

“The Tragic Meaning of Blood”:  
Symbol, Myth, and the Construction of Criminology

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Good morning, ladies and gentlemen. It is my sincere honor and privilege to join you today. I am particularly delighted to have this opportunity to address the Western Society of Criminology because it was only five years ago at the WSC conference in Portland that I began my journey as an academic criminologist. At the time, I was a doctoral candidate at the University of British Columbia in Vancouver, writing—or, to put it more honestly, struggling to write—the early stages of a philosophically-oriented dissertation about policing. Anxious and curious to see how criminologists would respond to my ideas, and hoping that they might be able to assist me in shaping them more intelligently, I presented some of my work at WSC. The formal feedback that I received proved invaluable, but what I recall even more strongly is the encouragement and congeniality with which I was met. I continue to be grateful for the support that you extended to me five years ago, and can honestly tell you without a hint of flattery that my earlier involvement with WSC had a decisive effect on my work.

Shortly after receiving your gracious invitation to appear here today, I happened to find an address delivered in 1938 by the French poet Paul Valéry to the Congress of Surgeons in Paris. As I read Valéry’s address, I was struck by at least three things: first, that a poet would be asked to speak to a congress of surgeons; second, that the poet, in making such an unlikely appearance, would succeed at giving his audience some remarkable insights into the nature of their own work; and third, that the poet’s words to the surgeons would actually be pertinent to a much wider audience, far beyond the realm of medicine.

Let me elaborate on this third point by quoting a specific passage from Valéry’s address, which became the genesis for my talk to you this morning. Commenting to the surgeons on the human reaction to the sight of blood, Valéry (1970:137) remarked as follows:

By definition, of course, this kind of shock never affects you surgeons. You live in the midst of blood, and moreover must be constantly at grips

with anxiety, pain, and death, the most powerful stimulants to our emotional echo chamber. The critical moments, the extreme conditions of other lives fill every day of your life, and in your steadfast spirit the exceptional event, however distressing it may be to the persons concerned, takes its proper place among statistics governing the same category. You shoulder the heaviest of responsibilities at the most urgent and delicate of moments.

I hope to convince you today that Valéry’s eloquent words fittingly apply not just to surgeons, but also to us—to criminologists—the academics and practitioners who have chosen, like Valéry’s audience, to engage the suffering and misfortunes of human beings in order to understand and ameliorate them.

Before I say anything further about Valéry, it is only fair that I reiterate what you already know about the strange improbability of my presence before you today. I am no poet like Valéry, and my career as a criminologist is still in its nascent stages. In fact, I have spent most of the past fifteen years balancing police work with my academic work, and have only recently begun to make the transition toward becoming a full-time academic.

When Neil Boyd conveyed to me your Board of Director’s generous invitation to give this address, he asked if it would be possible for me to talk about something theoretical, which would also be related to my professional experience in policing. It might seem to you that Neil’s request was a bit unrealistic. After all, what can I actually say about my work as a social theorist or philosopher that would have any meaningful bearing on my background in police work, and vice versa? Put even more bluntly, what two things could be more distantly removed from each other than street-level police work and theory?

My brief reply to these questions is that in fact, no two things could be more closely related than policing and theory. So, not only is it possible for me to fulfill

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Neil’s request that I deal with theory and police work in the same address, it would actually be *impossible* for me—or anyone else—to talk about one without the other. To elaborate this point within the context of this year’s WSC conference theme of myth and reality in the social construction of crime and justice, I submit to you that it is a myth to believe that theory and practice are truly separable, whether we are talking about policing or any other kind of social action.

If we scrutinize them with careful attention, our ways of constructing crime and justice reveal the inseparability of theory and practice at every turn. There is, of course, an astounding variation in our notions of *unjust acts*—let us think generally of these acts as “*crimes*”—and also in our notion of how to respond to those acts—let us think generally of these responses as “*justice*.” However, whatever the complexity of these variations, we always begin and end with the absolute, face-to-face reality of crime and justice—of the palpability of human suffering, and of the urgent imperative to respond to it. Every point where crime and justice meet, whether it exists in a police-citizen encounter, in a courtroom, in a research study, or even in our dreams, marks an intersection that we ourselves have constructed between ideas and the practical conditions of life. To speak, then, as you have been at this conference, of the construction of crime and justice is never to speak of something artificial or arbitrary; it is to speak of a continual human struggle, which, from the moment we first become aware of it, is at once both theoretical and practical.

