Longing for Sleep: Assessing the Place of Sleep in the 21st Century

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Sleep has been in the news for the past decade or so as a matter of growing concern. Along with this popular, medical and scientific attention, social scientists have been increasingly interested in sleep as an object or process of study. The first major sociological book published on sleep was Simon Williams’ Sleep and Society (Routledge, 2005), after which a number of other monographs and edited collections followed, including Williams’ latest book on The Politics of Sleep (Palgrave, 2011). In 2012, Matthew Wolf-Meyer published the first anthropological study of sleep in the United States, The Slumbering Masses (University of Minnesota Press, 2012). In the conversation that follows, therefore, Williams and Wolf-Meyer assess the field of social studies of sleep, discuss their commonalities and differences, and think about the future of sleep and its place in the social sciences and humanities.
Q1. Can we speak of a ‘turn’ to sleep matters within the social sciences and humanities today, and if so why?

**MWM:** There does seem to be broad interest in sleep these days – from the [Huffington Post](https://www.huffingtonpost.com), to documentaries like Alan Berliner’s *Wide Awake*, to [This American Life](https://www.thisamericanlife.org) and [Radiolab](https://www.radiolab.org) episodes, to humanities and social science scholarship – but I’m a little hesitant to say that we’re on the other side of a turn where the study of sleep from within the humanities or social sciences makes immediate and necessary sense. We have a number of people across the humanities and social sciences writing about sleep – particularly pre-modern sleep and the late 20th century medicalization of sleep – but we haven’t really reached the point where studying sleep isn’t considered novel, nor have we reached the point where scholars are seeking out increasingly obscure topics to discuss in relation to sleep. We are, instead, really at the tip of the proverbial iceberg of sleep-related research (particularly of the critical kind) and are in the position of waiting for quite a bit of novel work to be done. Beyond just having sketches of what sleep looks like in a number of places around the world (of which we really have little scholarly documentation), there’s quite a bit of material to cover and we haven’t really reached the critical mass of scholars where it seems that this will happen in the short term.

There is some really great work that’s been published in the recent past and a lot of stuff that I’m looking forward to. In the first camp, people like Roger Ekirch and Kenton Kroker have provided the foundation for people to start thinking about comparative histories of sleep – both lived experiences of it, in terms of Ekirch’s work on the pre-industrial day, and its scientific genealogies, in terms of Kroker’s work on American sleep science (I really hope to see people start working on sleep science in Japan and Italy, which both seem to have some notable differences from dominant sleep science). Brigitte Steger’s work on Japanese sleep – which is voluminous but not yet entirely in English – is one of the few cases of real ethnological documentation, and Hannah Alheim’s work on sleep in Germany and Benjamin Reiss’ research on 19th century sleep in the United States should help fill in more ethnological and historical gaps. But I’ve yet to hear of people conducting research in the global south on sleep (other than Australia), and so it seems that the relationship between colonialism and sleep is being largely ignored (outside of Reiss’ work). The one sort-of
exception is Maryinez Lyons’ research on ‘sleeping sickness’ (or trypanosomiasis) in Zaire, which really isn’t about sleep per se, but addresses the medicalization of a set of symptoms that get interpreted as related to sleep.

It seems to me that where most of the attention is focused is on adding depth to the scientific understanding of particular disorders – a humanist strain that works against contemporary medicalization efforts. Shelley Adler’s work on nightmares and Eluned Summers-Bremner’s book on insomnia immediately spring to mind here. I’m not sure that obstructive sleep apnea and restless legs syndrome can hold up the same kinds of projects – they’re comparatively newer and there isn’t anything particularly romantic about their symptoms – and there’s a short list of possible topics here, but narcolepsy seems to be an obvious target.

SJW: I am inclined to agree with you on this count. Despite the wider turn to the body and affect in the social sciences and humanities today, and despite the promising green shoots of work on sleep matters so far, we are still a long way off from anything approaching a ‘turn’ of this kind to sleep within the social sciences and humanities as yet, or in the foreseeable future I suspect.

Sleep indeed, in the main, remains a neglected or marginal matter within the social sciences and humanities even now, as if this vital third of our individual and collective lives was somehow ‘off-limits’, a ‘step too far’ or of limited relevance to social science and humanities scholarship ‘proper’ given its predominant waking concerns, commitments and values.

We are still then at an early stage in these developments and debates, including the case making stage as to why ‘sleep matters matter,’ so to speak, for the social sciences and humanities. That’s why I welcome the chance to have this discussion and debate with you in Somatosphere, given sleep is clearly a rich, fascinating and indeed vital issue for the social sciences and humanities to study. This for example, as I argue in The Politics of Sleep, includes sleep as both ‘problem’ and ‘prism’: the former involving a more direct focus on sleep matters as such, the latter taking sleep as novel vantage point from which to explore any or all other aspects of social, cultural, historical and political life.
As for the examples of promising scholarship on sleep matters you mention so far, I would add two related points. First, the discipline which has arguably witnessed the greatest critical mass of work on sleep-matters so far has been sociology. Second, this work extends far beyond the concern with the ‘medicalization’ of sleep that you mention.

On the one hand, for example, there have indeed been important strands of sociological work on the medicalisation of sleep and associated matters to do with healthicisation, an admittedly clumsy term, or healthism. But even here, this work has often sought to explore the limits of any such medicalization to date, and/or to think beyond any such terms of reference or concepts of this kind, including my own work on the politics or biopolitics of sleep and alertness, and the work of other sociologists such as Steve Kroll-Smith -- who has also of course done some other very illuminating and valuable work on the changing fate and fortunes of the workplace nap, as have scholars like Brigitte Steger whom you mention and Megan Brown too within the humanities.

