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This essay examines Audre Lorde's illness narrative, The Cancer Journals, *through the lens of postmodern theories of identity. By raising the ethical question of whether contemporary theory forecloses on the autonomy so important to people suffering from serious illness, this essay contributes to ongoing debates over identity, subjectivity, and agency.*

Audre Lorde's *The Cancer Journals*: Autopathography as Resistance

WILLIAM MAJOR

Few projects on life writing can deal with the nature of the self without tackling the question of humanist identity, now known as the problem of the *subject*. In a certain sense, critics and students of autobiography often find themselves caught between a common-sense belief in the quotidian entity that we call the self, and the knowledge that what seems so much a given is in many ways a social or linguistic construction. Even with the critiques of autonomy, humanism, and transcendence that have formed the better part of literary scholarship over the last thirty years or so, we find the ongoing popularity of a literary genre that often indicates this belief in autonomous selfhood. "Despite the present poststructuralist moment in history," Suzette Henke writes, "most contemporary autobiographies are engaged in fashioning coherent narratives of their own lives, even though they recognize that the concept of a stable identity allied with the myth of a universal subject has proven to be a fantasmatic cultural construct" (xv). Some current literary criticism seems to regard the "I" of autobiographical writings as an illusion synonymous with a critical naïveté, as if, with a little theoretical sophistication, we can blithely theorize the self out of existence. But, as Paul John Eakin notes, it is difficult to find a more useful term when dealing with life writing:

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"Whereas some critics today seek to avoid *self* as variously compromised by bourgeois, transcendental, or androcentric assumptions and associations, I believe it to be indispensable to any treatment of autobiography" (10, emph. Eakin's). Despite the inherent conflicts over this issue, we might agree that the scepticism over the epistemological and ontological status of the self has allowed us to understand that autobiographical subjectivity may not be representative, reflecting a universal and at times transcendent experience particularized within the unique consciousness of the author. The question arises, then, over the potential consequences of a radical disengagement from the idea of autonomous selfhood, especially for those writers whose subjectivity is already suspect from a social point of view.

For the autopathographer, the total deflation or dispersal of the self—even the self as an imaginary, utopian ideal—is often unacceptable from an ethical, political, and ontological point of view. Indeed, until recently, the ethical issues raised by the deconstruction of the stable referent in autobiographical writings have not been adequately addressed. For instance, one need not believe in otherwise outmoded assumptions about autonomous subjectivity to argue that recourse to the self as a theoretical, if utopian, *fiction* can be redeeming for people whose sense of identity has been damaged. Susan J. Brison, for instance, situates the need for stable subjectivity within the context of surviving a trauma: "Although the survivor recognizes, at some level, that these regained assumptions are illusory, she learns that they are necessary illusions—as unshakable, ultimately, as cognitively impenetrable perceptual illusions" (21). The human experience of what it means to have an identity, damaged as it can be by bodily affliction or trauma, exceeds our theoretical foreclosure of stable subjectivity, and it is here that a nuanced understanding of postmodern subjectivity, feminist autobiography theory, and the body can help us undo the conceptual gridlock between romantic individualism and identity understood as the mere effect of powerful discourses. We might ask to what degree a wholesale negation of romantic identity undermines the autonomy and agency that might be useful to the autopathographer attempting to resist not only the somatic eruption of a serious illness, for instance, but also its coding within the social world.

Is the subject of the illness narrative a special case, somehow different from the subjects of other forms of life writing? One can certainly make the argument that the ethical stakes are higher for the autopathographer or the survivor of trauma, for the dissolution of self is made so much more ontologically and epistemologically real than some paeans of post-

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modern dispersal might wish to acknowledge. What is it like *to lose* one's identity in an experiential way? Henke notes that a trauma such as "rape, incest, childhood sexual abuse, unwanted pregnancy, pregnancy-loss, or a severe illness [. . .] threatens the integrity of the body and compromises the sense of mastery that aggregates around western notions of harmonious selfhood" (xii). Perhaps, though, *trauma* is too strong a term, for, as G. Thomas Couser writes, "bodily dysfunction is perhaps the most common threat to the appealing belief that one controls one's destiny" (9). Because the experience of loss of self often transcends contemporary discourses of subjectivity, we need to be vigilant about just where and when we condemn the positing of "harmonious" subjectivity, for there are certainly people who have lost certain fundamental illusions about selfhood, about their bodies, and such loss does have its effect on identity. While our suspicion over the reliability of human experience has its place—especially as it seeks to undermine universal categories that presuppose one form of subjectivity or identity over another—such suspicion fails when it denies as pure romanticism the worth of that experience.