This morning, however, instead of trying to demonstrate in abstract terms this inseparability of theory and practice, I propose instead to do so concretely—so concretely, in fact, that I must acknowledge taking a risk that some of what I say may well discomfit or upset you. This is because I am going to talk to you about blood. I am going to tell you why I think that the human experience of blood offers a vivid illustration of the relation between theory and practice, and why that illustration serves as a reminder of what is ultimately at stake in the work that each of us does to construct crime and justice. Even though I am going to talk about blood in the context of policing, I hope you will come to agree with me that my stories may be applied far more broadly.

Now that you have a rough notion of the task that I have set for myself, let me return to Valéry’s address to the Congress of Surgeons, and read to you a further quote, from which I have taken the title of my talk. During his address, Valéry recounted to the surgeons how he had once witnessed a three year-old boy faint upon seeing a few drops of blood coming from a small cut on

a woman’s hand. He was astonished that a young child would react so powerfully and viscerally to this event, especially because, as Valéry put it, he “*had no idea of the tragic meaning of blood*” (1970:137, emphasis added). Valéry went on to observe that, by contrast, although the surgeons had a profound understanding of the meaning of blood, they nonetheless displayed a remarkable ability to treat blood with a matter-of-fact attitude.

This ability, about which I will say more later on, is one that surgeons share with many other professionals who encounter blood as part of their normal duties. If we compiled a list of these professionals, we would obviously include firefighters, paramedics, nurses, and police officers. We would probably mention laboratory technicians and funeral directors. We might also include meat cutters, fisherman, chefs, high school biology teachers, and veterinarians. And, as each day’s news tragically reminds us, I am certain that we would include soldiers. I imagine, however, that it might not occur to us right away to put criminologists on the list. But, are we not also a group with a mandate that puts us in daily contact with the spilling of blood? Like Valéry’s audience or surgeons, do we, too, not fill our days with “the extreme conditions of other lives”? Can we not say of ourselves as criminologists that with our work, as with surgery, “the exceptional event, however distressing it may be to the person concerned, takes its proper place among statistics governing the same category”?

By now, some of you must be thinking that I am simply taking Valéry’s point too far. Surely, I must appreciate that responding as a surgeon to the spilling of blood is radically different from doing so as an academic or researcher. Surely, I must see by reflecting on my experiences in policing and academia that my own responses to blood in these two arenas cannot withstand a serious comparison. In fact, for that matter, how can anyone even take seriously the idea that criminologists “respond” to the spilling of blood? Obviously, to find oneself in the physical presence of blood is not the same as retrospectively studying the events that might have caused the blood to be shed. Yet, I think that by focusing exclusively on this material difference, we lose sight of a deeper affinity that unites what we might otherwise distinguish and separate as “theoretical” and “practical” responses to blood.

With this idea in mind, I would like to talk in the widest possible sense of “responding” to the presence of blood, because this is how we will be able to get a clearer sense of blood’s “tragic meaning.” Even the simplest thought about blood constitutes a response to its reality. So, “responding” to the shedding of blood is something

that can occur in a multitude of different ways. My words to you right now are one response to blood; your reaction to what I say is another.

All of us have witnessed the spectacle of blood, and we know that the experience is something which, to varying degrees, imparts to us feelings of dread, fascination, discomfiture, mystery, and even terror or horror. However much we try to overlook or normalize the experience, the sight of blood always invites a moment of disequilibrium. Perhaps this is because we know that life's equilibrium depends on blood, and so, to see blood is to find oneself reminded of the tenuousness of existence. To lose too much blood is to lose life itself; and conversely, this is why we often speak of donating blood as giving the "gift of life."

This still leaves us to define more precisely the tragic meaning of blood. Valéry's example of the three year-old boy who faints at the sight of a few drops of someone else's blood offers a hint that very early in life, we come to realize that blood's mere physical presence conveys something awful. In fact, if I had to explain the tragic meaning of blood in a single word, I would say it comes from the fact that the experience of blood is *awful*. We tend to think of awful experiences as being extremely bad or unpleasant; and to be sure, many experience of blood are just that. However, in its fullest sense, the word "awful" refers to something that fills us with awe—with a reverential feeling of wonder, fear, or dread. Although the boy in Valéry's story was obviously unable to articulate it, his intense reaction suggests that our sense of the awfulness of blood is deeply intuitive.