On the other hand, much of this recent sociological work has not really engaged directly with medicalization debates very much, if at all. The main focus has instead been on the ‘doing’ and ‘disruption’ of ‘normal’ sleep in everyday/night life, including the sleep of children and young people as well as adults. In doing so this sociological work has emphasized the fact that much of this doing is both gendered and relational through processes of ‘negotiation’ with significant others, be they partners or parents. So we might term this a ‘relational’ emphasis on sleep matters in everyday/night life, if you like. But another related strand of sociological work here of late has also looked at the ‘bigger picture’ in terms of the wider social and cultural patterning of sleep and health across the life course in terms of factors such as socio-economic status, gender and age: what we might call the ‘social patterning and life course’ approach. I am thinking here for example, on both counts, of the work of Sara Arber and colleagues who has really been at the forefront of these sorts of sociological ‘relational’ and ‘social patterning’ approaches and agendas on sleep matters in recent years.

Further anthropological as well as sociological examples of this sort of work, of course, can also be found in the recent special issue of Social Science and Medicine on ‘sleep, culture and health’: a collection which further underlines
the critical importance of social science contributions to the study of sleep and health which extend far beyond medicalization agendas.

So all in all then, this amounts to ‘progress,’ of sorts, but much still remains to be done nonetheless. Perhaps too, on this latter count I could add to your list of possible candidate sleep disorders in need of deeper, richer, cultural histories, sleep walking and sleep paralysis as well as narcolepsy. Antonio Melechi’s work on sleep walking certainly springs to mind here, for instance, as does Corrine Weisgerber’s study of sleep paralysis, but I am not aware of anything much else to date within the social science and humanities, though I may be wrong there.

Let me however, end here with a final important point or qualifier to our discussion and considerations so far, namely the multiple references to sleep that may be read or recovered in philosophical texts and traditions, from Aristotle to Kant, Plato to Levinas. Readers, in this regard, may find Simon Morgan Wortham’s valuable and welcome new book, The Poetics of Sleep: From Aristotle to Nancy (Bloomsbury 2013) an engaging and instructive text on sleep and the philosophical imagination.

Q2. What do these recent engagements add to prevailing understandings of sleep within sleep science and sleep medicine?

SJW: Well, leaving aside any quibbles one may have with the very assumptions or terms of reference embedded in this question – is ‘add’ the right word or relevant criteria here, for instance, and can we not just as validly andvaluably pose the question the other way round? – the answer I think, succinctly stated, is that engagements of this kind help to further contextualize and enrich our (social, cultural, historical and political) appreciation and understanding of sleep matters in all their complexity and multiplicity. By this, for example, I mean both a greater appreciation and understanding of: (i) the diverse meanings and metaphors, practices and places of sleep or sleeping around the world, both past and present (i.e. the what, how, when, where, with whom of sleep matters) and; (ii) the social, cultural, historical and political dimensions and dynamics of sleep science and sleep medicine itself, including of course its own changing construction or shaping through time and culture as well as its social and political
implications for how we come to ‘know’ and ‘govern’ sleep, of which more shortly no doubt.

There are also I think, as this suggests, different roles the social sciences and humanities may play here on these counts, ranging from what one might term more ‘complementary’ or ‘convergent’ if not ‘collaborative’ ventures with sleep science and medicine -- as in say some of the studies included in the aforementioned special issue of Social Science and Medicine on ‘sleep, culture and health’ -- to other more ‘critical’ agendas – as in say your own work on sleep medicine in America, which as I read it poses critical questions about the degree to which ‘variations’ in sleep have come to be regarded, through the capitalism-medicine complex or nexus, as ‘disorders’ or ‘problems’ in contemporary times.

Both agendas have valuable contributions to make of course, but in the former case there is more of a concern to document and elucidate, often through large scale survey research, the relationship between social and cultural factors, sleep problems and health in ways that add to, broaden or complement public health research on the problems and risks of poor sleep for health. In the latter case, in contrast, there is more of an attempt to critically analyze these very ‘problematisations’ of sleep today, and to reflect on their wider social, cultural and political significance, including alternative possible positions and perspectives on these very matters, radical, romantic or otherwise.

In either case however, as I argued in my book The Politics of Sleep, there is I think a need to be more reflexively aware about the role the social sciences and humanities themselves are playing here in the ‘co-production,’ to borrow a useful term from science and technology studies (STS), of the very issues they seek to study. So, whether ‘complementary,’ ‘critical’ or whatever, we too are participating in part in the very problematisation and indeed politicization of sleep matters today, including ironically perhaps the risk of further raising public concerns and anxieties about their sleep, even if or when our message is to challenge or question any such problematisation.

Perhaps too I should add, as a sort of addenda to this last point, that it is not simply these engagements with sleep matters in the social sciences and humanities to date that are implicated here. So too is the majority of
scholarship in the social sciences and humanities which continues to dismiss or disregard sleep matters: a neglect, that is to say, which itself reproduces and reinforces, unintentionally or otherwise, dominant sleep negating attitudes, ideologies and values in the wider 24/7 society far beyond academe.

The main point nevertheless is that the social sciences and humanities do indeed have a lot to ‘add’ or contribute here I think, both on their own terms and through their multiple roles and relations with sleep science and sleep medicine inside and outside the sleep laboratory or clinic.

