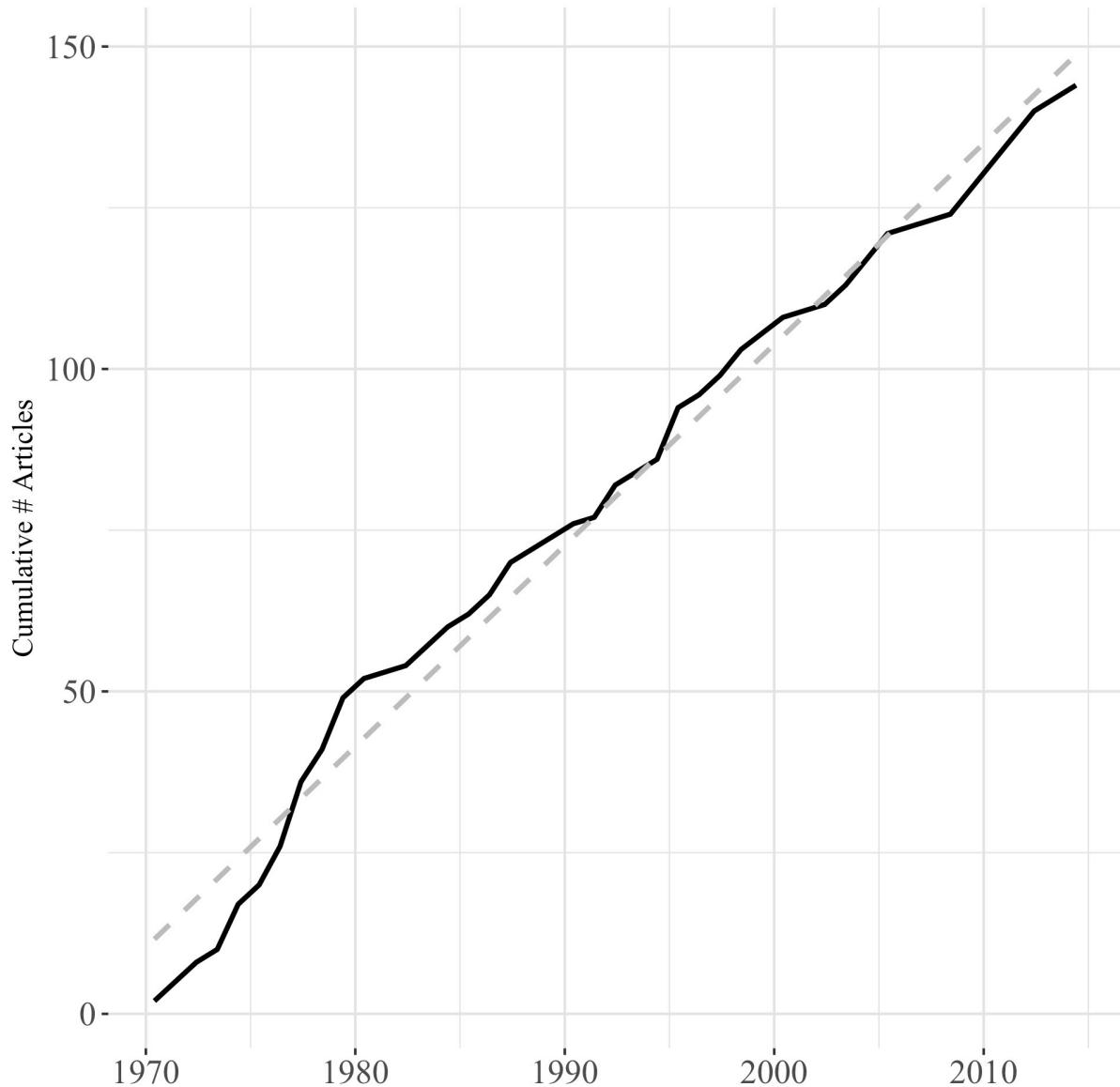
RQ: What is the shape of diffusion within popular / professional communities? How was the work received in each context? Is the work still used today? If so, how?

Data: All NYT mentions of Kübler-Ross ($N = 151$) and all academic articles that cite the work between 1969-2017 ($N = 3,065$).

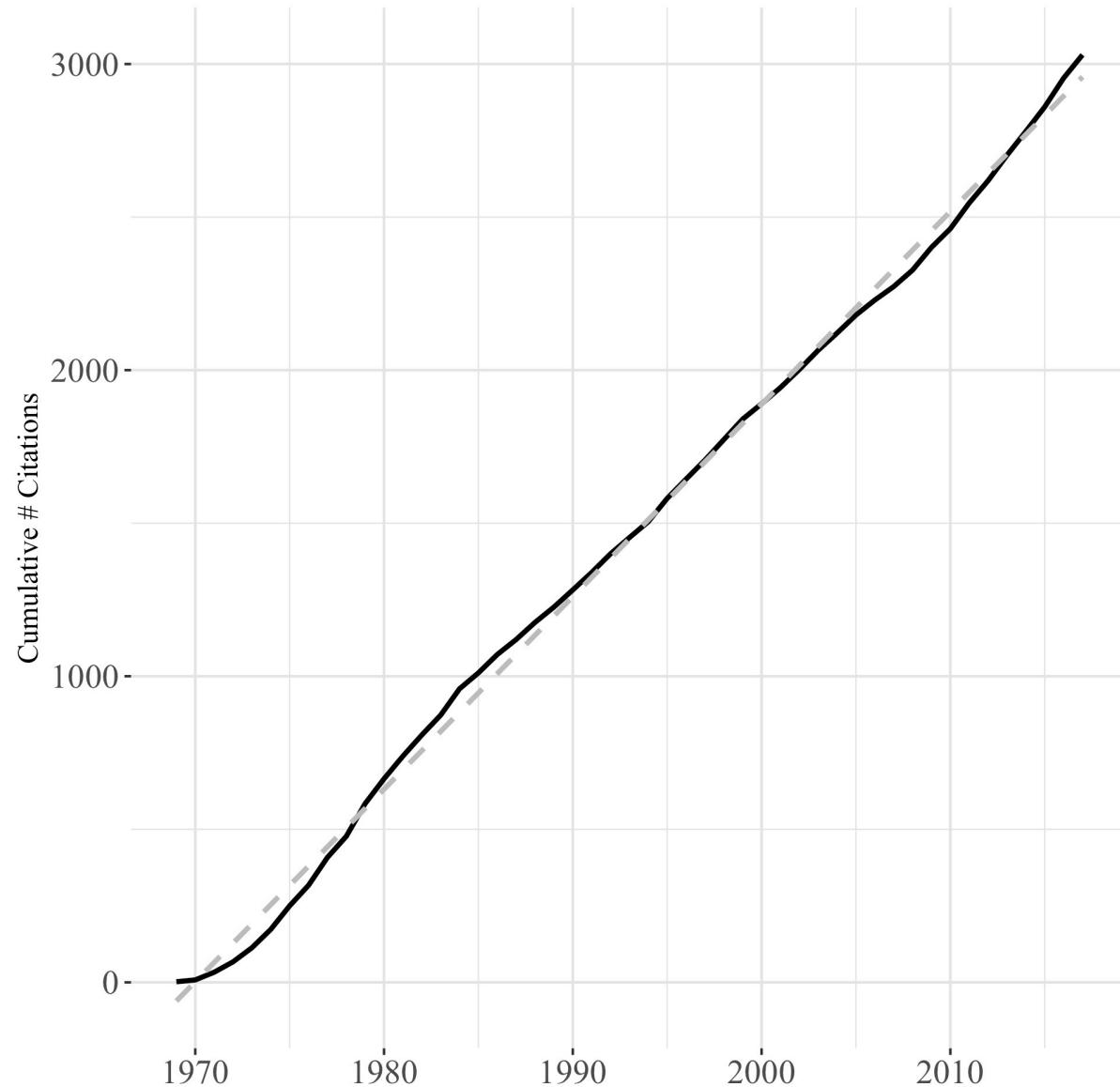
Method: Four-stage classic content analysis and structural topic modeling.

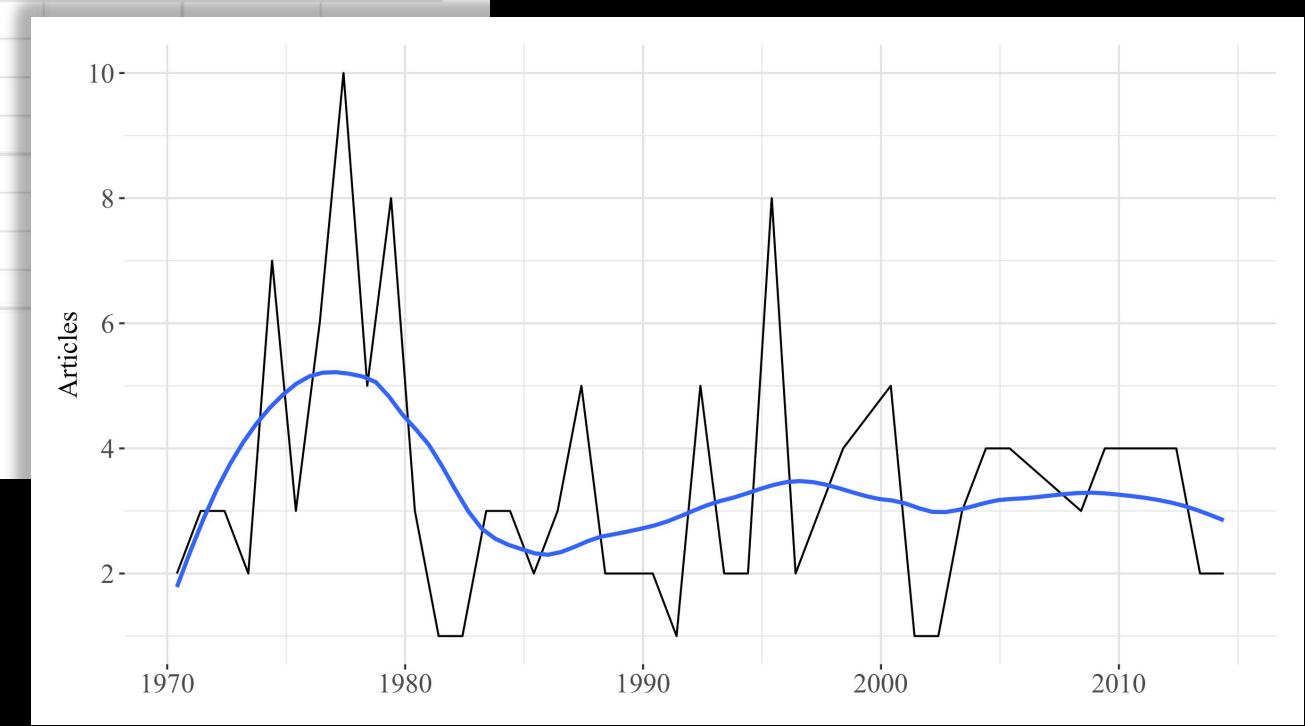
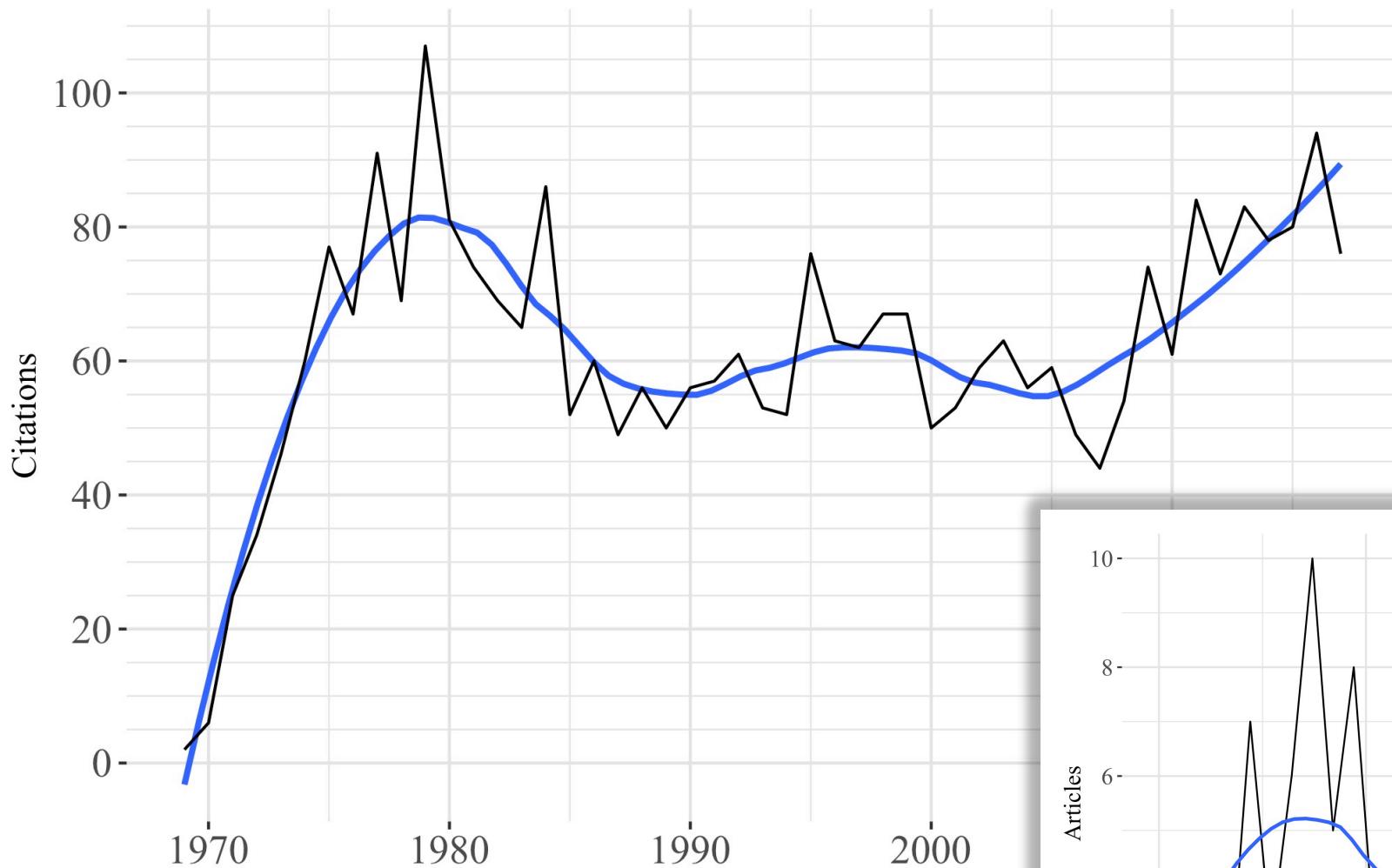
Conclusions: The work exhibits a similar shape of diffusion in both popular and professional contexts and enjoys remarkable stability in cultural conversations over the past 25 years. By looking at the content of the articles, I demonstrate the commercial-entrepreneurial logic of legitimization in the popular sphere and the expert-elaboration logic of legitimization in the professional sphere.

New York Times articles 1969 - 2014

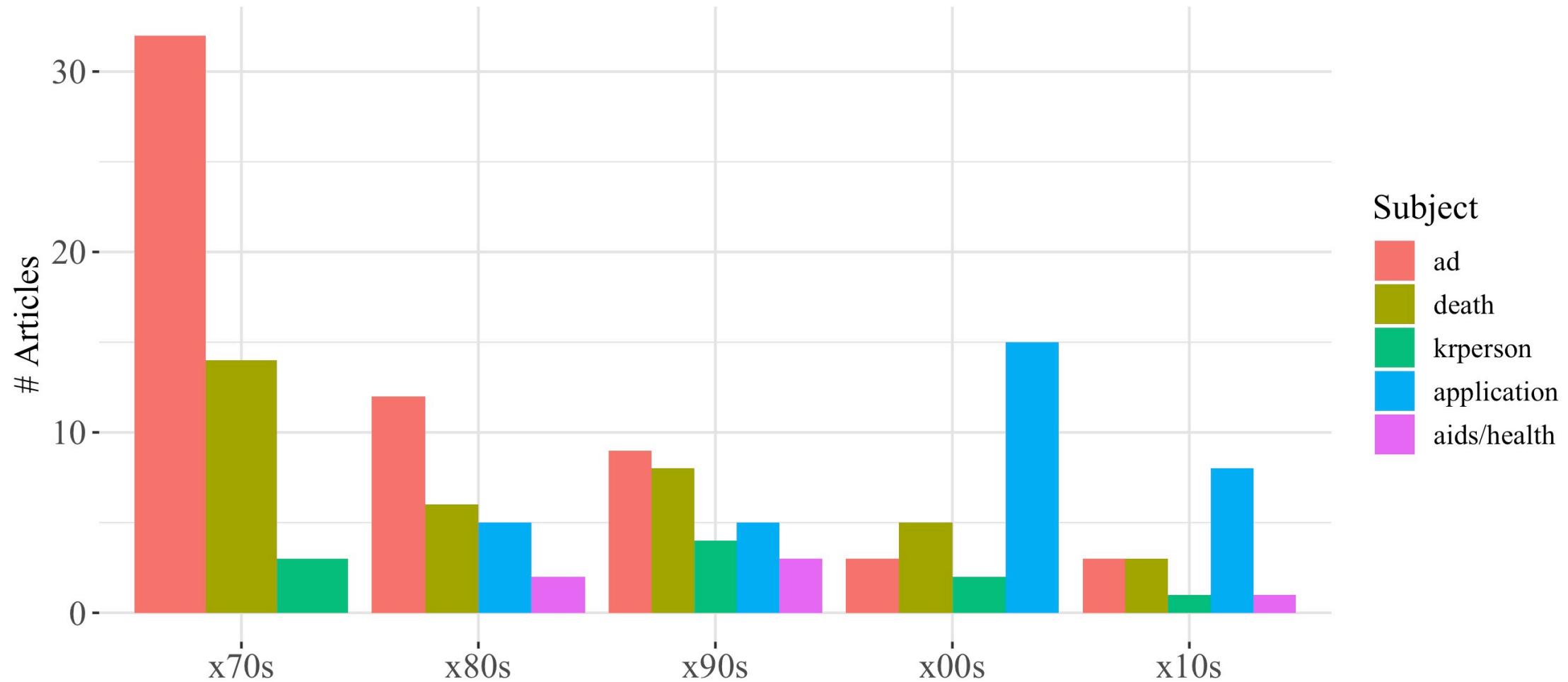


Web of Science Citations 1969-2017

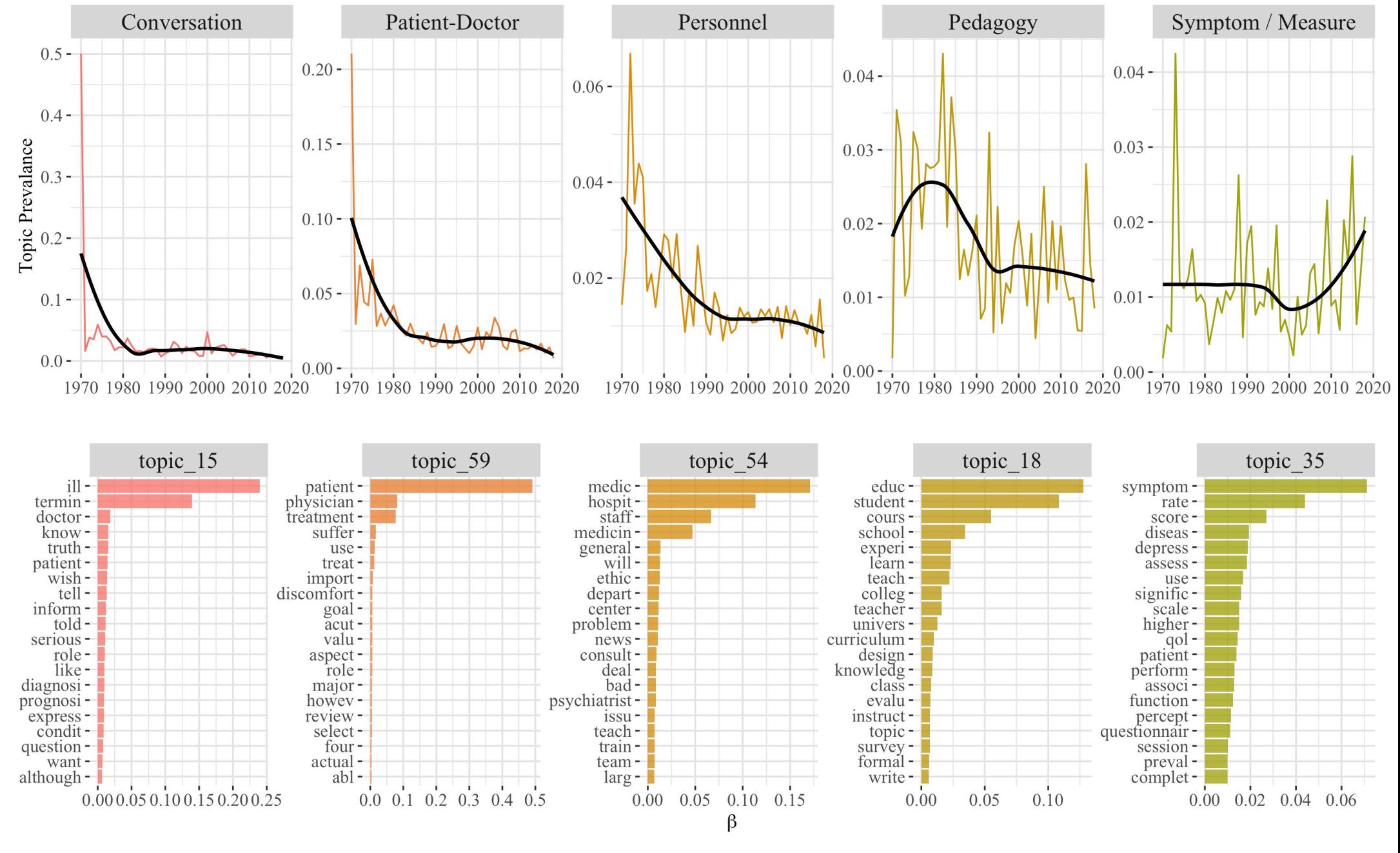


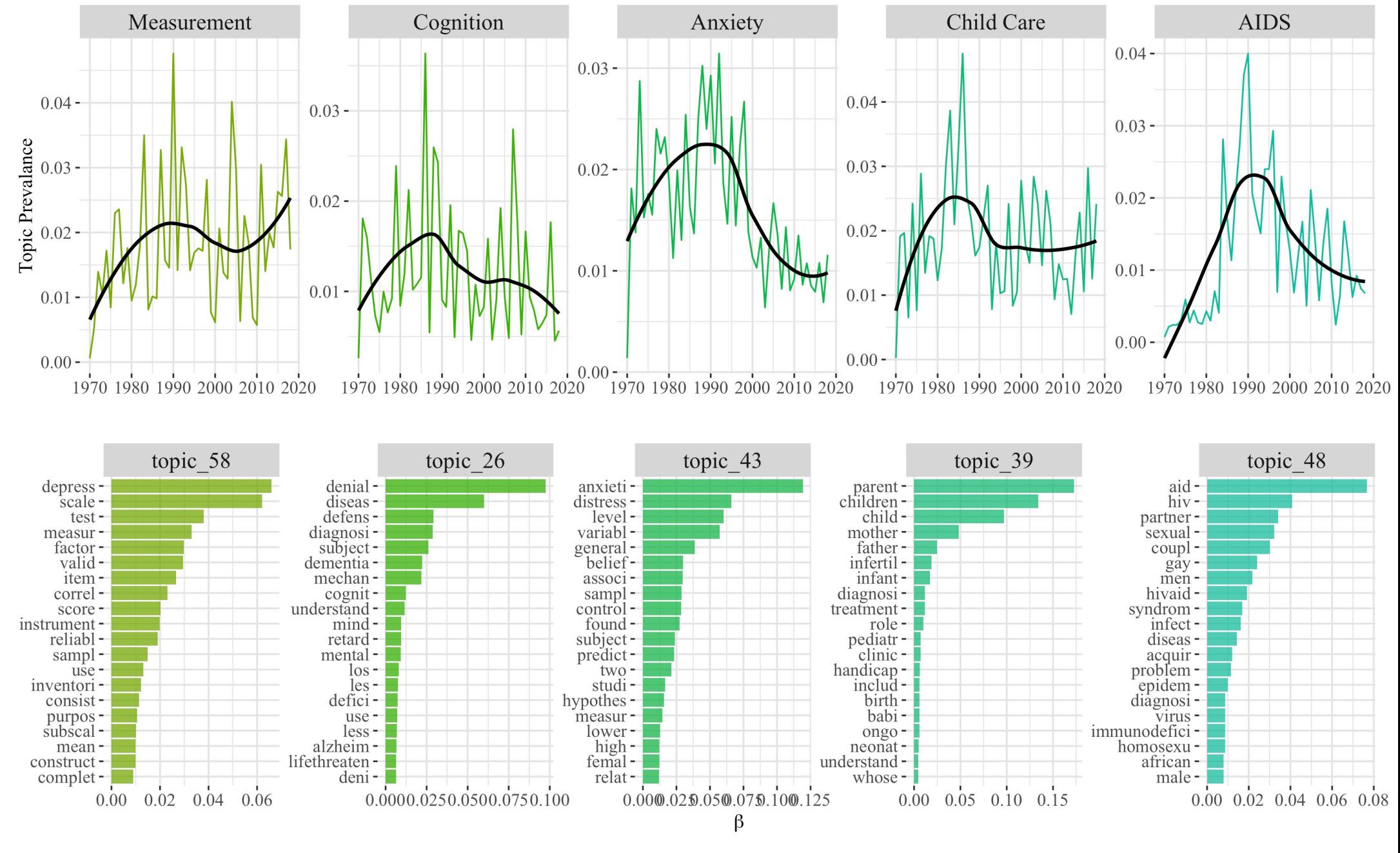


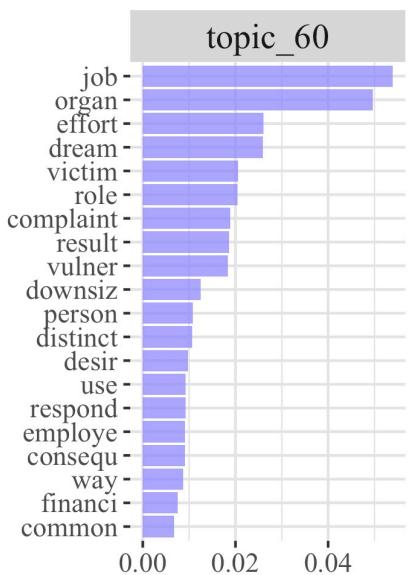
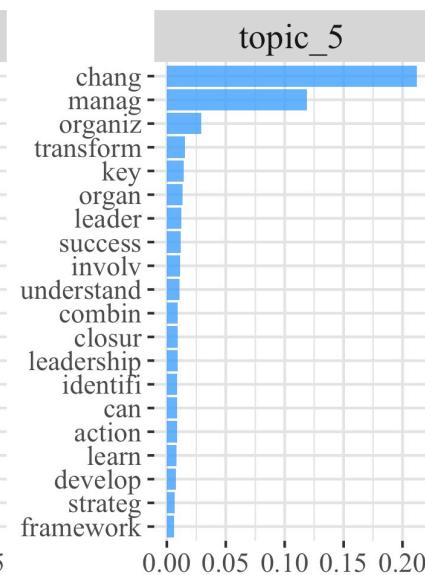
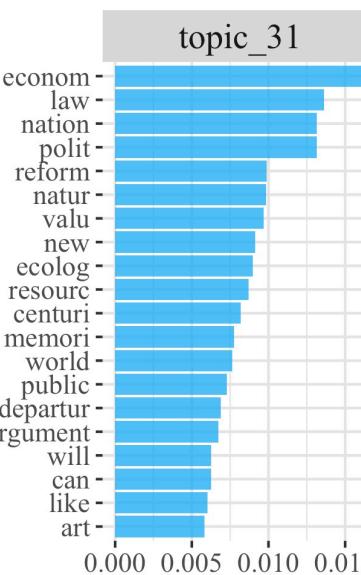
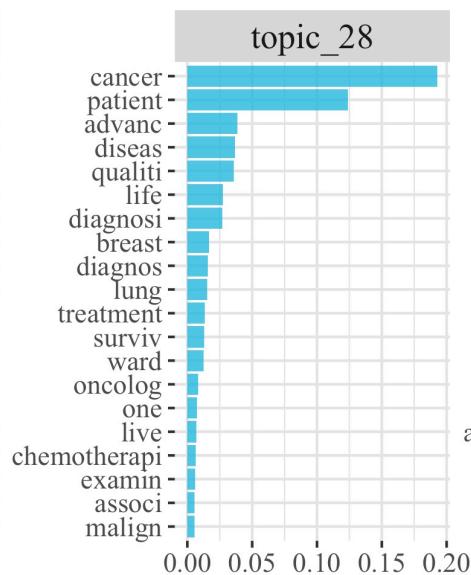
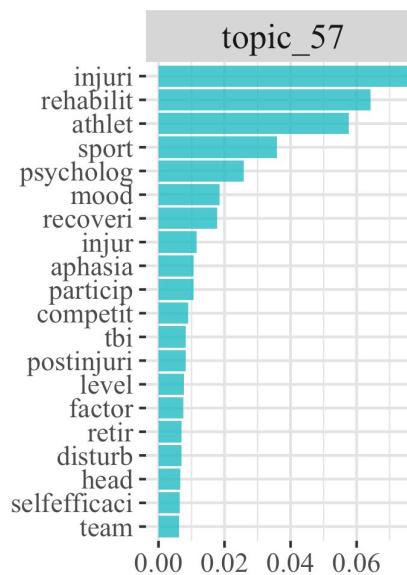
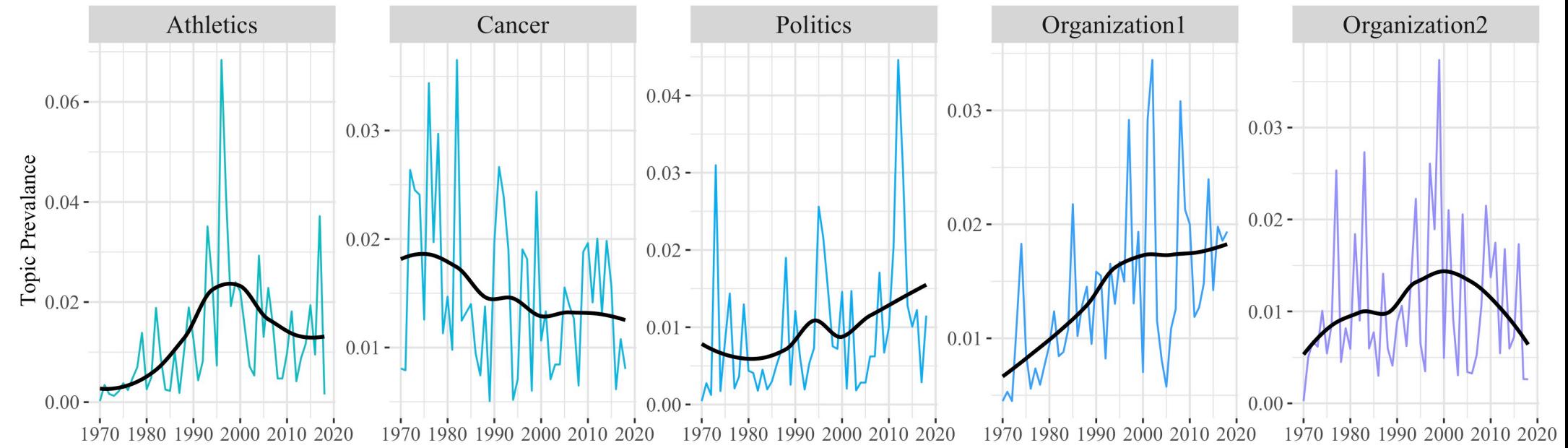
'Kubler-Ross' Mentions in New York Times 1969 - 2014

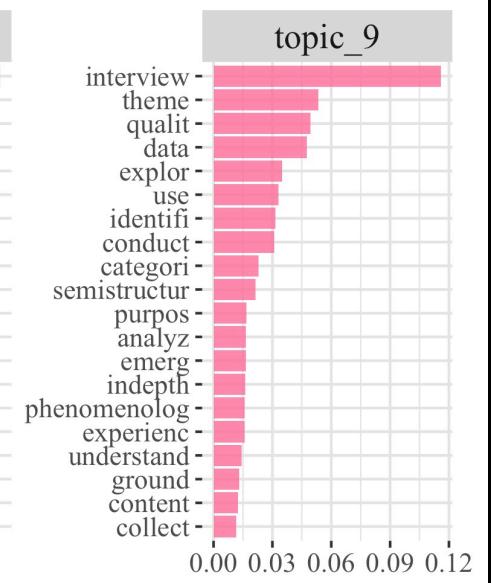
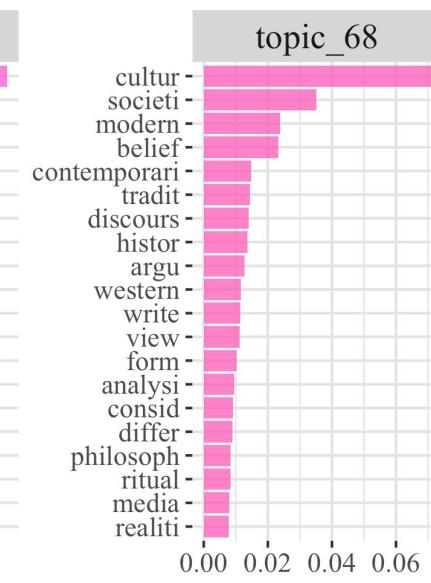
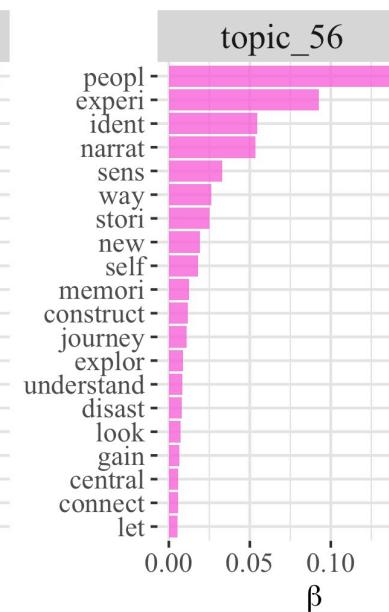
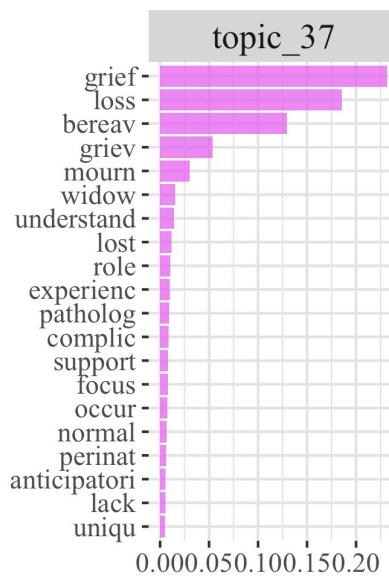
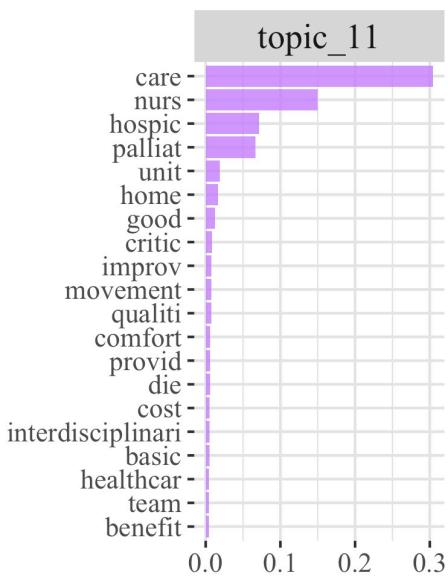
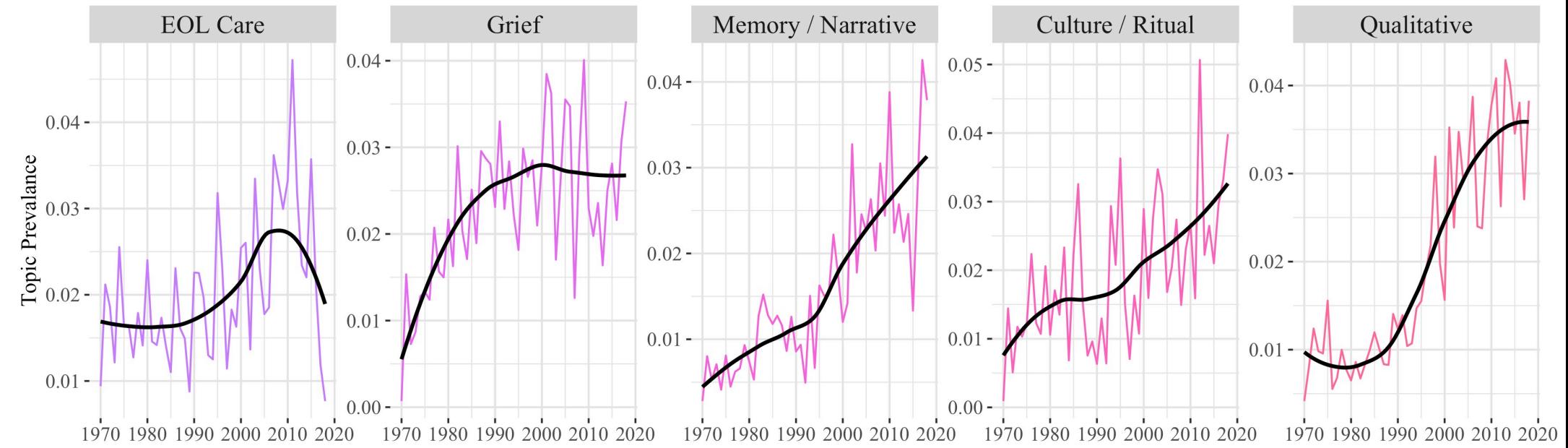


Data: Proquest Historical Newspapers (N = 151)
John A. Bernau 2018 // www.johnabernau.com











ON DEATH & DYING

What the Dying
Have to Teach Doctors,
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The work exhibits a similar shape of diffusion in both popular and professional contexts and enjoys remarkable stability in cultural conversations over the past 25 years. By looking at the content of the articles, I demonstrate the commercial-entrepreneurial logic of legitimization in the popular sphere and the expert-elaboration logic of legitimization in the professional sphere.