I am not saying, of course, that the experience of blood affects everyone in the same way, or to the same degree. For example, I know a detective who finds blood utterly fascinating, but not particularly upsetting. When he shows up to investigate scenes of the most horrific violence, he projects an air of quiet reverence, much as if he were standing in front of a painting that depicts death or misery. Yet, once in a while, my friend will give off a nervous little chuckle that reveals a deeper feeling—a feeling that I think indicates his sense of the awfulness of blood. So, though some among us might say, "the sight of blood doesn't especially bother me," do these very words not betray an awareness that the speaker knows *exactly* how awful blood really is—even if he or she faces that awareness with a relative degree of equanimity? The first quote that I read to you from Valéry's speech brings this equanimity into focus by highlighting the moral tension inherent to vocations like surgery, policing, or criminology, where mastery demands normalizing the exceptional.

To speak of the awfulness of the experience of blood also allows us to respond to events where blood and joy are co-mingled. I am thinking especially of childbirth. Blood heralds the arrival of each new life; but does its presence also not give us an awful foreshadowing of life's end? This ambivalence may be less apparent in the arena of gleaming delivery rooms and birthing centers; however, in much of the world, the peril of hemorrhagic death for mothers remains all too prevalent. Thus, even in the joy of childbirth, the tragic meaning of blood is a constant presence.

Any experience of blood necessarily carries within it, however vaguely, our intuition of blood's sacred significance. It does not matter that modern science constantly creates new meanings for blood, according to which we experience it in a factual and demystified way. We "type" blood; we measure its "spatter patterns"—what, though, is the meaning of the substance itself that transcends all of these analytic operations? When all is said and done, blood's physical presence will always be overshadowed by its sacred and moral significance—by its awful quality. Its mark or stain will always carry a significance far greater than what can ever be said of it in clinical or forensic terms. To appreciate that significance not only allows us to see blood's tragic meaning, but also reveals the hidden role of that meaning in shaping our practical encounters with blood. In a drop of blood then, we may find the entire interrelation between theory and practice.

For most of the remainder of this talk, I am going to share with you what I must frankly admit are some awful stories about blood. I hope to engage your attention without offending you, and apologize in advance if I falter in my rhetorical balancing act.

### **The Blood of Victims**

To show you how the tragic meaning of blood can change in an instant, I will begin by telling you about a case of domestic violence. Early one evening, I responded to a report of an assault at a large apartment complex. When my partner and I arrived, we saw a dazed man sitting on the sidewalk outside one of the buildings. He was covered in so much blood that I thought he had been stabbed or shot. I hurried over to him, and asked how he had gotten injured. His flat response still haunts me years later: "I'm okay," he replied, "but I think she's dead." It instantly struck me that the blood all over the man was not his own. Before I could say anything, he added, "Man, I think I killed her." I moved quickly to put him in handcuffs, and noticed that his hands were bleeding and badly swollen. I was soon to discover why.

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My partner and I left the man with another officer, who had also responded to the call, and went upstairs to the apartment reported as the location of the assault. The door stood wide open. Inside, furniture was upended and things were strewn everywhere. Most conspicuous, however, was the blood: it was smeared on the walls, it was smeared on the carpets, it was on the bathroom floor—it was literally everywhere. We searched the apartment, fully expecting to find a body. However, we found nothing. My partner looked at me nervously and commented on the eeriness of the scene.

We went to the apartment across the hallway. “She’s in here,” said the distraught woman who met us at the door. The victim was lying on the woman’s floor, so severely beaten that her head was swollen to double its normal size. Her eyes were swollen completely shut, and the rest of her face was obscured beneath a mask of fresh and clotted blood. The woman’s boyfriend had beaten her with such ferocity and for so long a time that he eventually became too tired to continue, and left. That is how my partner and I found him, covered in blood, exhausted from the sheer exertion of his attack. After her boyfriend left, the victim somehow managed to crawl across the hallway to her neighbor’s apartment. She was taken by ambulance to the emergency room.