In a suggestive perspective on women's life writing as a genre that contests long-held assumptions about the self and the body, Sidonie Smith outlines a practice of women's autobiography—she calls it a "manifesto"—that would "reject the sovereignty of this specular *ancien régime* and the dominance of the universal subject" (157): "Purposeful, bold, contentious, the autobiographical manifesto," Smith writes, "contests the old inscriptions, the old histories, the old politics [. . .] by working to dislodge the hold of the universal subject through an expressly political collocation of a new 'I'" (157). Neither poetry nor fiction can achieve the kind of emancipatory effect that autobiography might, Smith implies, since life writing allows the subject to undermine the masculine universal stranglehold on identity, on those "exclusionary practices" (9) that define subjectivity. Smith hopes to contest the repetitious category *man* and its exclusive claim to identity, which characterizes—or once characterized—autobiography and its criticism. What is most interesting here is Smith's contention that autobiographical manifestoes offer a theatre of liberation, one of the "occasions for restaging subjectivity [. . .] [and] resistance" (156-57), and that a certain kind of feminist life writing can potentially undermine the social desire for old forms of stable subjectivity. The clear question that arises, however, is how a "non-universal" positioning of the subject can serve as a basis for viable modes of resistance; Smith warns, for example, that "any autobiographical practice

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that promotes endless fragmentation and a reified multiplicity might be counterproductive since the autobiographical subject would have to split itself beyond usefulness to be truly nonexclusionary" (156).

Smith is by no means alone in her hopeful, if not celebratory, insistence on the dispersal of masculine models of transcendence. Indeed, such issues are also central to Jane Flax, who asks perhaps the most pointed questions for those concerned with politics and subjectivity: "Can there be forms of subjectivity that are simultaneously fluid, multicentered, and effective in the 'outer' worlds of political life and social relations? Could multicentered and overdetermined subjects recognize relations of domination and struggle and overcome them?" (92-93). Flax is an unabashed postmodernist; her belief in fluidity and struggle are central to her conception of ethics in which most claims for universalist positions are dangerously irresponsible: "I have [. . .] become profoundly frightened by the consequences of appeals to non-contingent beliefs and the refusal to see oneself as necessarily and deeply embedded in various relations to power. Rather than abandon such grandiose beliefs, we are tempted to find others whom we can absolutely control and onto whom we can project our finite and flawed humanity" (32). For Flax, transcendent subjectivity raises issues of power and control, and to reify the universal subject is in effect a profound impulse toward repressive power: "I believe four of the greatest tragedies of modern Europe—slavery, the oppression of women, nazism, and Stalinism—were potentiated by our collective wish that innocent and universal positions are possible and desirable" (32). Yet, like Smith, she still questions whether the ethical utility of multiplicity can serve as an "emancipatory" (93) basis for a politics that would not replace one metaphysics, such as Self, Man, Truth, with another—Woman, Feeling, Nature. One clear way out of this apparent quandary is to think through and past this incessant mantra that *discourse(s)* makes us who we are: "This celebration of difference can mask the hegemony in postmodernism of a singular category—discourse (or textuality)" (100). In fact, one can easily make the claim that our urge to substitute the self with discourse, even if we agree that it is an ethical/political necessity on a certain level, simply valorizes multiplicity to the degree that it becomes an empty signifier.

Flax, however, leads us in the right directions when she writes: "No singular category can do justice to the vast and highly differentiated variety of processes in and through which subjectivity can be constituted and expressed. An implicit privileging of language, speech, and writing circulates through this one [discourse]. Many aspects of subjectivity