**MWM:** The one class that I teach that has some sleep-related content is a lecture course called *The Biology of Everyday Life.* I’ve been reticent to teach a class that’s just about sleep, in part because I’m worried about precisely what you outline at the end of your answer – there’s a way that it might just reify dominant conceptions of normal sleep by looking at a series of ‘abnormal’ or culturally-marked forms of sleep. What the rubric of the biology of everyday life does is to put sleep into conversation with other biological functions that get wrapped up in cultural interpretations – sex, eating, breathing, defecating, death – and treats it on equal footing. I mention this because one of the examples I often talk about with students is the scholarly study of sex, which is very rarely about sex itself and more often about second-order treatments of sex (e.g. sexual identity, reproduction, pornography, etc.). But studying sex for the past 50 years (I’ll just go with a genealogy that starts with Foucault and Kinsey) has opened up a vast array of theory and analysis, not limited to identity, but surely indebted to it.

I do think there is an additive function to the study of sleep, at least in this modest respect: sleep is so often a part of subjectivity that attending to it opens up another way to think about people, bodies and the social. Like you mention regarding the emergent sociology of sleep, sleep is the basis for a number of social interactions, and not attending to it leaves a rather dubious gap in our knowledge about individuals and society. True, it may be rather limited, but as you mention, totally ignoring this third of our lives is perverse. We might know that we’ve collectively gone through a turn towards sleep when scholars start including chapters about sleep (or biological processes more generally) alongside chapters devoted to gender, sexuality,
class, race, and the other identity markers we so readily accept as meaningful.

Extending the biology of everyday life discussion though, I find it also really important for scholars to actually address biology and physiological experiences in their research and theorization, since the dismissal of actual biological experiences doesn’t really get us anywhere. The challenge facing many of the scholars working on sleep in the social sciences and humanities is what we might give back to science, beyond simply debunking through critique. Maybe we need to think about what we can ‘add’ to the science and medicine of sleep. Part of this is developing theoretical models and language that cut across disciplines and build more robust conceptions of self and society, biology and culture. Epigenetics seems to be one bridging mechanism, although I fear that it may already be over-determined. Until we start to find robust and supple ways to talk across disciplines, we’ll be stuck in our present situation where the study of sleep (and everything else) is primarily ethnological rather than deeply critical.

Q3. **Has this led to any genuine advances in the social sciences and humanities themselves in your view?**

**MWM:** Answering this question makes me feel a little dour. This is not to slight any of our colleagues who we discussed above, but I don’t really think we’ve gotten to the point where studying sleep is opening new theoretical or methodological vistas. As I mentioned above, it seems that much of the extant studies of sleep and society have really worked to expand and deepen the theoretical models that already exist, and have not bothered so much with wholly new theorizations or methodological models – although we might get there. It seems to me that we’re still in the first wave, and that until we’ve laid a robust foundation we might not really be able to ‘advance’ – first scholars needed to theorize nationalism before they could start to talk about transnationalism, after all. But maybe in saying such, I’m betraying my naïve assumption about what counts as an ‘advance’ – that it should be something rather new or surprising.

That being said, one of the things that the modest turn to sleep seems to be indicative of is an interest in the banal. So often, I find that scholars are
drawn to the exception rather than the rule – sort of following Georges Canguilheim’s interest in the study of the normal through the pathological. I often suggest to people that we’ve too often been drawn to the second-order representations of things and processes rather than the things and processes themselves – that is, like I mentioned above, there’s the critical study of food, but not of eating; there’s the study of sexuality but not sex. Surely the study of sleep also traffics in this interest in the symbolic and representation, but the phenomenological work on sleep – like your own – helps us strip away some of the cultural layers that might be distracting. But this depends upon a couple basic tenets: that, contrary to Foucault et al., we can come to understand (or at least posit) a human biology prior to discourse; and, secondly, that there is merit in accepting some scientific conceptions of the human, at least instrumentally, in order to reach other goals. Across the scholars working on sleep, I can’t think of one who’s so bold as to argue that there’s no such thing as sleep and that it’s pure social construction. Given that, it seems like we’re collectively on board with these two tenets, however temporary our acceptance of each of them is.

We might think about this in terms of what seems to be one of the most profound advances that the study of sleep has turned up so far, namely Ekirch’s rediscovery of non-consolidated sleep in Europe and North America (which I provide a footnote to in The Slumbering Masses). That we used to sleep differently and that consolidated sleep might be socially constructed has the potential to radically unsettle the science and medicine of sleep – and to open up possibilities for thinking about what else has been shaped so thoroughly by the civilizing process (to invoke Norbert Elias) as to totally escape notice or critique.

I think about this move towards temporary foundationalism in the social sciences as running parallel to the demise of basic science in the U.S.: just as social scientists are starting to get interested in basic biological processes, the government funding for the scientific study of these basic processes is disappearing (in favor of ‘translational’ science and medicine and epigenetic research). But maybe that’s just the nature of the pendulum: science moves one way, so social science moves in the opposite direction, never to meet. Or only to meet briefly in the middle, sometimes with dubious results, sometimes with more promising ones. So maybe the advance that we’re
making is that we’re taking a step back (so to speak) in order to see a broader canvas of social and physiological experiences.

