Theorizing Breast Cancer: Narrative, Politics, Memory

Mary K. DeShazer, *Wake Forest University*
Anita Helle, *Oregon State University*

The essays gathered for this special double issue of *Tulsa Studies in Women’s Literature* theorize written and visual breast cancer narratives from various aesthetic, ethical, theoretical, memorial, and political vantage points. When we invited proposals for this volume, we were prepared to take up transnational, queer, environmental, biomedical, and sociocultural perspectives on feminist theories of cancer embodiment and literary self-representation. We could not have anticipated that we would receive an abundance of submissions with a postmillennial emphasis and that many would stretch the traditional boundaries of “women’s literature” to focus on an array of multimodal breast cancer narratives. Included among the subgenres are romance novels, graphic memoirs, cyberfeminist blogs, autoperformances, photo-textual productions, cinematic narratives, and paintings that combine word and image.

Women’s cancer narratives and their scholarly treatments, as part of a broader academic terrain of illness narratives and studies of literature and medicine, have challenged dominant cultural discourses of women’s lived experience for several generations since the rise of the women’s health movements of the 1960s and 1970s. Among the earliest breast cancer narratives to receive critical attention were Susan Sontag’s *Illness as Metaphor* (1977), which calls for a de-stigmatization of cancer patients and an end to military metaphors of fighting the disease; Rose Kushner’s *Breast Cancer: A Personal History and an Investigative Report* (1975), which questions the ubiquity of the Halsted mastectomy and calls for study of environmental causes; and Audre Lorde’s *The Cancer Journals* (1980), which offers a Black lesbian feminist account of challenging medical hegemony and eschewing reconstructive surgery.1 Visual art also became a public medium for representing breast cancer in the 1970s and 1980s. A defiant poster featuring a photograph by Hella Hammid that depicts the tattooed mastectomy scar of United States poet Deena Metzger circulated widely, as did radical photographs of breasts *Marked Up for Amputation* by British photographer and memoirist Jo Spence.2 This trend continued in a postmastectomy self-portrait entitled *Beauty Out of Damage* by Matuschka that provoked controversy when it appeared on the cover of the 15 August 1993 *New York Times Magazine* and culminated in the 1999 publication of Hollis Sigler’s...
Breast Cancer Journal, a collection of the acclaimed artist’s paintings depicting her experience of this disease.³

Academic studies of illness narratives emerged late in the twentieth century, including such critical studies of autopathography as Arthur W. Frank’s The Wounded Storyteller: Body, Illness, and Ethics (1995), which examines the liberating and delimiting dimensions of restitution narratives; G. Thomas Couser’s Recovering Bodies: Illness, Disability, and Life Writing (1997), which theorizes representations of vulnerable embodiment in autobiographies about illness; and Jackie Stacey’s Teratologies: A Cultural Study of Cancer (1997), which critiques “masculine” cancer narratives that deify surgical oncologists as “heroic men of medicine” and that pressure women patients to “generate fantasies of heroic recoveries and miracle cures.”⁴ During the early twenty-first century, scholarly studies of illness narratives, and especially breast cancer narratives, have proliferated. In The Invading Body: Reading Illness Autobiographies (2007), Einat Avrahami argues that contemporary illness narratives “underline the uneasy coexistence of the lived body with the multiply inscribed cultural body” and compel an implicit reader-viewer-artist contract based on a “reality effect” that she defines as narrated through the traumatized self-in-crisis.⁵ In Fractured Borders: Reading Women’s Cancer Literature (2005), Mary K. DeShazer examines five ways in which women’s ill bodies have been represented—as medicalized, leaky, amputated, prosthetic, and (not) dying—and claims that literary depictions of cancer can provide readers with strategies for resistance, healing, and commemoration.⁶ Lisa Diedrich’s Treatments: Language, Politics, and the Culture of Illness (2007) traces productively the historical and narrative rise of the “politicized patient”; Ann Jurecic’s Illness as Narrative (2012) considers how pain moves from body to language in narratives of suffering; and DeShazer’s Mammographies: The Cultural Discourses of Breast Cancer Narratives (2013) explores how postmillennial visual and written cancer narratives depart from the strategies and themes of their predecessors.⁷

Breast cancer narratives published since 2000 differ from their twentieth-century counterparts in significant ways. They address previously neglected topics such as the possible links between cancer and environmental carcinogens, the ethics and efficacy of genetic testing and prophylactic mastectomy, and the shifting politics of prosthesis and reconstruction. Many feminist narratives question the medical establishment for emphasizing early detection rather than prevention and challenge mainstream cancer culture for its corporate complicity, pink iconography, upbeat rhetoric, and privileging of philanthropy over activism. Often collaborative or hybrid works, such narratives feature ecological, queer, genetic, and anti-pink discourses. They de-center survivor discourse by paying elegiac tribute to the often invisible women who die each year of this disease. As catalysts and
sites of public memory, these illness narratives engage readers and viewers politically, ethically, and aesthetically. In the United States alone, more than 225,000 women are diagnosed with breast cancer annually and nearly 40,000 succumb to it. Worldwide breast cancer rates are rising rapidly, and current projections posit that ten years from now 70% of all breast cancer cases will be in developing countries. It is therefore hardly surprising that new artistic forms have arisen for recounting trauma, celebrating survival, and memorializing the dead.