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and its practices are denied, obscured, or marginalized. Discourse is a particularly inapt synonym for practices (for example, ballet or breast-feeding) which are predominantly affective, sensuous, visual, tactile, or kinetic. These qualities are important in the constitution and expression of subjectivities" (100). Flax obviously alludes to the body—the "affective, sensuous, visual, tactile, or kinetic"—an entity under such current scrutiny by cultural critics that it would be impossible to do credit to the variety of perspectives on what exactly we mean when we talk about the body. One thing seems clear, however: our bodies are not mere discourse. While Flax believes fundamentally in the import of language "in the constitution of subjectivity," she makes the point that we also "tend to ignore or deny the potentially empowering, limiting, constraining, and partially autonomous effects of our psychic-somatic processes" (100). Perhaps one reason for our reluctance to engage and understand the importance of the body in the constitution of subjectivity, Shirley Neuman notes, is "that western cultures assume an analogy between mind, masculinity, and culture, and between body, femininity, and 'nature,'" a dichotomy that "only reinforce[s] the disembodiment of the self characteristic of most autobiographies" (138). Neither discourse nor experience offers us a way through this quandary, yet only by considering the two simultaneously can we come to a more ethical, if not more complete, understanding of subjectivity expressed both as an effect of discourse and as the immediate and experiential realm of desire. For, when we look at the question of the subject not as if we were looking at a specimen in a Petri dish but rather as an agent with all of the desires, contradictions, and moments of clarity that people actually do have, then notions of identity as merely the effect of power, language, or discourse oversimplify what it means to have, or to lose, one's identity. Again, Flax is instructive on this point: "Temporary coherence into seemingly solid characteristics or structures is only one of subjectivity's many possible expressions. When enough threads are webbed together, a solid entity may appear to form. Yet the fluidity of the threads and the web itself remains. What felt solid and real may subsequently separate and reform" (94). The coherence, however illusory, of this "solid entity" is of special importance, for it is here that the ethical questions raised by autopathography are most apparent. In order to situate Audre Lorde's *The Cancer Journals* within these issues, I first consider the question of viable political resistance, a practice with which Lorde is most concerned.

One potentially fruitful way to approach the issue of resistance is through the lens of Paul Smith's *Discerning the Subject*. Indeed, Smith's

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inclusion of autobiography in his wide-ranging study of the effect of contemporary theoretical models of inquiry on the subject and the self argues for the particular force that life writing holds as a possible way out of the subject/individual bind, apocalyptic pronouncements of its demise notwithstanding. Smith questions the ethics of poststructural analysis, including its demarcation of the subject as the effect of power, in the name of rediscovering human agency, not by reinvoking the humanist self but by suggesting that any active political praxis must originate *somewhere.* In this way, Smith introduces into critical theory notions of ethical and political responsibility, especially those branches of theory that have effectively disassembled practical subjectivity and human experience as merely discursive categories. For Smith, poststructuralism and deconstruction are particularly impoverished models of political praxis in their refusal to locate an agent of resistance: "Current conceptions of the 'subject' have tended to produce a purely *theoretical* 'subject,' removed almost entirely from the political and ethical realities in which human agents actively live, [. . .] [so] a different concept of the 'subject' must be discerned or discovered" (xxix). The over-theorized and abstracted postmodern subject fails to meet the goal of resistance, a fact that suggests a certain schism between a political and theoretical model of the self, with the latter neglecting actual "political and ethical realities" in which people live. Smith thereby claims, if only implicitly, that criticism should not foreclose on a politicized human agent, though he would not go so far as to rely on the humanist self as the grounds for a useful politics. Although Smith works well within contemporary theoretical models, his ambivalence about critical theory clearly centres on the effects of the theoretical enterprise on the subject's ability to contest those discourses and practices she might find repressive. In short, for the subject to counter and resist hegemony—including, I might add, the hegemony of discourse—she might need some ground other than pure dispersal.

The ethical concepts of *agency* and *resistance* would engage literary theory in a debate over the status of the subject and its ostensible erosion. Such critique takes the form of what Paul Smith calls *dis-cernment,* of coming to some understanding of the cultural, political, and social forces that influence and construct the subject in her daily life as well as offer an ideological foil against which she can resist. So Smith's agent of discerning—the autobiographer or the critic, for instance—is neither individual self nor subject, but someone escaping the totalization espoused by both critical theory and humanist illusions of holism and autonomy.

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"Dis-cerning the subject" challenges abstractions by showing that "the human agent *exceeds* the 'subject' as it is constructed in and by much poststructuralist theory as well as by those discourses against which poststructuralist theory claims to pose itself" (Paul Smith xxx). Such an autobiographer/critic might investigate the cultural production of ossified forms of identity, as I argue is the case with Lorde, by not foreclosing on the agency so important to combating those very ideologies that help shape who we are.