Study 2: From Communion to Compassion: The Changing Language of Pastoral Care

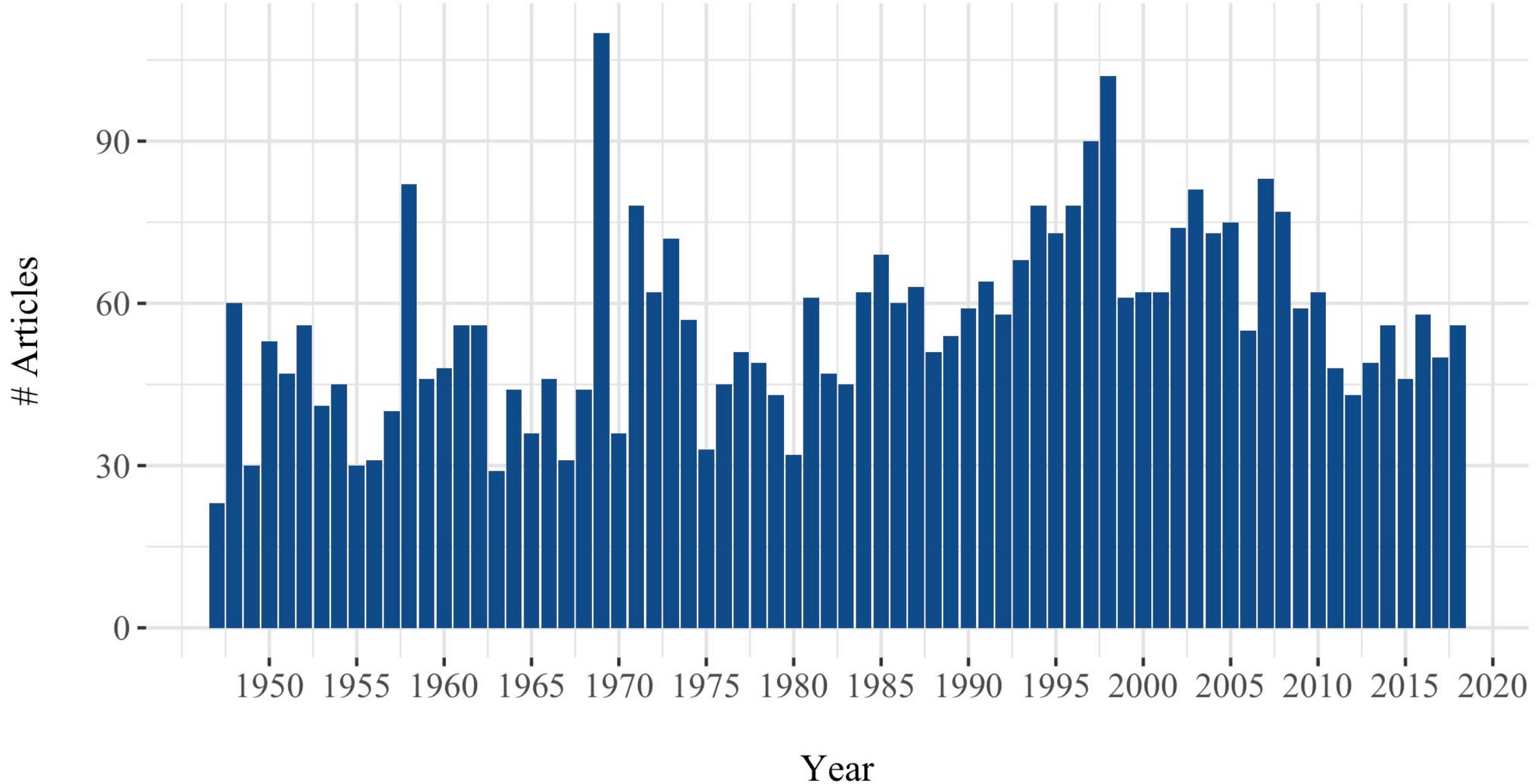
Theory: Secularization as declining religious authority (Chaves 1994) and Abbott's (1988) system of professions.

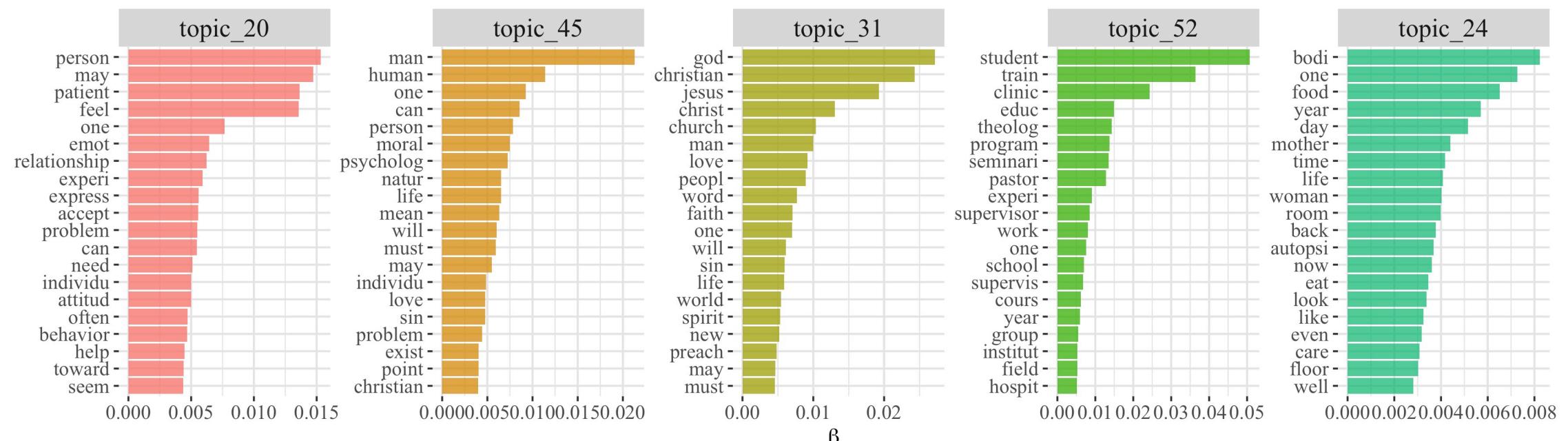
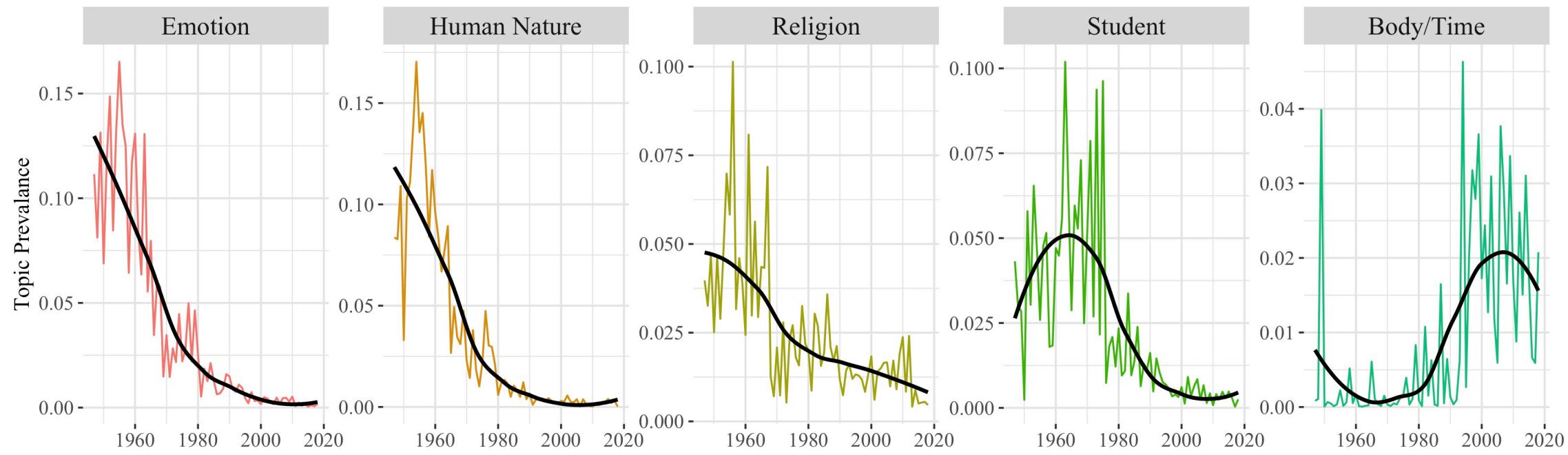
RQ: How has the language of pastoral care changed in the last seventy years?
How might this be the result of jurisdictional competition?

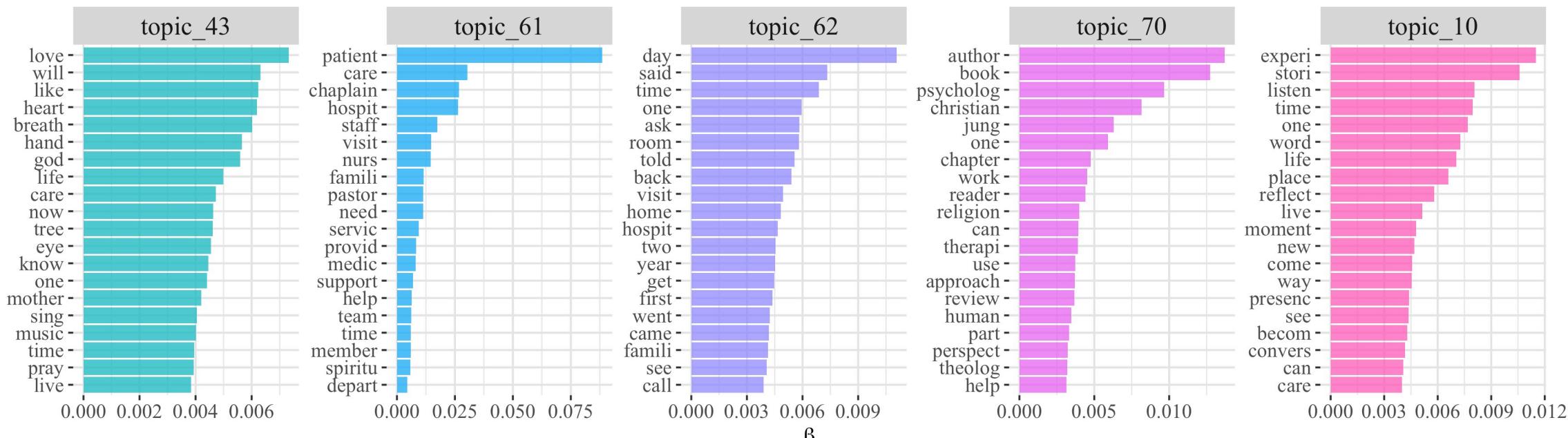
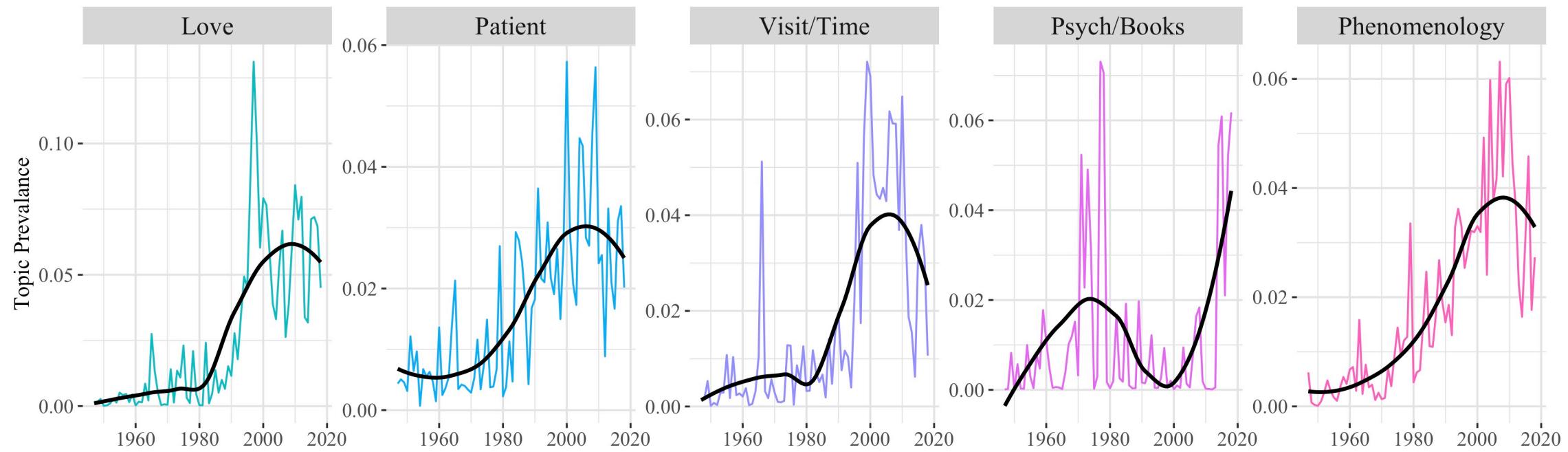
Data: All articles of the Journal of Pastoral Care and Counseling 1947-2018
(N = 4,054).

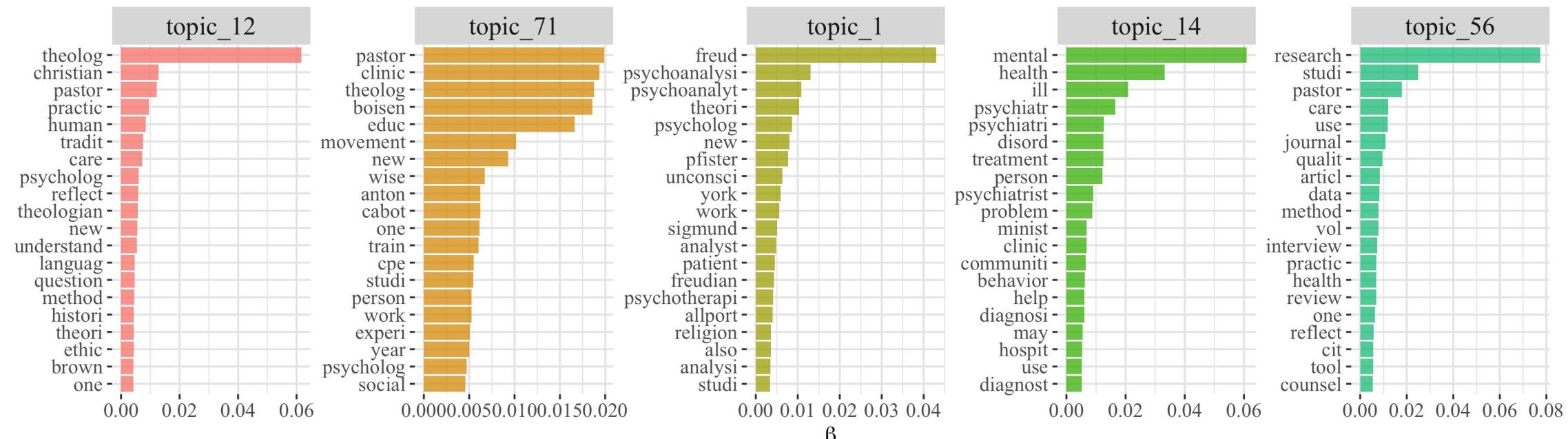
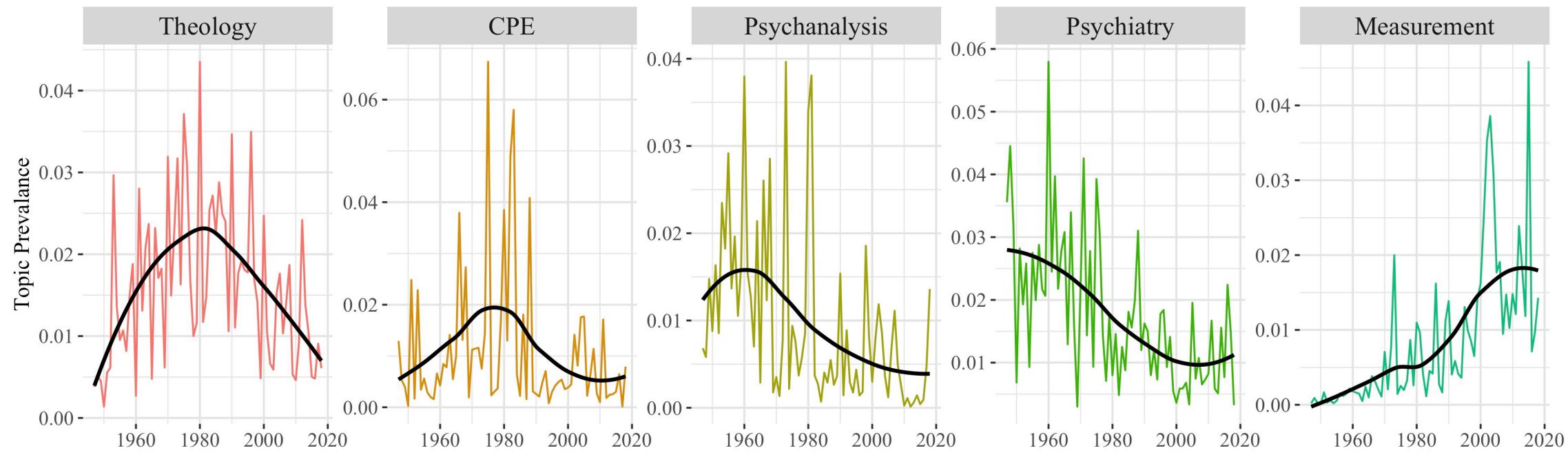
Method: Structural topic modeling with year as topic prevalence covariate.

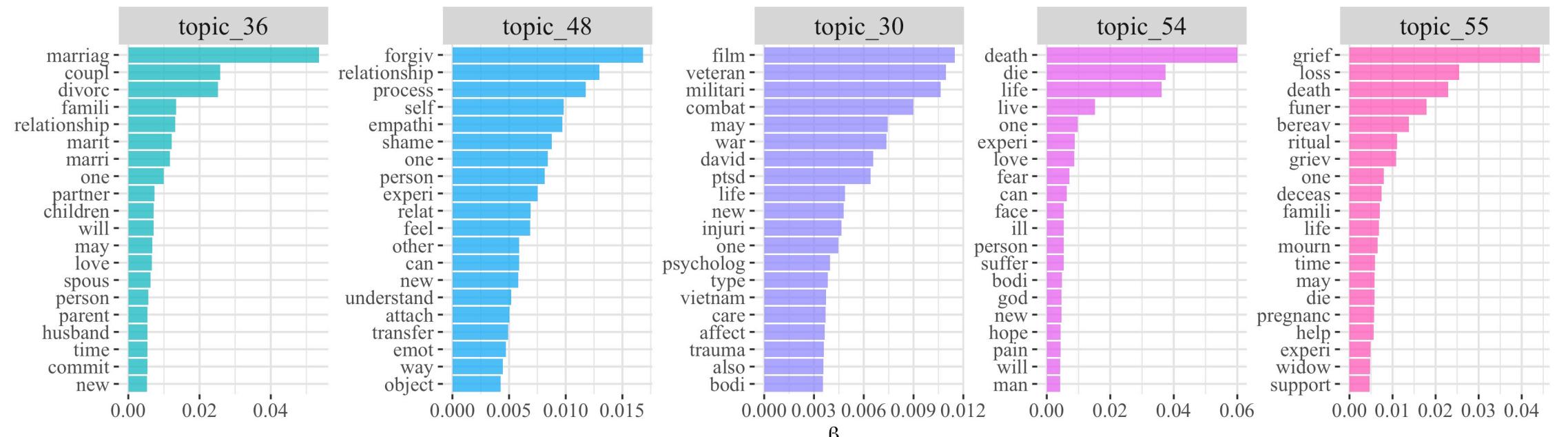
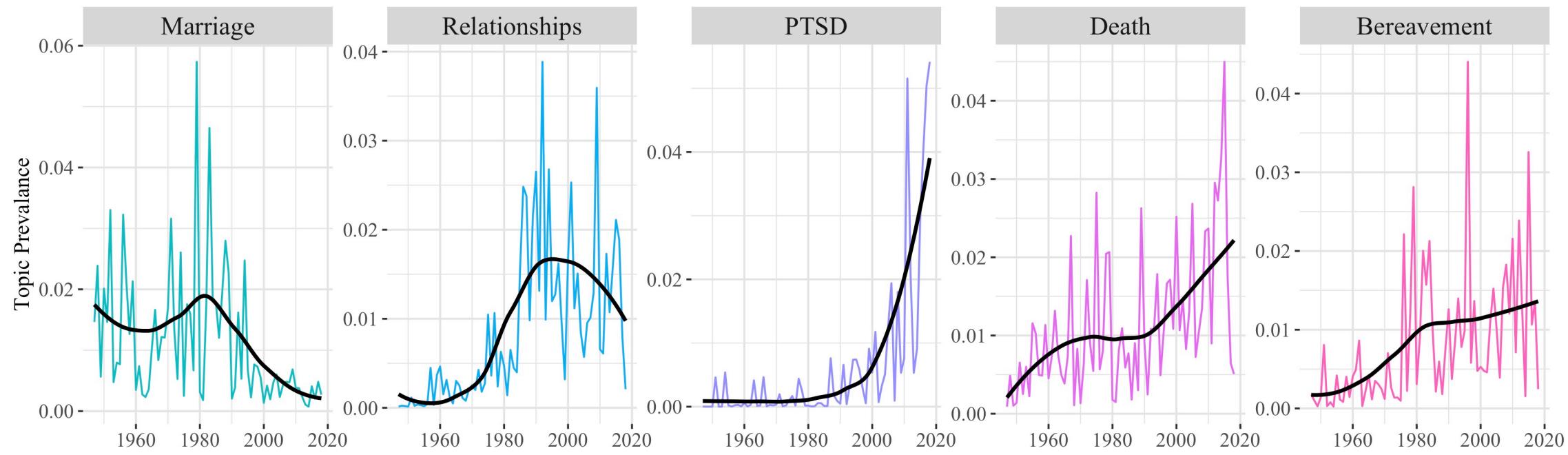
Conclusions: I demonstrate a linguistic shift from the universal to the particular as pastoral care professionals drop language of human nature and morality for that of individual narratives and experiences. I also find a decline of overtly religious language since the 1950s in favor of a more ecumenical language of spirituality, hope, and presence









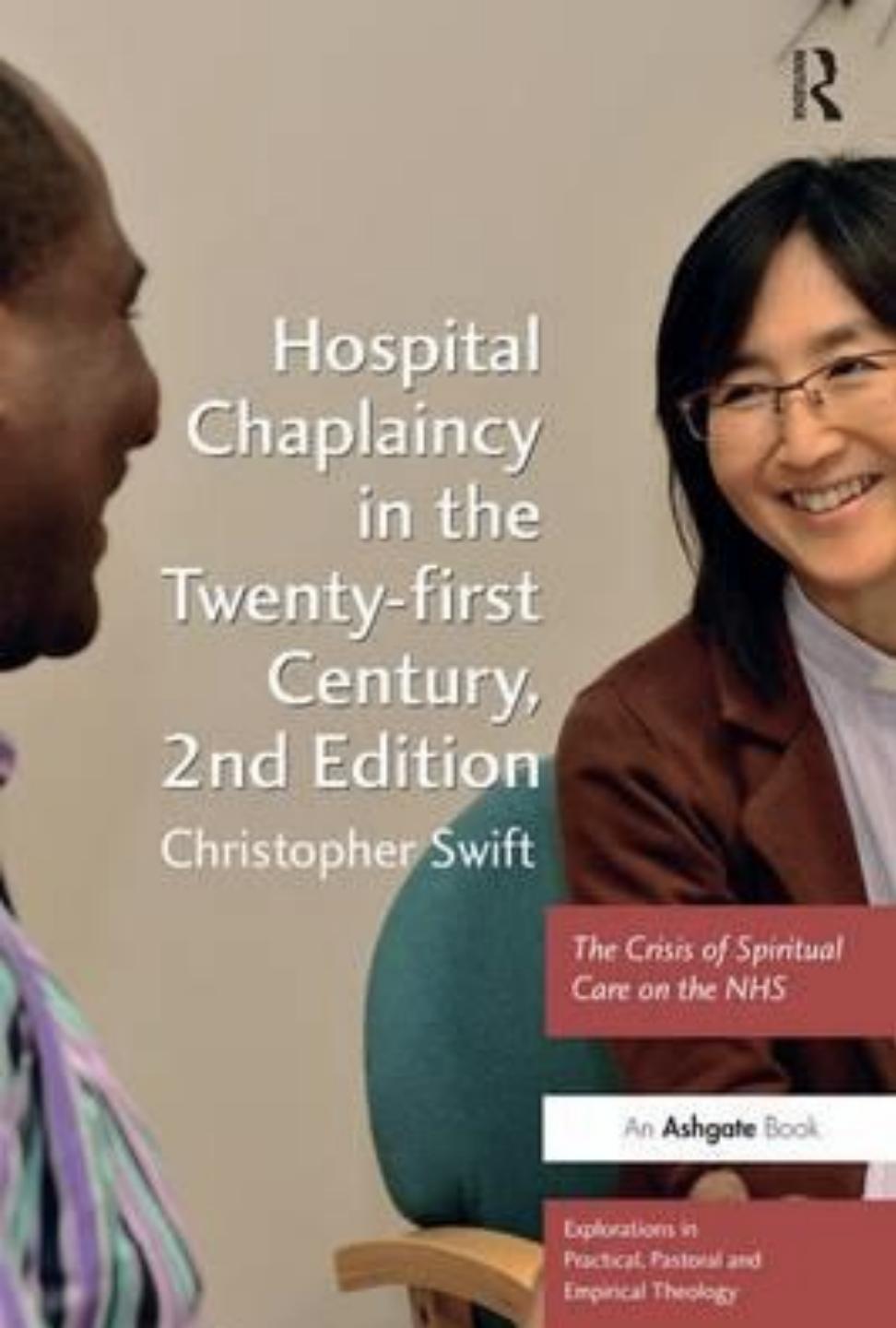




Study 2: From Communion to Compassion: The Changing Language of Pastoral Care

Conclusion

I demonstrate a linguistic shift from the universal to the particular as pastoral care professionals drop language of human nature and morality for that of individual narratives and experiences. I also find a decline of overtly religious language since the 1950s in favor of a more ecumenical language of spirituality, hope, and presence.

A photograph of a woman with dark hair and glasses, smiling. She is positioned next to a book cover. The book cover features the title "Hospital Chaplaincy in the Twenty-first Century, 2nd Edition" by Christopher Swift. Below the title, there is a red rectangular graphic containing the text "The Crisis of Spiritual Care on the NHS". At the bottom of the book cover, it says "An Ashgate Book" and "Explorations in Practical, Pastoral and Empirical Theology".

Hospital Chaplaincy in the Twenty-first Century, 2nd Edition

Christopher Swift

Study 3: The Language of Religion and Spirituality in Modern Medical Institutions: Evaluating the Efficacy of Small-Corpus Word Vector Representations

Theory: Social-psychological approaches to interactional meaning (Mead, Stryker). Shifting theological and jurisdictional authority (study 2). Chaplaincy as uniquely situated profession (Cadge 2012).

RQ: How do modern chaplains talk about religion, spirituality, death, and dying?

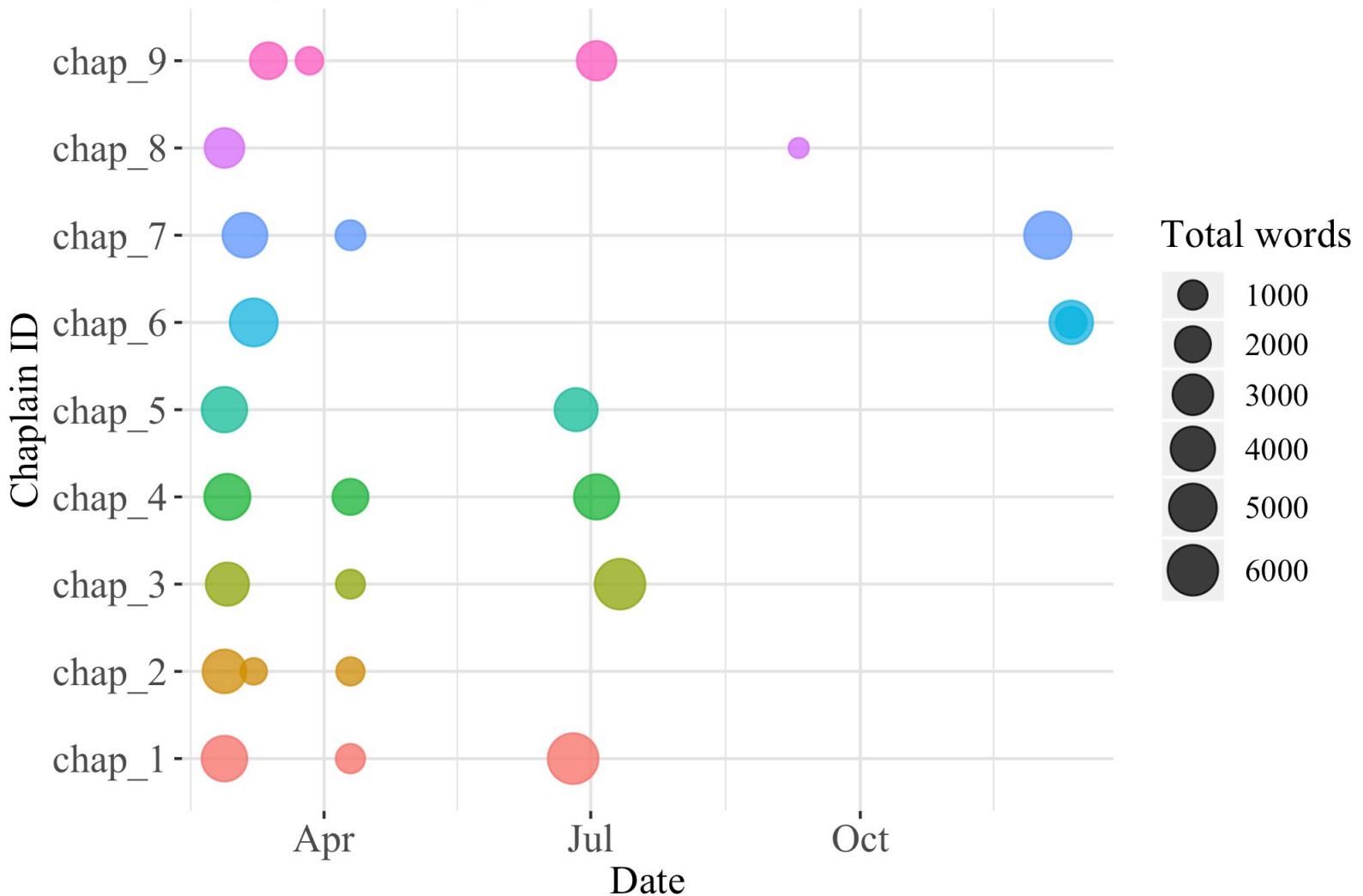
Data: Twenty-five in-depth interviews with practicing healthcare chaplains

Method: Word vector representation model (70k words, 300-vector dimensions)

Conclusions: Modern healthcare chaplains are more likely to evoke language of spirituality during end-of-life care than language of religiosity, and that this spiritual language appears less thematically unified than chaplains' discussions of religion. I also demonstrate the linguistic shifts that occur throughout the dying process. As a patient progresses through a terminal illness, talk of death moves from doctor, surgeries, and diagnosis; to meeting, understanding, anger, and afraid; to abstract discussions of death, culture, life, and history.

	id	date2	researcher	name3	total_words	lex_div	resclean
1	1	2013-02-26	George Grant	chap_1	4338	0.2037805	of course ok since august th hmmumph ok so my first experience with cpe was about or years ago summer of after ...
2	2	2013-04-10	George Grant	chap_1	976	0.2961066	the time diaries are going well um some days its a little harder to make time for them because i have a lot of visits its...
3	3	2013-06-25	George Grant	chap_1	6003	0.1705814	of course um so someone that comes to mind is a patient i had been seeing since the beginning of the year they had ...
4	5	2013-12-12	Molly Perkins	chap_6	1185	0.2717300	youre welcome uh probably about minutes researcher ok because i would normally i always like to put in some free t...
5	6	2013-12-12	Molly Perkins	chap_6	3737	0.2006957	so two different patient encounters or two types of mmhm mmhm mmhm i cant think of anything in particular um we...
6	7	2013-12-04	Molly Perkins	chap_7	4847	0.1697957	you want me to share with you the experience itself researcher right and what was ok um because im in the ed resear...
7	8	2013-02-26	Molly Perkins	chap_2	3744	0.1864316	i have been here at midtown since august before coming to emory before coming to emory i was an intern um chaplai...
8	9	2013-03-08	Molly Perkins	chap_2	724	0.3563536	the only thing i would change about my role as a chaplain would be the the audience that im assigned to um because...
9	10	2013-04-10	George Grant	chap_2	875	0.3542857	its been busy because im being pulled in so many different directions not just in my role as a chaplain but also in my ...
10	11	2013-02-27	George Grant	chap_3	3627	0.2338020	ive been here since august something so about labor day weekend yes i did my first unit of cpe so my cpe internship ...
11	12	2013-04-10	George Grant	chap_3	960	0.3395833	theyre good i hadfor a couple of weeks ive had a lot of patients under so i havent been time diarying as often as i wo...
12	13	2013-04-10	George Grant	chap_3	5978	0.1684510	id say when i had one of the researchers saturday one of the patients we visit can i use a patient name in this interview...
13	14	2013-02-27	George Grant	chap_4	4461	0.1759695	i have been here at midtown since august yes i was involved with another clinical pastoral education experience from ...
14	15	2013-04-10	George Grant	chap_4	1983	0.2168432	its going pretty well with the diary this week has been a little irregular for me because its been a series of kind of bac...
15	16	2013-07-03	Molly Perkins	chap_4	4224	0.1775568	im reminded of an example that dealt with a new diagnosis i work in the oncology unit or units because its plural i w...
16	17	2013-02-26	Molly Perkins	chap_5	4273	0.1514159	ahh i came here august th i think not very long for almost seventh months before i came here for the most of the tim...
17	18	2013-06-26	George Grant	chap_5	3610	0.1609418	okay uh using my resources i have enjoyed this and then it really helped me with how to encounter with my patient a...
18	19	2013-06-26	Molly Perkins	chap_6	5045	0.1750248	yep almost uh march th almost three years yeah i did my clinical pastoral education experience at georgia regional ho...
19	20	2013-03-05	George Grant	chap_7	4090	0.1704156	midtown ive been here uh about three years started here in august of i did my residency from to once i finished my r...
20	21	2013-04-10	George Grant	chap_7	1052	0.3184411	thank you its been going pretty well im use to it now um i feel more comfortable carrying the ipad itself um and bein...
21	22	2013-02-26	George Grant	chap_8	2728	0.2023460	been here at emory midtown for months i started in august pause yea about months chuckles i did my internship in c...
22	23	2013-09-10	George Grant	chap_8	484	0.3946281	laughs well i shared with you a few minutes ago um im carrying mymy ipad so after i finish my rounds visiting the pat...
23	24	2013-07-03	Molly Perkins	chap_9	2677	0.1991035	uhhuh my area is different so putting it within context uh in the preop area people before surgeries are usually very s...
24	25	2013-03-13	George Grant	chap_9	2114	0.2374645	five years basically in the perioperative area um before that i did my internship and residency over at clifton and one ...
25	26	2013-03-27	George Grant	chap_9	807	0.3283767	sounds exhausted with the diary last week and this week so far ive been so swamped that i havent been doing the dia...