But, again, these seem to be early days in the social and humanistic study of sleep, and as we move forward, there should be an ever-widening and deepening set of perspectives. And one of the effects of these moves should be the critique of our assumptions about sleep itself. Once things get to that point, it seems like we’ll pass the first rubicon on the way towards more profound advances in the social sciences and humanities more generally.

**SJW**: I have argued much the same thing as to what scholarship in the social sciences and humanities on sleep has, or hasn’t, added to our existing theories, concepts and methods so far. And there is no small irony in this current state of play, of course, when it comes to sleep of all topics: engagements, that is to say, however interesting and illuminating, which further reinforce rather than problematize our concepts and concerns with waking life, even when allegedly studying sleep.

We are also pretty much on the same page I think regarding the biological (as well as the banal) matters you mention, which are clearly critical issues in my view for scholars in the social sciences and humanities to further engage with and attend to.

Having said that, we can point to few notable examples of work of this kind which does I think break some new ground in relation to sleep ‘itself,’ so to speak, including (as you mention) both Ekirch’s work on segmented slumber in pre-industrial times and other more phenomenological explorations of sleep (such as [Drew Leder’s](#)) and my own work extending these insights further to embodied questions of sleep, vulnerability and human rights. Again however, we might add here some of Sara Arber and colleagues recent work too, which utilizes watch actigraphy to explore the dyadic and disruptive elements of sleeping together in everyday or every night life. Now watch actigraphy, of course, is a measure that has long since been used by sleep researchers interested in tracking sleep beyond the lab or clinic – and debates continue as to its merits as a sleep measure at all given its proxy status – but incorporating such measures into sociological research on the gendered dynamics of sleep across the life course does at least represent
another attempt to get at sleep as such (or sleep itself), as well as all the other more familiar (or second-order in your terms) sociological and anthropological stuff that surrounds or embeds it.

And yes too, as you suggest, we can perhaps reasonably expect more work that breaks genuinely new ground here in future in the social sciences and humanities after this ‘first wave,’ particularly if one considers the broader turn to biological and corporeal-material matters in the social sciences and humanities today, and associated calls for new engagements with the life sciences today, in sociology and beyond. Like Nikolas Rose, I think engagements of this kind are quite literally vital for the future of the social sciences and humanities, and sleep is a good place to explore and develop some of these issues, in terms of the ‘always already’ complex, reciprocal, relations between biology, biography, culture, self and society.

Finally let me say in this light, harking back to some of your qualms in response to the previous question and anticipating some of the issues we will doubtless be discussing shortly, that there is surely plenty of scope here, in both our research and our teaching, for problematizing or challenging (rather than reproducing, reaffirming or ‘reifying’) dominant conceptions of ‘normal’ sleep, as your mention of Ekirch and the position taken in your own book surely demonstrate. So I would encourage rather than dissuade you from teaching classes of this kind on sleep, as I am now starting to do myself with both sociology and medical students, as another valuable if not vital way to get your message across!

Q4. What role have capitalism and medicine played in the problematisation and politicisation of sleep over time?

SJW: Well you should really be kicking off here I guess, given the line you take in your new book on sleep, medicine and American life. Perhaps then I should discuss where I think we converge and diverge on these matters in terms of your line in the book.

Your main argument as I read it, focusing on the U.S. in the main, seems to be that human sleep is variable in ways that capitalism and medicine (as a mechanism of contemporary capitalism) fail to recognize or allow for -- given its new sleep regimen and preferred ideal of eight hours consolidated sleep per night -- and instead seeks to ‘pathologize.’ Hence the need, in your view,
to think beyond any such pathologization in order to account for these differences on the one hand, and to think about other more flexible institutional structures to accommodate these variations on other hand, thereby ensuring people get a good night’s sleep without recourse to medicine. This, granted, is to grossly simplify but it seems to get to the nub of what you are arguing in the book.

So where then if my reading is correct, do we converge and where do we differ or diverge on these matters?

Well, like you, I understand capitalism as a complex assemblage, which is deeply implicated in how we sleep and the sort of ‘problems’ people experience, both past and present. Whilst these sleep problems, moreover, may prove costly for capitalism in terms of accidents, lost productivity and performance and so on, we also agree I’m sure that sleep is big business for capitalism, including an ever expanding market of sleep related goods, products, and services designed to sell us the dream or promise of a good night’s sleep. The transformation of sleep itself furthermore into a form of ‘capital’ or a ‘productive act,’ if not the ultimate performance enhancer and secret to success, is something I find particularly intriguing if not ironic about the workings of capitalism today, as writers such as Steve Kroll-Smith and Megan Brown have ably documented in the case of practices such as the workplace nap or the power nap -- what my colleagues and I have recently termed the ‘customisation’ of sleep (Williams et al. 2013) in contemporary times whereby corporeal needs and corporate demands are further realigned in these and countless other ways.

Similarly, we both seem to be trying to work beyond the medicalization thesis these days (and nights no doubt) in seeking to more fully explore medicine’s complex if not contradictory roles and relations within all this. The medicalization thesis undoubtedly casts some important light on these issues, but it obscures or omits much in the process too, rendering at best a partial if not problematic picture, particularly when it comes to the newly forged links between sleep, enterprise and enhancement of the kind I alluded to above. My preference instead is to refer to the biopolitics of sleep, which includes of course some of the issues you raise in the conclusion of The Slumbering Masses under the, unfortunate in my view (if you will forgive me for saying so) rubric of a ‘multibiologism’: unfortunate, that is, given the ‘biologism’ bit
carries too must past baggage to be a useful social scientific term however much you wish to revamp or rehabilitate it. So perhaps we should be thinking about a better term of reference here to capture these multiple forms of sleep as human variation rather than medical pathologies, though I don’t have one ready-to-hand for you I am afraid! Margaret Lock’s notion of ‘local biologies’ perhaps might be useful here, or maybe something from the Nikolas Rose and Paul Rabinow stable on biosocialities?