What do we talk about when we talk about cancer? In *The Cancer Journals*, Lorde portrays the illness experience as a function of certain social practices, such as medical intervention and the cult of beauty, that she would attempt to understand, oppose, and disrupt. She thus highlights the peculiar dilemma of the autopathographer who challenges medical and cultural authority in that her interrogation of modern medicine is also, in some instances, a critique of one of the prevailing modes of identity formation: the white heterosexual body as a visible signifier of beauty and health. Lorde writes first as a black lesbian feminist with breast cancer; as Jeanne Perreault notes, "Lorde encourages a multiplicity of selves, and the spirals of selves (Black, lesbian, feminist, mother, poet) that touch, meet, cross, and blur according to context must all be given voice" (21). In the essay "I am Your Sister" from *A Burst of Light*, Lorde says, "When I say I am a Black feminist, I mean I recognize that my power as well as my primary oppression come as a result of my Blackness as well as my womanness, and therefore my struggles on both these fronts are inseparable" (20). In giving each aspect of her subjectivity a voice, she can to a very large extent dissemble the cultural desire for her to be one person, to give up her truth, for each vein of subjectivity demonstrates a different and often shifting truth: her subjectivity relies on a multiplicity of experience. Referring to Lorde's biomythography, *Zami: A New Spelling of My Name*, Leigh Gilmore categorizes Lorde's fluid subjectivity as a definite political strategy meant to problematize the social and generic desire for a stable, centred self: "Lorde moves both within and against political ideologies that take the subject to have a single, primary identity: either lesbian or black or working class. I take the problem of Lorde's subject positions to be central to autobiography's law of the subject. While subjects are doubtless complex, our ideologies of personhood reduce this complexity for political ends" (32). Lorde's strategy is the same in *The Cancer Journals*, where the resistant political self, based as it is on the importance of blackness and the strength of women's

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community of difference, predominates. In other words, Lorde contests forms of subjectivity that would deny the reality of her difference and ask that she become a self recognizable to the dominant culture, a process that recalls Sidonie Smith's conception of an autobiographical manifesto: "The autobiographical manifesto confronts the ghost of identity assigned her by the old sovereign subject, what Paul Smith terms the ideological 'I,' a fixed object position representing culturally intelligible and authorized performances of identity" (158). As I show in this essay, shifting subjectivity does not necessarily undermine the desire for stability, especially for someone who is undergoing the trauma of breast cancer. Lorde's multiplicity helps her engage the dominant culture on a variety of fronts without sacrificing her various identities to what Sidonie Smith calls the *"ancien régime"* of the "I."

Lorde's body—its blackness, its lack of a breast, its cultural absence—clearly fails to signify within masculine sexual economies except as a negation, and this is why she must posit a community more disposed to her particular form of difference: *"I am defined as other in every group I'm a part of.* [. . .] *Yet without community there is certainly no liberation, no future, only the most vulnerable and temporary armistice between me and my oppression"* (12-13, emph. Lorde's). We might say that Lorde arrives at what Judith Butler and Linda Singer call a state of "excessive femininity" wherein the female body breaks the "economy of masculinist power" intent on excluding it. According to Butler, because patriarchy invests women as "fetishized objects, phantasmatic sites of erotic investment" (4), to write as a "feminine" author is to be "erased and yet writing, absent yet assertive," all in the name of undermining the "masculinist regime of power" (4). As a black lesbian feminist with breast cancer, Lorde takes up this call to "excess" by *identifying* where pain and biomedicine-*cum*-patriarchy conspire to deny her agency and her subjectivities, and she accomplishes this by highlighting her body as that which cannot so easily be inscribed within a masculinist image repertoire. To put the matter slightly differently, Arthur Frank suggests that Lorde's body—"what it means to define and claim it—is the point of contest in her testimony," yet "'define' and even 'claim' are still too verbal, too cognitive: the body is the excess of any definitions or stated claims; it is in excess of any language that testimony can speak. [. . .] The body is always 'more,' because the body *is* 'more'" (139-40, emph. Frank's). Frank points to the difficulty in theorizing the reality of the body through language (a point also made by Flax), as if the discourse of the body fails to capture the contingency that is its reality. Yet the key point here is that by taking

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the necessary step to translate the physical and social nature of pain and loss into language and theory—by theorizing experience—Lorde helps to shape a community of women that combats those normalizing forces that would deny the reality of their experience and ask her to be one person. Lorde's body may be in excess of one normalizing sphere, but it clearly has a symbolic function as a point of departure for other women.