Templeton Chaplain Interviews 2013



Word Vector Representations

- Depart from atomistic understanding of words (“good” vs “great”).
- Map relations of words in universe of language
- Step 1: From a corpus, construct an n-word x n-word matrix and populate with co-occurrences in a fixed-length sliding window.
- Step 2: Dimensionality reduction to find latent variables (syntactic or semantic).
- Step 3: Report loading of each word on these latent variables.

Begin with raw text corpus...

```
look back in time and study former cultures  
ays been distasteful to man and will probab  
erstandable and can perhaps best be explained  
conscious parts of the self to the unconsciou  
selves it is inconceivable for our unconsci  
e here on earth and if this life of ours has  
alicious intervention from the outside by so  
conscious mind we can only be killed it is in  
age therefore death in itself is associated  
ething that in itself calls for retribution  
wise to remember these fundamental facts be  
e of the most important but otherwise uninte
```

window = 10

Construct co-occurrence matrix

	word1	word2	word3	word4	word5	...	word_n
word1	7	0	4	3	2
word2	4	2	5	10	2
word3	15	4	4	3	0
word4	0	0	25	3	3
word5	5	3	1	7	12
...
...
word_n

Now each word has a 300-item “address” of its location in a given language universe.

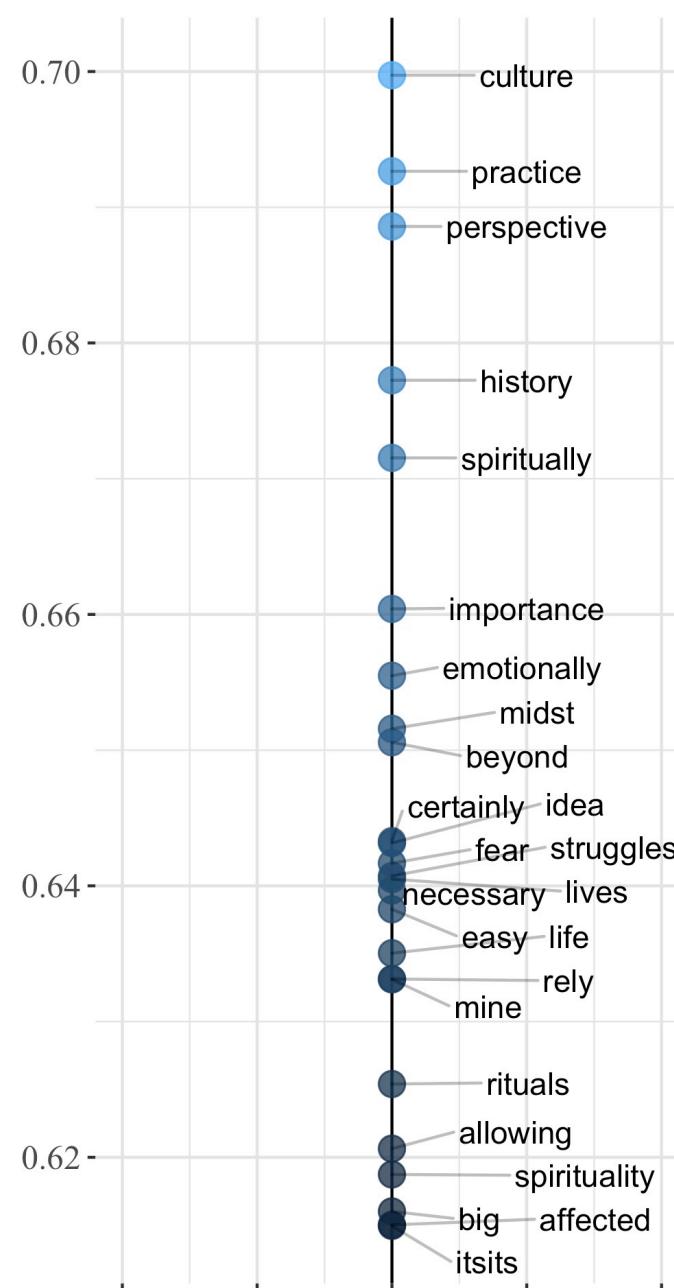
	dim1	dim2	dim3	dim4	dim5	...	dim_n
word1	0.05	0.63	0.003	0.08	0.4
word2	0.8	0.02	0.04	0.3	0.6
word3	0.1	0.34	0.25	0.13	0.3
word4	0.01	0.08	0.6	0.4	0.4
word5	0.34	0.52	0.67	0.01	0.01
...
...
word_n

Scale the columns into k vector dimensions (similar to PCA, factor analysis, etc.)

vector dimensions = 300

Death

Cosine similarity



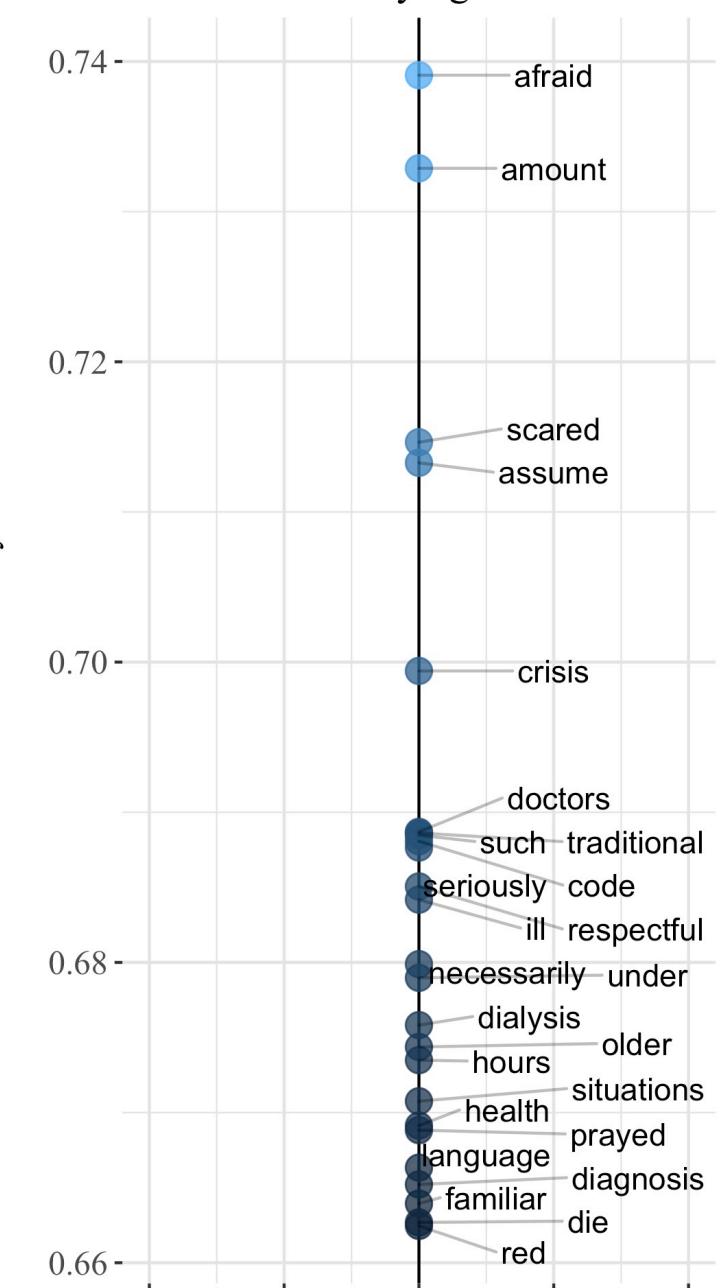
Study #3

One-dimensional
mapping reveals
semantic meaning.

“Which words appear in
similar contexts?”

Dying

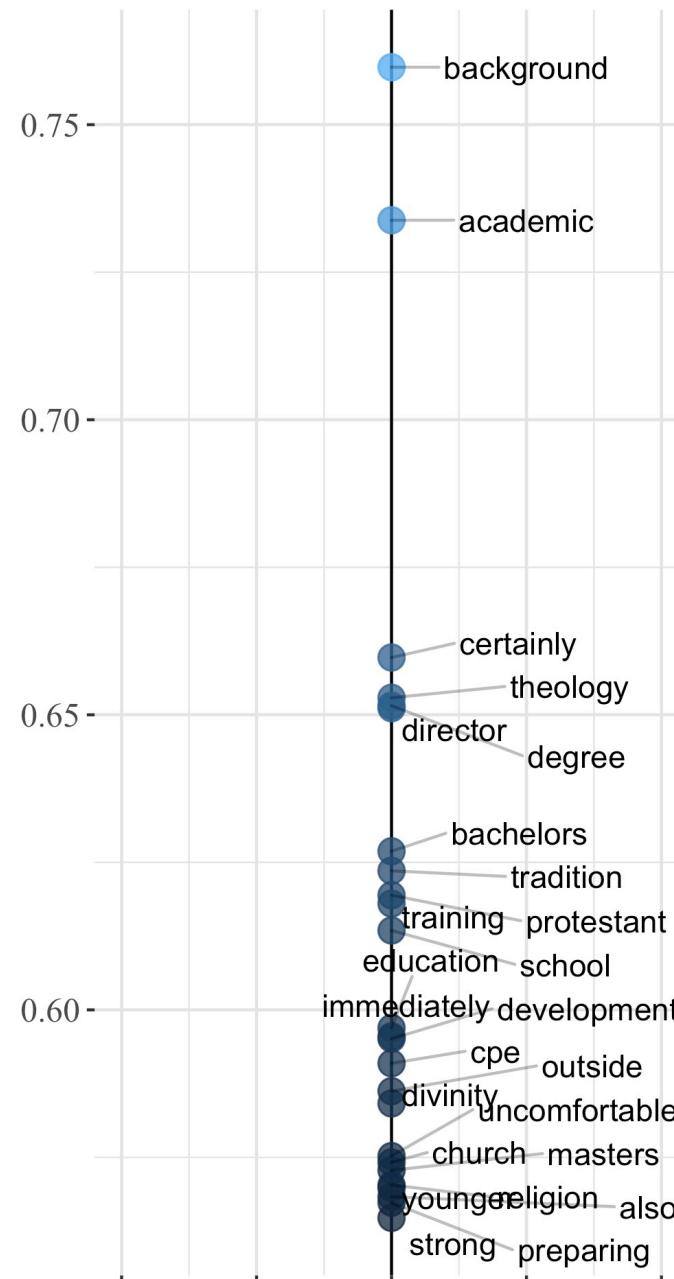
Cosine similarity



John A. Bernau 2019 // www.johnabernau.com

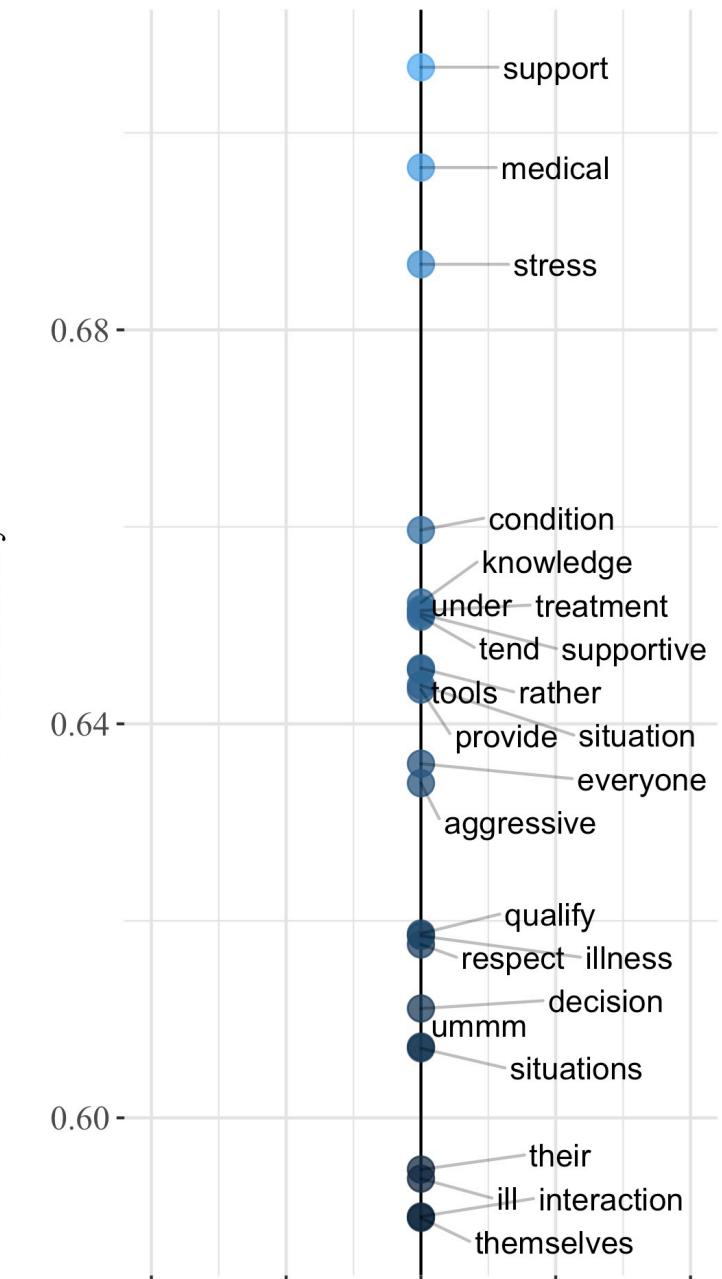
Religious

Cosine similarity



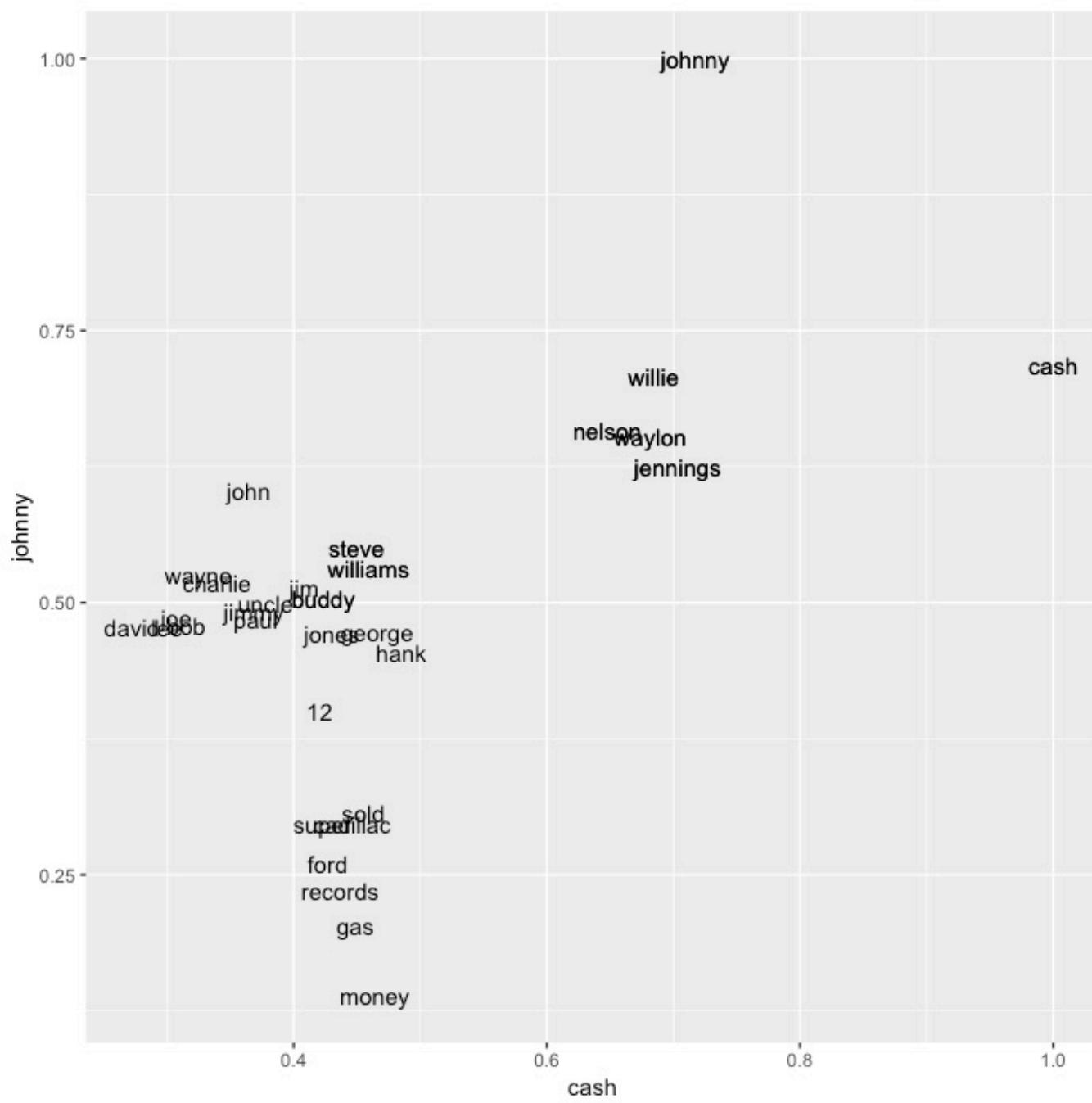
Spiritual

Cosine similarity

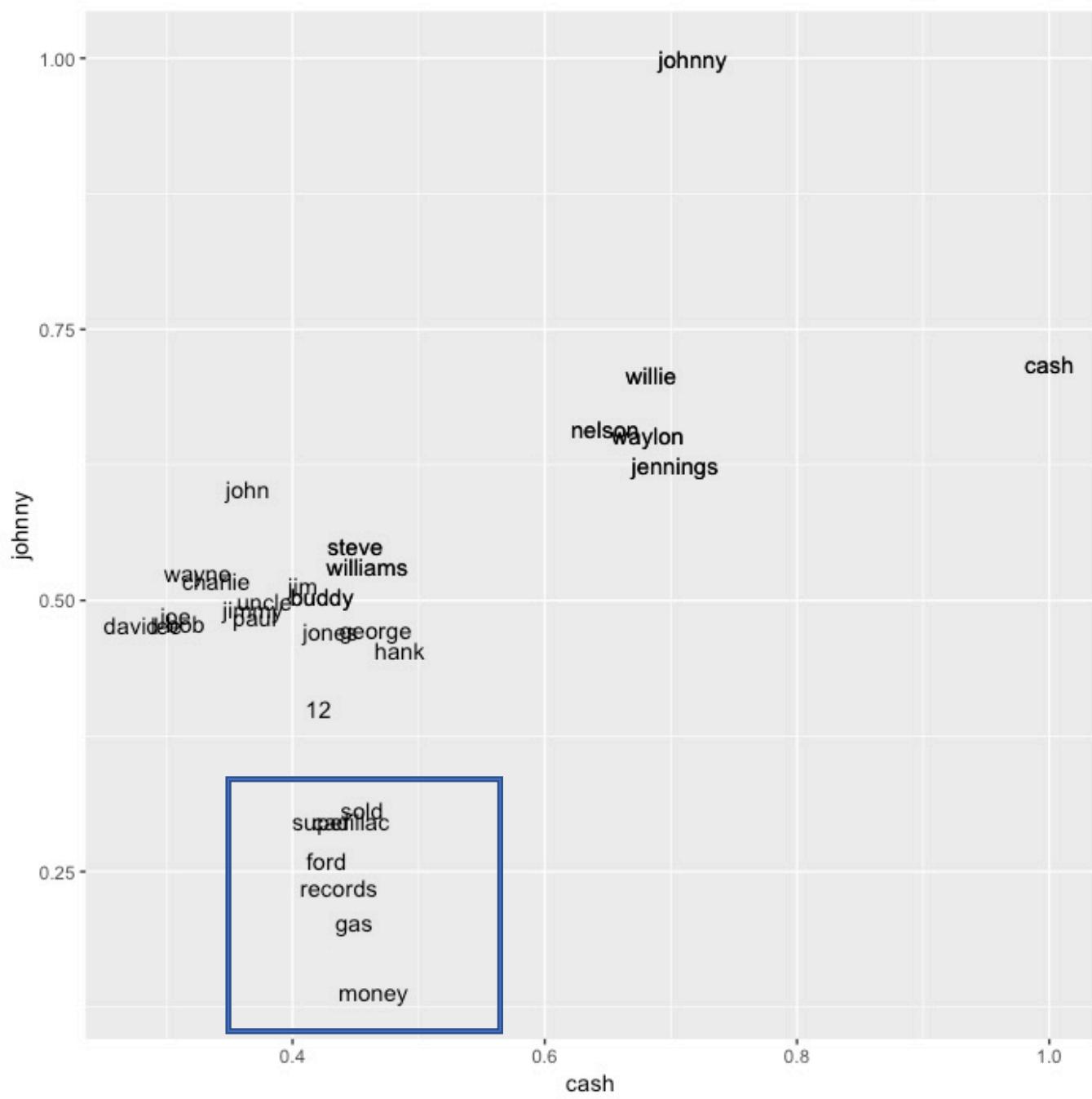


One-dimensional
mapping reveals
semantic meaning.

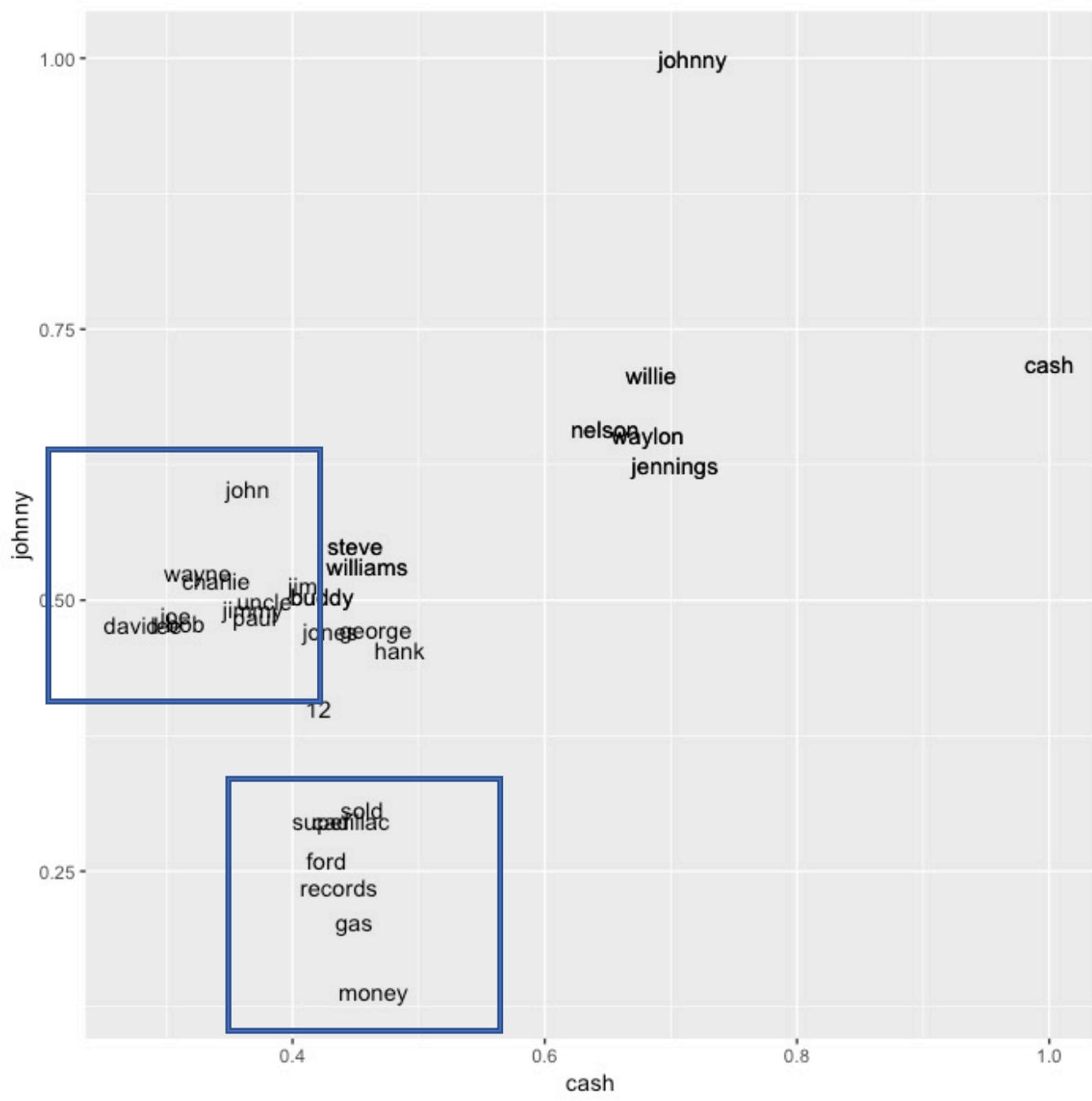
“Which words appear in
similar contexts?”



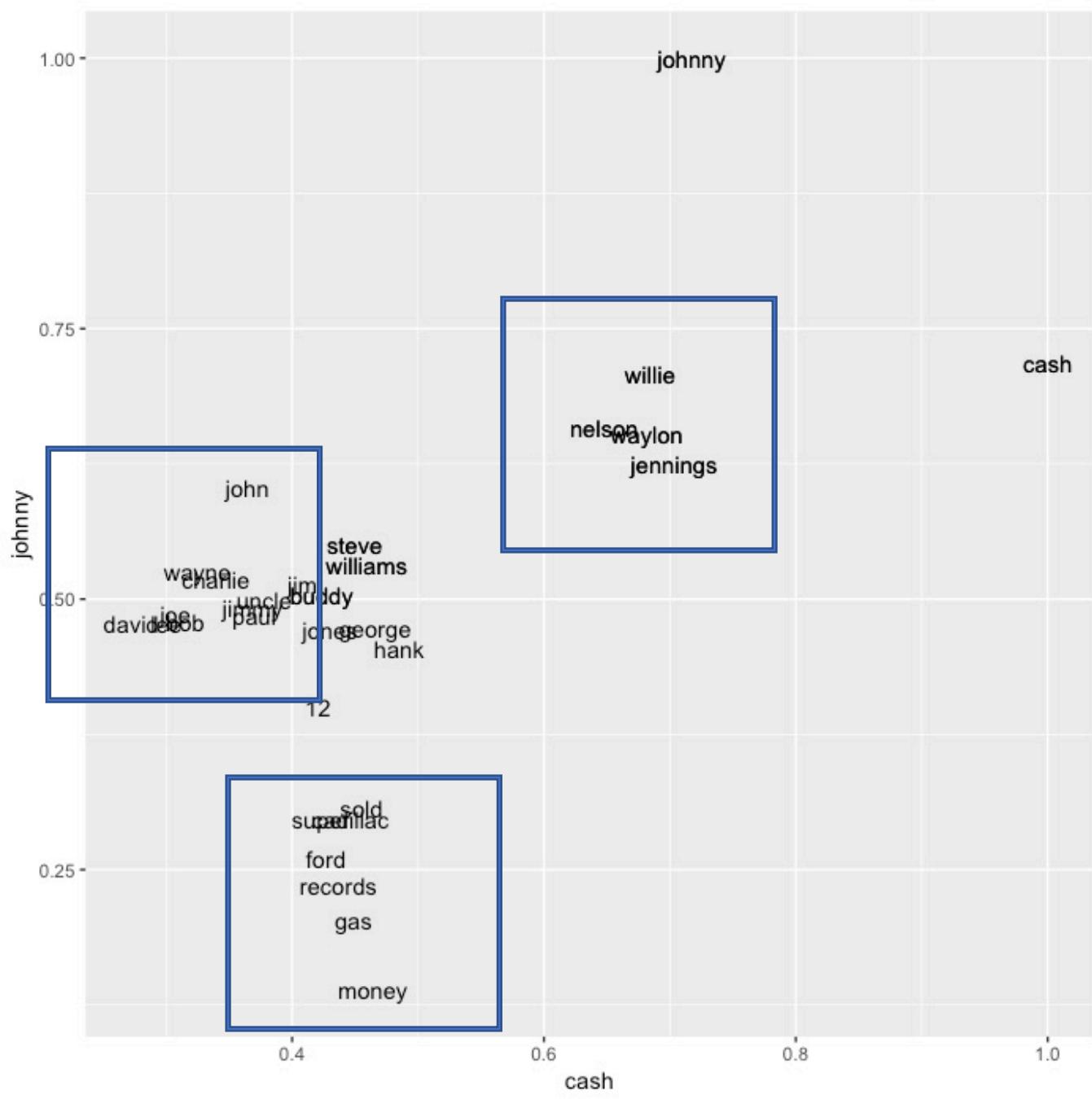
- Two-dimensional mapping reveals multiple semantic meanings



- Two-dimensional mapping reveals multiple semantic meanings
- “Cash” as currency...

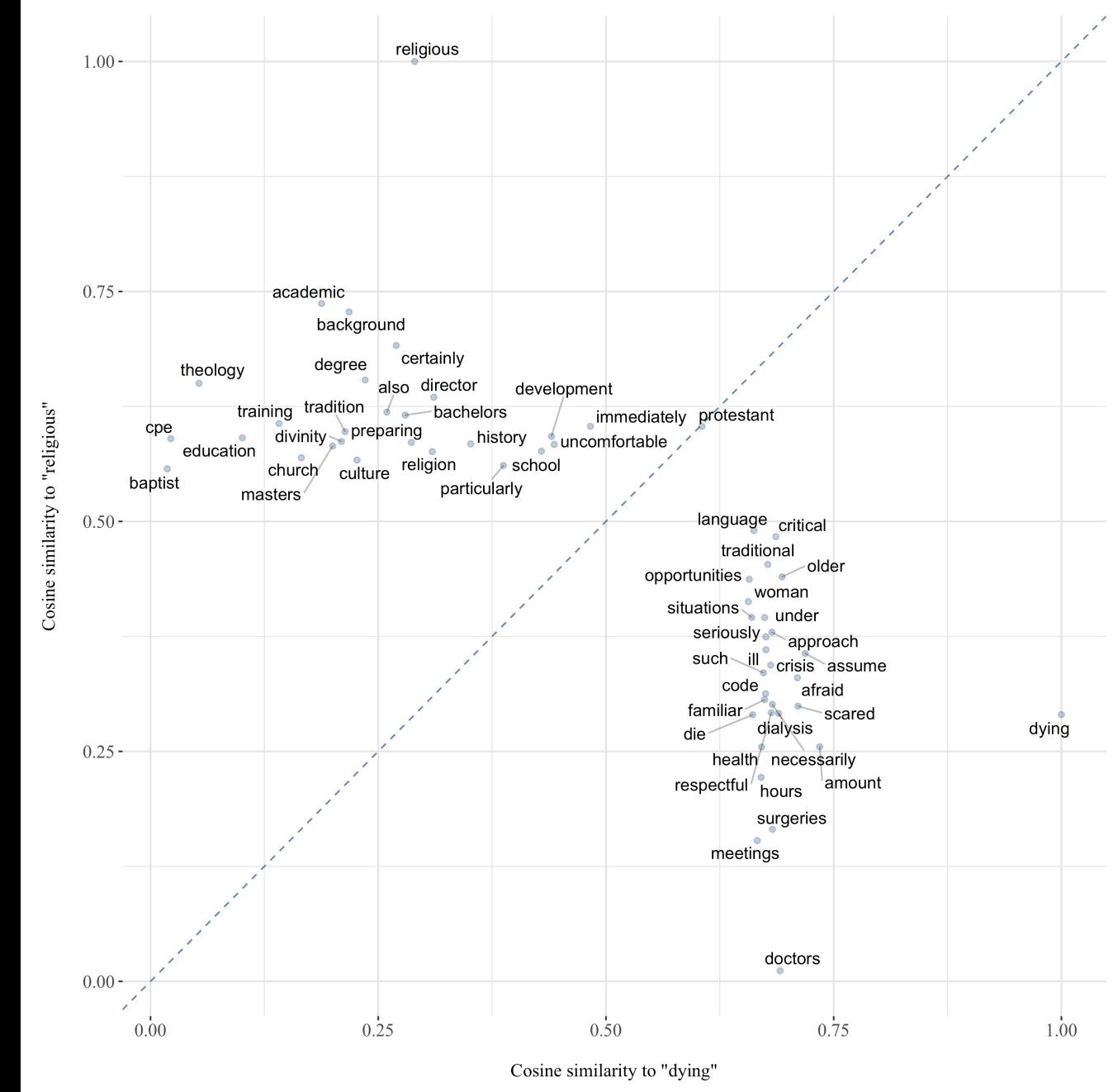


- Two-dimensional mapping reveals multiple semantic meanings
- “Cash” as currency...
- “Johnny” as name...