But here anyway we begin to run up against some of my other potential qualms or quibbles with you on these matters, as I don’t think your thesis in the book, suggestive as it is, can be pushed too far, or to put it another way perhaps, it is surely only part of the story, albeit an important part of the story, even when restricted to America.

So yes of course these models and classifications of sleep you document and detail matter in terms of what is or isn’t defined as problematic or pathological at any given historical point in time. And yes of course, to repeat, capitalism is deeply implicated or imbricated in all this in terms of how our sleep has changed over time: the colonization or subsumption of sleep as a vital lifeworld matter by capitalism you might say. But we also surely need to acknowledge or accept that at least some of this problematisation or pathologisation of sleep is not simply the product of a failure to conform to the new sleeping regimen under capitalism you discuss, but a consequence of the fact that these ‘variations’ are in fact genuine problems, whatever the norm, model or regimen, that people struggle with and suffer from day in, night out: problems moreover, as an accumulating body of contemporary evidence in sleep science and sleep medicine suggests, with short and long-term risks for health, safety and wellbeing. Now the emergence of these latter risk discourses, to be sure, is important for us social scientists and scholars in the humanities to document, discuss and debate, but we also I think, harking back to some of the points I raised earlier about the need for a new more constructive and open relationship to the medical and the life sciences today, need to heed or take on board at least some of what these findings have to tell us. So there are problems I think with pushing your variation not problematization or pathologization thesis too far here, though perhaps to be fair you never intended to. Either way, I can’t quite see how conditions like narcolepsy, or other conditions like obstructive sleep apnoea (OSA) or restless leg syndrome (RLS) say, fit in with your
overall arguments here, despite an illuminating STS paper by Tiago Moriera (2006) on the emergence of OSA, and various critiques of the ‘marketing’ of the latter from the ‘disease mongering’ stable (Woloshin and Schwartz 2006).

As for relations between medicine and capitalism, well these are close to be sure, but they are also complex if not contradictory given medicine too of course, like capitalism itself, is an assemblage of many parts, including elements or strands of sleep science and medicine that may to varying degrees, implicitly if not explicitly, be more or less challenging or critical of contemporary capitalism, not least its inflexible institutions which pay like heed to our circadian or chronobiological ‘rhythms of life.’ So yes capitalism and medicine are intimate bedfellows, but the relationship is not always a happy and harmonious one even so.

Thirdly and closely related to this second point, your analysis I think underplays the valuable indeed vital role which medicine and public health may still play here, particularly those aforementioned strands which lend themselves to critiques of contemporary capitalism in various guises. Downstream medical or medicalised solutions, to be sure, can only achieve so much when the real or root causes of many sleep problems today ultimately lie ‘upstream’ in the wider global dynamics and drivers of contemporary capitalism and the ‘wired’ world, but we should be careful nevertheless, not to throw the proverbial (medical) baby out with the (capitalist) bath water here. Medicalisation indeed, we should remember, may be positive rather than negative, involving both gains and losses which need to be judged on a case-by-case basis. Hence it is certainly not all, or always, bad news or wrong-headed.

Finally, on a wider political note, another important aspect of all this that greatly interests me here, beyond the issues documented and discussed in your book, concerns not simply the problematization or pathologisation of human variations in human sleep, but the politics of sleep in terms or inequalities, inequities, justice and human rights. We now have a fairly sizeable body of evidence from social epidemiology, public health and the social sciences, for example, that suggests an inverse relationship between social position, particularly socio-economic position and sleep problems (duration and quality). I quite like Benjamin and Lauren Hale’s recent work in this vein, indeed, which poses the pertinent and provocative question of
whether social justice is good for sleep — and answers in the affirmative. Sleep is also a basic human right of course, as I discuss in my book on the politics of sleep, including violations both past and present in the name of interrogation if not torture, and the vulnerable sleep of those without bed or abode sleeping rough on our streets and in other poverty stricken parts of the world. So the politicization of sleep I think is quite literally a vital global matter with many faces and facets, some darker and more disturbing than others.

Anyway, perhaps these comments and concerns are unfair or wide of the mark, in which case apologies in advance, but here is your chance to correct me and set the record straight for other prospective readers too, so over to you...

**MWM**: I think you do a pretty good job of getting to the crux of the argument in *The Slumbering Masses*, which I'll simplify even more: the institutions that frame American everyday life are indebted to the particularities of American capitalism, which includes the historical industrial and colonial contexts in which American capitalism came to be the hegemonic economic form in American social life. Among those institutions, medicine is clearly important, but on equal footing with other social forms like work, school, and the family. Like all social forms, medicine exerts force on individuals, which might be disciplinary (or controlling) in its aims. And so, I forward the argument that we need to think about human variation more than pathology, which leads me to ‘multibiologism’ (which, yes, is a pretty clunky neologism), akin to earlier models of multiculturalism. The multibiological stance, which I'm sure I'll have to defend at length in the not too distant future, leads me to argue for more flexible (less disciplinary or controlling) institutions, which might result in less medicalization and more attention to the differential capacities of humans — both in terms of sleep, but potentially in other realms as well.