Postmillennial breast cancer narratives often take place at an uncanny locus of embodiment and disembodiment, evoking what contributor Jane E. Schultz terms the “(un)body double”; as Schultz argues, “If one’s image is unrecognizable, one must find one’s way back to a notion of the self that can be accepted”—or a self not so singular and not so wholly accepted. The essays gathered here and the focal texts they consider have emerged from the distinctive contexts, questions, and theoretical concerns and imperatives of twenty-first-century developments in medicine and the public sphere, as well as in narrative arts. Each essay steps off in one way or another—through primary texts and theoretical questions—to a constellation of issues we identify as postmillennial. While in each year since 2000 a growing number of women of all ages has been diagnosed with breast cancer, the array of biotechnological remedies that women are encouraged to pursue as previvors, patients, or former patients has also multiplied. These treatments and their discursive representations evoke new forms of identities, subjectivities, and embodiments complexly interwoven with the technologies that produce them. The widely publicized mapping of and testing for hereditary breast cancer genetic mutations (BRCA1 and BRCA2) that indicate a predisposition to breast and ovarian cancers is only the most obvious example to illustrate that what Frank terms a life trajectory “interrupted by illness” must also be considered a narrative fractured from multiple directions, through complexly intersecting interdisciplinary, transgenerational threads and forms of embodiment. We recognize the current scholarly interest in narratives of prophylactic mastectomy by including several articles that analyze memoirs with BRCA themes in this special issue.

Since the millennium, another distinctive development in breast cancer narratology is the emerging recognition that breast cancer diagnosis and prognosis is both a language matter and a resource matter. Neologisms such as “previvor,” “deleterious mutation,” “genetic mutant,” “pinkwashing,” “graphic body studies,” “onco-filmographics,” and “autothanatography” mark the pages of these essays as evidence that the signifier is as important (and sometimes as controversial) as the signified in breast cancer theory and narrative. We realize that it may no longer be medically accurate to speak of some forms of breast disease (for example, ductal carcinoma in
situ) as cancer at all. At the same time, feminists have been quick to point out that breast cancer risk culture, as well as access to diagnosis, treatment, and cultural discourses surrounding treatment, is unevenly and differentially distributed across geographies and generations. We thus include several essays that recognize how a politics of location continues to matter in raising questions about loss, survivability, and interpretation of such critical new terminologies.

As yet another distinctive postmillennial development in the field, this special issue foregrounds ways that the changing conditions, contexts, and discourses through which breast cancer is culturally inflected and deflected in a postmillennial era challenge master narratives of the past and supplement life writing with new forms of expression. Several essays in this collection represent perspectives that make diverse use of multiple media, from blogs to comics to visual art. Together, these emerging subgenres raise new issues about mourning and commemoration as individually or collectively conceived, enacted, and produced. They raise questions about the politics of loss, about the grievability of loss as publicly, socially, or familially inscribed, and about the ethics of witnessing and testimony through which readers and viewers are interpellated. What these subgenres have in common is that word and image, text and visualization, witness and resistance to traditional procedures of mourning coexist in productive tension and differentiation. As a consequence, we find that more variable regimes of visibility, memory, and female embodiment are being depicted and theorized.

Differential viewpoints are represented variously in this special issue. Racial and ethnic diversity is evident from the African American, indigenous, queer, and disability studies perspectives offered. Two contributions from Canada are included and one from Spain. Generational diversity occurs in the inclusion of second-wave feminist perspectives alongside third-wave and in productive cross-generational dialogue. Discussion of ovarian cancer as well as breast cancer narratives is featured, along with genre diversity—from memoir and autopathography to popular fiction, from theater and autoperformance to the graphic memoir as well as other forms of visual narrative such as photography and painting.