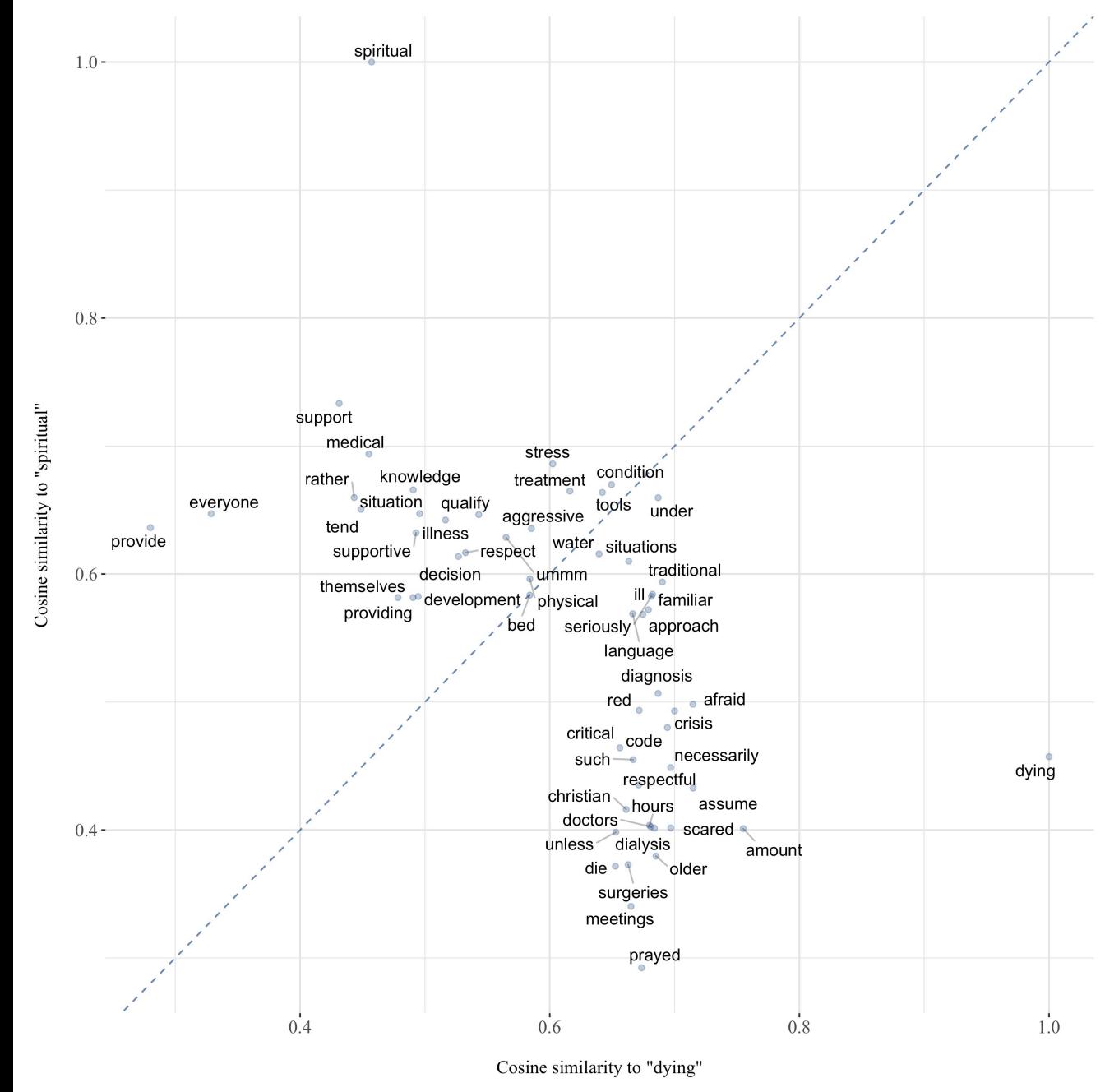


- Two-dimensional mapping reveals multiple semantic meanings
- “Cash” as currency...
- “Johnny” as name...
- “Johnny Cash” as proper name.

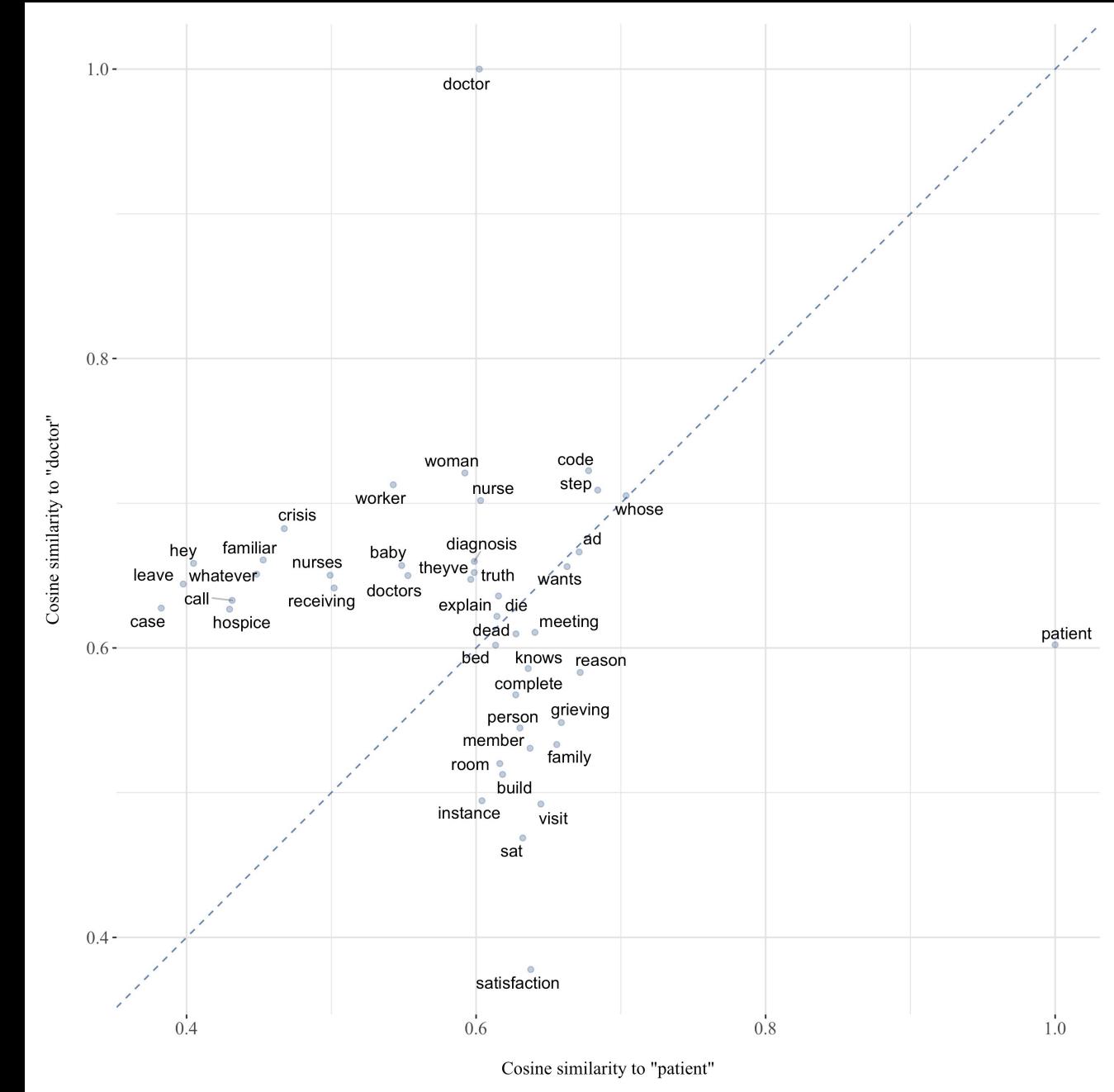
Religious vs dying



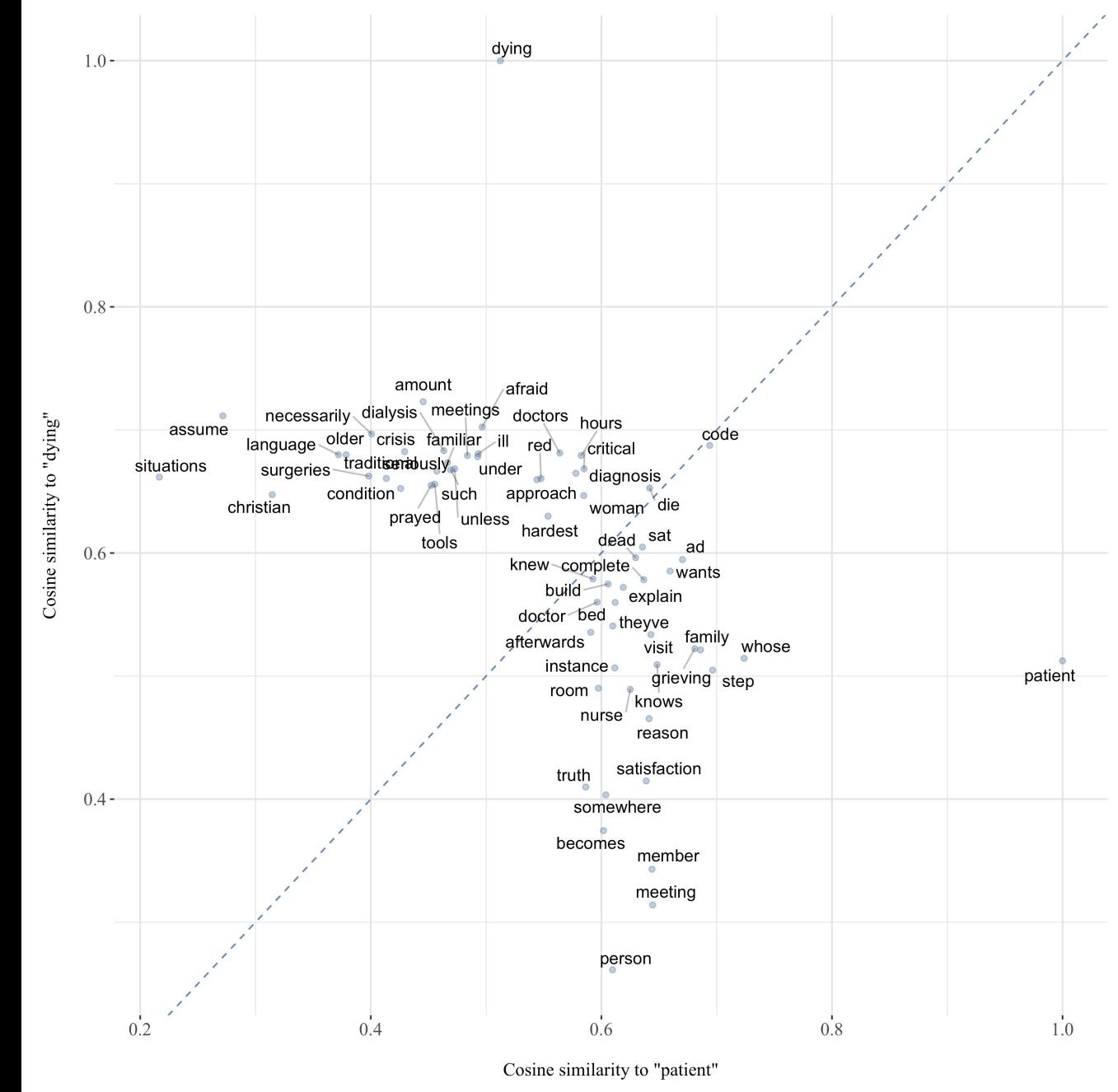
Spiritual vs dying

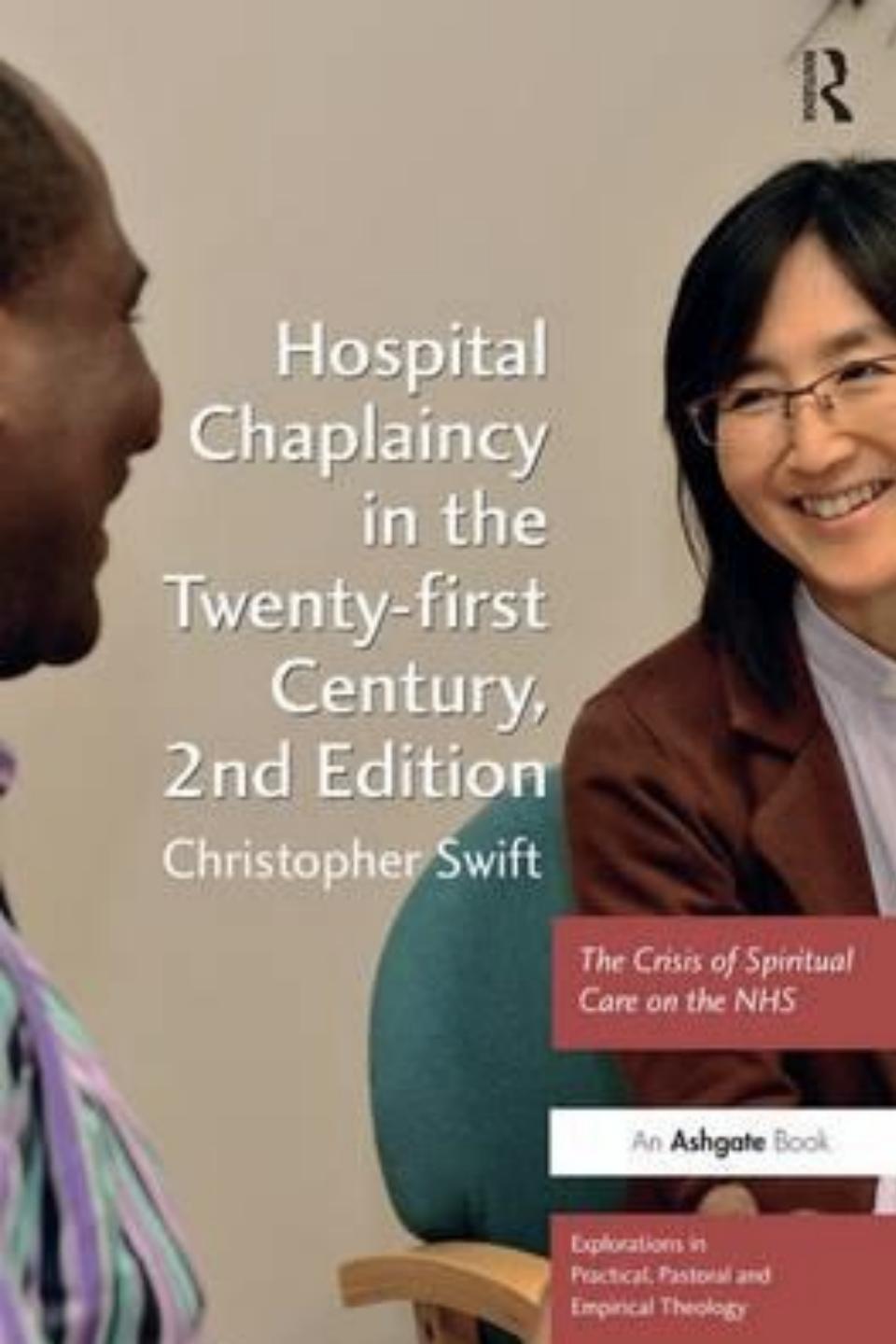


Patient vs doctor



Patient vs dying



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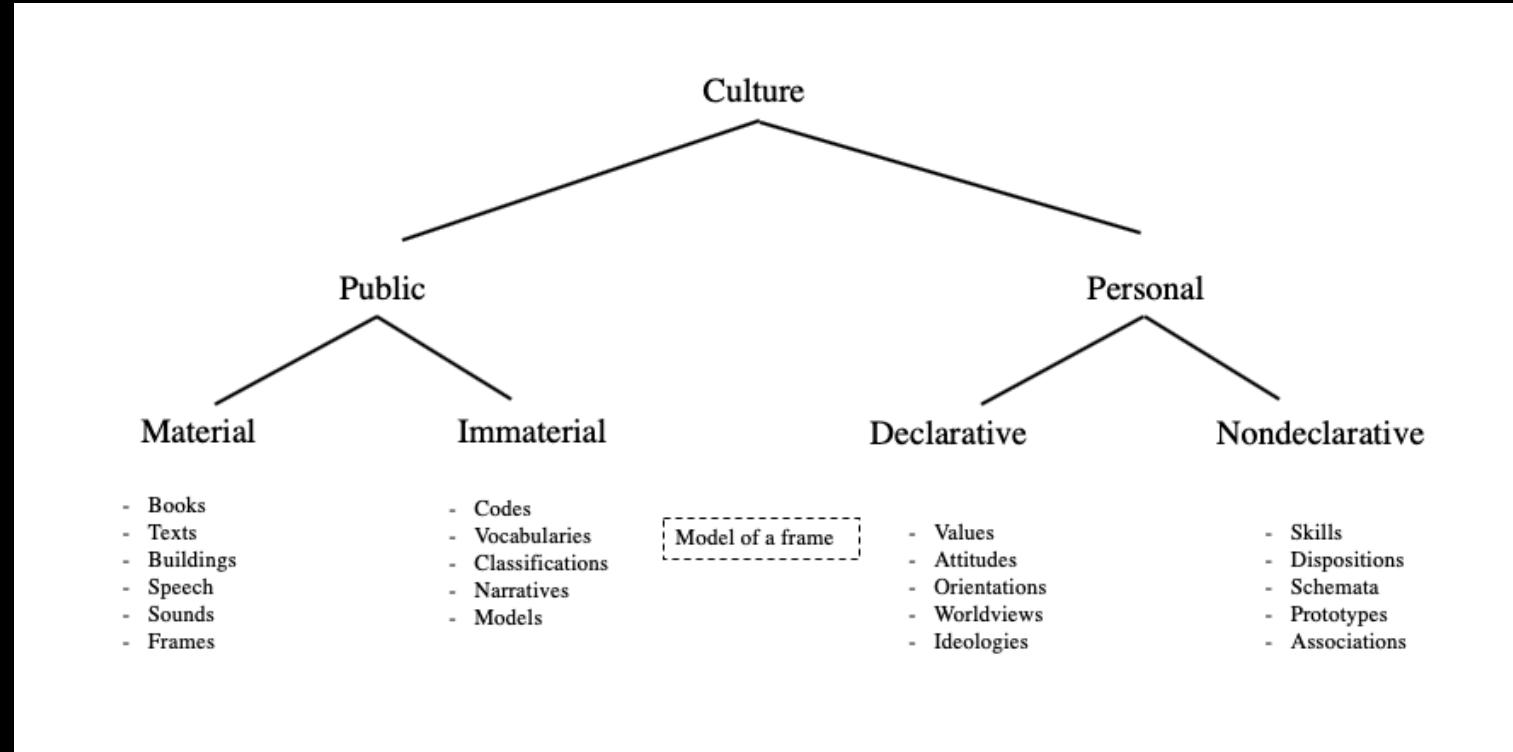
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Future directions

Cultural sociology of language and “immaterial public culture”

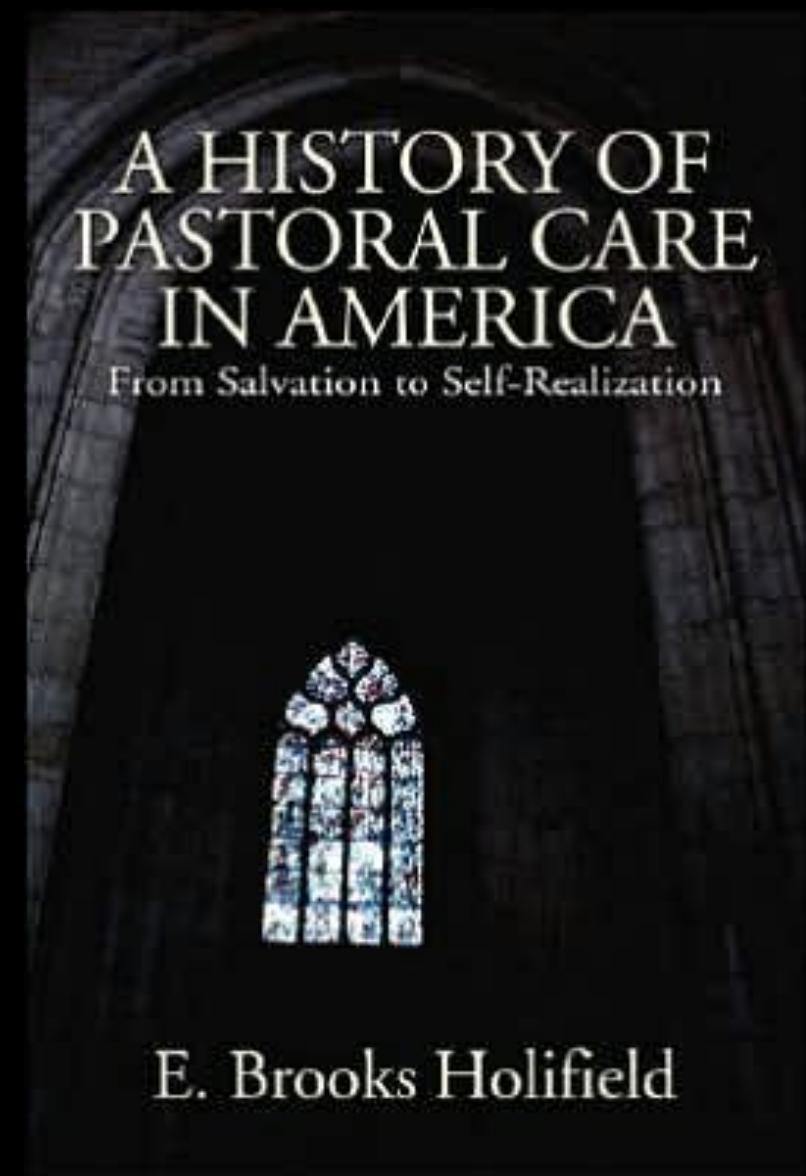
- Beyond “interpretive packages” (Gamson & Modigliani 1989)
- “Model of a frame” (Wood et al. 2018)
- Mead, Firth, Habermas...



Future directions

Secularization, theology, and pastoral professions

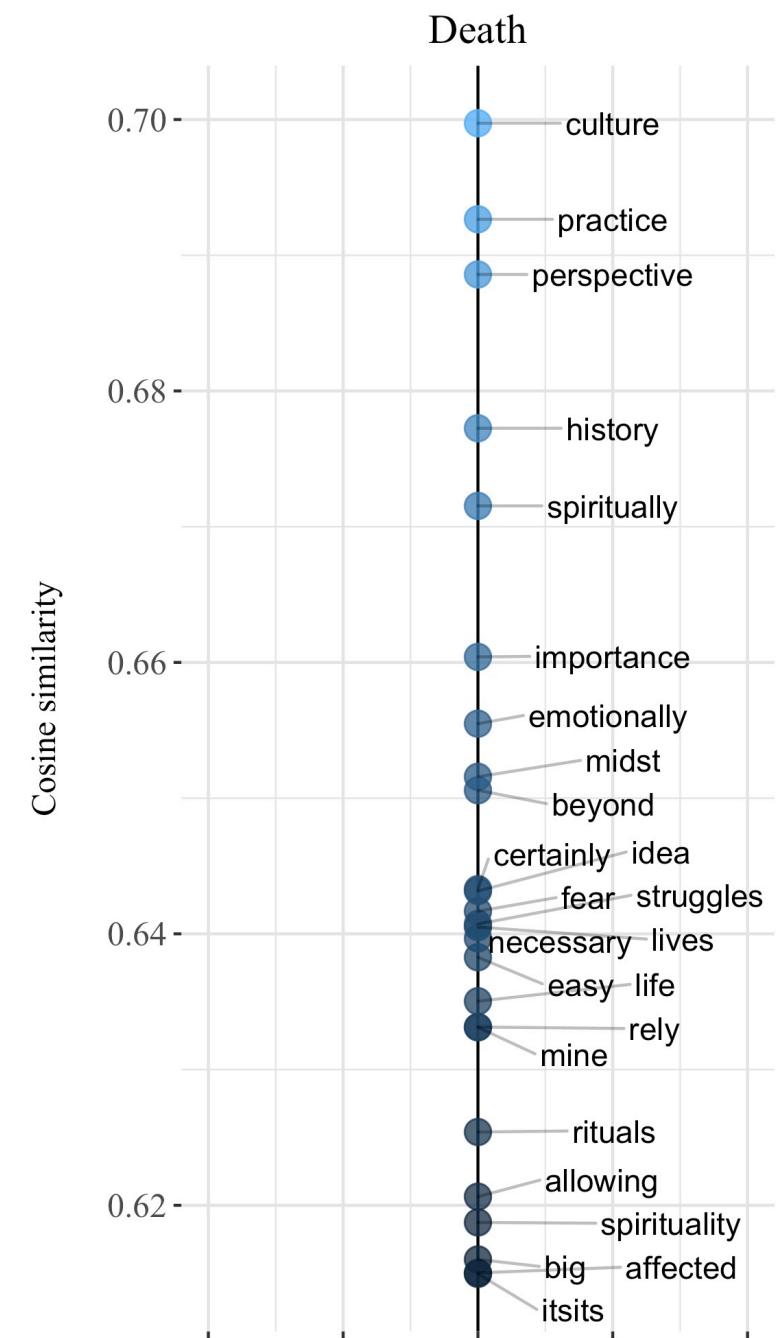
- Disentangle chaplaincy from pastoral professions (Cadge 2012, Swift 2014)
- Examine other religious texts: conservative journals, other faith traditions, other global contexts.
- Pair with other qualitative methods



Future directions

Computational text analysis

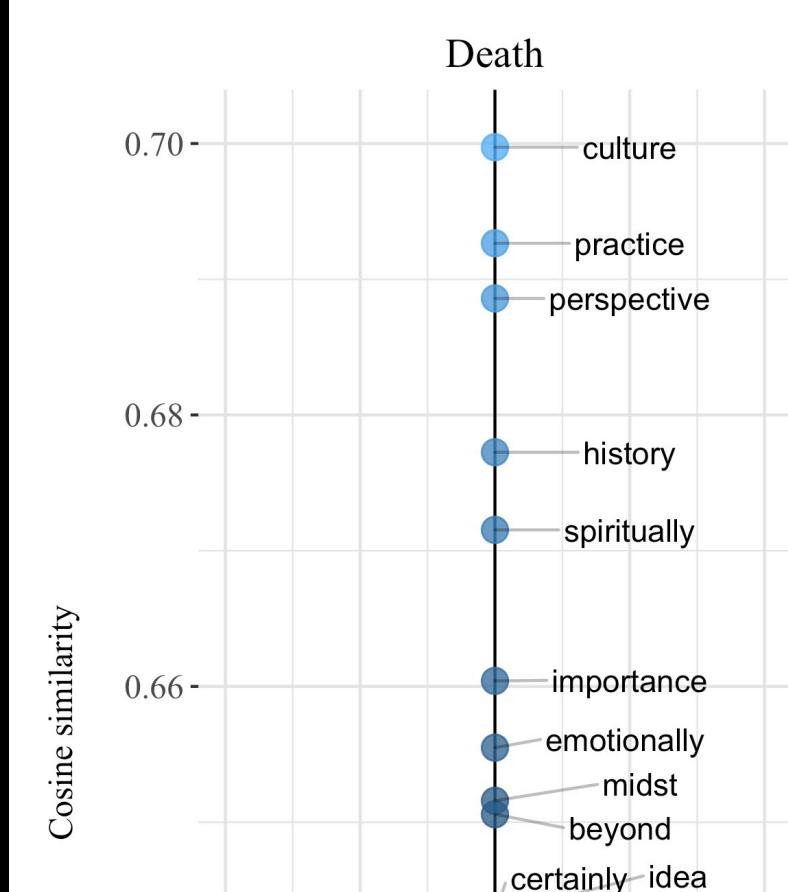
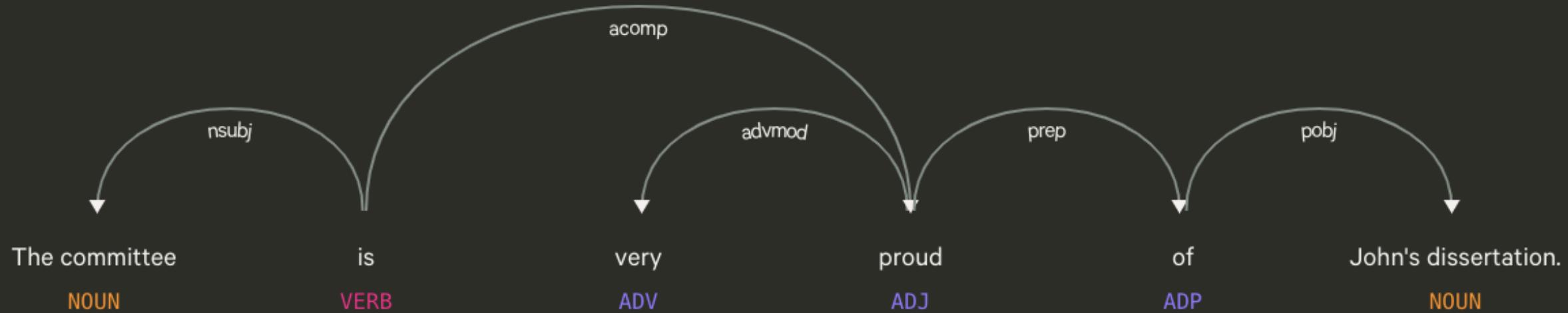
- Precedent-building for word vector representations

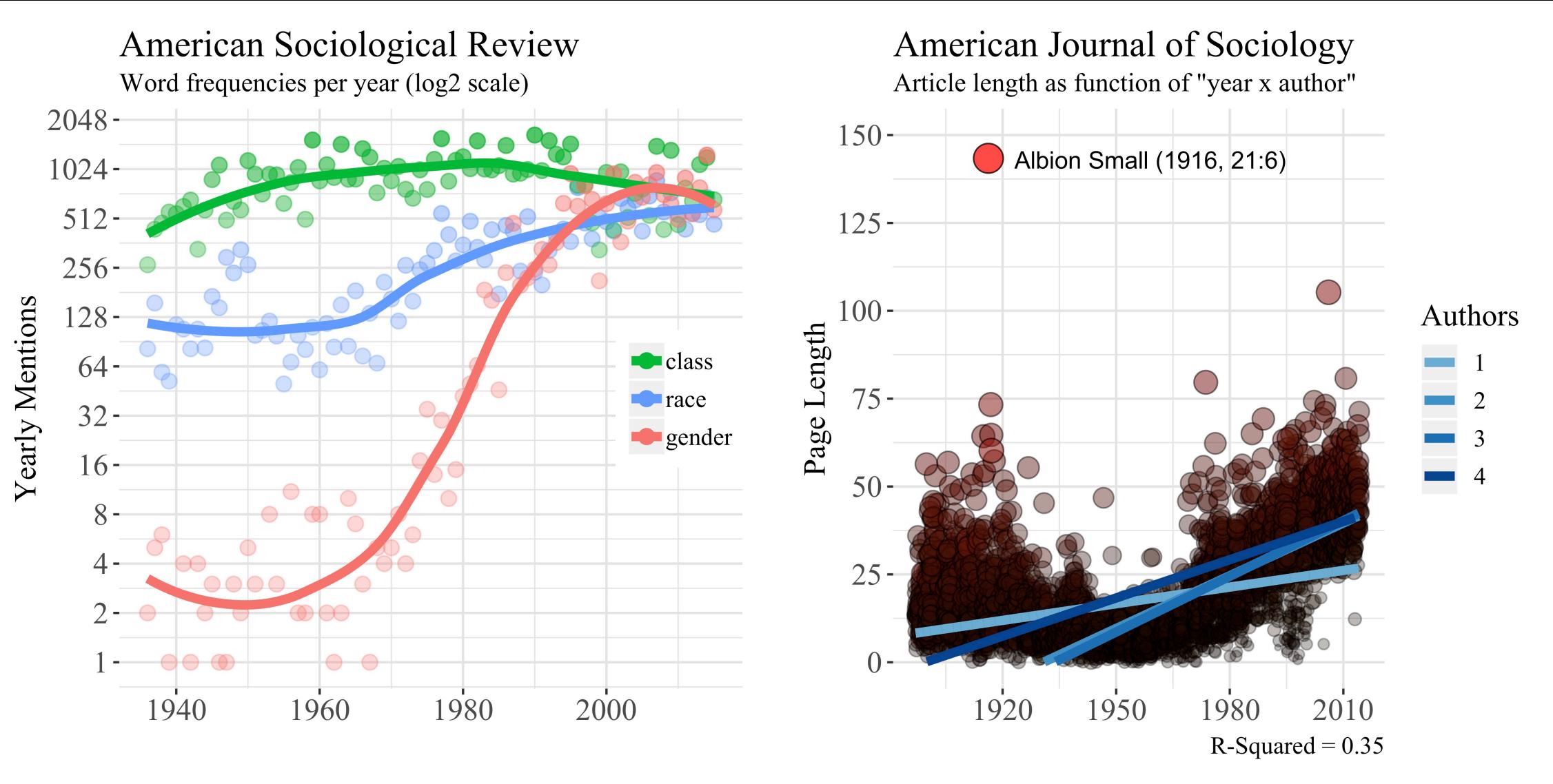


Future directions

Computational text analysis

- Precedent-building for word vector representations
- Grammatical parsing





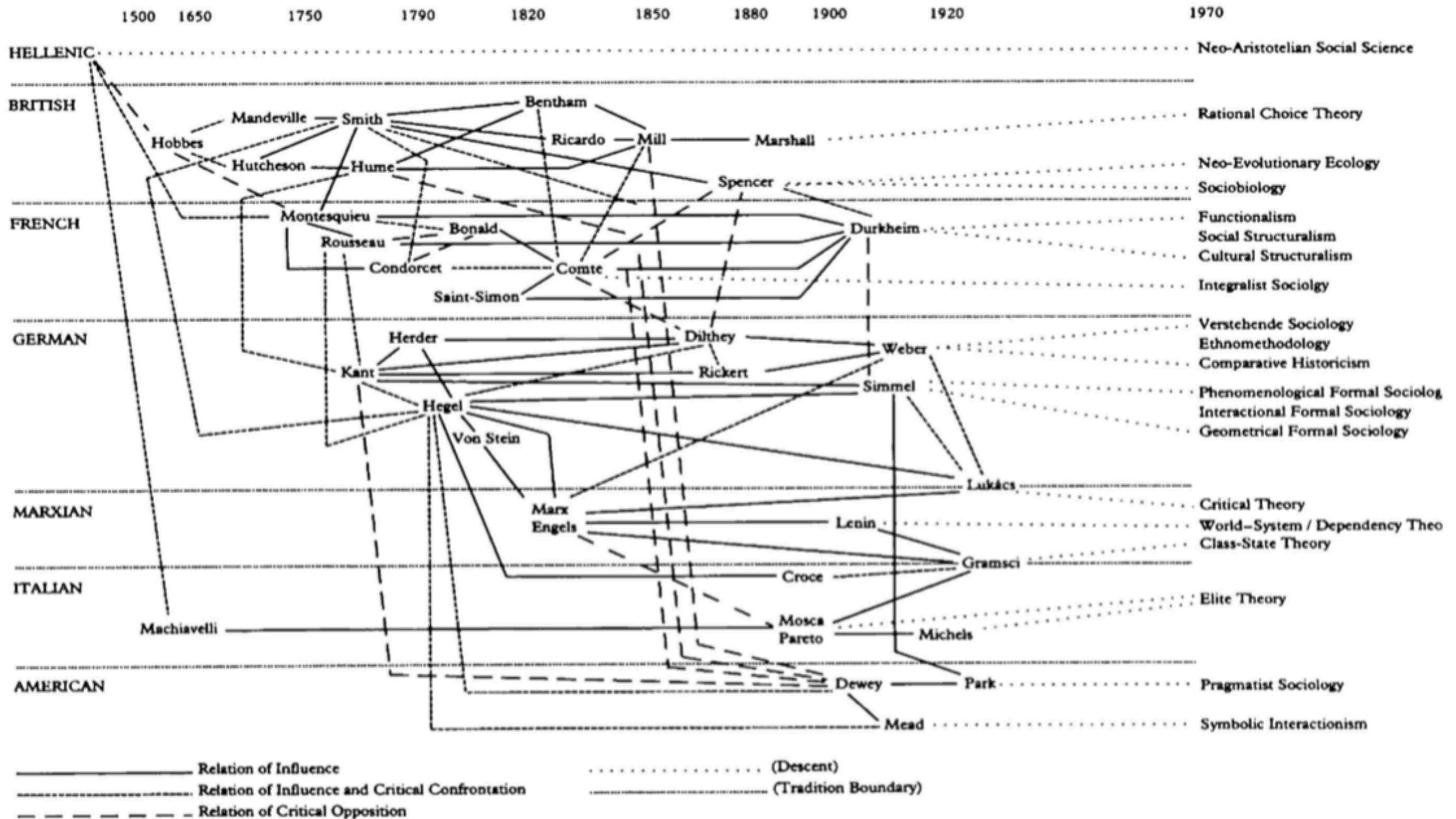
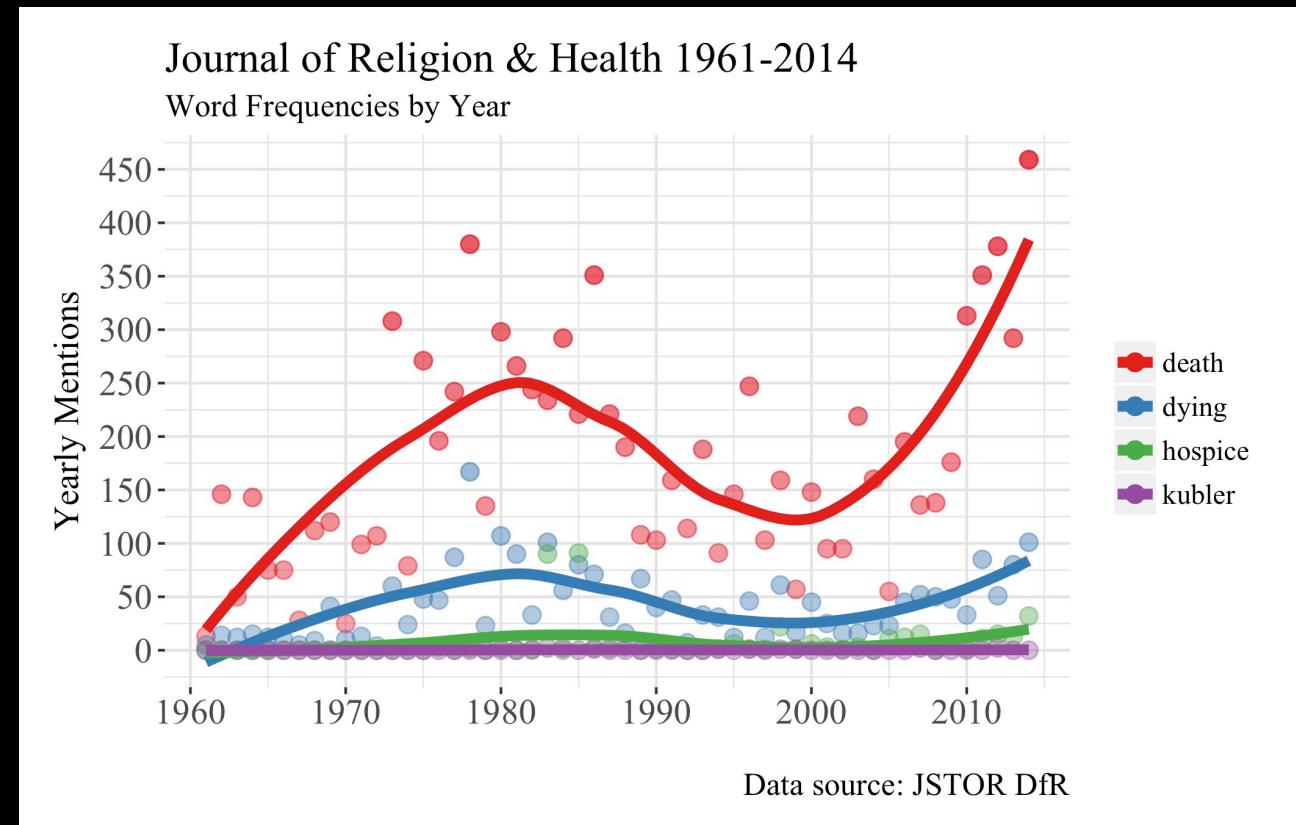