I told her boyfriend that he was under arrest for attempted murder, and read him his rights. As I was driving him to the police station, he asked me, “Did I kill her?” I told him that he had not. In an exasperated tone he replied, “Man, I just kept beating the bitch and beating her, but she wouldn’t die.” He muttered this statement two or three more times. The suspect later confessed to what his girlfriend would also subsequently tell investigators: that he had subjected her to a prolonged assault that went from room to room in the apartment, and ended up with his pinning her on the bathroom floor and beating her in the face and head.

I no longer remember the specific extent of the victim’s physical injuries. In many ways, however, the real horror of this incident was its culmination in a face-to-face attack, in which the suspect must have looked at his girlfriend until her eyes were so swollen that she could no longer return his gaze. To assault someone until she cannot look back at her attacker, and then to obscure her face beneath her own blood is to commit an act that demands to be understood as a form of effacement—an attempt to annihilate the most basic form of the other person’s presence. If this is true, what we might first regard in the limited terms of legal analysis or forensic investigation emerges in its even deeper awfulness as an attempted sacrifice.

To engage this awfulness is to look beyond the evidentiary presence of bloodstains on a human face, and consider what they ultimately represent. When I initially contacted the suspect, I had not yet realized that most of the blood in which he was covered was not his own. Conversely, some of the blood masking the victim’s face was almost surely her boyfriend’s. The violent intermingling of the blood of the attacker and the blood of the victim produced the horrible effect of covering the victim’s identity, and—even if only momentarily—concealing the suspect’s guilt.

Think for a moment about the idea of *consanguinity*, which literally means “with blood.” It refers specifically to family relationships by blood, but also applies generally to any close bond. In the brutal attack that I have just described to you, the entire moral significance of consanguinity was inverted with a mixing of blood of the cruelest kind. With this idea in mind, consider an apparently simple fact of evidence. Bloodied knuckles can present strong evidence of assaultive actions. But more fundamentally, what deeper truth emerged from what I saw before me in this case: a swollen pair of hands, smeared thickly with blood? The dried blood of his girlfriend on his hands, intermingled with his own, revealed a truth that defied what any investigative facts or forensic evidence could begin to reveal. Whose blood is the suspect’s, and whose is the victim’s? In my next story, it was not the question of the blood’s origin that changed, but the circumstances under which it was shed.

### The Blood of a Suspect

One night, a colleague of mine tried to stop a speeding car. The driver refused to pull over, and a high-speed pursuit began. My colleague chased the car for several minutes until it halted at the entrance of a hospital emergency room. It turned out that the passenger in the back seat had been shot in the head. He was rushed inside for treatment.

While the emergency room staff frantically worked to save the victim, I joined numerous other officers in converging on the scene in front of the hospital. A situation like this is always confused and chaotic. Some officers went into the emergency room to keep track of the victim’s situation, and to ensure the chain of custody for any evidence that might be gathered—bloody clothing, shoes, and so on. Other officers remained outside, where the pursuit had ended. The car and the area around it needed to be sealed off for detectives. The other occupants of the car were extremely distraught, and had to be separated and interviewed. Officers worked quickly

to gather information about the shooting—where it had occurred, what might have precipitated it, and of course, who might have been responsible.

The other occupants of the car reported that they had been driving along when gang members in a passing vehicle fired on them, striking the victim in the head. However, my colleagues and I soon determined that the real story was quite different. We learned that the gunshot victim had met the other occupants of the car in a convenience store parking lot in order to sell them some drugs—LSD, I seem to recall. When the victim got into the car to conclude the transaction, one of the passengers brandished a handgun and demanded his drugs and cash. Then, apparently by mistake, the passenger shot the victim in the head. In a panic, the driver sped off to the emergency room. The wounded passenger could not be saved: he had sustained massive brain trauma and died at the hospital. Another drug-related homicide; another dead drug dealer. This drug dealer was just fifteen years old.

I walked over to the empty car and looked inside. The victim's bloodstained ball cap lay on the back seat. The seat cushion where he had been sitting was stained with fresh blood. Blood droplets spattered the interior of the car. Detectives arrived at the hospital and processed the crime scene. What an odd concept: "processing" a crime scene. How *does* one really *process* a scene like this—a planned robbery turned unplanned homicide; a teenager shot and killed; shocked parents notified—not just the shocked parents of the victim, but of the suspects, too—like the victim, only teenagers themselves? Beyond the technical, forensic, and investigative tasks, what remains unprocessed for the very reason that it exceeds all attempts at processing? What remains, I propose to you, is the tragic meaning of blood—its awfulness.