One aspect of postmillennial breast cancer that may be under-represented here is the transnational perspective, given the global statistics on women diagnosed with and dying of this disease. There are reasons for this; relatively few written or visual breast cancer narratives have been published from areas other than North America and Western Europe, although there are increasing numbers of journalistic reports, magazine articles, and online resources that offer global perspectives. The 15 October 2007 cover of Time, for example, features as its headline “Why Breast Cancer Is Spreading Around the World”; the accompanying essay by Kathleen
Kingsbury notes that 500,000 breast cancer patients worldwide would die that year of the disease and offers testimonials from women in China, India, South Africa, Egypt, and elsewhere. Among the most poignant statements is that of Kenyan survivor Mary Onyango, who explains that a breast cancer diagnosis feels hopeless to most women in her country: “If you can’t travel overseas for treatment, . . . you just sit and wait for your death” (p. 37). In The Wounded Breast: Intimate Journeys through Cancer (2001), Lebanese writer Evelyne Accad explains that many Arabic-speaking people still “refer to cancer as Al-marad illi ma bitissamma: ‘the disease not to be named’”; she wrote her memoir to work against silence and stigmatization in the Middle East. In Manmade Breast Cancers (2001), United States activist Zillah Eisenstein likewise posits a global imperative by developing “a breast-felt politics” and tracing “a theorized journey from my body to a politics of bodies for a healthful globe.” Contributors to this collection who offer transnational vantage points include Diane Price Herndl and Amy Boesky—each of whom analyzes (from differing critical perspectives) Blood Matters: From Inherited Illness to Designer Bodies, How the World and I Found Ourselves in the Future of the Gene (2008), Russian-American journalist Masha Gessen’s provocative study of breast cancer genetics among Ashkenazi Jews—and Eva C. Karpinski, who examines a Canadian documentary film, One of the 1 Percent: The Sandy Ahenakew Story (2008), which chronicles one Aboriginal woman’s struggle with breast cancer.

The two inaugural essays in this volume, Price Herndl’s “Virtual Cancer: BRCA and Posthuman Narratives of Deleterious Mutation” and Emily Waples’s “Emplotted Bodies: Breast Cancer, Feminism, and the Future,” inscribe an arc of theoretical and discursive concerns that characterize postmillennial breast cancer narratives. That these essays are informed by feminist rethinking of previous “models of emplotment” (Waples, p. 59) and “new narratives of deleterious mutations” (Price Herndl, p. 37) associated with genetic testing for cancer speaks to the terms on which many of the essays in this volume use the materiality and agency of breast cancer narrative to challenge foundational definitions of the premillennial illness narrative. In doing so, they give rise to new configurations, terms, and definitions of a deeply gendered genre.

Price Herndl begins by noting that, in the era of genetic testing, twenty-first-century breast cancer narratives issue reports from a new country. If Virginia Woolf, in her essay “On Being Ill” (1925), characterized the commonness of illness in the 1920s as “undiscovered countries” (“the spiritual change that it brings, how astonishing, when the lights of health go down”), Price Herndl identifies a virtual unexploded minefield of postmillennial impossible illness that follows from problematizing what it means to have “virtual cancer” (p. 25). While traditional illness narratives step off from the point of a knowable interruption of daily life, autopathographies inspired by genetic mutation—Price Herndl examines Pretty Is What
Changes: Impossible Choices, the Breast Cancer Gene, and How I Defied My Destiny (2008) by Jessica Queller, Blood Matters by Gessen, and Joanna Rudnick’s documentary film In the Family (2008)—consider the multiple temporalities, identities, and narratives that frame a “story of an illness that is not, or at least not yet” (p. 25).

The questions that animate Price Herndl’s essay, while inspired by a group of memoirs published in 2008 shortly after the advent of genetic testing, resonate throughout this special issue. What are the “new narratives” of breast cancer, and in what ways do a myriad of “old” discourses and master narratives—objectifying, romanticizing, commodifying, subversive, or resistant—seem not so old, after all? In what ways do twenty-first-century narratives challenge our understanding of the boundaries that separate present from past understandings of autopathography as a genre? And what new genres might emerge from a reconsideration of the logic (or illogic) and temporality of living—and writing—at the “crossroads of bodies, technology, and narrative” (p. 25)?

While feminist theorists have noted that the prevalence of the twenty-first-century BRCA memoir is itself a sign of the privilege attendant upon access to costly tests and the choice to “do something about it” when a genetic mutation is discovered, Price Herndl contests the narrow framing of prophylactic mastectomy and “virtual cancer” through the wider lens offered by feminist theories of materiality (p. 31). A material approach to breast cancer narratives, she argues, raises new questions about the ideological and ideational effects of the work that these texts perform through their narrative structures and in the material world in which such works are suspended. As commodities, like the commercialized genes that give rise to them, virtual cancer memoirs enter into the exchange systems of economies and markets and into the logic of the simulacrum. Just as the “world of contemporary genetic medicine has moved fully into the postmodern confusion of signifier and signified” (in that to have a mutation is often conflated with being ill), Price Herndl concludes her essay by noting that any possibility of writing new narratives may depend upon nothing less than “perform[ing] the posthuman in a different way” (pp. 29, 40). Drawing upon feminist disability studies as well as the resistant and revolutionary body of Donna J. Haraway’s cyborg, Price Herndl’s essay proposes that a deeper questioning of the complex relationships between the human and the nonhuman, between breast cancer narratives and environmental degradation, might be a place from which the cultural work of the previvor memoir can be reconsidered.