After her modified radical mastectomy, Lorde writes: "*Is this pain and despair that surround me a result of cancer, or has it just been released by cancer? I feel so unequal to what I always handled before, the abominations outside that echo the pain within. And yes I am completely self-referenced right now because it is the only translation I can trust, and I do believe not until every woman traces her weave back strand by bloody self-referenced strand, will we begin to alter the whole pattern*" (11, emph. Lorde's). Lorde does not of course only refer only to the physical pain here; her allusion to whether her current "despair" has only "been released by cancer" points to a deeper psychic trauma brought into the open by the loss of her breast. Her trauma is the alienation and separation wrought not by the damaged body, but by the larger pain shared by women separately and in silence. And so the answer for Lorde is to re-imagine her self as the self of community, of alterity: "*My work kept me alive this past year, my work and the love of women*" (13, emph. Lorde's). Though pain makes her "*completely self-referenced*," she nevertheless knows that in the name of subverting the gripping hegemonic forces of isolation and alienation, overcoming pain's confluence with power means connecting with the larger "weave" of women who may be feeling self-referenced as well. Writing the self-into-being is one way of achieving this connection, a process that Perreault calls "autography," "the process of self-in-the-making. [. . .] Autography [. . .] invites the reader to reconsider the imbrications of subjectivity, textuality, and community" (2). Speaking and theorizing are therefore essential to Lorde's form of resistance to what Paul Smith calls a "cerned" singularity—identity as an effect of discourse. Like Flax and others, Perreault justly argues that there is something missing when we relegate Lorde's body to discourse: "To think of self as merely discourse seems arid, and to choose 'discourse' as the dominant trope for discussing this I, this writing, is to disfigure the passion with which Lorde allies her written to her physical self" (21). After all, let us not forget that Lorde's somatic reality is one in which her "real breast has been disappeared, and not as rhetoric" (Perreault 20). If Lorde is truly a "self-in-the-making"—it may be more accurate to say "selves-in-the-making"—then her construction of subjectivities and

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multiplicities depends on the projection of community, on being heard, as a way to resist overwrought medical practice. The medical and cultural desire that asks that she deny her various identities—especially the post-mastectomy body that symbolizes the "physical and psychic reality that might be integrated into a new sense of self" (16)—pain and all, best expresses itself in the highly sexualized hegemony of denial and silence signified by prosthetics.

While in recovery from her modified radical mastectomy, Lorde notes that her physical pain makes her "susceptible to ideas [. . .] [and] patterns and networks" that disallow the visibility and sense of community that would help her through her ordeal; she theorizes that many of these "networks" are normative and help to "pressure [women] to reject the adventure and exploration of our own experiences, difficult and painful as those experiences may be" (41). Lorde alludes here to a specific cultural operation on her sense of self, wherein she is expected to conform to what might, for lack of a better term, be otherwise called a "neutral" model of subjectivity. In actuality, however, such a model demonstrates the particular confluence of biomedical practice and cultural desire; in other words, medicine enforces the social demand that Lorde be one kind of body, one kind of woman. Couser writes that "medical discourse, ostensibly and ideally the language of healing, may be at times counterproductive—that it may contribute to patients' suffering even as it purports to ease it." This is not to argue that medicine has a conscious agenda to harm the patient, a practice that would violate the Hippocratic Oath, but that its focus on disease tends to discount the patient, thereby fostering deep feelings of alienation: "autobiographical accounts of medical training and personal narratives of illness reveal how medical discourse may alienate doctors from patients and patients from their bodies and bodily experience" (19). One of the remedies currently in vogue to redress this disparity in power relations is an effort to re-invoke the patient's voice, to try to effect a change in medicine by privileging the truth-value of speech. Clearly, without a more thorough understanding of the cultural authority of medical discourse, medicine's "tendency to infantalize patients, reify illness, and medicalize experience" (21) will continue, a point that Lorde makes in *A Burst of Light* when her desire to take control of her body and make her own medical decisions makes her seem like a petulant child in the eyes of her physicians. She writes that the doctors are "treating my resistance to their diagnosis as a personal affront. But it's my body and my life and the goddess knows I'm

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paying enough for all this, I ought to have a say" (76). Lorde here asserts a form of ownership over her body that undermines the doctor's putative authority. Perhaps more importantly, in doing so she also wishes to have some say over her body's meaning in a culture that would rather have her stay alienated and alone, a stranger to herself and other women.