Here is the same paradox of which Valéry spoke to the surgeons: how does one gaze matter-of-factly at the scene of crime and combine the legal mandate for proper investigation with the moral and sacral mandate to be astonished and awed? Do the two not work at cross-purposes with each other?

As I look back on this incident, what lingers most strongly in my recollections is not the confusion in front of the hospital, the x-ray image of a bullet lodged in a boy's brain, the discovery by a man the following morning of a handgun lying innocuously in his flowerbed, nor even the conversation that I had with the suspect, who had only intended that night to get some drugs and cash, and ended up killing another teenager instead. No—what I remember most clearly is the bloodstained ball cap lying on the bloodstained car seat. As evidence of the

crime, the ball cap and car seat became evidence, and were photographed and processed accordingly. In the years since the shooting, I have occasionally shown these photographs to kids in trouble, as an illustration of the unforeseen and irreversible tragedies that can occur in the blink of an eye.

Some of the kids who see these photos adopt a blasé attitude; others are less self-consciously upset. A bloodstain, sometimes even more than flowing blood itself, has a haunting quality that heightens blood's tragic meaning by drawing attention to a human being who is no longer immediately present. You will understand precisely what I mean if you think about photographs depicting pools or stains of blood that remain where people have been injured or killed. So, if people such as the woman in my first story convey one awful sense of blood's tragic meaning, bloodstains separated from their origin leave a trace that leaves us equally awestruck. The philosopher Paul Ricoeur makes a similar observation in *The Symbolism of Evil*, where he discusses the meaning of stains. Violently spilled blood, says Ricoeur, does not just stain—it defiles; and "the defilement that comes from spilt blood is not something that can be removed by washing" (1967:36). Let me tell you another story about blood stains, and I think you will appreciate what Ricoeur is trying to say.

### **Blood Spilled Mysteriously**

Late one afternoon, I was sent to check on a suspicious circumstance at a motel well known for chronic drug-related activity. The label "suspicious circumstance" is a catch-all category used to dispatch police incidents that fall outside any kind of immediately-apparent definition. In this case, it seemed that one of the housekeepers had found a large amount of blood in one of the rooms.

I arrived and contacted the housekeeper outside the room in question. She told me that she had gone to clean a recently-vacated room, and found the bed sheets and mattress heavily soaked with fresh blood. She was not exaggerating. In addition to the blood on the bed, the bathroom sink and countertop were spattered with blood, and the tub was full of bloody water. There was so much blood in the room that I could smell it.

Not knowing the source of the mysterious blood, I called for an evidence technician and detective to respond to the scene. I followed a number of leads, and eventually succeeded in finding a relative of one of the people who had been registered to stay in the room. My colleagues and I were able to determine that the blood had come from a botched attempt at self-treatment of a severe abscess caused in the victim's leg by repeated heroin

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injections. Without medical insurance, and afraid to call for an ambulance for fear of getting police involved, the victim and his girlfriend decided to try to deal with the abscess by themselves, as best they could. They eventually had no choice but to go the emergency room. The investigation was closed—in the eyes of the criminal justice bureaucracy, the meaning of the blood had been clearly determined.

The awfulness of blood in this situation was unrelated to any criminal act other than the apparent use of illegal drugs. For an overburdened bureaucracy, the quick resolution of the case was a blessing—no protracted investigation, no homicide, no body. To paraphrase Ricoeur, however, even if the stains were removed, the defilement persisted. It is a defilement staining a society in which a man would risk bleeding to death in a motel room rather than seek medical attention. Perhaps, then, in reflecting on the tragic meaning of this man’s blood, and what it symbolizes, we will find not just the misery of addiction, but of the compounding of that misery through the cruel and ineffective response of its criminalization. In this situation, blood was shed in the anonymous space of a motel room, and the mystery of its origin was also resolved in total anonymity: I never even set eyes on the victim. Sometimes, however, one experiences the awfulness of bloodshed when it first occurs.