That summary aside, clearly the smoking gun in my argument is capitalism, both in the sense of industrialization forcing certain changes in human life (namely, the move to consolidated sleeping), and also in respect to the profit motive (both for individual workers earning a wage and doctors, scientists
and corporations making profit off of labor and the sale of pharmaceuticals). Pushing back against this problematization of sleep requires a pretty broad set of actors, which I try to gather together in *The Slumbering Masses*: non-compliant patients, social movements (like *Take Back Your Time*), and physicians who choose to find social rather than chemical solutions to disorderly sleep – and social scientists.

My cynical Marxian thinking really leads me to the position that we’re stuck with capitalism, but that we might be able to tinker with it from within. But that depends on drawing actors together across disciplinary and social divisions – hence ‘multibiologism.’ I wanted a word that made sense to a wide variety of people, and, due to the discourses of multiculturalism, multibiologism seemed to fit. And, for most people, it’s relatively free of any over-determining genealogy (we might see problems with ‘bio,’ but, in my experience, clinicians have even more problems with the ‘politics’ in ‘biopolitics.’) So it may be clunky, but as a tool its lack of finesse might lend itself to more immediately instrumental critiques. We’ll see...

But this is all to say that we’re in agreement that medical professionals – whether clinicians or public health researchers – can do more for improving sleep, but they need more tools to do that work with, since science alone clearly isn’t getting us very far. As an example, one might look at the constant debate about school start times in the U.S.: parents really believe that kids can be good students any time of day despite the evidence that adolescents need more sleep and school start times are directly at odds with their sleep needs. We might dismiss or critique the science, but if public health officials can embrace an idea like more flexible institutions, the result might be the same: we might end up with schools that allow students to attend when they’re best able and not when they have to. My more optimistic side tends to think that this is a real possibility – especially if we can link it up to discourses about efficiency! (However much we might internally deride ‘efficiency.’)

And we’re in total agreement about sleep and social disparities, which is research that really needs to be done among social and laboratory scientists. To forecast my answer to #5, I briefly mention it in *The Slumbering Masses* (and its at the heart of an article I’m working on), but I find one of the functions of a lot of contemporary medicalization to be the ‘whitening’ of
individuals; that is, medicine becomes one of the mechanisms by which disorderly individuals come to be orderly and brought into the fold of white, mainstream Western society (and I follow Douglas Holmes here in his discussion about race in Europe). More work definitely needs to be done on non-white disordered sleepers and sleep in non-white contexts – although I'll be slippery here and say that I don't want to delimit what counts as ‘white’ here and would rather leave it open ended to think about sleep across a variety of class and colonial (and postcolonial) contexts. My hope in pushing the study of sleep outside of whiteness is to get a more robust sense of what normative sleep really looks like, as well as getting a more robust picture of the social forms that privilege certain people and certain kinds of sleep.

Q5. **What normative questions and issues does this raise?**

**MWM:** As I mentioned above, medicine is one of the control mechanism through which individuals become more orderly, both in a top-down sense (clinicians disciplining individuals through medicalization) and bottom-up sense (of individuals wanting to be normal and seeking recourse through medicine). The most straightforward example here is the eight hours of consolidated sleep that individuals are induced to desire, and which drugs like Ambien and Lunesta take as the goal for their chemical structure. That consolidated model – at least as I argue it – is really about producing both orderly individuals and an orderly society. When people aren’t sleeping as expected, problems arise. And this goes for work, school, family and romantic relationships (and so on). But at the heart of this conception of order is really the unexceptionality of heteronormative whiteness.

The extension of this is the ordering of society itself, and one of the things I track are the ways that normative models of sleep and society in the U.S. and Western Europe are forcing other societies to align with them temporally. Sometimes this is just about aligning communities in nearby time zones for their collective convenience, as in the case of Spain in the E.U. But the stranger cases are those in which dominant societies force subordinate ones to meet them temporally across wide time zones – as in the case of the U.S. and India. U.S. businesses functionally preserves normal sleep for their employees while subjecting Indian workers to non-normative sleep schedules.
(by both American and Indian standards), which results in Indian employees being exposed to the possibility of Shift Work Sleep Disorder and social estrangement. So, while the normal is clearly at work here, it's working in perverse and uneven ways. It's important here – and this takes us back momentarily to our discussion of capitalism and sleep – to think about the consequences of our spatiotemporal orders, both locally and globally, and how these are producing new forms of inequality and risk.

One of the places where we diverge is human rights and sleep, which might be one of the ways that we might tackle these concerns about disparities in sleep. I’m constantly wary of human rights, since it places the human into often static terms, and often traffics in human exceptionalism. One of the generative things for me about sleep – and this might be a gesture towards work in the future – is that all life sleeps (or is dormant in some way). Tackling sleep from this perspective helps to decenter the human as the foundation for analysis – and, might also, lead to new models of thinking about sleep, as we come to consider why humans alone consolidate their sleep. That being said, I do think that taking a stance on human rights, torture and sleep in your *The Politics of Sleep* is a necessary step to take, in part because it helps us look towards the next horizon.

**SJW**: It is interesting to me that you’ve chosen to answer things that way in terms of emphasizing the normative (consolidated) models of sleep and trying to get people to conform to them.

That’s unsurprising and understandable, of course, given the line taken in your book, but I guess there is a prior or at least another question for to ask here as to whether or not our own stance on these matters (in the social sciences and humanities) might or should be normative, and if so, what exactly a normative stance of this kind might involve or entail. And that of course is itself simply another instance or iteration of a long-standing or running if not raging debate in the social sciences and humanities.