Waples’s “Emplotted Bodies” pivots on a series of epistemological questions posed by this third-wave feminist, who is indebted to Lorde’s Cancer Journals, a pioneering second-wave breast illness memoir, yet who is committed to offering a different generational perspective on issues of
embodiment, prosthesis, and narrative: “What does it mean—culturally, politically—to have breast cancer in your twenties?” Waples asks, “And what does it mean to be a twenty-something feminist with breast cancer at this historical moment?” (p. 47). In her analysis of postmillennial cancer narratives and blogs by women under forty, Waples critiques the postfeminist reification of hegemonic femininity, heteronormativity, and survival rhetoric that dominates Kris Carr’s Crazy Sexy Cancer Tips (2009) and Geralyn Lucas’s memoir, Why I Wore Lipstick to My Mastectomy (2004).17

Bridging as well as critiquing generational differences in postmillennial breast cancer memoirs, however, Waples finds some members of her generation productively navigating alternative temporalities and “intersectional subjectivities,” as illustrated by the queer narrative of Tania Katan, My One-Night Stand with Cancer (2005), and by the cyberfeminist blog of the late activist Jennifer Merendino (p. 64).18 Ultimately Waples argues that breast cancer is a third-wave feminist issue and that young chroniclers of this disease are increasingly attending to the multiple subjectivities that a cancer diagnosis invokes. She further claims that such narratives challenge mainstream survivor culture by offering generationally distinct representations of breast cancer’s materiality and its narrative emplotment.

The second cluster of essays in this special issue of Tulsa Studies in Women’s Literature focuses on innovative literary representations of breast cancer in recent works of autobiography, popular fiction, and drama. The authors of these essays explore several key questions: What distinctive contributions to readers’ understandings of ill women’s material, technologized, and postoperative bodies do the narratives under consideration offer? How do feminist theories of illness and embodiment, as well as postmodern constructions of shifting narrative subjectivity, enhance our interpretations of written texts that depict breast cancer today? What tropes and personae, aesthetic and ethical debates, and opportunities for discursive resistance and audience witness do the focal cancer narratives engage?

In “Valid/Invalid: Women’s Cancer Narratives and the Phenomenology of Bodily Alteration,” Jane E. Schultz argues that in the late twentieth century and especially in the postmillennial era, “we have an emerging etiology of breast and ovarian cancer narratives, in which manifestations of diseases and the bodily alterations that attend them are more graphically represented than in narratives published before 1990” (p. 74). These protean narratives have shifted in accordance with oncological treatment advances, she suggests, and with changing levels of cultural receptivity toward an embodied subject’s frank testimony about her medicalized identity and self-reconstruction. Examining two exemplary breast cancer autobiographies—Christina Middlebrook’s Seeing the Crab (1996) and Catherine Lord’s The Summer of Her Baldness (2004)—alongside Susan Gubar’s narrative of ovarian cancer, Memoir of a Debulked Woman: Enduring Ovarian Cancer (2012), Schultz considers how these works function as
phenomenological constructs that “distill subjectivities based on the need
to understand and heal through telling” and how they reflect the ill writers’
recalibrations of their gender and sexual identities (p. 71).19

The three narratives that Schultz analyzes present the cancerous body in
different forms and degrees of travail. Middlebrook recounts the trauma of
a metastatic breast cancer diagnosis in her thirties followed by seven weeks
of radiation and a stem cell transplant that leaves her unable to recognize
her own image in a mirror. Lord, in contrast, confronts a less invasive but
nonetheless unsettling diagnosis and treatment—early breast cancer that
requires a lumpectomy—by establishing a queer and saucy email persona,
Her Baldness, who provides her lesbian creator with new forms of textual
performativity and gender-bending. Gubar responds to her diagnosis of
advanced ovarian cancer in yet another way, by reflecting on the treachery
of an apparently healthy body and the difficulty of describing for public
consumption the devastating effects of culturally taboo surgical procedures
in the “nether regions”—for as Schultz rightly notes, ovarian cancer nar-
ratives are “written in but not on the body,” as breast cancer narratives
are often said to be (pp. 74, 75). In linking these narratives theoretically,
Schultz posits that each writer confronts a shared dilemma of unrecogniz-
ability after her cancer surgery yet challenges her designation as invalid
by validating—indeed, by reabsorbing—her postoperative body through
touch and through textual representation.