### **Life Draining Away**

This is what happened to me during an incident that occurred while I was off-duty, attending a conference in Chicago in 2003. Those of you familiar with police operations will probably know that in most situations, officers usually arrive on scene after a tragedy has occurred. Rarely is the incident itself witnessed firsthand. There are exceptions.

I was in downtown Chicago, walking along Michigan Avenue on the way back to my hotel after dinner, when I heard the high-pitched acceleration of a car, followed by the screeching of brakes. I saw the car spin out of control in a complete circle, jump onto the sidewalk, and strike a woman. I ran across the street, and identifying myself as a police officer, pushed past several other people to reach the woman. She lay motionless in the street, thick blood pouring from her head in an awful juxtaposition: life draining into the gutter. After enough years of seeing critically injured people, one develops a certain intuitive sense that someone is dying; and I knew that this woman was probably not going to live. A man rushed through the gathering crowd and told me he was a paramedic. He looked at the woman, gave me a shocked glance, and

shook his head saying, “This is beyond me.” Another bystander came forward and identified himself as a doctor. He, too, looked at the woman; and we exchanged a glance that silently conveyed our common intuition. I left the woman in his care, ran over to the car that had hit her, and detained the driver until Chicago PD officers arrived. I gave one of the CPD officers a quick report on the situation. He declined further assistance, so I turned and walked away. I later read in the newspaper that the woman had died at the hospital. She was a tourist from out of town, and had been walking down the street beside her husband when she was killed. The driver was charged with vehicular homicide.

### **The Fear of Blood**

As I walked back to my hotel, I looked down at my hand, and saw some dried blood on my fingers. It was actually just a small amount. I surmised that it had probably gotten there when I had tried to check for the woman’s carotid pulse. I immediately started checking my pants and coat for other bloodstains, and determined that my first act upon returning to my room would be to wash my hands and decontaminate myself. “Decontaminate” myself—what a strange notion—wash away a stain, an impurity, a source of possible infection (see Douglas, 1966).

There is no theme as constant and universal in police training as officer safety. For obvious reasons, cops spent a great deal of time thinking about intelligent ways to avoid getting hurt or killed. Most people rightly imagine that they harbor nightmares of getting shot; however, it usually does not dawn on them that officers are almost equally fearful of blood. As much as I still remember much of my academy training about tactical safety, I recall with equal vividness learning about the perils of bloodborne pathogens. Rookie officers graduate from the academy convinced that every person they meet will try to kill them; and they are similarly convinced that coming into contact with the smallest drop of blood is a fate to be avoided at all costs. It goes without saying that there are plenty of legitimate clinical reasons to fear blood as a potential biohazard, and to take universal safety precautions such as wearing gloves and washing hands. Officers typically review these precautions annually as part of their mandated training. They also review procedures for handling and packaging blood evidence such as hypodermic syringes, vials of fresh blood, and blood-soaked clothing.

Beyond their rational basis, what fascinates me about bloodborne pathogen training and the rituals of

handling blood is how they recast the tragic meaning of blood as a narrow issue of infection control. Our sense of the awfulness of blood seems driven here by what anthropologist Claude Lévi-Strauss calls the primordial human fear resulting from “the conjunction of the dead and the living” (1983:151-2). Today, ancient taboos and myths about the awful nature of blood are recast as horror stories of needlesticks and contamination. The trunk of the typical patrol car is filled with devices for warding off evil—gloves, eye shields, disposable Tyvek® jumpsuits, antibacterial hand wash, sharps containers, biohazard waste bags, and so on.

Arriving at any scene involving blood brings the admonition to “glove up.” Doubtless out of sheer reflex, the doctor in the street beside me in Chicago yelled out for someone to give him gloves. Obviously, there were none to be had. I remember going to a stabbing fairly early in my career. As I began kneeling down to assist the victim, a senior officer admonished me, “You’d better glove up!” Processing blood evidence or evidence contaminated with blood involves intricate rituals of packaging and labeling, deviation from which invites sharp rebuke from crime labs or evidence technicians. Even in a vocational culture famed for its hidebound indifference towards supervisory criticism, those rebuked for deviating from proper procedures for handling blood evidence contritely accept their chastisement.