Your stance then, in the book, is kind of doubly normative if you like. Normative, that is, in the sense of a critique of the consolidated sleep norms we are supposed to conform today (and hence the pathologizations this creates) in favour of a multibiologism on the one hand, and normative in
terms of the stance you take as a consequence or corollary on the need for institutions to be more flexible on the other hand so as people don’t need to turn to medicine so much or so often (for chemical solutions to problems of capitalism).

Now whilst I have some problems, as I have already indicated, with pushing your pathologization (and hence your medicalization) critique or thesis too far, I am certainly with you on the need to stress the need for ‘upstream’ (institutional) rather than just, or ‘as well as’ I would say, ‘downstream’ (individual) responses to our sleep ‘problems’ today.

As for your ‘de-centred’ if not ‘slippery’ stance on human rights, well, my answer to that is both yes and no. You are right of course to be wary of, if not to problematize, any such appeals and I am, to be sure, mindful of those critiques too myself, including as you rightly say the fact that all life sleeps or is ‘dormant’ in some way. But I still want to hold on to some such notion that getting adequate or sufficient sleep is a basic or fundamental human right nonetheless, whether people choose to exercise that right or not. Hence depriving people of adequate or sufficient sleep for whatever reason is a violation of that right, and an important violation at that.

So I started off, in The Politics of Sleep, trying to ground these claims (through recourse to Bryan Turner’s work on human rights) in notions of bodily vulnerability, but I now find it more productive or useful to do so through recourse to the human development or capabilities approach of writers like Amartya Sen and Martha Nussbaum on human flourishing.

But the flip side of any such appeals to rights of course is responsibilities, particularly when or if we factor ‘risk’ into the equation too. So yes, as I have already indicated, we might wish to critique or problematize in some way contemporary discourses that construct sleeplessness and sleepiness as ‘at risk’ states, and yes we may also wish to appeal to the notion that people have a right not to sleep if they so wish -- or to sleep in ways that don’t conform to the prevailing sleep ‘norms’ or models you document and discuss -- but to the degree that this places others as well as ourselves ‘at risk’ then this also involves an obligation or responsibility to get sufficient sleep on the part of us all surely: one, I hasten to add, that is not akin to downstream victim
blaming but also, returning to your stance on these matters, places responsibilities on institutions too in helping facilitate this.

**Q6.** What remains to be done, in your view, in terms of future research agendas on sleep within the social sciences and humanities?

**SJW:** Well we’ve covered a lot of that ground already now in what we’ve said so far. The need for more studies in the sorts of areas and on the sorts of issues we’ve already discussed, that is to say, given we are still at a fairly early or first stage in these developments and debates. Having said that one area that remains very under researched still I think, even in this first wave of work, concerns issues of ‘race’ or ethnicity in relation to sleep and culture, both past and present.

More generally I guess my hope here, in terms of what ‘remains’ to be done, would (in part at least) be to explore and engage with sleep more as a vehicle for challenging than confirming the predominant waking assumptions and concerns of the social sciences and humanities to date, what you term ‘first-order’ issues or what I call ‘sleep itself’ sorts of questions and issues. I would also like to see, continuing in this vein, sleep woven more fully and inextricably into the fabric of the social sciences and humanities, rather than being some kind of add on or bolt on, marginal or ghettoized area of research and teaching in the social sciences and humanities, which returns us perhaps to your cautions about having specific classes or modules on sleep as such.

Finally I think we need to work hard on what, within all this, we can add or give back to sleep science and medicine, in the form of a constructive dialogue and debate which is mutually rewarding and enriching. So sleep could very well in this regard be an exemplar of such constructive or revitalized conversations if not collaborations between the biological and social sciences and humanities today.

Clearly there is much more I could say on these matters, and there are a number of other areas and issues I could flag here in terms of ‘what remains to be done’ (some of which I intend to ‘do’ myself in future of course), but I
will leave it there I think in the interests of a brief answer given we have exchanged a lot of words and thoughts on these issues already.

**MWM**: I, too, will keep this brief. We’ve covered a lot of ground, and, like you, I think the most important thing to focus on are issues of race and ethnicity related to sleep; the anthropology of sleep is fairly meager, and it would be a wonderful outcome of this conversation if more anthropologists just took the time to document how people are sleeping in their fieldsites. Which isn’t to say that anthropology and the study of race and ethnicity are synonymous, but for the purpose of the ethnological record, attending to human variations in sleep are just as important as human variations in diet.

And, like I mention above, I’d really like to see social scientists start to attend to sleep science in other historical and social contexts – especially in Italy and Japan, which both have robust histories in sleep science, and also happen to have different ideas about normative sleep. I’m sure there are other genealogies to account for too, especially those that have had little impact on a science that’s been ruled by Americans and Western Europeans for the last half-century.

Like you, and like I mentioned above, I think there’s a lot of work to be done at the intersections of medical, scientific, social scientific and humanities research, and I’ve often found scientists and physicians to be deeply interested in what we can provide for them. They might dismiss it in practice – or at least hold it in suspension in the lab or clinic – but people drawn to sleep are often intrigued by what it has, does and can mean to people. My hope in any of these collaborations – if it isn’t obvious already – is that we can start to decenter the burden on individuals to fit societal norms, and that medicine might take seriously the impacts of society. But, at the very least, it might lead to more robust understandings of the possibilities of science, society, medicine and the arts and their rootedness in human experiences.