Figure 14. Major Dialogical Traditions in the Heritage of Sociology

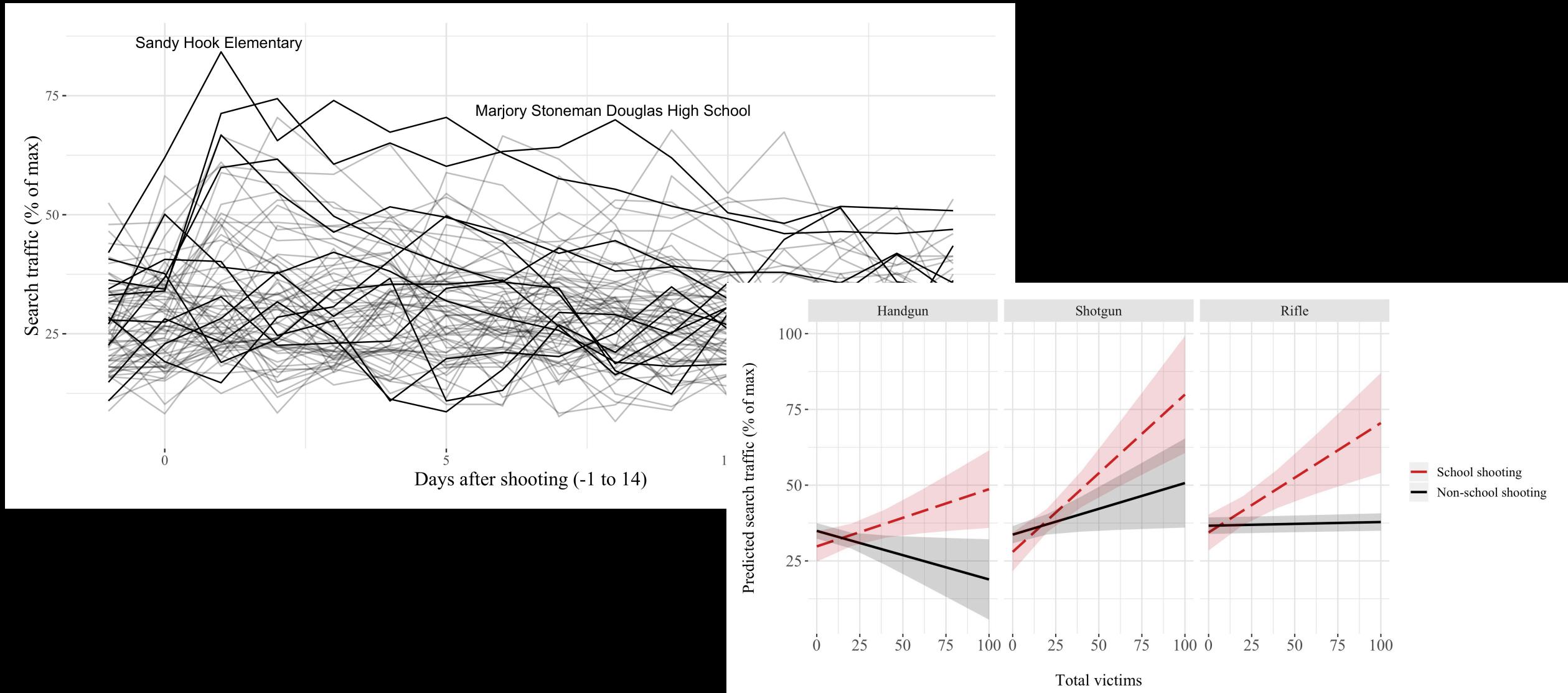
Future directions

Other data sources...

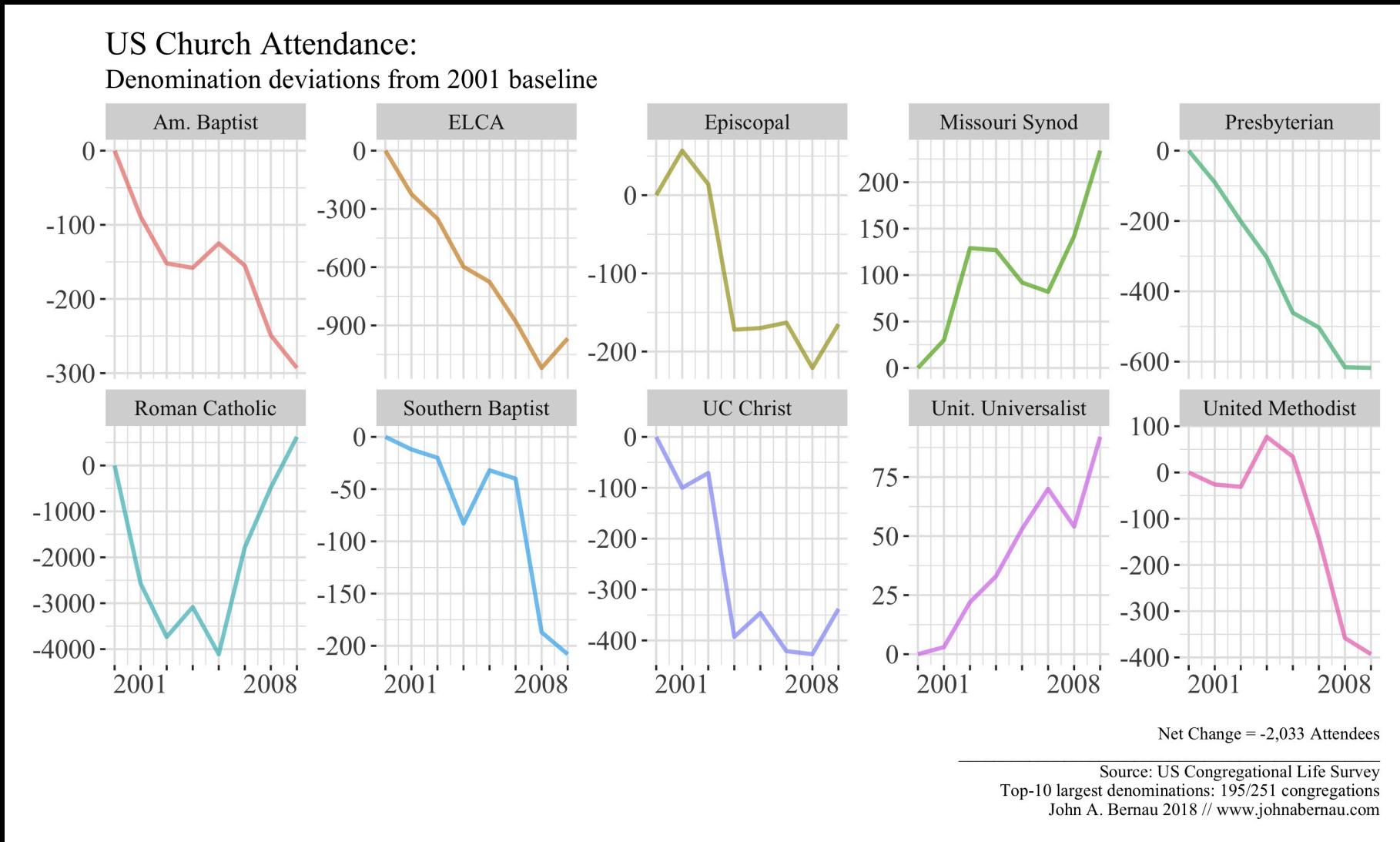
- Journal of Religion and Health 1961–2014
- Omega: Journal of Death and Dying 1999–2014
- American Journal of Sociology 1895–2014
- American Sociological Review 1937–2014
- Country Music Lyrics 1989-2014 (N = 30k)



Future directions



Future directions



Thank you

Appendix

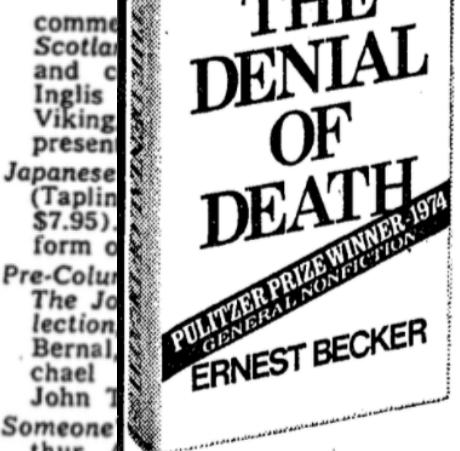
The New York Times

- Advertisements

New Books

FICTION

A Murder of Crows, by Patrick Buchanan (Stein & Day, \$4.95). Suspense and mystery.
Cruising, by Gerald Walker (Stein & Day, \$5.95). Efforts by the police to trap a slayer of homosexuals.
Five Fates, by Keith Laumer, Paul Anderson, Frank Herbert, Gordon Dickson and Harlan Ellison (Doubleday, \$4.95). The authors take their hero through the worlds of science fantasy.
The Methuselah Enzyme, by Fred Mustard Stewart (Arbor House: World, \$5.95). Three couples attempt to arrest and reverse the aging process.



...A brilliant and desperately needed synthesis of the most important disciplines in man's life. *The Denial of Death* puts together what others have torn in pieces and rendered useless. It is one of those rare masterpieces that will stimulate your thoughts, your intellectual curiosity, and last, but not least, your soul!

—Elisabeth Kubler-Ross, M.D., author of *On Death and Dying*

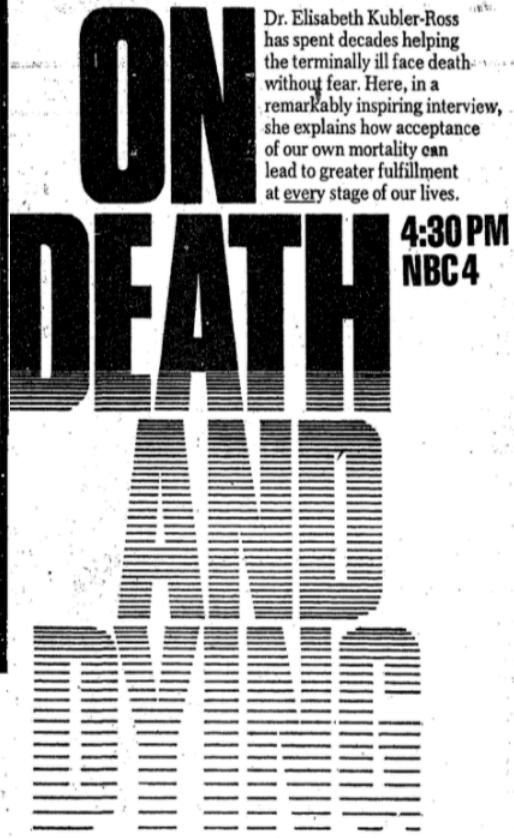
1974 Pulitzer Prize Winner
—General Nonfiction

\$7.95

THE FREE PRESS
A Division of
Macmillan Publishing Co., Inc.

**"BRILLIANT"
"RARE MASTERPIECE"**

Ad 352 -- No Title
Times (1923-Current file); Nov 24, 1974; ProQuest Historical Newspapers: The New York Ti



Paperbacks

Best Sellers

Mass Market Paperbacks

- 1 **ONCE IS NOT ENOUGH**, by Jacqueline Susann. (Bantam, \$1.95.) More mental bubblegum from Miss Susann, this time about a movie producer, his Electra daughter and a rich lady.
- 2 **THE ONION FIELD**, by Joseph Wambaugh. (Dell, \$1.75.) Powerful, detailed inquiry into a true crime involving a madman and policemen.
- 3 **SYNTH**, by Flora Rheta Schreiber. (Warner, \$1.95.) A popularly told psychoanalytic case history of a woman whose hysteria led her to assume 16 identities.
- 4 **THE CURSE OF THE KINGS**, by Victoria Holt. (Fawcett, \$1.50.) Victorian bride honeymooning in Egypt runs into a Pharaonic curse.
- 5 **THE GOLD OF THE GODS**, by Erich von Daniken. (Bantam, \$1.95.) Amazing! Why are you still reading this dismal pseudo-science?
- 6 **THE FIRST DEADLY SIN**, by Lawrence Sanders. (Berkeley, \$1.95.) Realistic, well-thought-out police-procedure story about a gratuitous street murderer with a murky sexual hang-up.
- 7 **THE END OF A PRESIDENCY** by The Staff of The New York Times. (Bantam, \$2.25.) "Instant" history of Nixon's resignation.
- 8 **THE MANNINGS**, by Fred M. Stewart. (Bantam, \$1.95.) The life of a fire-manufacturing tycoon; Stewart keeps his involved narrative rolling along merrily with a sharp fist.
- 9 **JOSHUA, SON OF NONE**, by Nancy Freeman. (Dell, \$1.50.) Political fantasy about a boy who is cloned from an assassinated President.
- 10 **NORTH DALLAS FORTY**, by Peter Gent. (NAL, \$1.95.) A tough, bitter pro football novel about men paid to inflict pain—and suffer it.

Trade Paperbacks

- 1 **THE GUARDIAN**, by Aleksandr I. Solzhenitsyn. (Harcourt, \$10.00.) A tremendous indictment of the Soviet secret prison system.
- 2 **THE JOY OF SEX**, by Alex Comfort. (Simon & Schuster/Fireside, \$4.95.) A compendium of sexual techniques.
- 3 **BREAKFAST OF CHAMPIONS**, by Kurt Vonnegut Jr. (Delta, \$2.65.) The sadly funny saga of a Pontiac salesman who goes bananas when he discovers everybody else is a machine.
- 4 **TEDDY BARE**, by Zad Rust. (Western Islands, \$2.) Scathing, right-wing exegesis of Chapman's work.
- 5 **TRY TO WIN**, by Max Jones and Dorothy Jongeward. (Addison-Wesley, \$4.95.) Exercises in transactional analysis.
- 6 **ON DEATH AND DYING**, by Elisabeth Kubler-Ross. (Macmillan, \$1.95.) Sensible advice on facing mortality.
- 7 **NOTES TO MYSELF**, by Hugh Prather. (Real People Press, Box F, Moab, Utah 84532, \$2.) Poetic and philosophical musings.
- 8 **I AINT MUCH BABY—BUT I'M ALL FVE GOT**, by Jesse Lair. (Doubleday, \$2.95.) Homespun psychological self-help.
- 9 **RAND McNALLY '74 ROAD ATLAS**. (Rand McNally, \$2.95.) Maps of America's highways and byways.
- 10 **FIGHT TO BE YOUNG AND FREE**, by MS Foundation. (McGraw-Hill, \$4.95.) Songs, homilies, poems, stories aimed at breaking down traditional sex-role stereotypes.

Mass market paperbacks are sold on newsstands, in supermarkets and variety stores, as well as in bookstores. Trade paperbacks are sold, for the most part, in bookstores and by mail-order houses. Some are sold on report from more than 100 booksellers throughout the United States.

The New York Times

• Death / Dying

Dignity in Dying Is Goal of New Studies

By JANE E. BRODY
Special to The New York Times

ROCHESTER, May 1—A growing league of profes-

has become increasingly important now that swift deaths from acute illnesses like pneumonia are rare and many people die over years from chronic diseases like cancer passing by dehumanizing, less

cally painful?

What Youville and other similar programs are trying to do is break down the terrible barrier—some would say cruel prejudice—that so often isolates the dying from the rest of society. They want to make dying seem a more humanized and natural part of life.

The new concern over death, many believe, is fundamentally a reflection of complex changes in the national psyche since the dawn of the nuclear age. Many writers and thinkers are coming to see death, and often the threat of premature death, not as just an enemy of the old and weak but as a powerful influ-

creasing rapidly during the last decade.

Participants included psychologists, sociologists, philosophers, clergymen, psychiatrists, nurses and physicians who commonly treat fatally ill patients.

As demonstrated at the conference, which was sponsored by Rochester General Hospital in cooperation with the University of Rochester Medical School, the current interest in death has already

Continued on Page 20, Column 4

Attitudes to Death Grow More Realistic

By ROBERT REINHOLD

Death, perhaps the last major American taboo, is beginning to emerge from its dark cloak of fear and denial.

Increasingly, Americans are trying to come to grips with and ease the inevitability of their mortality. More realistic and open attitudes toward the ultimate fact of life are undermining Arnold Toynbee's observation, made only half-facedly, that death is an "un-American" affront to our "inalienable rights" to life, liberty and the pursuit of happiness.

Death is never likely to be a welcome or free from entirely welcome or free from

foreboding. Our secular and existential society offers little of the spiritual comfort that cushioned the passage of our ancestors from the known to the unknown. What is perhaps feared today more than death is dying, often suffered in loneliness amid strangers and machines in a hospital. Demand is growing for the "right" to die "with dignity" when the time comes.

"We do not see people fighting death the way they used to—this despair at the end," said Sister Annette Caron, head of the Youville Hospital in Cambridge, Mass., a Roman Catholic facility that specializes in caring for the gravely ill.

Continued on Page 26, Column 3

Learning How to Die

By DAVID DEMPSEY

FOR several months last year, in isolation, I worked to help the terminally ill, learning how to die.

only way to keep her from becoming depressed.

The astounded psychiatrist, who by this time realized that it was the family, not the patient, who needed help, proceeded to the woman's bed. He found her in an unexpectedly cheerful mood. A few minutes' conversation revealed that she had known for some time that she was dying, but did not want to admit it to her children. "I let them kid me because it makes them feel better," she said.

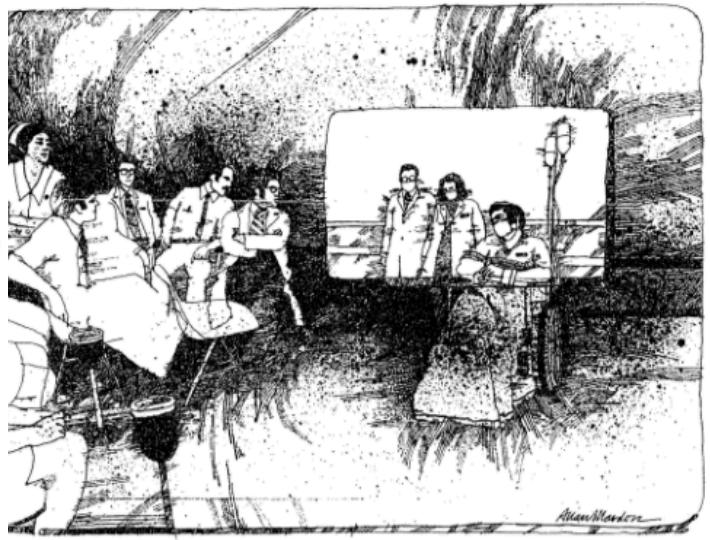
In some cases is typical. Thousands of terminally ill patients in American hospitals are, for a variety of reasons, kept in ignorance of their real condition. In most instances, it is feared, the dying person "won't be able to take it." But in the opinion of researchers who have surveyed attitudes toward death, it is actually the physician who is least able to cope with it. According to Dr. Elizabeth Kubler-Ross, a Chicago psychiatrist who has spent the last seven years working with dying patients of all ages, most people want to know the truth—and many of them, like Mrs. M., find it despite the obstruction when doctors are reluctant to admit that they have run out of solutions.

Dr. Herman Feifel, a professor of psychiatry at the University of Southern California and the author of "The Meaning of Death," suggests

that physicians have "significantly stronger death fears than do most other persons" and that they sometimes (through silence) reject or "psychologically disinherit" the helpless patient who will not give up hope, efforts at resuscitation. This frenetic, last-minute activity, he adds, is largely for their own benefit.

Such attitudes are reinforced by a society that looks upon death as a taboo subject. Technological advances have prepared us to expect solutions to every problem, including the problem of mortality; our hospitals are vast laboratories of positive thinking. Modern medicine's "life-support systems," with their kidney

(Continued on Page 60)



The New York Times

• Kübler-Ross as person

Leading Scientists, Including Four Nobel Laureates

Special to The New York Times

SAN FRANCISCO, Nov. 27—Eugene P. Wigner, the Nobel Prize-winning physicist, praised the scientific symposium held here this weekend and said it was "irrelevant" that money for the conference had come from the Rev. Sun Myung Moon's Unification Church.

Professor Wigner, who teaches physics at Princeton University, was one of four Nobel laureates among more than 400 participants at the sixth International Conference on the Unity of the Sciences, which ended today. Another Nobel laureate, Sir John Eccles, emeritus professor of neuroscience at the State University of New York, was director of the conference.

Mr. Moon said in a 1974 speech that he intended to use eminent scientists, and

Nobel laureates in particular, to make himself "known in every corner of the world" through his sponsorship of such conferences.

The Unification Church, through its affiliate, the International Cultural Foundation, spent \$500,000 for travel expenses, lodgings and speakers' fees in bringing together scholars and scientists from diverse fields to address the theme, "The Search for Absolute Values in a Changing World."

Increasing Scrutiny

The Unification Church has come under increasing public scrutiny amid reports of vast wealth and ties to the South Korean Government's intelligence operation, as well as allegations that brain-washing techniques were employed in the recruit-

ment of its thousands of young American followers.

Professor Wigner and other scientists in attendance repeatedly affirmed, however, that the academic atmosphere at the conference had not been colored by Unification Church dogma. "The freedom here is total," said Richard L. Ruben, professor of religion at Florida State University, who led a group exploring applications in social science.

Daniel Lerner, professor of sociology and international communication at Massachusetts Institute of Technology, said that accepting funds from Mr. Moon's church was no worse than accepting grants from such research spots as the Carnegie, Ford and Rockefeller Foundations. "These foundations were set up by pirates trying to clean up

BEHIND THE BEST SELLERS

By Herbert Mitgang

Elisabeth Kübler-Ross



Kübler-Ross

Aldous Huxley described man as "an intelligence in servitude to his organs." Dr. Elisabeth Kubler-Ross, a medical pioneer in the field of the way human beings die, is attempting to bring understanding and faith to the process so that the mind dominates to the very end.

Her book, "On Death and Dying," a Macmillan trade paperback, has been on the best-seller list, on and off, for the last 15 months. But books are only a part of her medical crusade. She lectures, provides tapes of her talks, sees individual patients and their families, and is

chairman of the board of Shanti-Nilaya, a "healing and growth center," staffed by specialists, in Escondido, Calif. It is a non-profit therapeutic and teaching center, and includes dying patients and those with "negative feelings."

Dr. Kubler-Ross was interrupted briefly at her main office in Flossmoor, Ill., before her biweekly commute to California, to talk about her career, ideas and books. One had the feeling that every moment of her time was precious.

"I travel a quarter of a million miles a year," Dr. Kubler-Ross

Elisabeth Kübler-Ross, 78, Dies; Psychiatrist Revolutionized Care of the Terminally Ill

are dying and their families live without guilt and fear.

The New York Times

• AIDS / Health

A Good News/Bad News AIDS Joke

HERE HAS BEEN MUCH RECENT EXCITEMENT about protease inhibitors, a new class of drugs that promise to prolong markedly the lives of and in some cases possibly help cure those with H.I.V. But because of the cost, a great many who would benefit from such drugs will not have access to them.

For many people already infected, like myself, treatment with proteases might offer at least "two to three years of additional life — which is a lifetime, because new drugs are appearing so fast," says Dr. Steven A. Miles, director of the AIDS research center clinic at the University of California at Los Angeles. For those just infected, Miles says, proteases "quite possibly are a cure, if you get them into you quickly enough."

But drug companies are charging historically high prices for their new wares, insurers are finding ways to get out of reimbursing for them and what little Government help there was in past years is rapidly evaporating as the nation turns away from public support for the needy, a group that now includes a lot more people than it ever did before.

Finally
there are drugs
that may
allow people to
live longer,
but here's the
punch line:
Few can
afford them.

BY LARRY KRAMER

and then I remember reading that in the United States almost 40 million people have no health insurance.

AIDS activists have furiously pressured and battled the research establishment to get new drugs conceived, developed, tested and

costs \$137 million annually and benefits 63,000 people a year, as many as 17,000 of them in New York State. Several months ago New York's ADAP cut the list of drugs it covers from 190 to 66; until earlier this month, it did not pay for proteases, but even now it lacks enough money to provide the drugs to all who need them. ADAP's in 20 states, including New York, reported a total budget shortfall of more than \$12 million for the last quarter of 1995 — and greater deficits are expected this year.

How many of the estimated 650,000 to 900,000 Americans with H.I.V. won't be able to afford protease inhibitors? Can we ever really know? How do you count the indigent, those who cannot speak English, those bumped off welfare or insurance rolls, those in denial and those inefficient at maneuvering through the bureaucratic maze? In my travels, I have been amazed at how many people with AIDS are uninsured,

and then I remember reading that in the United States almost 40 million people have no health insurance.

AIDS activists have furiously pressured and battled the research establishment to get new drugs conceived, developed, tested and

After a Slow Start, AIDS Books Are Com

By EDWIN McDOWELL

Book publishers were slow to sign up books on AIDS after the disease came to public notice in 1981, but now they are making up for lost time.

Big commercial publishers, obscure little presses, religious publishers, homosexually oriented presses, university presses and organizations ranging from the American Management Association to the National School Boards Association have all either published books or research papers on the deadly disease, or are about to do so. While most are nonfiction books aimed at adults, some are aimed at younger readers, and there is a growing body of AIDS-related fiction.

What's more, the books have begun to sell. "A few months ago only a couple of AIDS books had notable sales," said Mary Lilia, a spokeswoman for B. Dalton. "Now we're suggesting

"Back then the publishing world didn't want to hear about a book on Vietnam, they were convinced nobody wanted to read it and it wouldn't sell," he said. "But publishers have responded quite well to this crisis. There may soon be as many books about AIDS as about cancer."

A recent survey by Publishers Weekly turned up more than 130 books and bibliographic references about AIDS, and more are on the way. But information about the medical, legal and political aspects of AIDS is accumulating so fast that publishers are scrambling to keep up. Some are rushing new books to print to avoid being obsolete the day of publication; others are revising and updating books published as recently as six months ago. Many publishers and authors are adding a chapter or afterword to books that were published before AIDS was identified.

In the latter category are the

by the book's timeliness, but also by the fact that this month Pantheon Books is publishing "Advice for Life: A Woman's Guide to AIDS Risks and Prevention," by Chris Norwood.

University Presses Jump In, Too

Even university presses are moving to benefit from the current inter-

Many authors are adding chapters to works published before the disease was identified.

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DAVID GONZALEZ
About New York

Looking Past Fear of AIDS To See a Child

MICHAEL had been in New York for about a month, but it was time to leave for the peaceful reaches of rural Virginia. He didn't touch the shiny aluminum trays of Chinese food laid out before him and his family like a real New York send-off. He cried like a baby at times, which is all right, since he is one. His parents, Wayne and Dianne, barely had time to eat. They took turns cradling him, stroking his soft face or playfully dangling a pacifier close to his tiny, grasping hands.

They had waited six years for this trip to the city. The couple had traveled from Virginia to adopt Michael, a baby born with the antibodies to the AIDS virus. When — or if — they'll ever return to the city of Michael's birth is uncertain. So, too, is whether or not the child is definitely H.I.V. positive or had only tested positive for his birth mother's antibodies, like three-quarters of such children. It might be two years before that question is answered.

His new parents accept that uncertainty. Wayne is a minister, and his faith partly explains his family's decision.

"Jesus says, 'Whatever you do for the least of these, you do for me,'" he said, speaking on condition that his surname not be used. He nodded toward the child. "This is the least."

He can relate to that feeling in his own life, when people thought his epileptic seizures were the signs of mental retardation.

"I know what it's like to grow up having something over your head," he said. "We all have something wrong with us in some way."

The New York Times

• Application

THE ATHLETE'S LOSING GAME

By Robert Lipsyte
New York Times (1923-Current file); Nov 30, 1986; ProQuest Historical Newspapers: The New York Times pg. 305

THE ATHLETE'S LOSING GAME

A great many elite athletes are totally unprepared to make the transition from a pampered and protected life as a pro player to the 9-to-5 world.

By Robert Lipsyte

THEY MAY BE BLOODY AND HURT A losing, down and out today on ice or wood turf. Yet the professionals of hockey, basketball and football feel fortunate and secure in their careers. They are on the team. They have deferred emotional and financial traumas of being "cut." They are on the team. They have deferred emotional and financial traumas of being "cut." For another season, they do not have to drop out of room of their parents' house and close the door with the final, and most wrenching, stage of blinds. They are on the team. They have deferred emotional and financial traumas of being "cut." For another season, they do not have to drop out of room of their parents' house and close the door with the final, and most wrenching, stage of blinds. She would not let family or friends in, elite athletic career — the transition to real life. "It's something you just don't want to even think about while you're still playing," she says.

David Meggyesy, a former pro linebacker, now the Western regional director of the National Football League Players Association. "It's a death experience."

There are physical, racial, geographic, economic, educational and social variances among hockey, baseball, basketball and football players that make their playing experiences a month transitional problems different. But every one of them must "go through a huge depression," Ms. Street said. "I went all the way to rock bottom. I never thought that I ever could experience such a low point in my life."

What sent her hurtling into a depression was the realization of how long and difficult her recovery would be. In the end, it took 20 months for her to crawl out of the protective cocoon of a team, drop feeling like a caged animal." Ms. Street from hero to zero overnight. These are the terms of the Faustian bargain the elite athlete makes with a society that gives him a very powerful athlete, to barely having any strength to get from my room to the kitchen. You're stuck and you can't do

Robert Lipsyte is the sports correspondent for NBC News.

Athletes' Injuries Go Beyond the Physical: Athletes' Injuries GO Beyond the Physical
TARKAN, LAURIE
New York Times (1923-Current file); Sep 26, 2000; ProQuest Historical Newspapers: The New York Times pg. F7

By LAURIE TARKAN

A month after badly breaking her left leg in a skiing crash in Switzerland, Pamela Street, the fearless, spunky media darling of the 1998 Nagano Olympics, shut herself in the bed-and-breakfast where she was staying and confronted the reality of her life. "I went through a huge depression," Ms. Street said. "I went all the way to rock bottom. I never thought that I ever could experience such a low point in my life."



Reuter

THE NEW YORK TIMES, SUNDAY, APRIL 23, 1989

VIEWS OF SPORT

What Happens When the Cheering Stops

By RICK WOLFF

ON this page are excerpts of two essays Jim Kass, the long-time baseball pitcher, examined the reasons why aging ballplayers find the prospect of retirement so uniformly depressing. What he found touched upon a number of reasons: money, pride, competitiveness, fear. There was one area, however, that was relatively unique: a dark side that can ripen the heart of every professional athlete's sense of identity: The painful process of watching one's body "die," and thus becoming an average citizen.

A person just like the rest of us mere mortals — it might not sound so bad. But for the professional athlete, who has spent his high school, collegiate and professional years being treated like royalty, it can be a very de-

athlete.