### The Sacredness of Blood

If Lévi-Strauss is correct, then whatever their obvious basis in scientific and medical fact, our present-day taboos about blood draw on a deeper awareness that blood “means” something profound. More accurately, to speak of blood’s tragic meaning is to recognize that, beyond its medical or forensic qualities, blood has a *sacred meaning*. It is this sacred meaning that looms in the background for surgeon, police officers, and criminologists. Even if it is overlooked, consciously ignored, or dismissed altogether as superstition, it is still there. The tragic meaning of blood and its underlying sacredness pose a paradox for modern society. The paradox is that the more we know about the physical nature of blood, and the more we apply that knowledge in investigative and clinical ways, the more we tend to forget blood’s sacredness and tragic meaning. To reconnect this with my aim of shedding light on the interrelation of theory and practice, I would say this: the more our theories about blood are cast strictly in scientific or clinical terms, the less we remember about its tragic nature in our practical actions.

With this idea in mind, I would like to relate to you

one final incident—a case of a domestic feud that ended violently in a double suicide. The case involved a situation in which, as I think you will see, the sacredness and tragic meaning of blood were at the very center of events. Without going into excessive detail, I will just tell you that the situation grew out of a dispute between a young couple, who were engaged to be married, and the prospective groom’s father. The bride-to-be fell out of favor with her prospective father-in-law. The situation reached the boiling point when the man ordered his son to break off the engagement. The woman became so distraught that she hanged herself; and in an especially tragic turn of events, her fiancé was the one who discovered her body. This led to a violent confrontation between the fiancé and his father. He attacked his father and tried to stab him, but the father was able to escape. The fiancé ended up fatally stabbing himself.

I was not personally involved in this incident, nor were any of my colleagues. This is because, as some of you might have already realized, it comes from Sophocles’ *Antigone*. The dead woman in the incident is Antigone. Her fiancé’s name was Haemon, which also happens to be the Greek word for “blood.” Haemon is the root of English words such as “hemorrhage” and “hematology.” Sophocles (1994:117) describes in gory detail the scene in which Haemon stabs himself:

. . . then the unhappy man, furious with himself, just as he was, pressed himself against the sword and drove it, half its length, into his side. Still living, he clasped the maiden in the bend of his feeble arm, and shooting forth a sharp jet of blood, stained her white cheek.

What is Sophocles telling us here, and how does his message bear on our work as criminologists? By naming one of his characters after blood, he left us an obvious clue that his play should be viewed in no small measure as a *study in hematology*—not, of course, in its modern medical sense, but in its wider sense as a meditation on the logic of blood, and where that logic begins and ends.

So, now that I have told you several awful stories about blood, how are we to see them more clearly as illustrations of the interrelation of theory and practice? My purpose in sharing these stories has been to try to suggest that blood’s presence eludes and transcends the practical attempt to contain it. Blood’s flow can often be controlled, but its tragic meaning resists all such efforts. A story such as that of the deaths of Antigone and Haemon takes the tragic meaning of blood and places it front and center, in a way that we sometimes overlook in our own day and age, when we are so eager to control, predict,

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and categorize. The awfulness of blood is something that we cannot control, predict or categorize, so we tend to let it recede into the background. In a certain sense, that ability has created enormous blessings, as the work of modern surgery makes so apparent. Yet, the price of those blessings is a potentially catastrophic forgetfulness. I would put it to you like this, again drawing from Paul Ricoeur’s argument about the symbolism of evil: when we pretend to be able to desacralize blood, we create the myth that we can separate the theoretical from the practical, and more broadly, the ethical from the physical.

This is the basic change that has obscured the tragic meaning of blood. Still, even in an age where surgery has become an operational task of enormous technical complexity, and when policing and criminology similarly experience blood as an abstract “matter of fact,” something lurks in the background, which we ignore at our own peril. Many of our prevailing social constructions of crime and justice tend to dismiss the tragic meaning of blood as irrelevant to the everyday workings of a society that does not want to challenge its dominant belief that the ethical and the physical can be separated. But, it seems to me that the stories I have told you today challenge that supposition, and show that what might seem at first glance to be a remote theoretical question about something like the tragic nature of blood is inseparable from our ordinary practical lives. Our challenge as criminologists—as a profession that works with blood even when we do not realize it—is to strive to respond holistically to blood, and to be constantly mindful of the real tragedy that comes

from ignoring it. As Mircea Eliade says, “the true sin is forgetting” (1959:101). Thank you! I would be pleased to respond to your questions or comments.

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