Not everyone who writes a memoir about cancer, embodiment, and
shifting subjectivity has had the disease. Since the discovery in 1990 by
Mary-Claire King of a gene linked to hereditary breast and ovarian cancer,
the isolation of this genetic mutation—known as BRCA1—in 1994, and
the subsequent identification of the BRCA2 mutation in 1995, increas-
ing numbers of high-risk women, some of them cancer free, have writ-
ten autobiographical narratives that trace their family history of cancer,
chronicle their decision whether to undergo genetic testing, and explore
the emotional and medical impact of inherited cancers. In her contribu-
tion to this collection, “‘This is how we live’: Witnessing and Testimony
in BRCA Memoirs,” Amy Boesky argues that written representations of
 genetic mutations depart from conventional modes of illness narratives and
that trauma theory can help readers untangle the complex web of repetitive
loss, grief, and confession that such memoirs weave. Herself the author of
a powerful previvor memoir, What We Have (2010), and an edited collec-
tion of genetic testimonials, The Story Within: Personal Essays on Genetics
and Identity (2013), Boesky here analyzes two BRCA narratives—Gessen’s
Blood Matters and Sarah Gabriel’s Eating Pomegranates: A Memoir of
Mothers, Daughters, and the BRCA Gene (2009)—that explore “the ways
self-knowledge changes for the genetic subject through the process of rep-
resentation” (p. 89).20
As mutated subjects, Boesky argues, both Gessen and Gabriel occupy an interstitial space from which to challenge conventional restitution narratives through an emphasis not on survival but on radical uncertainty—not knowing when/whether a cancer diagnosis will occur yet internalizing the reality that testing positive for a BRCA mutation has raised their lifetime risk of breast cancer to 90 percent and ovarian cancer to 50 percent. In her narrative Gessen, who is premenopausal and BRCA positive, struggles with her doctor’s insistence that she make premature decisions about prophylactic surgeries. Instead, she employs her skills as an investigative journalist to garner data that help her comprehend her sudden catapult into the “cancer caste,” and she embeds her findings in her memoir.21 Gabriel’s narrative features more traumatic retrospection and less fact-finding, Boesky claims, since Gabriel’s breast cancer diagnosis is the catalyst for writing the memoir. Indeed, the diagnosis prompts recurrent flashbacks to her mother’s death from ovarian cancer when Gabriel was eighteen and to her own conflicted decision to undergo a prophylactic oophorectomy shortly after the birth of her second daughter. These writers’ approach to temporality differs, Boesky posits: “Whereas Gessen feels it is too early (for a decision, for surgery), Gabriel is haunted by the sense of being too late” (p. 92). Both writers nonetheless are committed to testifying about their experiences of mutated subjectivity and familial illness legacy, regardless of whether their narratives end with unanswerable questions or with a sense of liberation that comes from breaking silence.

Challenging the crumbling taboo against public testimony about breast cancer has become a recurring theme in recent romance fiction as well as memoir, as Melissa F. Zeiger’s contribution to this volume makes clear. In “‘Less Than Perfect’: Negotiating Breast Cancer in Popular Romance Novels,” Zeiger notes that scores of postmillennial narratives in this genre feature a protagonist who has survived diagnosis and mastectomy, only to find herself reckoning anew with her altered eroticism, body image, and sense of self. Special attention accrues to the mastectomy scar, which serves as catalyst for meditations on wholeness and for climactic moments in which the scar is revealed to an actual or putative lover for the first time. Pink culture, as promulgated by mainstream breast cancer organizations, also appears in these texts, whether in the protagonist’s choice of a sexy dress to conceal her prosthesis or as a description of her “rosy-tipped” breast in the cases where nipple reconstruction has occurred.22 Despite the hyperfemininity of such representations, Zeiger joins such earlier scholars as Tania Modleski, Janice Radway, and Catherine Belsey in offering a feminist defense of the “emotional reach” (Modleski’s concept) of romance fiction—in this case the cancer romance—as a “powerful site . . . for elaborating a productive and critical public breast cancer discourse (p. 108).”23
As evidence to support this claim, Zeiger analyzes diverse romance novels that thematize breast cancer yet go beyond the strictures of survivor culture in acknowledging the brutality of the standard treatment regimen, the fact that breast cancer often recurs after the five-year passage that many believe signifies cure, and the tragic truth that thousands of women die each year from this disease. Zeiger also investigates the sexual and racial diversity in breast cancer romance through close readings of a lesbian novel, *Seeking Sara Summers* (2008), whose previously heterosexual protagonist finds love with a woman and faces cancer simultaneously, and two African American novels, *Crown and Glory* (2011) and *No Regrets* (2002), that depict racial differences in treatment access and recovery rates for their protagonists. Zeiger concludes that “the emergence of this subgenre reflects a shift in what is acceptable to say about breast cancer” (p. 108). Ultimately she concurs with Belsey’s assessment that romance fiction is “more contradictory, more plural, more supple, and more elusive in its political implications that we have hitherto been prepared to recognize” (pp. 906-07).