Is it fair to compare Kubler-Ross's therapeutic methods for the terminally ill with the process of retirement? Well, the simple fact is that, sadly, many former athletes just can't make the transition, and their sad stories make headlines. Take, for example, the careers of Larry Tyler, Bill Robinson, Larry Mickey — those are a few former pro athletes whose joints became so severe that they took to wheelchairs. Countless others have to find consolation with alcohol or drugs. For these

individuals, playing professional sports turned out to be a terminal illness of a kind. In the adapted Kubler-Ross model, the retreat from the game is the first phase of a period of six months that is marked by a series of roller-coaster confrontational emotions. The first phase, which immediately follows the initial shock, is denial. It is overt denial, as in: "I can't believe that my career is over. I know I can play for a least three or four more years."

The first phase is followed by anger.

The athlete, beginning to sense that his career really has come to an end, asks: "Why me? I'm still healthy, I'm still young, I'm still in the league, and they still got jobs!" Venting this anger and confronting it is essential for one's sense of inner progress, so the next phase begins to share one of basic human nature: the desire to start being somewhat philosophical about his career in sports, as in: "You can't help it if fun for me to lose doesn't what I love. I guess I should stop being so selfish and get rid of this self-pity."

But just as the individual might feel a sense of relief, the next phase can quickly sour into depression. This is the phase in which the athlete is really most vulnerable; this is the point at which the athlete finally has to come to grips with the reality that his active athletic career is finally over.

For a lot of retired athletes, it's 'Hey, didn't ya used to be?'

There are no more games. No more road trips. No more reaching for one's potential in uniform.

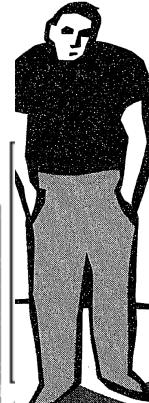
Only after this stage has been lived through — and this newly minted average citizen — can the individual finally reach acceptance. This, of course, represents the light at the end of the tunnel for the former pro, and the hope is that he will now have a new and cold perspective.

Sadly, with most professional clubs, no matter what the sport, the concern about the future of the athlete and his career after he is over is not high on the priority list. Some clubs do offer career counseling, but choosing a new job is merely taking care of a problem and not solving it. That is the crux of the matter. Help should start when the athlete first signs a professional contract; it's at that point that the counseling should begin, regardless of how little the athlete knows about sports. It's time for professional clubs to really investigate this situation.

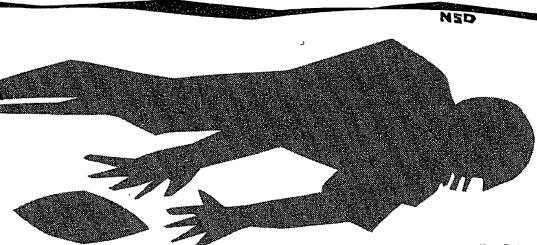
Pai Riley, a Los Angeles Lakers' coach, summed up the entire transitional process when he talked about his own National Basketball Association playing career coming to an end.

"That first year of retirement was a year of mourning," he said. "A year of reflection and grieving. I'd spend my whole life with my head buried in the sand. And when it was gone, there was a terrible, aching hollow within me."

In Riley's one of the lucky ones. He made it through that first year of retirement and, although he has remained in the game, he moved on. But for a lot of other retired athletes, it's still a case of: "Hey, didn't ya used to be...?"



NSD



Nancy Domaner

The New York Times

- Application

Journal

FRANK RICH

Death Be Not Proud

Everyone knows about Elisabeth Kübler-Ross's five stages of dying — denial, anger, bargaining, depression and acceptance. Far less known is the fact that those five stages are preceded by the five parallel stages of reading the obituary page of the newspaper.

Denial: You are so young and unmarked by life that you read the obituaries only occasionally, to learn

The Five Stages of Weathering

New York Times (1923-Current file); Feb 5, 1994; ProQuest Historical Newspapers: The New York Times pg. 20

The Five Stages of Weathering

It was while she was standing in line at a token booth on Monday, toe-deep in a big puddle, that a New Yorker realized she had reached the psychiatrist Elisabeth Kübler-Ross's fifth stage. Dr. Kübler-Ross, however, was talking death. The New Yorker was talking weather.

First, in early January, came denial. Thirty hours of snow, sleet, freezing rain and a *souçon* of hail were an aberration, a blip in the great scheme of things. Besides, all that ice left the city looking slick and shiny.

Slick? Hah! After eight days of slipping, sliding, teetering and tottering, the New Yorker raised an angry fist toward the sky. Promptly, the sky spat back.

Bargaining came on the ninth day. If I give my

boots a vacation from my feet and wear my new shoes today instead, she asked, will you promise not to dump any more snow until tonight? Fat chance — and soaked suede.

Depression was inevitable, deepened by the sheer arbitrariness of events. Who would have predicted that something that looked mighty like a blizzard last week would be followed, 24 hours later, by something that looked mighty like a monsoon?

Now, though, the fifth stage — acceptance — has arrived. It arrived at the moment a subway maintenance man showed up to scoop up the puddle (the size of a small millpond) with a large paper cup. She laughed. He laughed. Every sodden-footed soul in that whole long line laughed.

It was either that, or cry.

The New York Times

• Application

At the Bar

Andrea Higbie

For many, the most frightening part of the Simpson trial will come when it is over.

Hard as it may be to believe, the O. J. Simpson trial will one day come to an end. And that, psychologists say, will leave a nation of befuddled people who suddenly have a void in their lives and time on their hands.

"It will be even worse for a lot of people," said Dr. Joseph Gerstein, the president of Smart Recovery Self-Help Network, a nationwide nonprofit organization based in Wilmot Hills, Ohio, which supports self-help groups. "They've become obsessed, and they'll face an awful emptiness in their lives."

Since the killing of Nicole Brown Simpson and Ronald L. Goldman on June 12, 1994, the case has saturated the news. For more than a year, the nation has been alternately saddened, fascinated, repulsed and, yes, sometimes bored by the twists and tangles in a trial that has been called the most sensationalistic of the century.

For thousands, possibly millions, of people, the Simpson trial has become the drug of choice.

"What's addictive is that it's exciting and it gets you out of the doldrums of day-to-day life," said Dr.

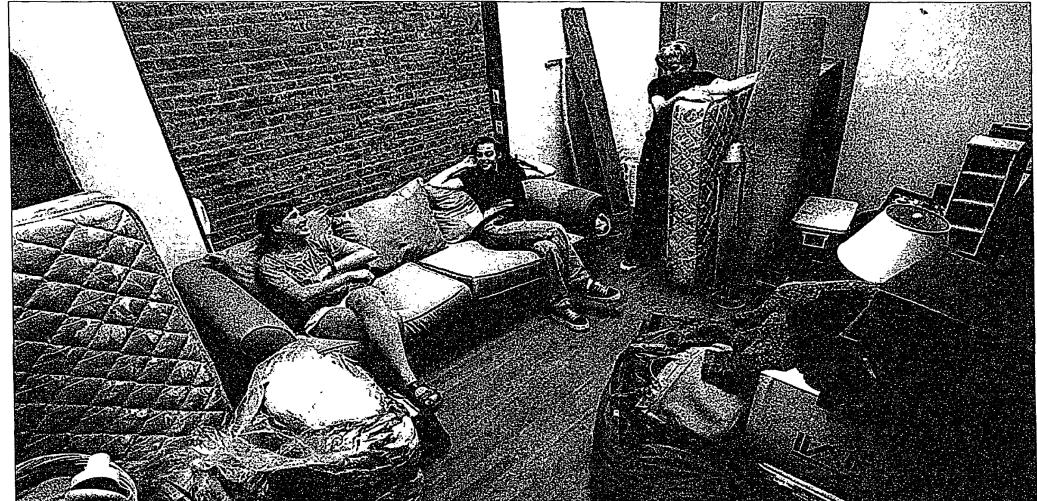
withdraw suddenly will experience the opposite of what they feel when they are under the influence. Instead of feeling aroused, relaxed and swept away by fantasy, they feel depressed, nervous and empty.

These experts prescribe a "gradual schedule of detoxification," a weaning process that takes advantage of reruns of the trial's highlights along with published reminiscences and scholarly assessments of the case.

"In the end," Dr. Gerstein said, "there will be televised rehashing, which they'll watch, so it won't be a sudden withdrawal. Instead, it will be analogous to withdrawing under medical supervision with drugs."

Simpson addicts should not be surprised if they experience the five stages of grief outlined by Elisabeth Kubler-Ross in her landmark work on loss. The first stage is denial. ("The trial's not going to end, ever.") The second stage, anger. ("It had better not end now.") In the third stage, bargaining. ("Just five more witnesses and I'll stop thinking about this trial. I promise.") Then, depression. ("Life without Simpson

In 'Rent' 1998, the Renters Sing the Blues



Dith Pran/The New York Times

Throughout the city the prices keep on rising, and there's not a lot available.

By DENNIS HEVESI

C LARK HALSTEAD, founder of the real estate brokerage that bears his name, sees a certain similarity between the current quest for a rental apartment in New York City and the five stages of death and dying so poignantly delineated in Elisabeth Kubler-Ross's classic 1969 book on the subject:

Denial.
Anger.
Bargaining.
Depression.

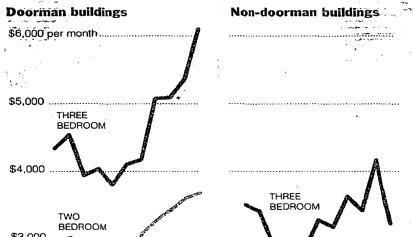
And, ultimately, acceptance.
At first, it's denied denial to the merchantable agent and the price levels," Mr. Halstead said. "Eventually, it reaches the final stage: quiet resignation — you've accepted all this bad news and are quietly trying to deal with it."



Top: Elizabeth Eaton (left) Molly Brady and Lauren Wimmer in four-bedroom TriBeCa loft they and a fourth roommate rented for \$3,600 a month. Above: Christopher Thomas showing Brooklyn Heights apartment to Jessica Siena, who was "shocked"

In Prime Parts of Manhattan, Prime Prices

Monthly rentals of doorman and non-doorman apartments between 60th and 96th Streets.



The New York Times

• Application

Ground Zero Or Bust
Rich Frank
New York Times (1923-Current file); Jul 15, 2003; ProQuest Historical
ARTICLES

FRANK RICH

Ground Zero Or Bust

HOW brief is the shelf life of ele-
phant art in our culture? It's not even a decade.
Four years ago that New York
lew into a frenzy over Rudolph Giuliani's
short-lived effort to shut down the Brooklyn
museum's Art for Living Christ's
dismantled armature of the Holy Vir-
gin Mary." Last week dung returned for an
encore, ceremonially clumped on a portrait of
the former mayor himself that appears in
a new show at the Whitney Museum. The
show, which will have a short run, by the
Shanghai-born artist Zhou Tiehai, on
Page 1 ("New Rudy Art Flip"), the local
television newscasters duly cluck-clucked
and no one cared. Even Mr. Giuliani did
it with a smile. "When I'm really not an
art critic," he said, "if it was an opera, I'd
be able to comment on it."

Mr. Giuliani's reaction confirms the pass-
ing of art. In particular, New York, and the
first post-September 11th generation of por-
nography and blasphemy that drew blood.
The new culture wars often spring from 9/11
itself, starting with the future, aesthetic and
political of ground zero. As Mr. Giuliani
set to take in the rest of the Whitney exhibit, he
might yet be moved to take up art criticism
again. Its more incendiary works rise above
dung, in provocation if not always in merit,
to mark the terrorist's attack and its after-
math head-on.

The show, called "The American Effect,"
is a roundup of how artists around the world
have viewed the United States since 1990. It
may not be the best show in New York, but it
and Karl Rove's favorite Bush antecedent,
William McKinley, are evoked as impe-
rialistic icons. But even the works that pre-
dicted 9/11 can bleed into the here and now.
The Japanese artist Tadashi Ando's 1990
"Picture of an Air Raid on New York City"

Continued on Page 4

Priests From 60's Fear Vatican II Legacy Is Lost

Continued From Page 1

housing and street lights in Browns-
ville and Bushwick, Brooklyn

The dismay is not limited to New
York, and does not arise only from
the return to traditionalism embrac-
ed by incoming priests. Rather,
older priests see their bedrock be-
liefs doubted by the Vatican itself.
While Pope John Paul II has spoken
out loudly and often in support of
human rights, he has also steadily
held the line on innovations begun by
the Second Vatican Council, and has
selected cardinals from among his
most conservative priests. The uneasiness of the Vatican II priests
grew in recent weeks as the beatifi-
cation of Pope Pius IX, who ordered
Jews confined to Rome's ghetto and
had a Jewish child abducted to be
raised as a Catholic, advanced in
step with that of John XXIII, father
of Vatican II.

The council, which met from 1962
to 1965, ushered in a raft of changes
aimed at making the Catholic Church
more accessible to the faithful and
more attuned to secular life. Its 16 documents gave lay people a
role in running parishes, replaced the
Latin used at Mass with neighbor-
hood languages, and gave priests
a voice in church matters. Vatican II
identified social justice as an integral
part of the church's mission and
reversed the church's age-old insistence
that Jews were responsible for
the death of Jesus. It said Catholicism
did not represent the only path
to salvation, a groundbreaking state-
ment that the Vatican has publicly
started to reconsider in recent
weeks.

In a 1995 article, Dr. Hoge predict-
ed a priesthood that would seem like
a professional class and would be
"smaller in numbers, more conserva-
tive in ecclesiology, more pres-
sured by leadership responsibili-
ties."

In his 1987 book, "Dreaming About
the Church" (Sheed & Ward), the
Rev. Walbert Buhlmann, the former
secretary general of Capuchin mis-
sions in Rome, wrote that Vatican II
once seemed "to trace out a whole
new future for the church."

"Why hasn't the promise been
kept?" Father Buhlmann asked.

cessor he expects after he retires. "It
seems that we are now coming to a
period of more uniformity, less crea-
tivity and less space for personal
preferences," said the archbishop
whose letter was obtained and pub-
lished by the National Catholic Re-
porter, a lay weekly.

The archbishop suggested that the
retrenchment answered the yearnings
of Catholics today. "The younger
generation needs more structures,
clarity and guidance," he wrote.
"For those who put their heart and
total energy into the implementation
of Vatican Council II, this new period
might seem sterile and empty. I hope
and pray not."

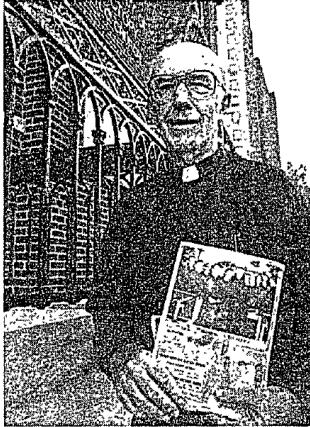
Under the church's retirement
system, priests are permitted to re-
tire at 75 with full benefits, and to
leave at 70 for reasons of poor health
and stay after 75 to meet emergency
staffing needs.

According to periodic nationwide
surveys of thousands of priests by
Dean R. Hoge, a professor at Catho-
lic University in Washington work-
ing at the National Opinion Research
Center in Chicago, since the 1980's
the priesthood has grown increasingly
conservative on theological ques-
tions like celibacy in the priesthood
and the ordination of women. Dr.
Hoge's research shows that the
youngest and oldest priests share
similar views, while the generation
of Vatican II stands isolated between
them.

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Sister Katarina Schuth, a sociolo-
gist at St. Paul Seminary School of
Divinity in Minnesota who surveyed
faculty members and students at 42
seminaries last year, found impor-
tant differences between today's
seminarians and those of earlier
years. Nearly half the schools' 2,300
students had converted from another

Now, priests trained in political
advocacy tool largely behind the



The Rev. Peter Gavigan, left, ordained in 1965: "For us, of our generation, there's a real sadness." He added, "We thought it would be a golden age by now" Msgr. Harry J. Byrne, center, now retired: "The



newer priests don't want to work in the inner cities. They like nice clean white cuffs, pressed surplices." Msgr. Thomas Leonard remembered how Vatican II orders made the Mass more accessible to parishioners.



"In our desire to extend the mean-
ing of the sacred, did we end up with
a situation in which nothing is sa-
cred?" asked Monsignor Murnion,
who heads the National Pastoral Life
Center in New York, a research fa-
cility for the Catholic Church. Today,
he said, redemption is what happens
to food stamps, and Madonna is a
rock star.

Because their numbers are so few,
Msgr. Vincent Fullam, rector of the
Seminary of the Immaculate Con-
ception in Huntington, N.Y., consid-
ers men who choose the priesthood
these days "heroic, or the next thing
to it."

And Sister Schuth said her study
had found that "the majority of sem-
inarians see their role as very much
spiritual, celebrating the Eucharist,
praying with people, administering
the sacraments." When this genera-
tion talks about straightening out the
world, she added, it means bringing
Catholics who are "off base" into
line.

Father Gavigan compares his dis-
appointment to Elizabeth Kubler-
Ross's five stages of grief, and finds
comfort in his work with lay Catho-
lics and in organizing his commu-
nity. Others say they find solace in modest victories and in faith.

**'Social action' and
'reform' are words
used by priests
from another era.**

sway

"The newer priests don't want to
work in the inner cities," Monsignor

The New York Times

• Application

ESSAY Elizabeth Royte

Publish and Perish

FOR any writer, the publication of a book, labored over for years, is an exciting event. But excitement is a fleeting emotion, and the business of publicizing the book, so that it sells and the author can earn out his advance, quickly displaces any initial euphoria. The writer then embarks on a tortured journey toward acceptance of the fact, several months after publication, that his book isn't going to vault him into the empyrean of fame, or even improve his life. At the intersection of Elisabeth Kubler-Ross's stages of grief and Stendhal's stages of love, the contemporary author trudges along a predictable path that can only be described, in hindsight, as self-induced misery.

● Honey, by the publicists don't call you 10 years work

BY PAUL B. BROWN

I HAVEN'T a clue what kind of psychologist Elisabeth Kubler-Ross was. But I do know she was a terrific writer. Kubler-Ross, who died in 2001, is best known for identifying the five stages of grief that people go through over the loss of a loved one. And those stages — denial, anger, bargaining, depression and acceptance — read recently, according to Fidelity Investments, my wife, Alison, and I will need to save eight times our current annual income to come even close to having

But, unfortunately, countless people have lived that multiple, or even more challenging ones, as a retirement savings plan. What's the point? What's the payoff?

ANGST "Those financial plans haven't a clue what things cost in the real world! We had four kids to put through college, and we live there is our home, an 1870 farmhouse that should require someone with a local electrician, plumber and carpenter. And do you know what we are paying right now? It's been enough when I read recently that, according to Fidelity Investments, my wife, Alison, and I will need to save eight times our current annual income to come even close to hav-

By PAUL B. BROWN

BARGAINING O.K. We'll need eight times our income. Well, I'd round up to 8, right? So maybe we can get away with 7.5? That would mean putting in 60 hours a week until I'm 83. Beyond generating more money, that would cut down on my retirement time. But then I probably won't be able to log, to work. Who the heck will hire me when I am 83? What about my wife? She's got a decent rent income in half? That would make the 7.5 times figure even worse. Although I am not quite sure how we would pay the mortgage. Or we could"

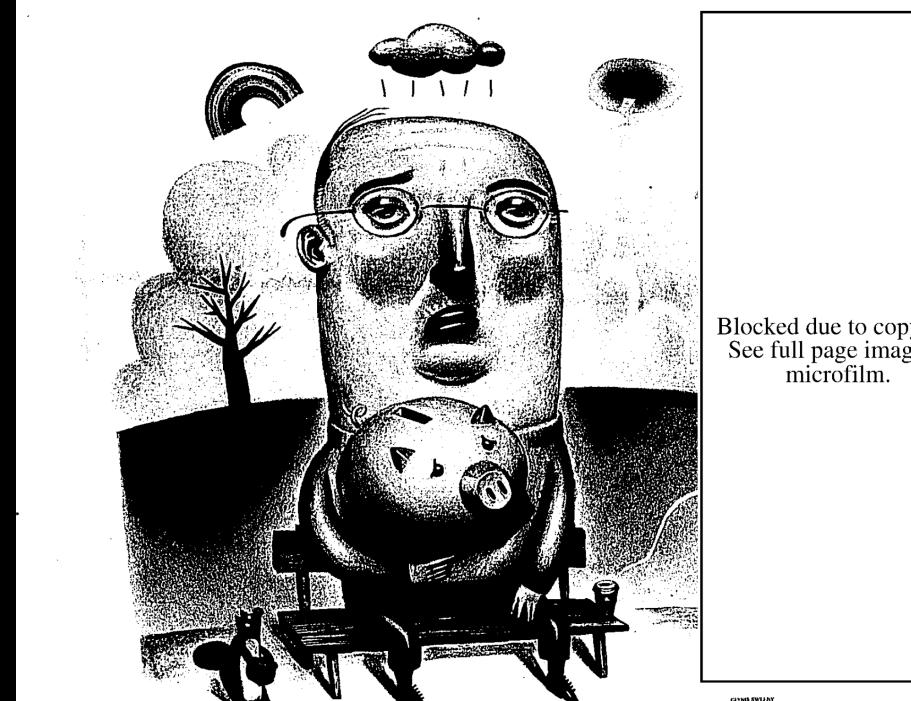
My nest egg is what it is, and I'm finally O.K. with that.

place to swallow. My attention span is too short. And so, in a surprisingly short amount of time, I broke through to the other side of the fence.

ACCEPTANCE "Well, focus on facts. We are not going to have eight times our current income packed away when we die. Bring it up to 7.5. That's fine, either. But do you know what? To quote that great sage William Stephen Bell, 'If you're otherwise down as far as the eye can see, you might as well go to Social Security; we will make do.' I am at peace with it. Effective today, I am not going to spend hours agonizing over whether we should do this or that. I am going to make one decision -- with a lot of help from our accountants -- and let it go."

WHAT have I accomplished by going through these five

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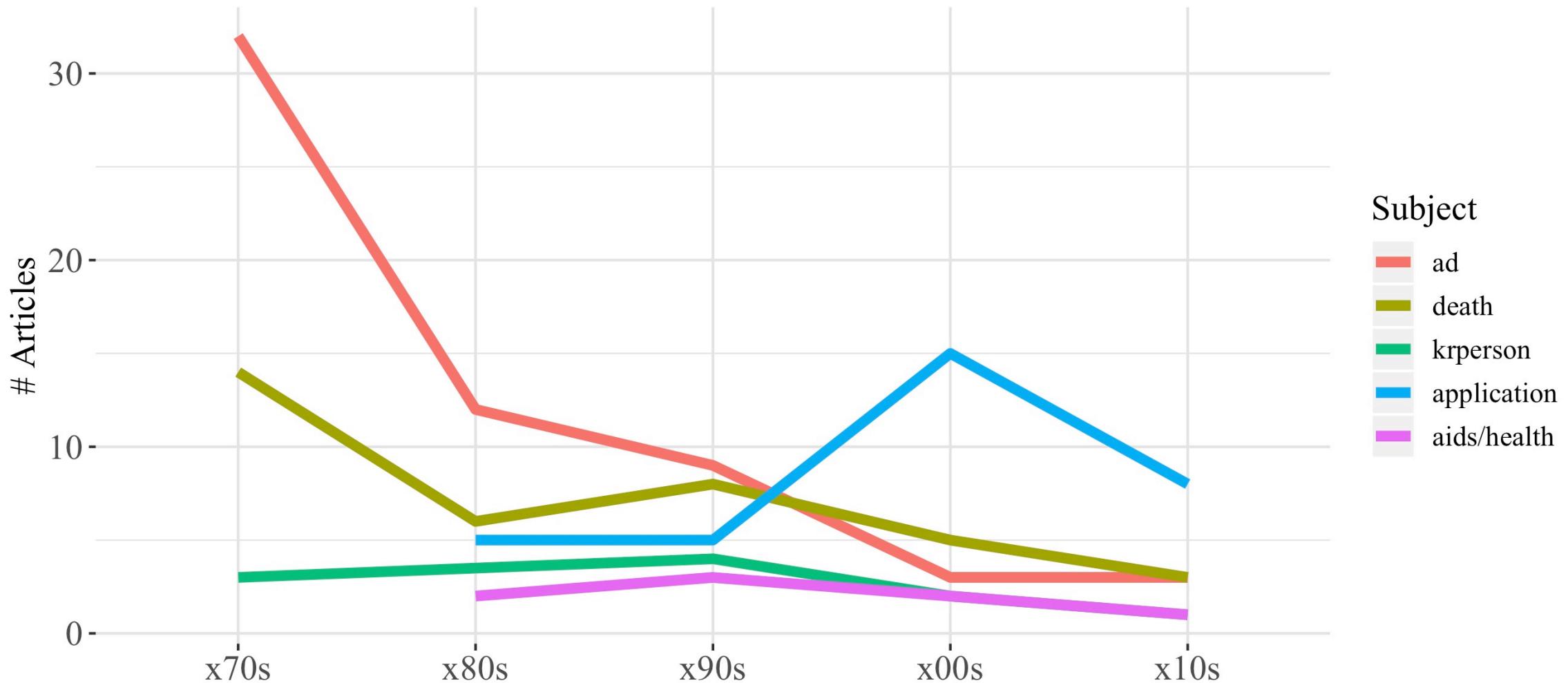


The Five Stages of Retirement Planning Angst

place, frayed wiring and all. And the saying is on target: Happy wife, happy life. Given all this, I am going to be O.K. with whatever we have to do with it when we retire. If we remain diligent, it looks as if we will have about six times our current income available from Social Security; we will make do. I am at peace with it. Effective today, I am not going to spend hours agonizing over whether we should do this or that. I am going to make one decision -- with a lot of help from our accountants -- and let it go."

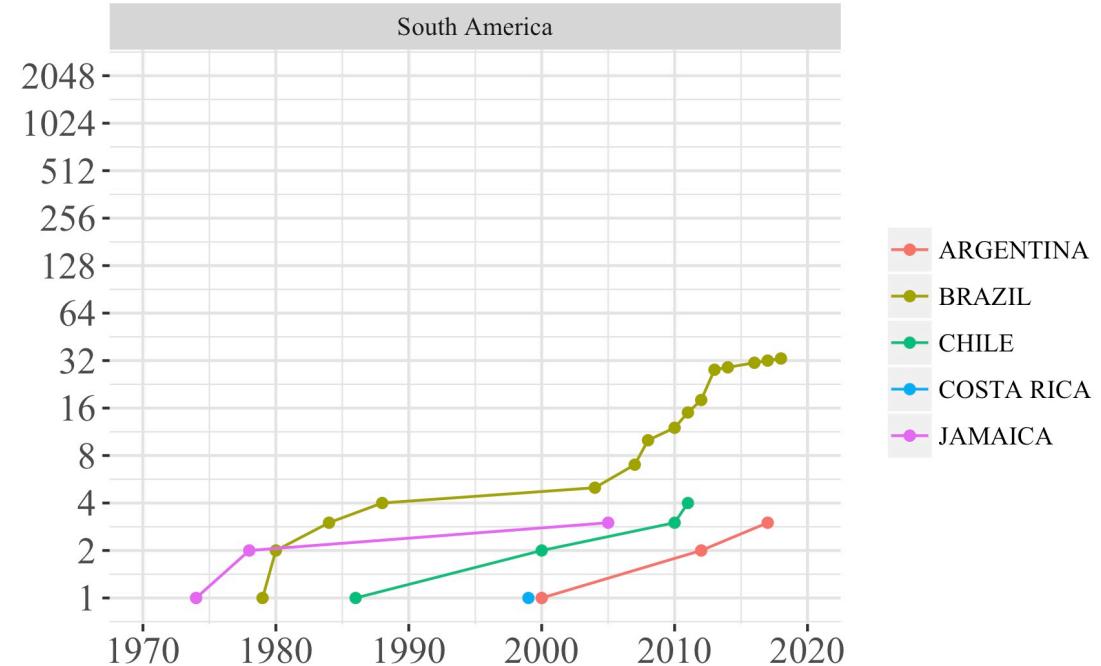
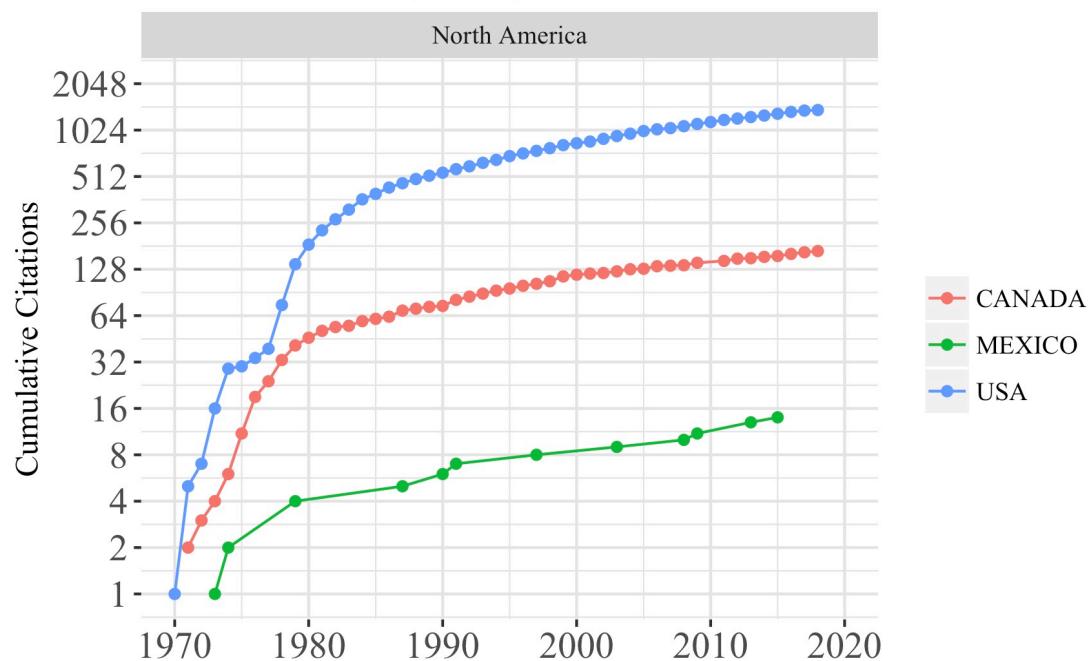
"And there are some advantages in the fact that we're going to fall short. For one thing, I don't have to agonize every day whether our retirement ac-

'Kubler-Ross' Mentions in New York Times 1969 - 2014



Data: Proquest Historical Newspapers (N = 151)
John A. Bernau 2018 // www.johnabernau.com

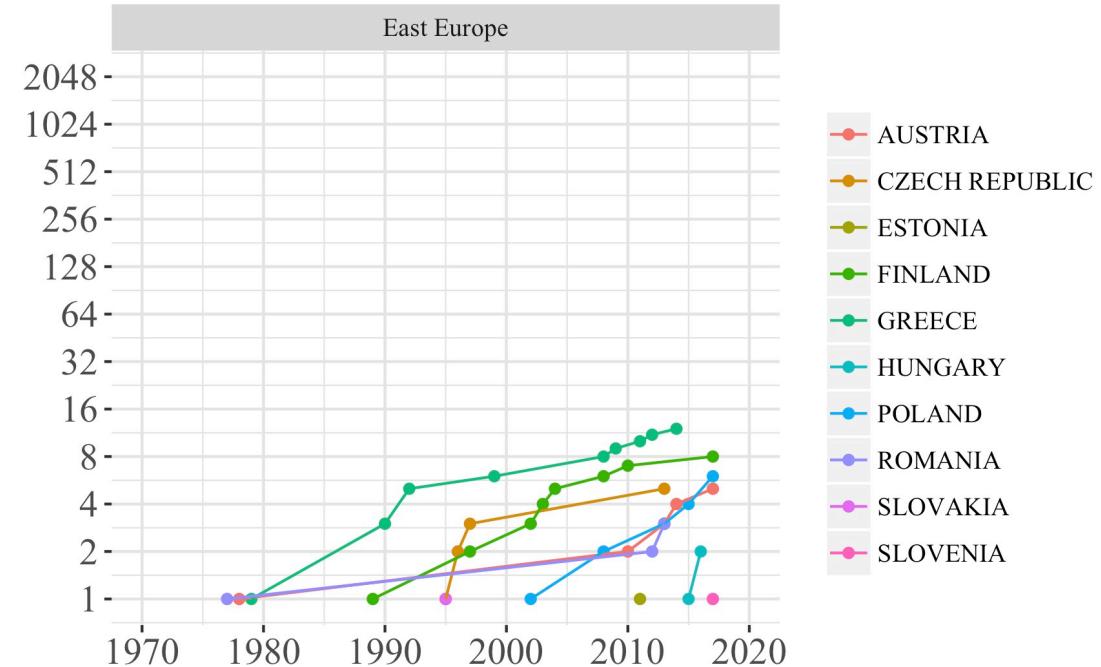
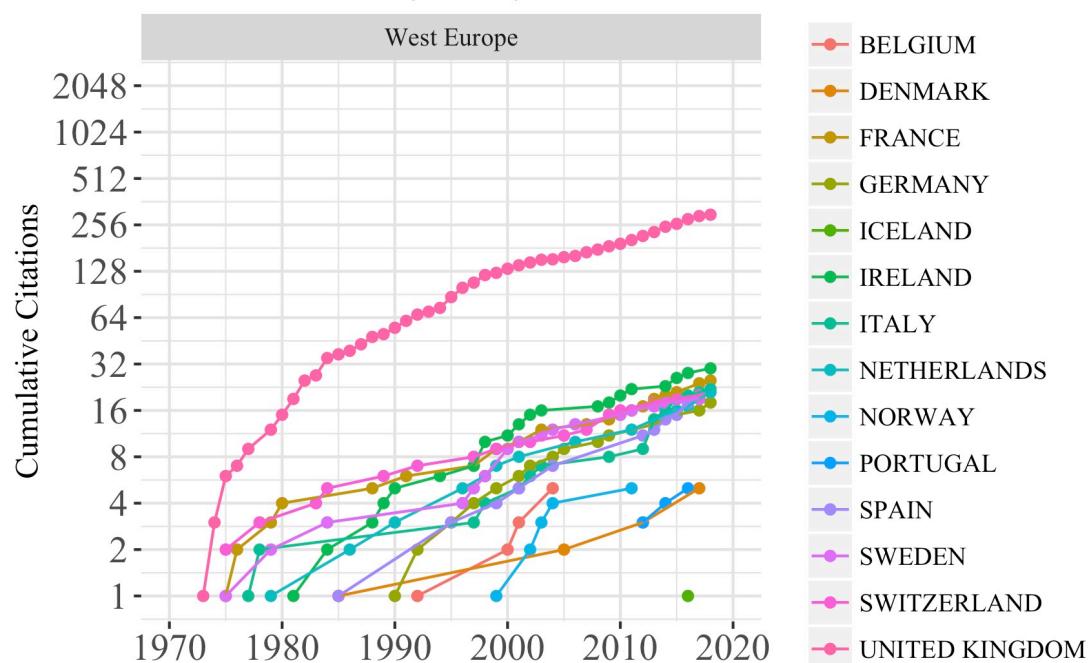
"On Death & Dying" by Elizabeth Kübler-Ross
Cumulative Citations by Country 1969-2018