The material form of normative hetero-social ideology that would have Lorde be something other than a post-mastectomy black woman is the wad of lamb's wool "pressed into a pale pink breast-shaped pad" (42) that a worker for the American Cancer Society's Reach for Recovery program gives her to wear after her operation. For Lorde, this intervention is not only infantilizing, but it also emphasizes the larger cultural desire to cover difference:

> I came around my bed and stood in front of the mirror in my room, and stuffed the thing into the wrinkled folds of the right side of my bra where my right breast should have been. It perched on my chest askew, awkwardly inert and lifeless, and having nothing to do with any me I could possibly conceive of. [. . .] Somewhere, up to that moment, I had thought, well perhaps they know something that I don't and maybe they're right, if I put it on maybe I'll feel entirely different. I didn't. [. . .] I looked at the large gentle curve my left breast made under the pajama top, a curve that seemed even larger now that it stood by itself. I looked strange and uneven and peculiar to myself, but somehow ever so much more myself, and therefore so much more acceptable, than I looked with that thing stuck inside my clothes. For not even the most skillful prosthesis in the world could undo that reality, or feel the way my breast had felt, and either I would love my body one-breasted now, or remain forever alien to myself. (44)

Here Lorde straddles the axis between alienation and desire, for the prosthesis, a cultural intervention symbolizing a form of silence, not only does not feel like a part of herself but it is also *of the wrong colour.* The body that has so abruptly signified radical contingency, loss, and pain—all keys to her emerging identity and her constitution of a community of women—metamorphoses into that which can neither speak the social language of health nor conform to the normative assumptions of race. It is almost as if Lorde and her body become the very image of the loss of control so feared by a culture invested in noncontingent subjectivity and so untheorized by medical discourse. But Lorde understands that the breast form is not her, and, in its negation of materiality and difference, "women are kept from expressing the power of [their] knowledge

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and experience, and through that expression, developing strengths that challenge those structures within our lives that support the Cancer Establishment" (58). Her refusal to wear a breast form helps identify the medical/social imperative of silence and blindness perpetuated by "Cancer Inc.," itself determined by a masculine economy of beauty that not only cannot "see" absence, but also cannot fathom blackness. In this instance, the Cancer Establishment offers a form of social redemption through integration into the patriarchal mirage of "health," based as it is on a fetishized female body—the breast as the universal sign of a healthy sexualized selfhood, as long as it remains (in)visible. Lorde seems to suggest that the existence of the Cancer Establishment is its own rationale, a self-reflexive logic, a manifestation of the *common sense* of power. After all, why wouldn't Lorde want to wear the prosthesis? But the hidden body also potentially negates the community that results from making her difference visible. Perreault notes that "rejecting the unreality of a false breast is rejecting a lie; [. . .] it is erasing the difference between herself and women who have not undergone a mastectomy" (27). "What are the words you do not yet have?" Lorde writes, reflecting on the fear of visibility. "What do you need to say? What are the tyrannies you swallow day by day and attempt to make your own, until you will sicken and die of them, still in silence?" (21). Accepting the breast form amounts to acquiescence to the powerful cultural mandate of silence.

That speaking about the social meaning of prosthesis may bring about criticism and censure, or worse, will be ignored, is a consideration born of fear; this fear reproduces itself as a naturalized consequence of having breast cancer, as if women with cancer were already caught in an infinite loop of diminishing returns. In the manner of Michel Foucault's well-known analysis of the dynamics of confession, the potential power of confession to change the self has in fact been predetermined by the cultural desire for sameness and normality, and women have to a large degree internalized their own oppression. Foucault writes:

> The confession is a ritual of discourse in which the speaking subject is also the subject of the statement; it is also a ritual that unfolds within a power relationship, for one does not confess without the presence (or virtual presence) of a partner who is not simply the interlocutor but the authority who requires the confession, prescribes and appreciates it, and intervenes in order to judge, punish, forgive, console, and reconcile; a ritual in which the truth is corroborated by the obstacles and resistances it has had to surmount in order to be formulated; and finally, a ritual in which the expression alone, independently of its external consequences,

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> produces intrinsic modifications in the person who articulates it: it exonerates, redeems, and purifies him; it unburdens him of his wrongs, liberates him, and promises him salvation. (61-62)

Lorde argues, however, that "in the cause of silence"—an apt phrase that suggests the larger need for the docile, "healthy" body—"in the cause of silence, each one of us draws the face of her own fear—fear of contempt, of censure, of some judgment, or recognition, of challenge, of annihilation. But most of all, I think, we fear the very visibility without which we also cannot truly live" (*Cancer* 21). Paradoxically, Lorde suggests that women can truly come together only when they visit and make plain their alienation from normative spheres, a process contingent upon critique and visibility. "Silence betrays the self," Perreault writes of Lorde, "and speaking the self is an action, one resisting the 'final silence' of death and the everyday silences of self-betrayal. If death is silence then life must be (in part at least) language, and giving the self in language, or to language, is a death-defying act" (24-25). Lorde recognizes that prosthetics also promises a vision of health that necessitates certain compromises on her part and that of other women: "By accepting the mask of prosthesis, one-breasted women proclaim ourselves as insufficients dependent upon pretense. We reinforce our own isolation and invisibility from each other, as well as the false complacency of a society which would rather not face the results of its own insanities" (61). "I believe that socially sanctioned prosthesis," Lorde writes, "is merely another way of keeping women with breast cancer silent and separate from each other" (16). It is thus that Lorde unmasks the normative ideology of health—and biomedicine's complicity in fostering the same—by promoting her body's colour, deformity, and materiality, and thereby creating a community of activists who understand that self-knowledge means knowing the self-as-subject.

What would Lorde's community of activist women look like? In her investigation of environmental pathogenesis, for instance, Lorde imagines a community of women to ameliorate the physically and culturally atomizing experience of breast cancer by calling for "an army of one-breasted women" to descend upon Washington and demand "that the use of carcinogenic, fat-stored hormones in beef-feed be outlawed" (*Cancer* 16). This army of women would theoretically appropriate or make visible difference, a political tactic *contingent upon repressive masculine economies of language and power.* In what is surely a vision of utopian political resistance, Lorde reworks the alienating logic of health. "To be available to herself," Frank writes, "she must find a connection to all who share that condition" (65), and in so sharing she constructs what

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Perreault calls an "I" that equals "we." Butler's and Singer's formulation of excess holds here, for by advertising her body Lorde makes it a social text *in excess* of the repressive metaphysical voice signified by the Cancer Establishment and hetero-social normalization. The very visibility that the Cancer Establishment resists, however, is that which Lorde produces, regardless of whether it is "bad for the morale of the [doctor's] office" (59), which a nurse tells her on one visit to her doctor when she refuses to wear her breast form. Her breast is both an absence and nightmarish presence at the heart of male desire: "There still appears to be a conspiracy on the part of Cancer Inc. to insist to every women who has lost a breast that she is not different from before, if with a little skillful practice and a few ounces of silicone gel she can pretend to herself and the *watching world*—the only orientation toward the world that women are supposed to have—that nothing has happened to challenge her" (62, emph. mine). But does not Lorde's visibility and her investment in speaking out make her vulnerable to the normalizing tendencies of culture? And does her text act as a prescription for all women who have undergone breast surgery?

More than a heterogeneous, disseminated, and spontaneous attempt at resistance, Lorde's autobiographical project seeks not only to understand power but also to manifest a utopian ideal: a well-informed "army" of single-breasted women—Lorde calls them Amazons—ready to break with medical and social codes of normalization. In short, her text supports an idea of embodied and political activism so necessary in the land of disembodied postmodern subjectivity. Paul Smith says that "it is negativity which also and simultaneously produces the human agent" (150), and one of the values (among many) of Lorde's text is that it comes from a position of difference and negativity and does not try to legitimate or recover humanistic presence; rather, it uncovers, and in this uncovering creates the community through which power is contested and identity constructed. To put the matter differently, the normalized figure of desire—beauty, whiteness, health—Lorde opposes is partially (never fully) subverted through a dialectal tension with its own absence (blackness, loss of breast). Only at this moment are the terms of the debate between the humanist self and the fully "cerned" subject turned willy-nilly, and the agent that eclipses assumes multiple subject positions without succumbing to the perforce nihilism of discourse or the troublesome eidolons of medicalized normality.

Finally, and perhaps most importantly, this text demonstrates the need for the autopathographer to theorize. bell hooks notes that the