The feminist political project of performing the explicit body onstage to interrogate the ways in which gendered and sexual embodiment is rendered oppressive or liberating provides the focus of Marta Fernández-Morales’s contribution to this collection, which examines comparatively the representations of breast cancer in a premillennial play by Linda Park-Fuller, *A Clean Breast of It* (1993), and a postmillennial play by Sarah Ruhl, *The Clean House* (2004). In “‘Is Anybody Paying Attention?’: Breast Cancer on Stage in the Twenty-First Century,” Fernández-Morales analyzes the shift from the feminist testimonial of Park-Fuller, in which mimesis dominates as the protagonist shares and politicizes her cancer experience to raise audience consciousness, to the postmodern landscape of Ruhl, in which magical realism dominates as the ill protagonist realizes that her cancer is terminal and convinces her women friends to help her die laughing.

Fernández-Morales argues that despite significant representational differences, there exists a “thematic continuum within the feminist theatrical tradition from 1990s autoperformance . . . to postmillennial experimental works” due to shared political motives and common Brechtian strategies of defamiliarization (p. 130). Concluding on an optimistic note about ongoing performance of feminist breast cancer narratives, Fernández-Morales suggests that “the politics of the personal—including illness and the female body—demand renewed strategies and formal novelties to continue to engage contemporary theatrical audiences” and that defamiliarizing plays like Ruhl’s provide such technical and aesthetic innovations (p. 140). Given that postmodern feminist theory has long considered the problem of visual embodiment in cultures supersaturated with images of women’s bodies and fetishization of the female breast, it comes as no surprise that practical and theoretical approaches to twenty-first-century breast can-
cer narratives have also taken a visual turn by exploring new forms of cultural and representational visibility. Essays clustered in the final section—by Martha Stoddard Holmes, Eva C. Karpinski, Michelle Peek, and Laura E. Tanner—consider the emergence of distinctively postmillennial multimodal and hybrid forms of textuality and their potential for expanding the material and discursive field of breast cancer representation and activism.

In what may be taken as a prospectus for a new area of “graphic body studies” with breast cancer narratives as its focal concern, Stoddard Holmes’s essay, “Cancer Comics: Narrating Cancer through Sequential Art,” launches the essential question of how the medium of graphic illness narratives in the sequential art of comics might be seen as presenting materially distinct “aesthetic and sociopolitical agents” with potential to transform cancer’s cultural positioning (pp. 147, 148). Recognizing that recent autobiographical graphic narratives by women artists with breast cancer, such as Miriam Engelberg’s Cancer Made Me a Shallower Person and Marisa Acocella Marchetto’s Cancer Vixen (both published in 2006), have been deemed culturally riveting, if controversial, treatments of breast cancer, Stoddard Holmes’s essay considers the specific modes in which visual and verbal texts in graphic comic form together are performing a new kind of cultural work, materializing and manifesting semiotic re-coding of their central, afflicted figures.26

Drawing upon theoretical insights of comics theorists Hillary L. Chute and Scott McCloud, Stoddard Holmes argues for re-valuation of the graphic illness narrative as a new “intermediate space” between the academic and the popular, with potential for capturing more diverse cancer experiences and reaching new audiences (p. 147).27 Making tangible and visible the critical connections between the aesthetics that underpin visual and verbal modes and the rendering of “dynamic embodiment” as a shared feature of diverse cancer experiences, Stoddard Holmes points to comics’ capacity to transform by evoking the “morphing embodiment” that accompanies cancer experiences, destabilizing a unified central self to reflect the experience of bodily alteration and enacting temporal/spatial dislocations that disrupt narrative logics of progress and decline (p. 148).

In “Onco-Filmographics: The Politics and Affects of the Canadian Breast Cancer Documentary,” Karpinski examines similar questions of resistance and transformation in the medium of documentary filmmaking. Since 2008, the Toronto Breast Cancer Film Festival (Breast Fest), the only North American film festival devoted to screening films about breast cancer, has become a site of dialogue and performance in breast cancer art and activism, influenced in part by the Canadian National Film Board’s (Studio D) tradition of supporting feminist perspectives in governmentally sponsored films on social issues. Karpinski’s neologism “onco-filmographics”
brings both formal and ideological considerations into view by joining the traditional meaning of filmographies, as the writing of film, with the graphic shock introduced by “multimodal life narratives that combine visual images and words in a variety of media, technologies, and materials” (p. 164). While the propensities of the graphic novel to reconfigure alternative subjectivities and forms of embodiment respond to methodologies of literary analysis (image, word, and line), Karpinski grasps the potential of women’s documentary films about breast cancer through cultural analysis and the making of “cancer publics” through contestation and dialogue (p. 163). Such analysis raises profound questions about what becomes “unbearable to watch” and about the affective and ideological disposition of various cancer publics, communities of viewers whose attitudes toward representations of medicalization, suffering, legal frameworks, local and global economies, and media discourses are framed by and bound to intersectional perspectives on illness, gender, sexuality, and race (p. 181).