That being said, the one thing that I would encourage our colleagues in the sciences to pursue is more basic research on human sleep. Those of us who talk about unconsolidated or biphasic sleep often make recourse to the same few papers published by Thomas Wehr in the 1990s – which are now pretty old, and aren’t really about biphasic sleep as such (for those who don’t know his work, it’s about seasonal affective disorder and what happens when you
put people in controlled environments where they have to spend most of their days indoors – they sleep biphasically). It would be great to see some people tackle the place of consolidated sleep in the sciences to see what – if any – benefits might be associated with biphasic sleep.

I should also confess that I’m done with writing about sleep for the time being – and maybe for a long time. So as much as I know that there’s work to be done, I also know that I’m not the person to do it. No pun intended, but a decade of working on sleep has been exhausting to me; I’m hoping to move some of the ideas that studying sleep have provoked for me into other realms – all under the rubric of the biology of everyday life. There are still biological phenomena less studied than sleep...

Q7. Finally, what about the future of sleep itself?  

MWM: How could we not talk about the future of sleep? More than any other question, this seems to be the one that people are broadly interested in – particularly whether we’ll be rid of sleep once and for all. Well, maybe after ‘Is my sleep normal?’

I find the question a little troubling, and make the argument in The Slumbering Masses that if we were ever to succeed in being rid of sleep, we would no longer qualify as human, since the experience is so integral to being the species that we are. Probably the best place to look to think this through is Nancy Kress’ Beggars in Spain, which is a science fiction novel that is built on the idea that in the near future, humans are able to genetically remove the need to sleep from the next generation. But only the wealthy undergo the program (it being rather expensive), and this leads to new class warfare – between the sleepers and the sleepless. Kress’ sleepless are cold and calculating, which she attributes to a loss of the ability to dream. I’m not so sure about the necessity of dreaming to make us empathetic creatures, but I definitely agree that the loss of sleep altogether might prove more troubling than we think. (The more fun science fiction novel about sleep is the Gillons’ The Unsleep, which interested readers should track down.)
I tend to find the question a little perverse since most people actually really seem to look forward to and enjoy sleep – why would we want to get rid of it? It’s rare to hear people suggest we get rid of eating, and especially not sex, but still we talk about getting rid of sleep.

The more likely way forward – and this is something that we’re both interested in – is finding a way to live with sleep that’s more humane than our current situation. It seems like everyone agrees that we aren’t getting as much sleep as we need or want, and that the sleep we do get could be better. There are different solutions, which we may or may not agree on, but we agree on that basic reality: more sleep would be better. Now it’s just a matter of forging that reality, and confronting the many social and cultural impediments to making a better world for sleep.

**SJW:** Well first let me say, returning to your confession at the tail end of the last question, that it is a shame you are ‘done’ with writing about sleep stuff for a while, although I suspect you will find yourself constantly returning to it, like the ‘return of the repressed’ maybe, if the ‘biology of everyday life’ is your ‘new’ subject matter. Sleep after all, would still be a kind of ‘absent presence’ here, even if you were trying to focus on other aspects of the ‘biology of everyday life.’

As for your take on the current question, well it is interesting here that you seem to answer this question, in the main, in terms of being ‘rid’ of sleep in some way or other. The question, after all, is simply asking about the future of sleep, which opens up a range of possibilities other than ridding ourselves of sleep, some admittedly more likely or probable than others. Anyway, being ‘rid’ of sleep is certainly one of the more extreme and unlikely of these future scenarios, as you yourself note in your book.

There is also a potential contradiction in your response here too isn’t there, given earlier you stated that sleep helped us decenter the human (as all life sleeps or is dormant at times in some way or others, you rightly reminded us) and yet you now seem to want to claim it as part of what makes us human?

Anyway, we both agree it seems, sleep despisers notwithstanding, that many if not most people value their sleep (even perhaps secretly those public
despisers or disavowers of sleep), deriving comfort and pleasure from it as vital time out. At most then, I think, we are likely to see an increasing customization of our sleeping patterns and practices in the future, but sleep itself will not be done away with any time soon if ever indeed, even if future developments in medicine, science and technology enable us to do so. Few of us indeed, I think, would ultimately welcome continuous wakefulness or some such state, even if we signed up to it initially; look what happens, for example, to those poor surgically altered souls who no longer sleep in J.G. Ballard’s essay ‘Manhole 69’ (I won’t give the ending away for those who haven’t yet but will now read it).

As for Kress’ Beggars triology, well yes that too is a rich source to consult in the science fiction genre, as my Warwick sociology colleague Deborah Lynn Steinberg (2008) insightfully discusses in her contribution to the Body & Society special issue on ‘sleeping bodies’ I co-edited (with Nick Crossley).

Finally let me say that that yes, whilst we both agree that finding ways to live with sleep that are more humane than current arrangements and institutions allow would be welcome, if unlikely, it is not quite as you suggest. Some sleep experts and critics, for example, would still contest or query your claim that people aren’t getting the sleep they need (even if they want more sleep), or that we live in a chronically sleep deprived society. And we can’t also claim, as you seem to suggest, that more sleep would necessarily be better: yes in many cases that would be true, of course, but not always, given too much sleep may also be problematic. As for confronting the many cultural and social barriers to making the world better for sleep, well here I couldn’t agree more: A fitting note to end upon indeed as a rallying call for the future...

Citation: