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Social Meanings of Mortality: The Language of Death and Disease in 19th Century Massachusetts

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Abstract
This dissertation investigates the emergence and development of cause-of-death registration in nineteenth-century Massachusetts. I examine the historical, demographic, sociopolitical, and theoretical conditions that gave rise to the first state-implemented cause-of-death registration system in the United States, Massachusetts's vital registration system. Developments in almost every arena of social life during the nineteenth century were shaped in some fashion through disease. The disease ecology changed dramatically during this period shifting from acute infectious to chronic degenerative diseases, which marked the beginning of the epidemiological transition. Registration systems were key components in this transitional period, providing the raw data on which nineteenth-century public health policy emerged. The greatest challenge that public-health reformers faced in implementing and regulating cause-of-death registration was standardizing the language and practice of

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disease and cause-of-death reporting. I look closely at issues of implementation and regulation and examine the relative impact that standardized nomenclature and reporting practices had on cause-of-death registration in Massachusetts from 1850 through 1912. Efforts to standardize disease and cause-of-death terminology in the United States and internationally did not, however, successfully emerge until the late nineteenth century. While many disease terms were in common, their diagnostic applications were not. I argue that certain constitutive and regulative features of death registration did not match up with the institutional mandate of Massachusetts's vital registration system until forty years after its implementation. The institution-building process required the alignment of these features as normative practices, culminating in the organized efforts of European and American medical professionals to instruct physicians in proper nomenclature through explicit references and sanctions in the 1900 International Classification of Diseases. The pragmatic conditions out of which both Massachusetts' cause-of-death registration system and the International Classification of Diseases emerged did not consist of special circumstances or unique cultural practices. The social meanings of mortality in nineteenth-century Massachusetts reflected the public commitments of a diverse set of communities and practices that shared similar resources in working out the struggles and triumphs of communicating the language of death and disease.

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