Karpinski’s tripartite categorization of films (as liberal, multicultural, or radical in documentary style and political orientation) organizes an abundance of films produced from 1997 to 2011 and screened at Breast Fest. Looking beyond the neoliberal repackaging of individual heroics and the naturalized representations of heteronormative survivorship exemplified by well-meaning but ultimately uncritical breast cancer documentaries such as Mary Anne Alton’s Run Your Own Race: Dr. Marla’s Journey with Breast Cancer (2006), Karpinski turns to the affects and representations that a mass-mediated breast cancer documentary must ultimately grapple with if the medium is to produce truly counterpublic, counterhegemonic interventions. Two films by lesbian directors, Gerry Rogers’s My Left Breast (2005) and Stevens and Ahenakew’s One of the 1 Percent, depart from the status quo in their challenge to heteronormative relational patterns and their distinctive adaptation of cinéma-vérité techniques. Karpinski’s analysis of Ahenakew’s documentary also raises far-reaching questions about the potentially healing resources that an indigenous community may bring—and about the global traditions of Aboriginal filmmaking that inspire them—through strategies of activist collective intervention in the broader medicalized field of colonial and racial hierarchies. Finally, Karpinski’s close analysis extends to overtly political films that reach toward formation of cancer “counterpublics,” films that “genuinely ‘touch’ individual viewers” by explicitly critiquing the regimes of medicalization, pinkwashing, environmental toxicity, and geneticization (pp. 164, 166). Films such as Exposure: Environmental Links to Breast Cancer (1997) and Pink Ribbons, Inc. (2011) demonstrate potential for enlarging public knowledge by linking “a mixed economy of feelings”—from love and outrage to loss and grief—to new modes of relationality, witnessing, and institutional critique.
Scholars who have theorized representation of ill and vulnerable bodies have speculated that new genres may emerge from “the contingent and contiguous relationships between writers and artists’ experience of terminal illness and their textually or visually displayed selves” (Avrahami, p. 3). In *The Invading Body*, Avrahami broke new ground by proposing that photonarratives of illness in narrativized relations of traumatized and self-exposed subjects comprise an “emerging subgenre of self-documentation” whose reality effects may parallel and sometimes contradict the facts of somatic experience (p. 19). Where women’s bodies are both site and instrument of cultural critique, theories of visual embodiment must often plumb the limits of representation. Building on these insights, Peek’s essay, “Willful Vulnerability: Generous Offerings in *Cancer in Two Voices* and *The Century Project*,” examines affinities and dissimilarities in two narrative projects. One is a photo-narrative, Frank Cordelle’s *The Century Project*, widely exhibited and published in book form in 2005 (as *Bodies and Souls: The Century Project*); the other a less well-known lesbian feminist cancer memoir, Sandra Butler and Barbara Rosenblum’s collaborative autothanatography *Cancer in Two Voices* (1991), which opens with Barbara’s diagnosis with metastasized cancer and near-certain death.31 Peek’s essay freshly contributes to our understanding of visual embodiment among women who give the camera access to nude bodies in stages of advanced cancer by theorizing what happens when such exposures are written under the sign of impending death. Theorizing the problem of agency and will, Peek argues that such representations are doubly inscribed as a “willful” performance oriented toward the future, and a willed contract that putatively governs the posthumous disposition of properties (in *propria persona*, in one’s own body) in relation to reader-viewers (p. 189).

Such painfully conceived examples of a self in crisis, Peek contends, evoke a deeper questioning of subjectivity, authorship, and witnessing. In both projects, the strategies women use in juxtaposing the multiply inscribed cultural body with the indexical realities of vulnerable, devastated, ravaged bodies gesture toward an “extratextual reality” as bodies in pain that resist being encompassed in discursive and representational forms alone (Avrahami, p. 15). Because *The Century Project* and *Cancer in Two Voices* expose the reader-viewer to shared and unshareable moments, Peek contends, the images of extremity they present ultimately create questions about singular authorship and identity and the forms of picturing and looking that radically exceed the frames in which they are given.