Data: Web of Science Cited Reference Search 2018-06-29

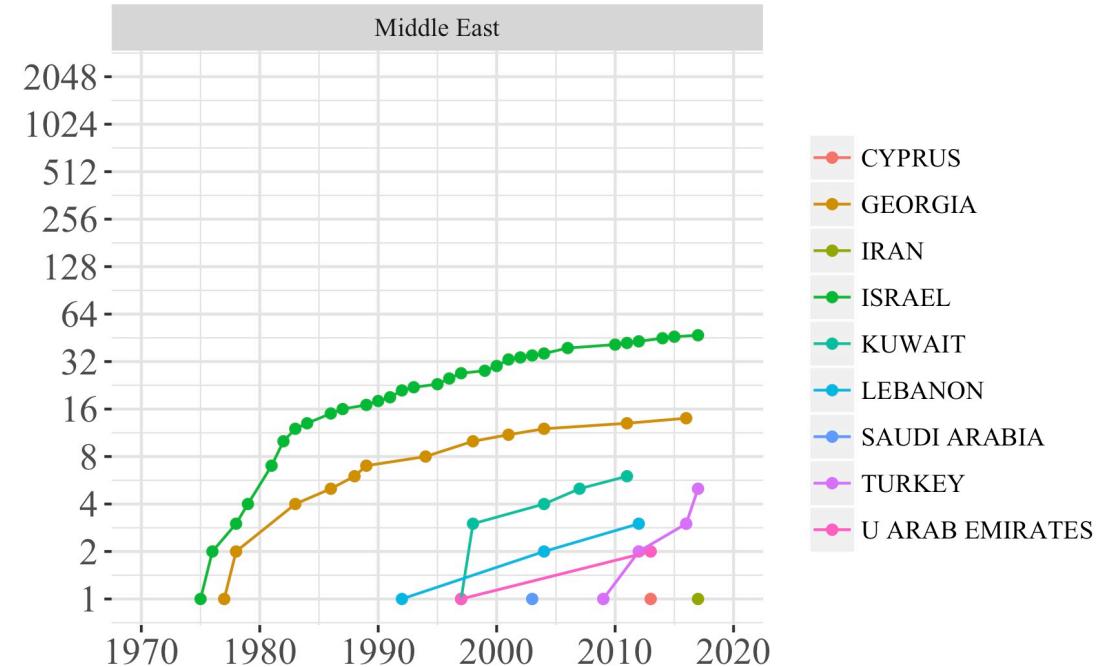
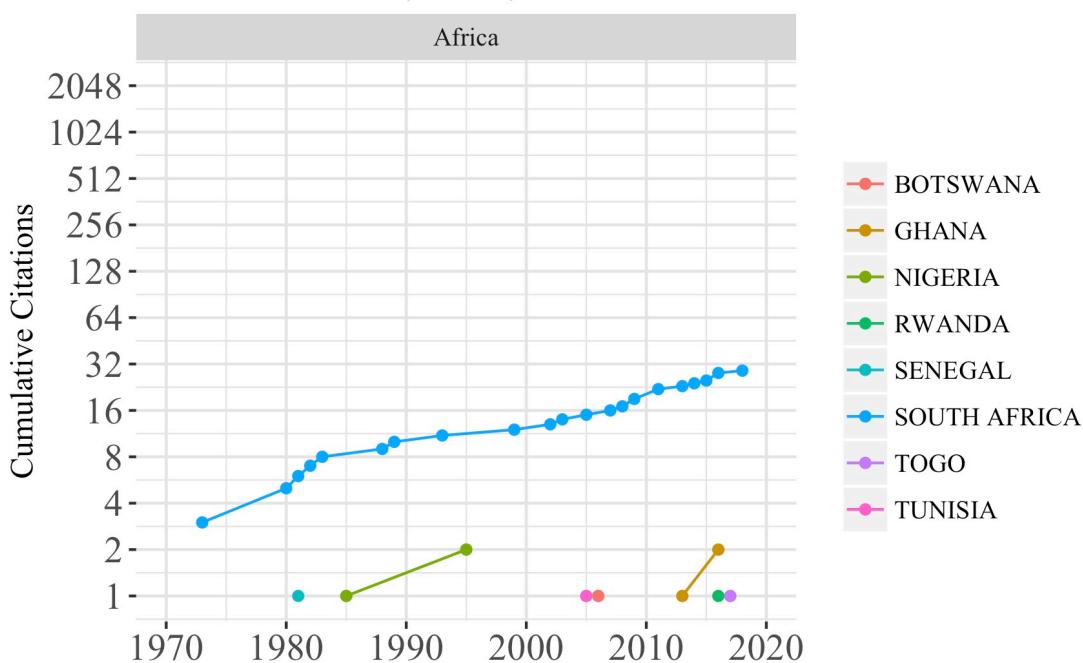
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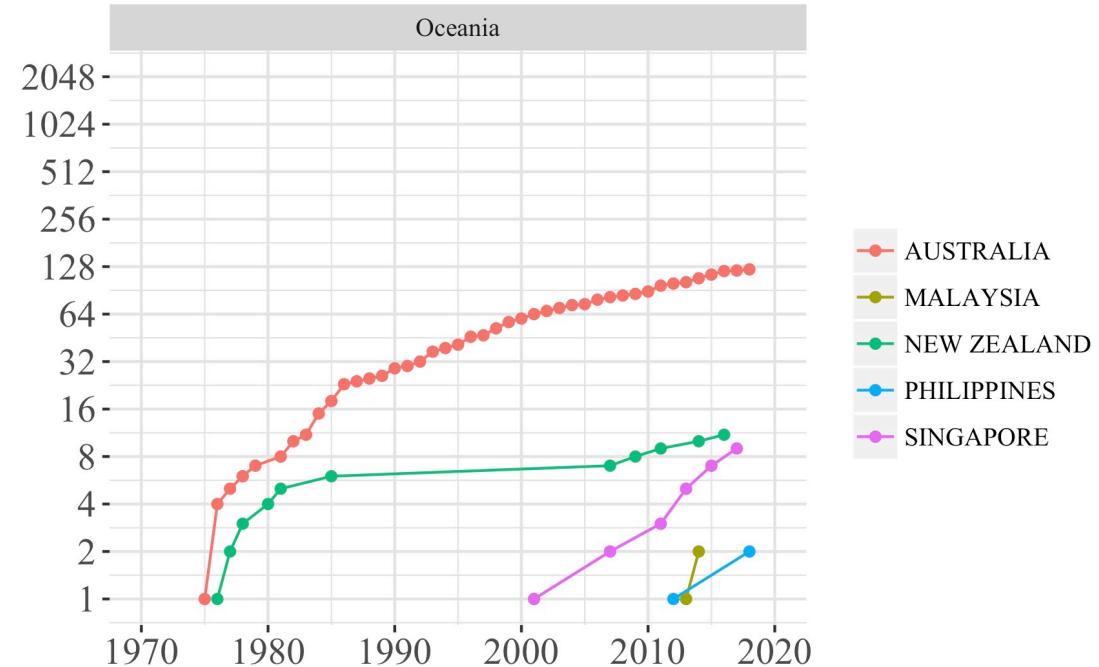
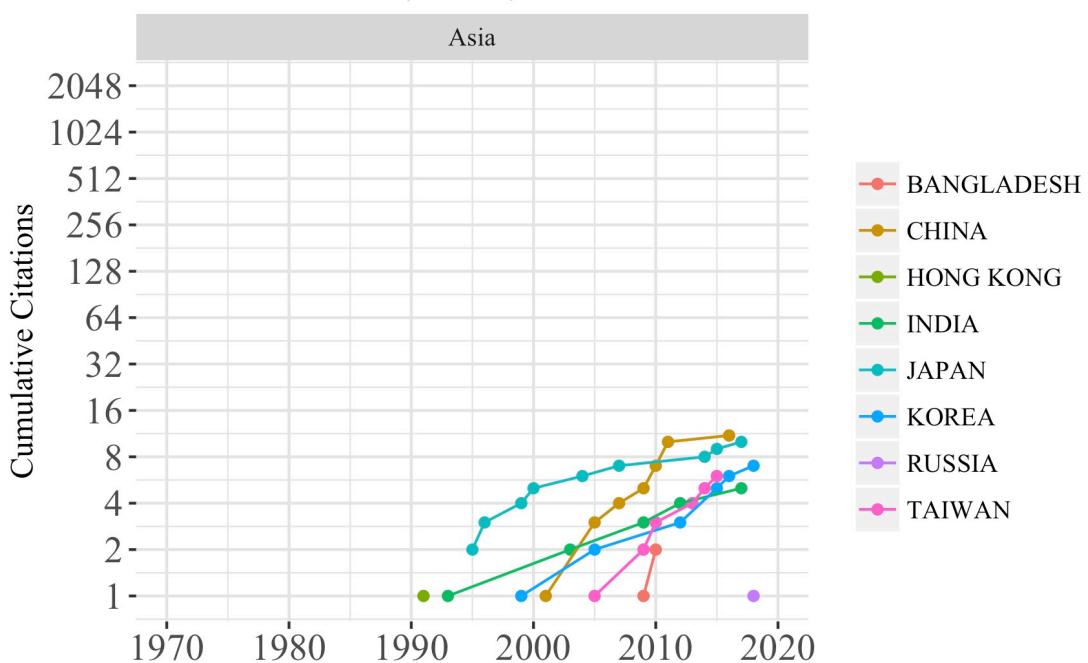
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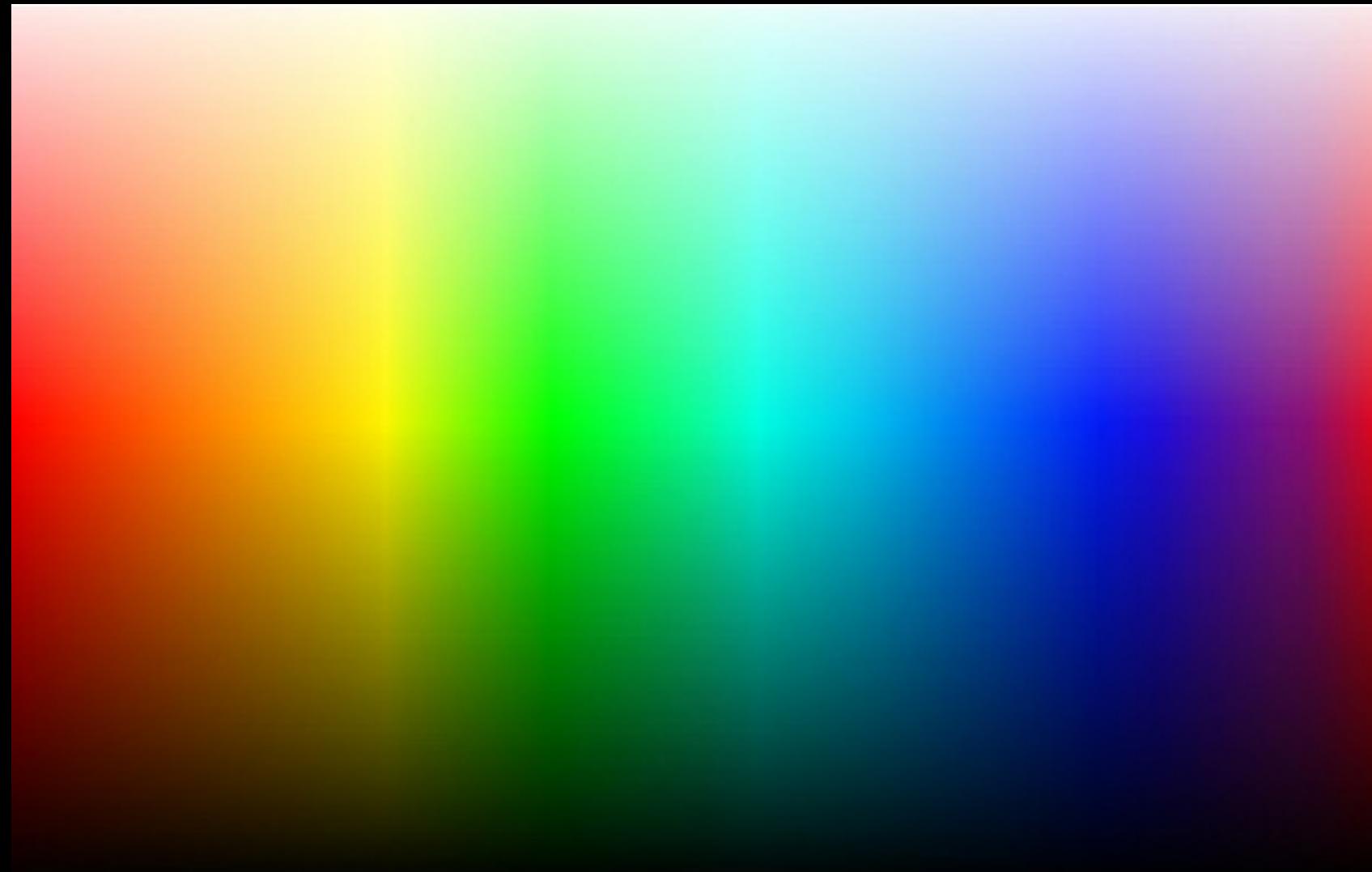


Corpus Coverage Weighting (CCW)

$$CCW_K = (1N_{10} + 2N_{20} + 3N_{30} + 4N_{40} + 5N_{50} + 6N_{60})_K$$

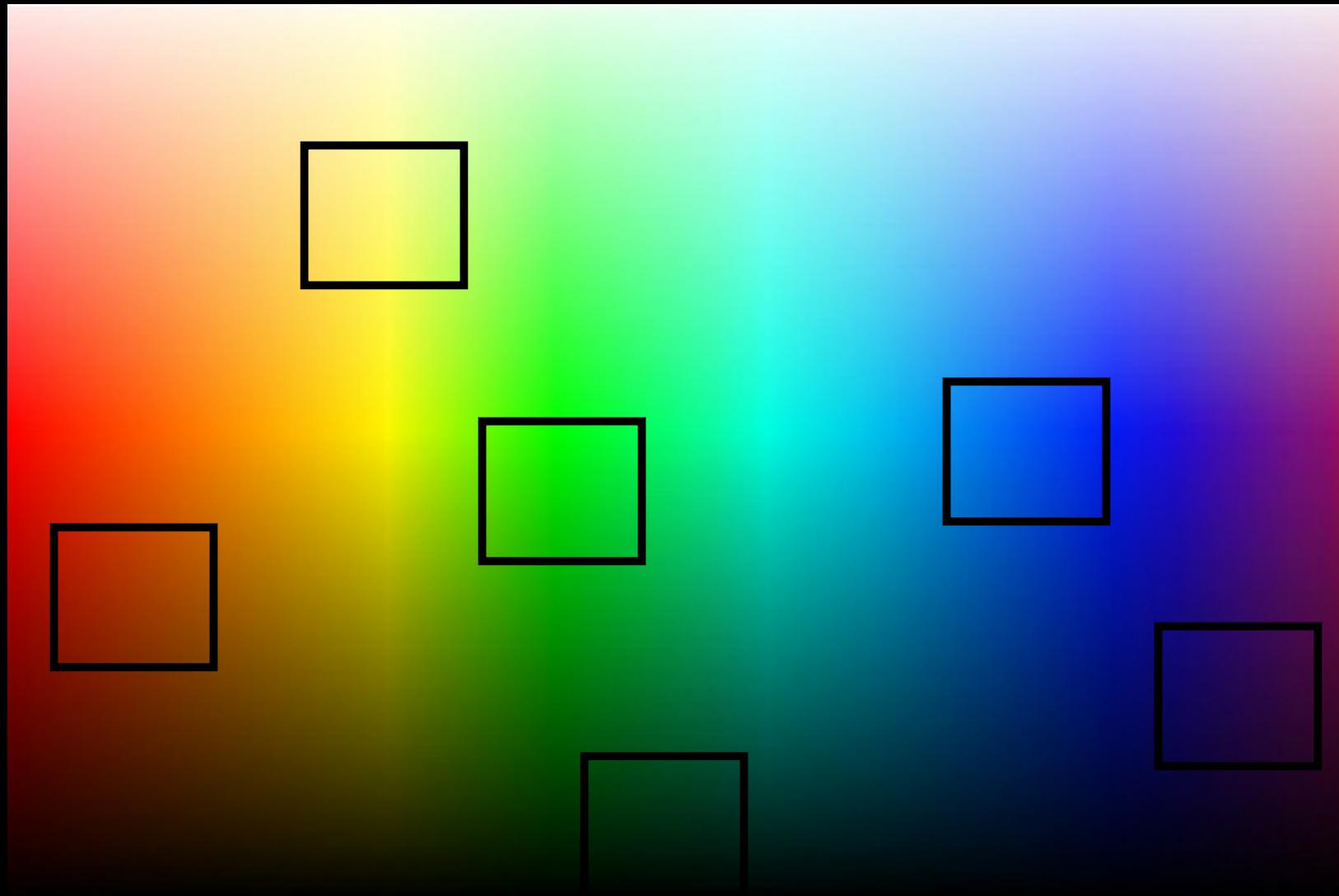
Topic Modeling: A Conceptual Example

- A universe of language...



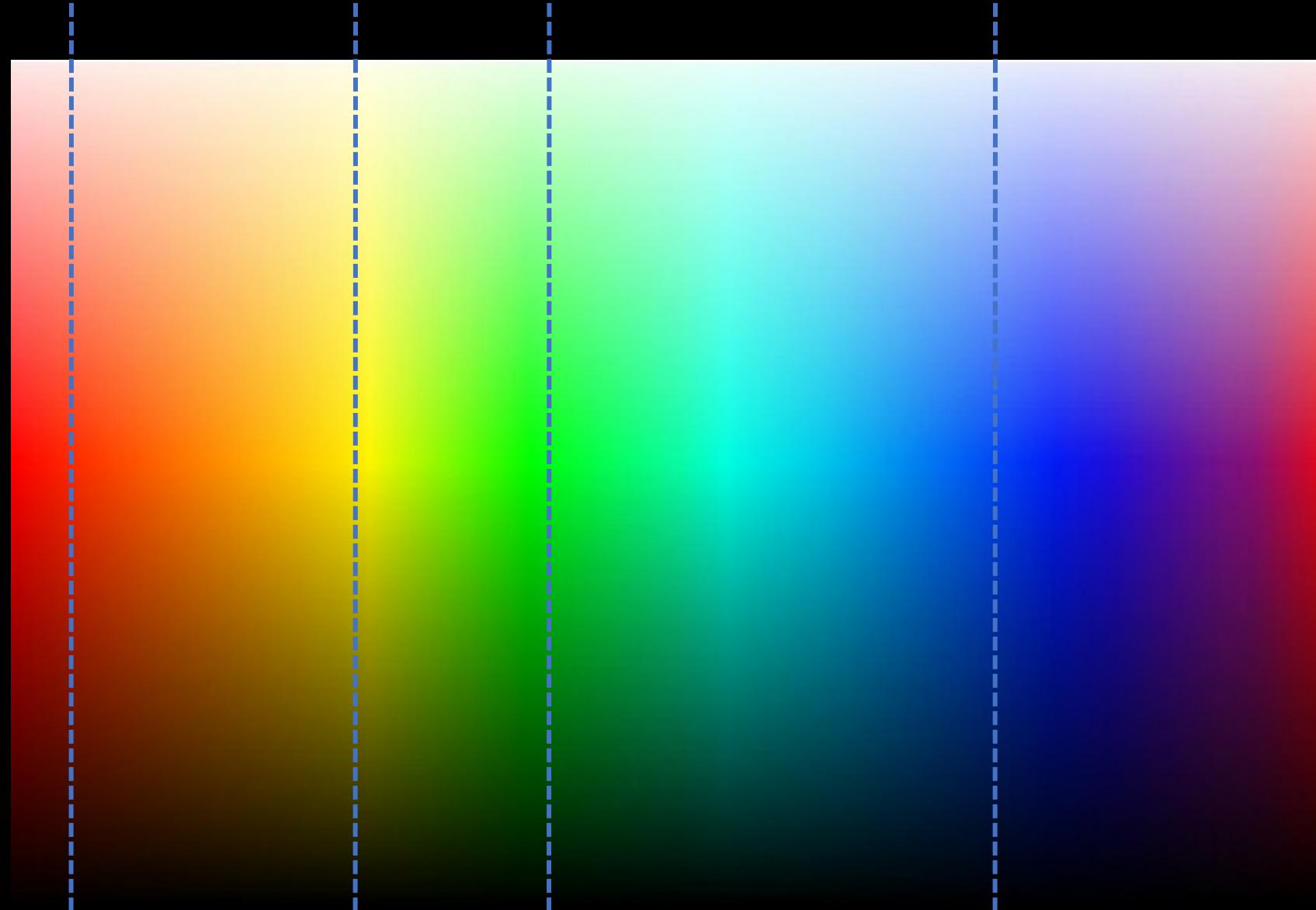
Topic Modeling: A Conceptual Example

- A universe of language...
- With n documents



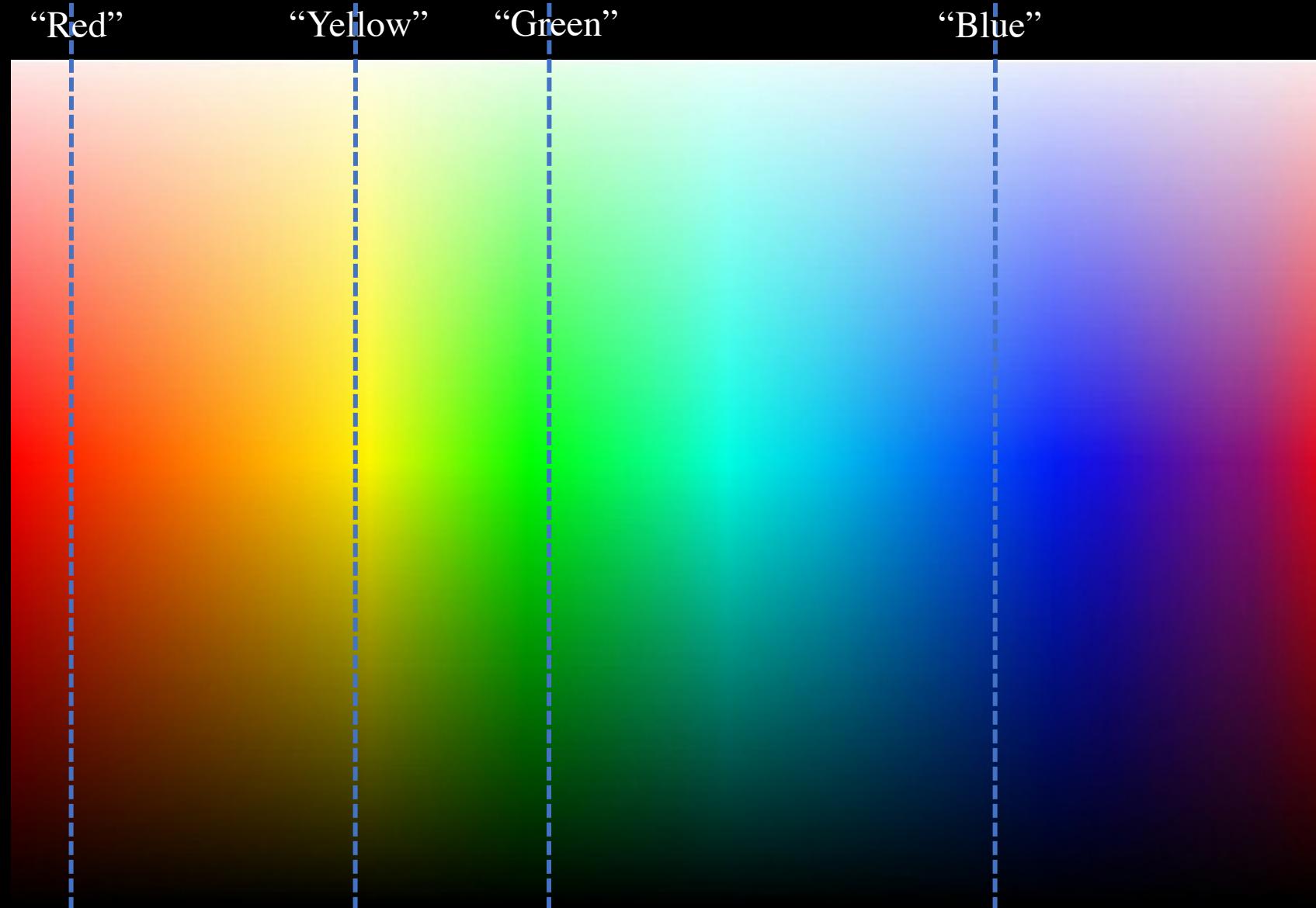
Topic Modeling: A Conceptual Example

- A universe of language...
- With n documents
- First, identify k latent word dimensions (topics)



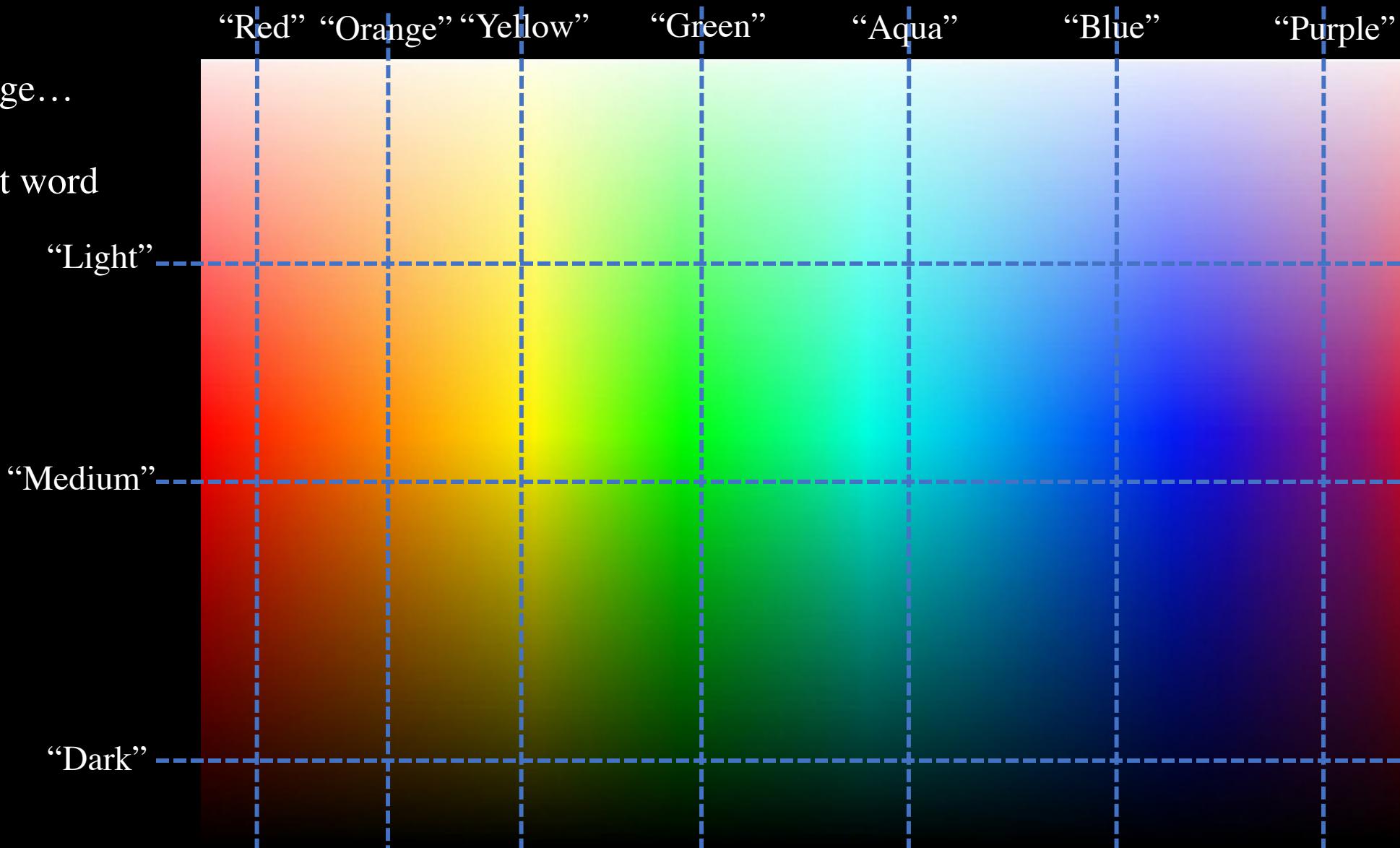
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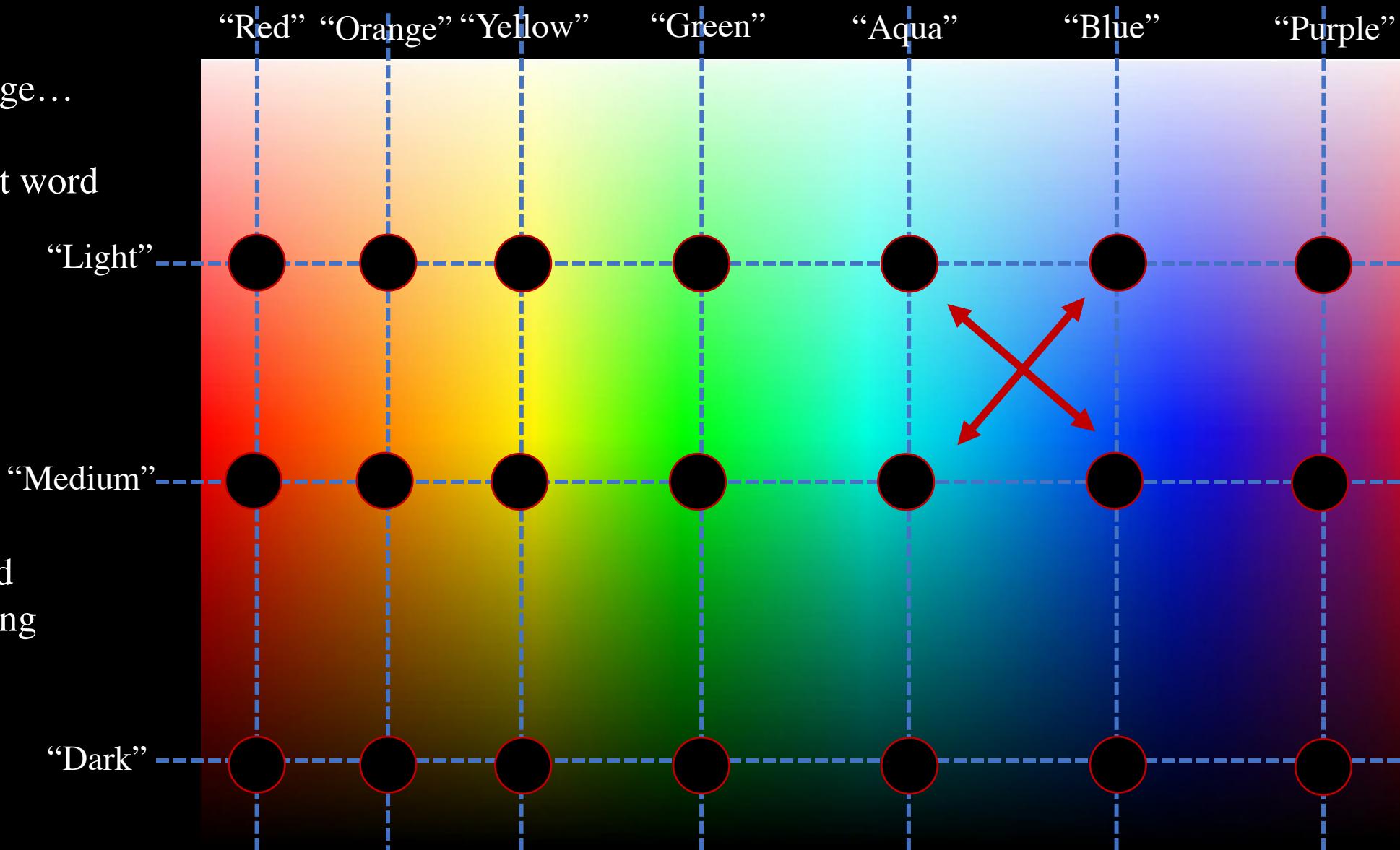
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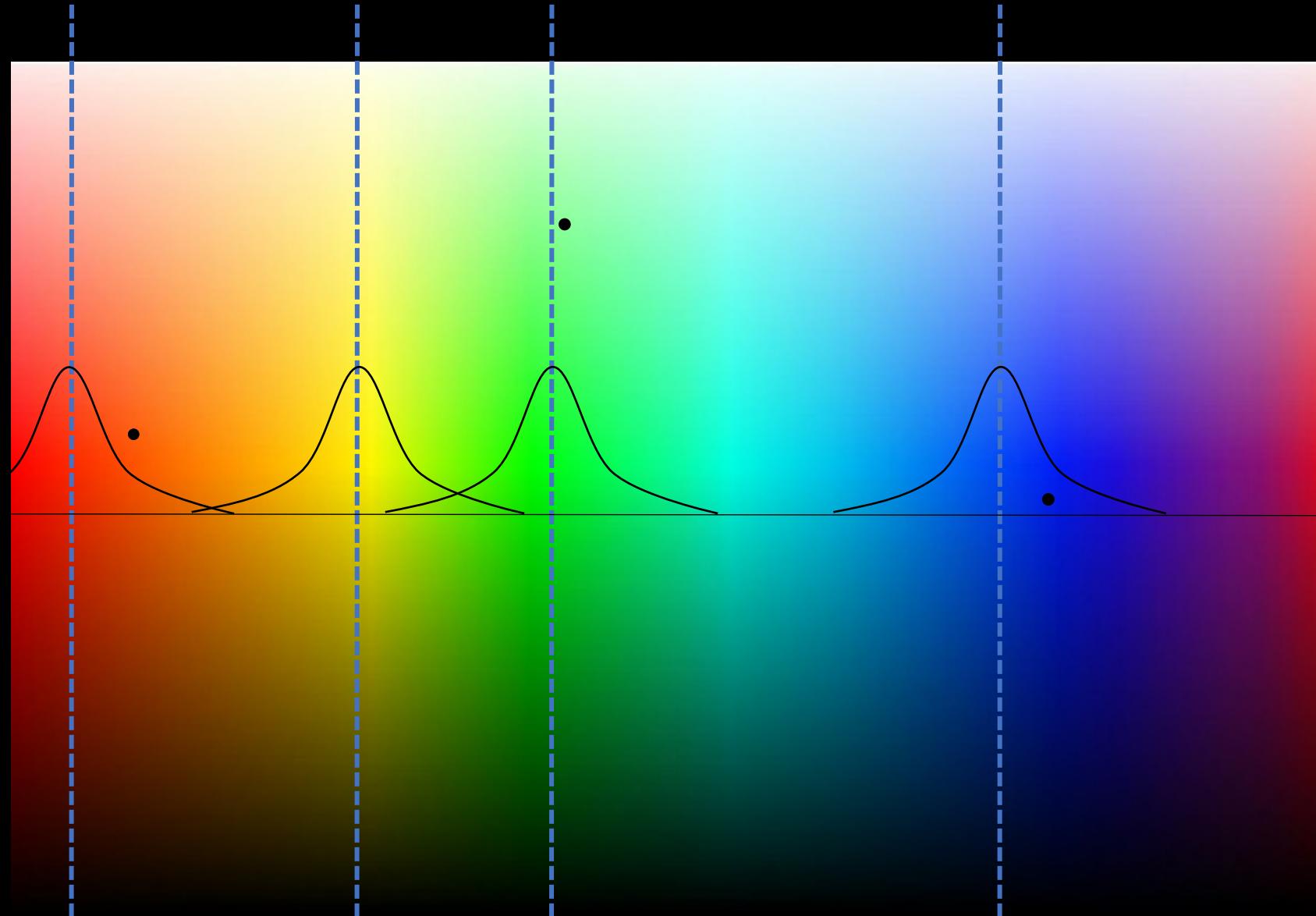


"Hard clustering" would force each word to belong to one category (i.e. crayons).