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sometime feminist call to arms "the personal is political" shifts the burden away from politics to the sphere of the personal: "If the personal and the political are one and the same, then there is no politicization, no way to become the radical feminist subject" (106). hooks values the role of personal narrative in *describing* experience, but, as Linda Alcoff and Laura Gray-Rosendale make clear, hooks understands that "if the narration of experience is not bifurcated from theory, then [. . .] the act of speaking out can become a way for women to come to power" (216). The need for the speaking subject to become both speaker and theorist allows that subject to take some form of control over the reception or mediation of the experience. Here, Foucault's "expert" listener is also the speaker or the community of empathic witnesses. hooks writes, "Simply describing one's experience of exploitation or oppression is not to become politicized" (106). To that end, hooks and Alcoff and Gray-Rosendale show that Foucault's sometime dark vision of self as fundamentally caught up within the networks of power can be situated differently when the experiential self forms the basis for collective consciousness and theory. This need to theorize experience is one of the lasting messages of *The Cancer Journals* and, I think, many of the debates over subjectivity. Lorde loses her breast—we cannot forget this fact—but of course such loss happens not only to her, nor are the effects of her experience limited to her private sense of identity; indeed, one can make the argument that the text undercuts the very idea of private and inviolate subjectivity. Her own analysis of the cancer industry, of how we understand health and beauty in America, is evidence of her fundamental awareness of her own subjectivity-in-the-making, a process relevant for other women as well. "Politicization," hooks asserts, "necessarily combines this process (the naming of one's experience) with critical understanding of the concrete material reality that lays the groundwork for that personal experience" (108). Lorde speaks, it is true, but she also speaks about speaking, about the conditions of her speech, and in this she moves through (not past) the personal to the political.

Lorde's strategy, therefore, should help to illuminate some of the questions of subjectivity and selfhood adumbrated earlier in this essay, especially in light of the medicalization of the body. Much contemporary theorizing about the subject, the self, and identity often feels desiccated, as if the writers were attempting to get as far from their subject as possible; indeed, some critical writing about the body reads as if the writers themselves were trapped in their own Cartesian nightmares. Not all theory is so sterile, of course. After all, *The Cancer Journals* is a work of theory, but

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it has a body, and it suggests that it makes little sense to separate the two, for in so doing we injure Lorde and her political project. Although Lorde describes the pain and reality of losing a breast, she also understands the social ramifications of loss and she moreover focusses on the conditions that allow her to speak of her loss. This process is therapeutic: "As I slowly began to feel more equal to processing and examining the different parts of this experience, I also began to feel that in the process of losing a breast I had become a more whole person" (*Cancer* 55). Similarly, in *A Burst of Light,* Lorde writes: "But there is the terrible clarity that comes from living with cancer that can be empowering if we do not turn away from it. What more can they do to me? My time is limited, and this is so for each one of us" (120). Lorde obviously desires recovery of some kind, *and recovery denotes something to recover,* thus illustrating two of the mysteries of the illness narrative: its ability to heal and its positing of some form of stable subjectivity as necessary for that healing. Couser's formulation bears witness to the power of such writing: "Published illness narratives may be in some significant sense healing. Although they may be unable to relieve the symptoms of the body, they may help to relieve the suffering of the self" (289). Lorde's "suffering of the self" extends of course to other women and would help them understand their suffering with new eyes. Again, Couser is instructive on narrative's ability to heal: "At base, narratives of illness are efforts to give meaning to, or find meaning in, bodily dysfunction and thereby to relieve suffering. People who narrate their illness or disability may be said to share their bodies with others in a kind of secular healing ritual" (293). Couser's ideas of "sharing" the body perfectly describe Lorde's *The Cancer Journals,* for by making plain her loss and the conditions of her loss, she shows the therapeutic power of speaking out, but her speaking out is also a theoretical enterprise.

We can infer that for the autopathographer or the trauma survivor the ethic of subjectivity demands that we understand the self not only as illusion, then, but as a necessary component—*however illusory*—of personhood, especially for those whose identities have been fundamentally undermined in real and material ways. Postmodern theories of subjectivity have the potential to understand this particular freedom: both from the constraints of humanism and for the comforting and therapeutic vision of self, based as it is on family, community, and "the love of women." But it must resist its overweening tendency to locate the self in discourse. *The Cancer Journals* in effect bears witness to Lorde's terrible struggle with the cultural, psycho-social, and somatic effects of breast cancer, all of which are ameliorated in the community of women's

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love that Lorde helps construct. But, as a manifesto, *The Cancer Journals* makes clear that resistance to ideological models of identity can in fact be partially liberating, if not from the physiological fact of cancer, then from that social nature of self that pathologizes difference. The way around that gaze is by theorizing and organizing simultaneously, by taking one's story and making it into a template for other women. Cynics might argue that Lorde's assertion that "the love of women healed me" (*Cancer* 39) relies too heavily on mawkish sentiment, especially given the oft-polemical nature of this text. The "love of women" did heal her, but of course the formation of that network of friendship and community is based in part on the undeniable premise of the manifesto that information, analysis, and visibility make resistance and networks of community and healing possible.

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