Tanner’s essay, “Living Breast Cancer: The Art of Hollis Sigler,” also steps off from the dynamics of the spectator’s relationship to the lived experience of women with breast cancer and to the reader-viewer contract, governed as it is by the dynamics of looking and informed by themes of loss, self-memorialization, and memory, which attend all autothanatographic
projects. Tanner’s essay, accompanied by three plates by Sigler, contributes to this special issue a sustained feminist and phenomenological analysis of a compelling body of work by a painter who chose, as Tanner notes, to “feature the connection between her art and her breast cancer experiences” by a “new way of framing her images”—inscribing her reflections in the physical frames of her artwork—following her diagnosis of recurring breast cancer in 1991 (p. 222). This body of work has been used in medical education and medical humanities settings, but it is only beginning to be more widely known and theorized following its postmillennial exhibitions. Tanner’s essay looks both forward and back to a body of work produced in the 1990s, but one that in many ways anticipates postmillennial questioning of the problematics of representation, permeable borders of metaphor and materiality, and contemporary speculations on environmental and genetic predispositions, as well as on the hybrid visual-verbal text. Such subjects are invoked by compelling details in the painter’s work and its metacommentary (Sigler’s paintings are inscribed by narrative titles and sometimes by written inscriptions that frame their visual access). It is the “rare immediacy” of this artwork, its difficult present-ness to the viewer, that Tanner’s essay addresses in its argument that the domestic details of Sigler’s painting and their extraordinary pattern of representing disoriented and dislocated space “push[es] past the material surfaces” of the body to interrogate constructions of the everyday and extend parameters of what could be considered “normal” (pp. 223, 219).

Unlike the figures of “willful vulnerability” excessively visible to the reader-viewer analyzed in Peek’s essay, Tanner’s phenomenological model of understanding seeks to illuminate and grapple with the absent presence of the ill body as the hallmark of the artist in her painting, a subject who does not appear present as a representational figure, but whose affective interiority, emotional trauma, and bodily dislocation are everywhere obliquely implicated in the dislocation of lived domestic, interior, and natural spaces and affectively charged details. If space is the lived present of the phenomenological world of illness for this artist, Tanner argues, the reader-viewer’s expectations are also materially repositioned at the threshold of expected access to visual embodiment. We are reeled in by an absent presence to a world of illness that both disorients and provides a fragile holding space for reconsidering its discursive and cultural supports. Locating evidence of this living of breast cancer not only in the agonizing particulars of shape-shifting domestic environments in Sigler’s paintings but also against the backdrop of phenomenological theories of visualization and embodiment, Tanner’s essay points toward the necessarily multidisciplinary and multimodal understandings that are proving productive at the sites—both intimate and social—of theorizing breast cancer’s emerging narratives and genres.
The World Health Organization claims that breast cancer is the type of malignancy that affects the most women globally today, since more than 1.4 million each year receive a breast cancer diagnosis and 500,000 women worldwide die from it annually. Although medical advancements have challenged the once dominant belief that cancer constitutes a death sentence, the fact that treatment, which frequently involves removal of a malignant tumor or breast, fails to excise the lingering presence of cancer in the lived present underscores the impossibility of recovering a singular and intact postoperative body. If the breast cancer experience remains awash with doubt, then the narrative uncertainties and multiple temporalities that women occupy in the aftermath of a diagnosis become, paradoxically, a stepping-off point for artistic creation. As coeditors we hope that this special issue will provide readers with new theoretical ways of framing these creative ventures. In addition, we join S. Lochlann Jain in envisioning an “elegiac politics” for twenty-first-century feminist theories of breast cancer, “a space . . . that is not about comforting ourselves and each other, and that is not about righteous anger but, rather, is a space of mourning and a space that allows for the agency and material humanity of suffering and death.”

We trust that the essays collected here will enhance readers’ understanding of narratives of grief and memorialization as well as narratives of recovery and restitution.

NOTES

Unless otherwise noted, article citations are from Tulsa Studies in Women’s Literature, 32.2/33.1 (Fall 2013/Spring 2014) and are cited parenthetically in the text.


2 For the photograph by Hella Hammid, see Deena Metzger, “The Woman Who Slept with Men to Take the War Out of Them” and “Tree” (Culver City, CA: Peace Press, 1981); and for the photographs by Jo Spence, see Spence, Cultural Sniping: The Art of Transgression (London: Routledge, 1995).


5 Einat Avrahami, The Invading Body: Reading Illness Autobiographies (Charlottesville: University of Virginia Press, 2007), 8, 14. Subsequent references
will be cited parenthetically in the text.


9 Frank, *The Wounded Storyteller*, 56. Frank’s explanatory model of illness narratives assumes that “disease interrupts a life, and illness then means living with perpetual interruption” (p. 56).


21 Gessen, Blood Matters, 11, quoted in Boesky, “‘This is how we live’: Witnessing and Testimony in BRCA Memoirs,” 95.
28 Mary Anne Alton and Marla Shapiro, Run Your Own Race: Dr. Marla’s Journey with Breast Cancer, directed by Alton (Toronto: 90th Parallel Film and Television Productions, 2006), videorecording.
29 Gerry Rogers, My Left Breast, directed by Rogers (St. John’s, NL: Pope Productions, 2000), videorecording; and Ahenakew and Stevens, One of the 1 Percent.