Topic Modeling: A Conceptual Example

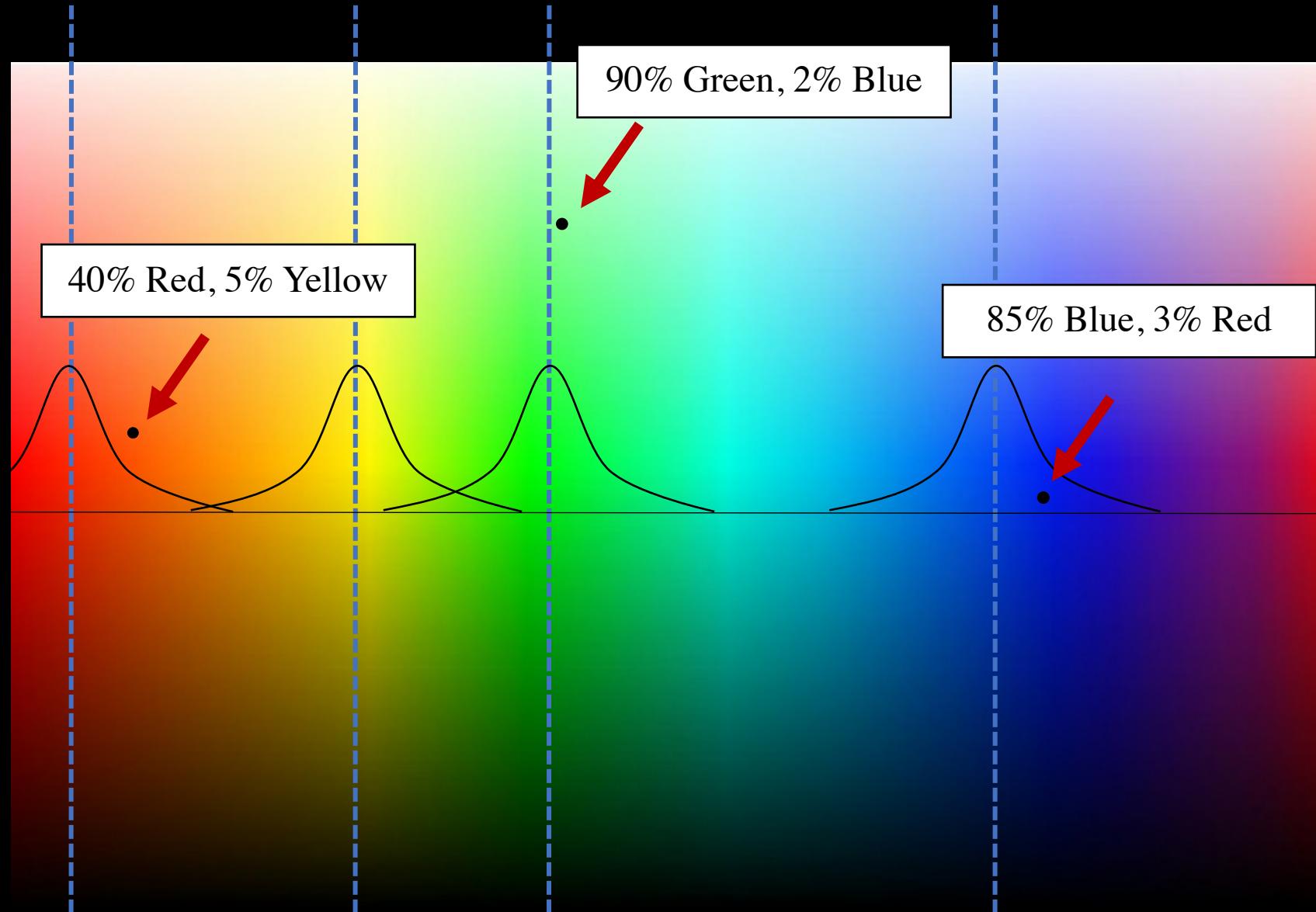
- A universe of language...
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- First, identify k latent word dimensions (topics)
- Second, assign topic probabilities to each word (beta).

“Soft clustering” models uncertainty using probability distributions (i.e. watercolors).



Topic Modeling: A Conceptual Example

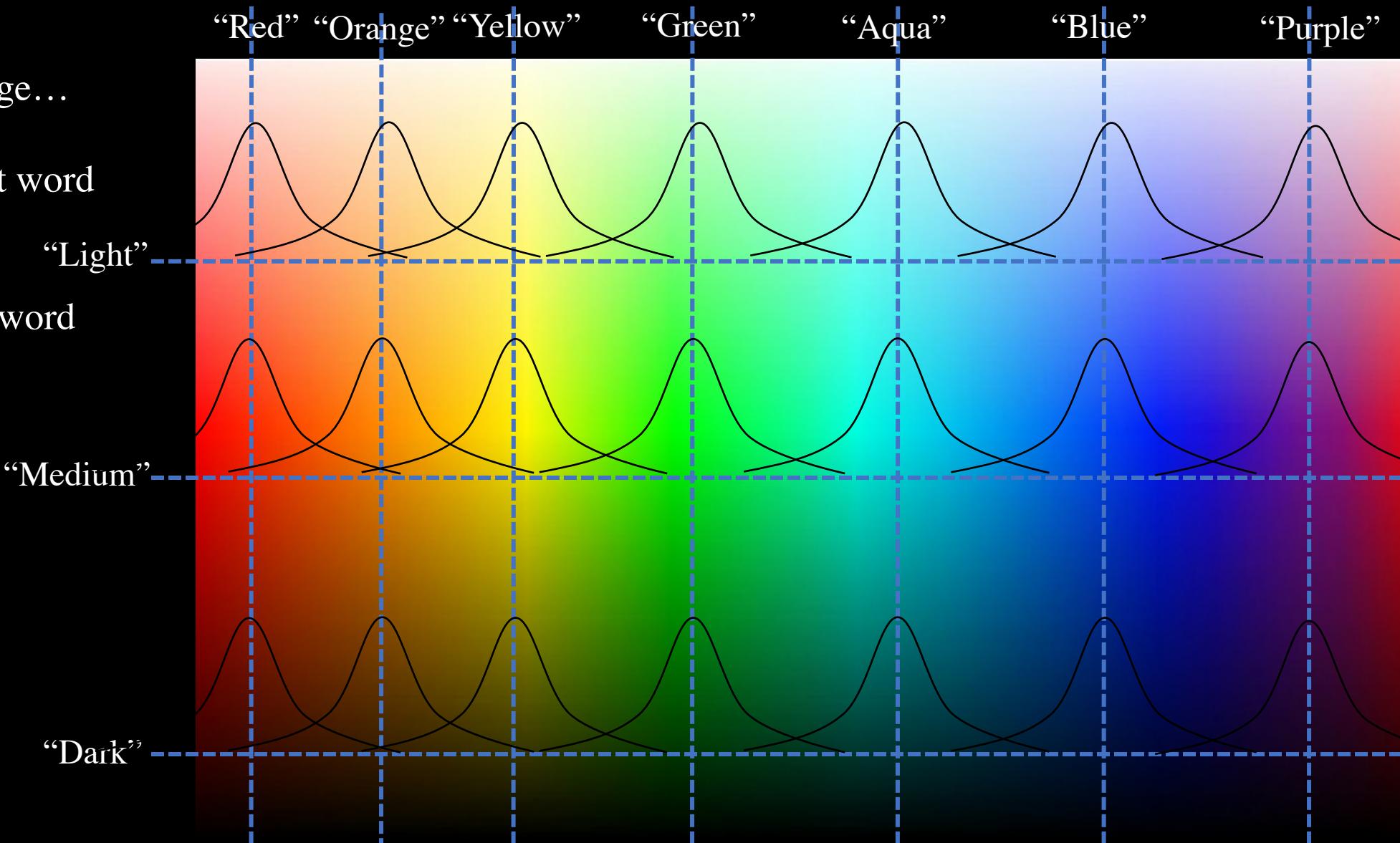
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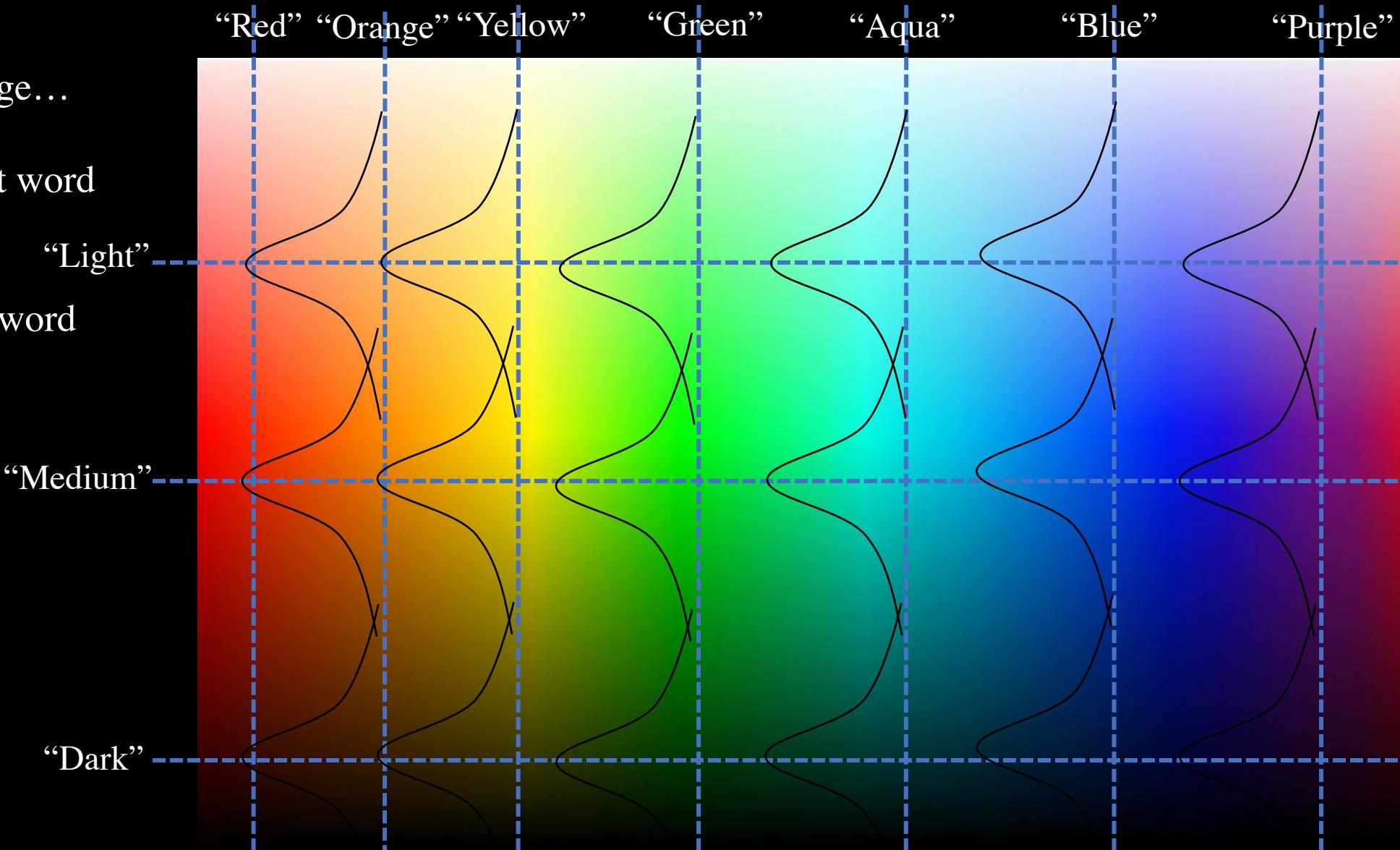
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Topic Modeling: A Conceptual Example

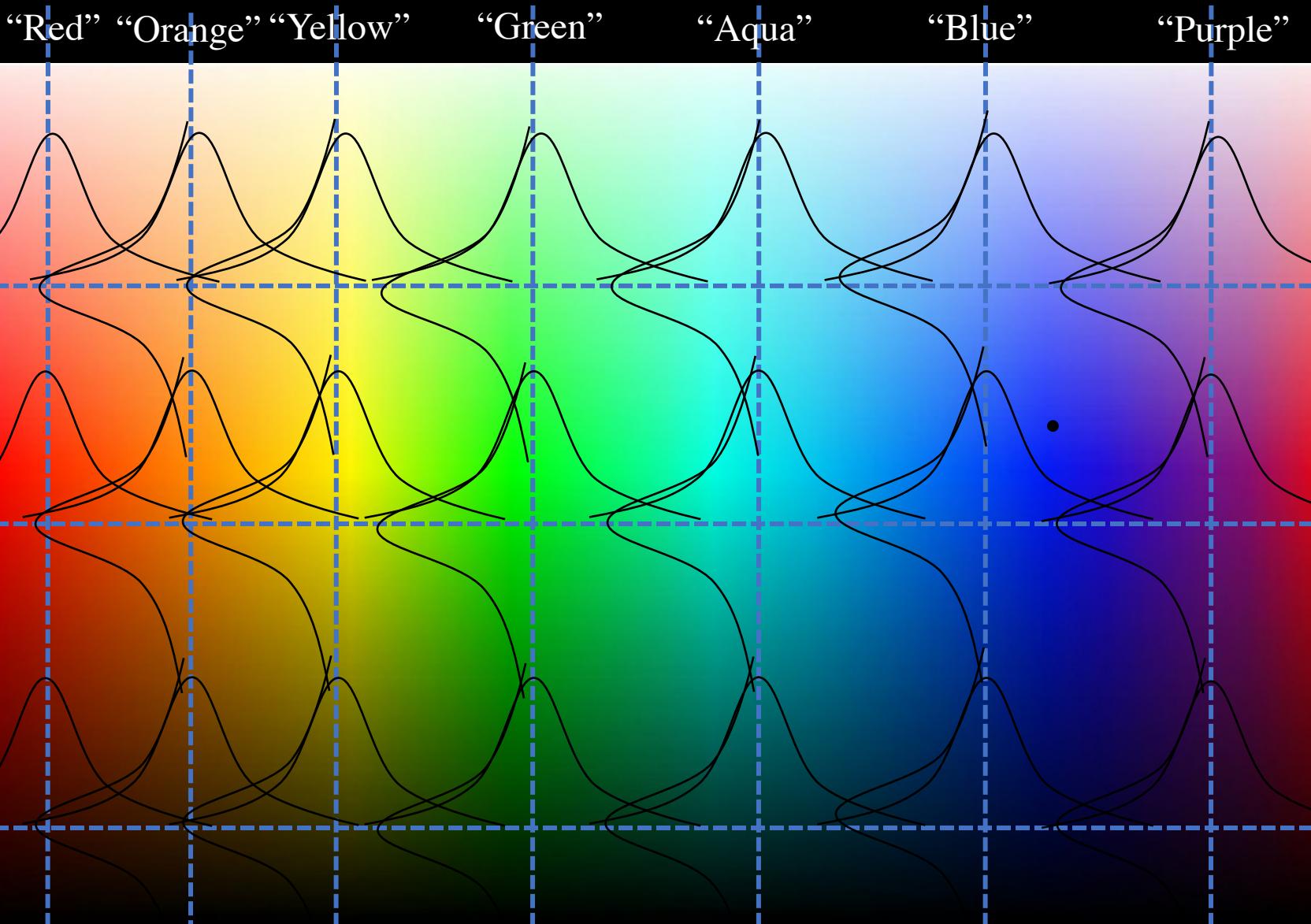
- A universe of language...
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...complications arise in hyper-dimensional space.

“Dark”

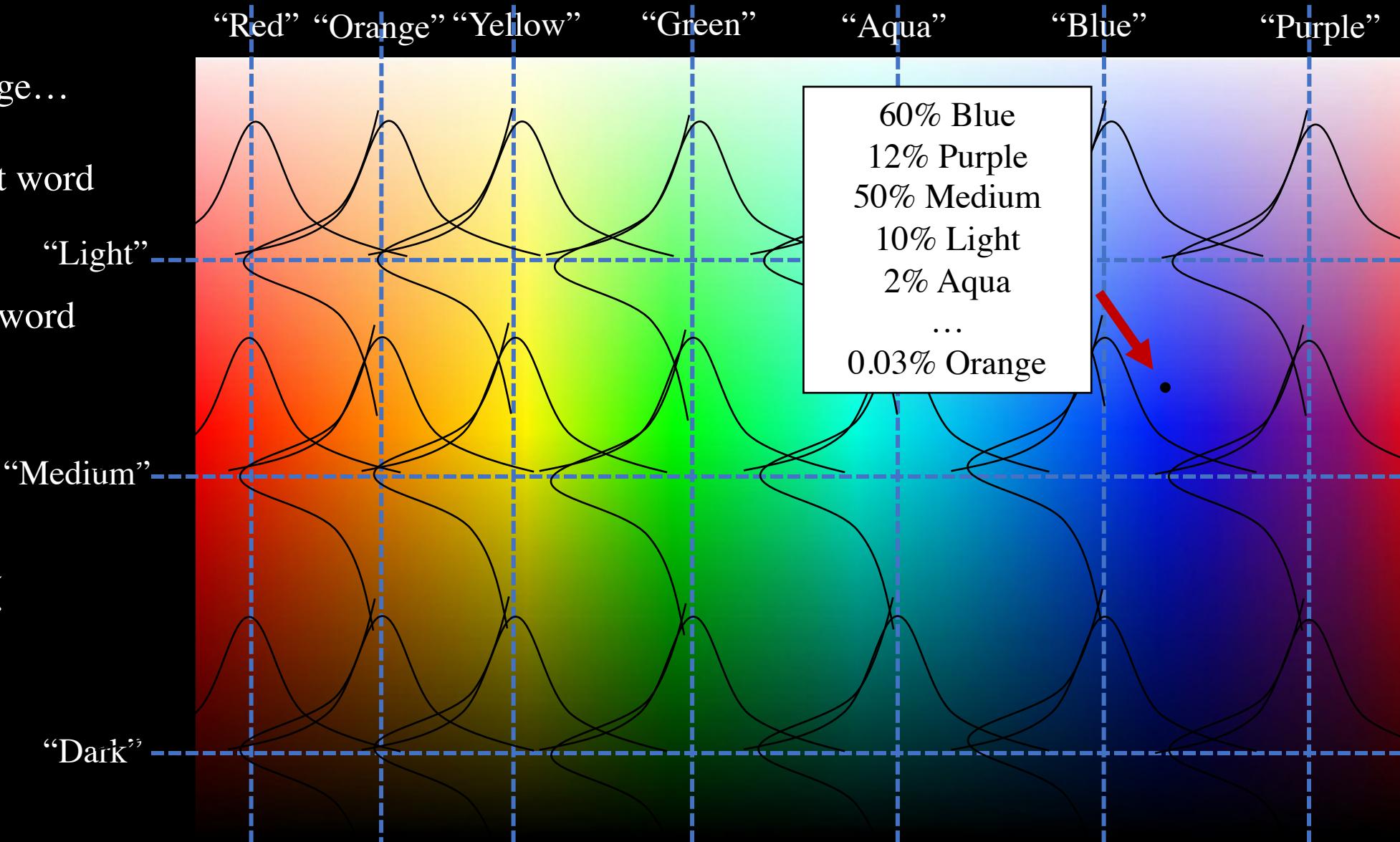
“Medium”

“Light”



Topic Modeling: A Conceptual Example

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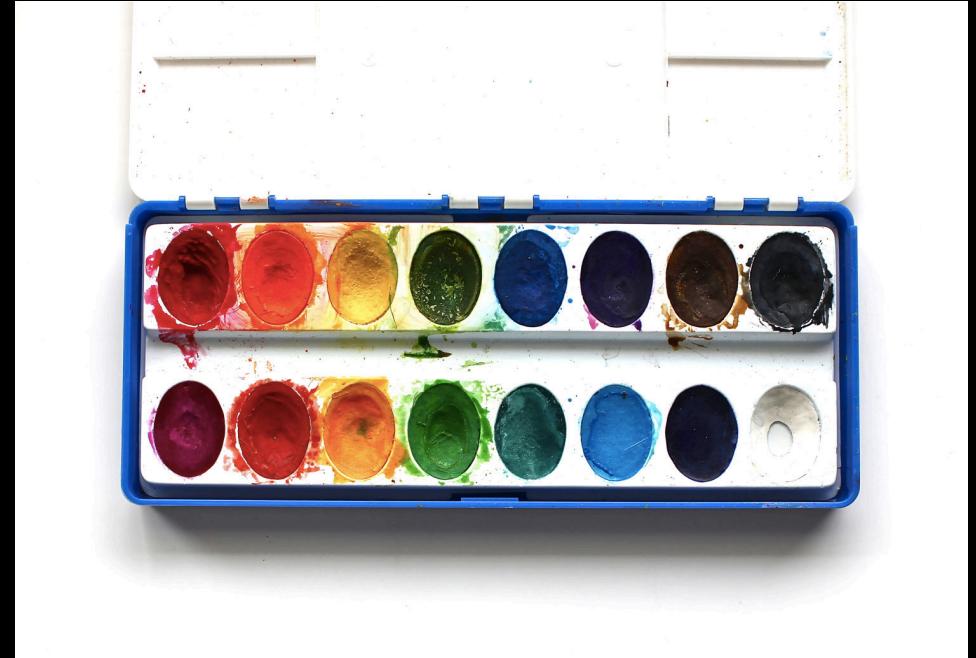


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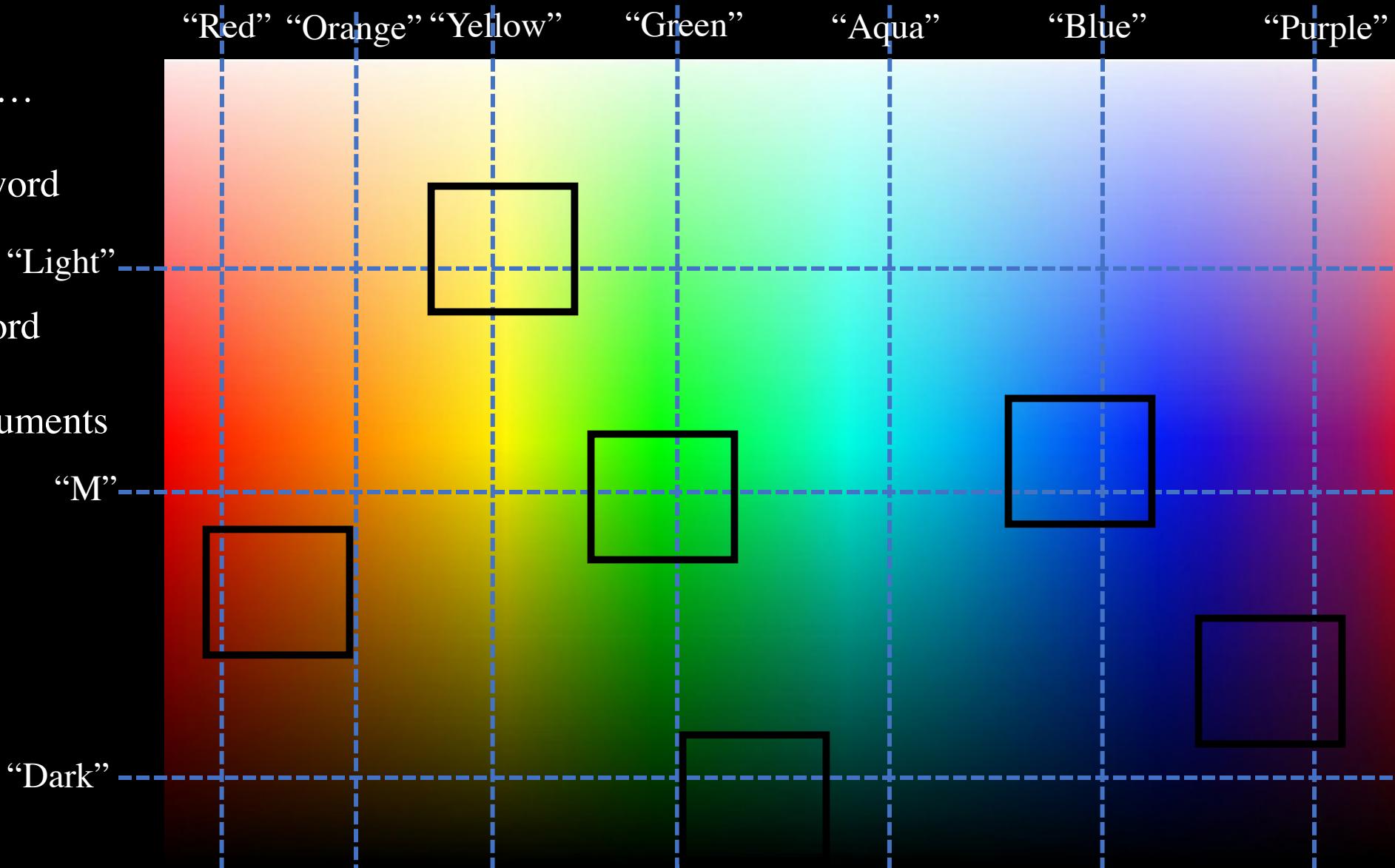
	word1	word2	word3	word4	word5	...	word_n
topic1	0.05	0.63	0.003	0.08	0.4
topic2	0.8	0.02	0.04	0.3	0.6
topic3	0.1	0.34	0.25	0.13	0.3
topic4	0.01	0.08	0.6	0.4	0.4
topic5	0.34	0.52	0.67	0.01	0.01

Beta matrix



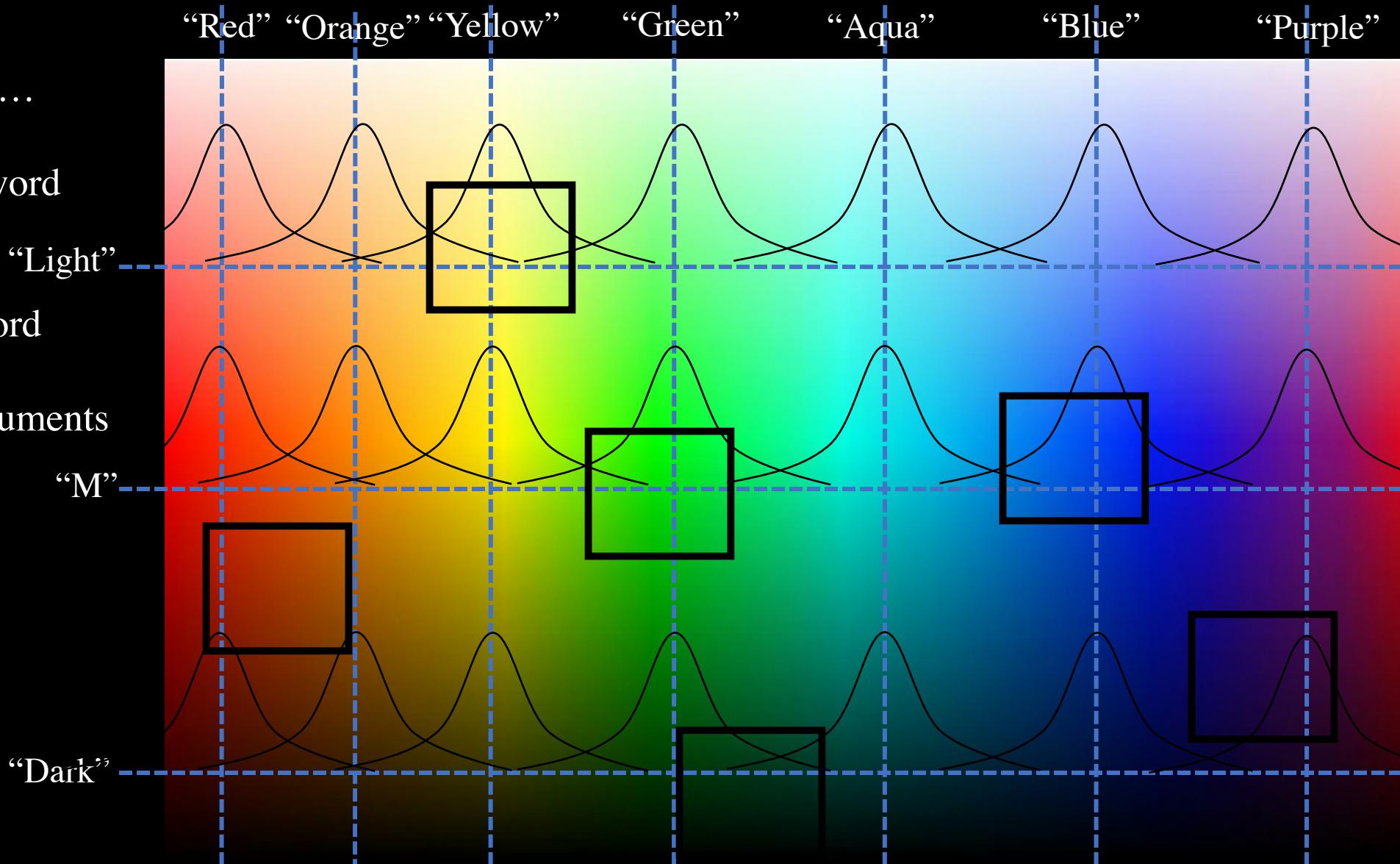
Topic Modeling: A Conceptual Example

- A universe of language...
- With n documents
- First, identify k latent word dimensions (topics)
- Second, assign topic probabilities to each word (beta).
- Third, model our n documents using new dimension distributions (gamma).



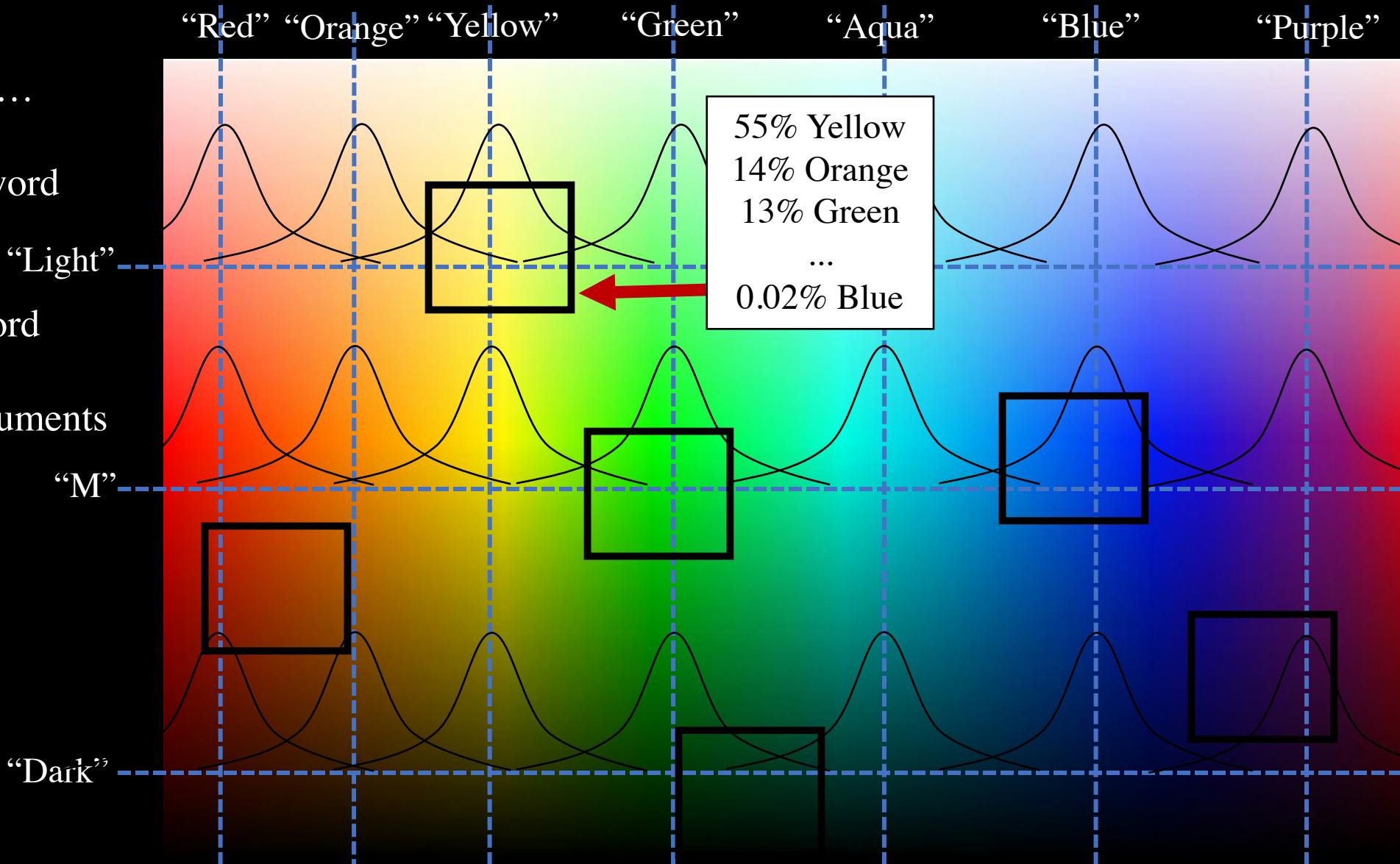
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	topic1	topic2	topic3	topic4	topic5
doc1	0.05	0.63	0.003	0.08	0.4
doc2	0.8	0.02	0.04	0.3	0.6
doc3	0.1	0.34	0.25	0.13	0.3
doc4	0.01	0.08	0.6	0.4	0.4
doc5	0.34	0.52	0.67	0.01	0.01
...
doc_n

Gamma matrix



Topic Modeling: A Conceptual Example

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- With n documents
- First, identify k latent word dimensions (topics)
- Second, assign topic probabilities to each word (beta).
- Third, model our n documents using new dimension distributions (gamma).
- Remember, latent word dimensions are calculated using the document-term frequency matrix (dtm).



	word1	word2	word3	word4	word5	word_n
doc1	7	0	4	3	2
doc2	4	2	5	10	2
doc3	15	4	4	3	0
doc4	0	0	25	3	3
doc5	5	3	1	7	12
...
...
doc_n

Document-term matrix

Computational Text Analysis

1. Count Word Frequencies

g) Topic modeling

- LDA (Latent Dirichlet Allocation) (Blei et al 2003)
- Correlated (ctm) (Blei & Lafferty 2007)
- Dynamic (dtm) (Blei & Lafferty 2006)
- Structured (stm) (Roberts et al 2013)



Source: Blei et al 2010

Table 1: Experts from Chaplain Interview Guide (2013)

- ◇ Did you share the patient's faith tradition, beliefs, practices, or faith community? If not how did you resolve these differences in approaches to care?
- ◇ Do you tend to focus on faith or religion explicitly or do you respond to a person's suffering in the context of hospitalization regardless of faith or religion?
- ◇ What were some of the elements of this conversation [with patient] that were most relevant?
- ◇ What were some of the elements of this conversation [with patient] that were most relevant to the lack of effectiveness in the care encounter?
- ◇ How often in your daily life does your religion help you cope with problems? Some researchers have described positive religious coping methods such as: looking for a stronger connection with God; seeking God's love and care; seeking God's help to let go of your anger; trying to work together with God; trying to see your strengths; asking forgiveness; or focusing on religion to stop worrying. Would you say you cope with your everyday problems in a religious or spiritual way? Are there some other religious coping methods you could add to these?
- ◇ Researchers have also identified what they call negative religious coping methods, such as: wondering whether God has abandoned you; or feeling punished by God; or questioning God's love; or wondering whether your religious congregation has abandoned you; or thinking that the Devil caused a problem to happen; or questioning the power of God. Have you ever grappled with problems in these terms? Are there other "negative" religious coping methods that you could add to these?
- ◇ We are also interested in chaplain's views of God's control over the length of time people live. Some people would say that the length of one's life is determined by God -- that it is God's will when one's life will end, and that people should not take matters into their own hands. On the other hand, some people would say that they believe that very sick people have the right to decide what kind of care they want at the end of life and should be given clear alternatives and choices between aggressive treatment and hospice or palliative care. Which view would you say comes closest to your own? Would you say your views have changed since you began to practice as a chaplain?

Patient vs chaplain

