

Revisiting Cancer: The Politics of Discrimination and Disguise in Audre Lorde's works.

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Abstract: Breast cancer is the disease which conquers the diseased body without warning, savagely eating into the system silently, spreading across vital organs and rupturing the body's progress and functions. If the diseased is prudent enough or rather fortunate to detect the growth which is slowly and silently seeping into the body early intervention might help. Detection is 'fortunately' just the beginning of this battle followed by mastectomy, the agony of chemotherapy and radiation and the perpetual fear of recurrence and death. This paper attempts to look into Audre Lorde's works as she part of her other 'selves' detects the disease, understands the diseased, the treatment creates questions on histories, identities and concept of the secular, unity and peace are correlative to erotic and sisterhood. The battles are on-going and the cancers are spreading. The only way to understand this disease in perspective is to think deep, speak loud and keep questioning.

Keywords: Breast cancer, survivor, cancer and its metaphors, silence and phobias, erotic and sisterhood.

The language of rage, pain, anger, isolation, fear, disease, body, body politics ... and endless are the list of discrimination, dehumanisation and commodification repeatedly and loudly echoed in the works of African American writing since decades. These repeated histories have not been crying for some space for survival and existence alone but they are impregnating the secular political state with harsh questions on differences and demanding answers from the world and their nation which promises a secular humane potential of democracy, with an attitude. For Audre Lorde it is a choice she chooses to pronounce her

erotic within the democratic and historical narrative space her ancestors, grandmothers and the Dahomey women warriors have already paved for her, her sisters and her women lovers. Lorde's essays, poems, biomyhtography, and cancer journals affirm the dark isolations she experiences as she confirms herself as: a woman, a black woman, a black lesbian and mother of two and a black lesbian cancer survivor. This paper focuses on the metaphorical as well as the pathological isolation created by the disease cancer upon the diseased.

African-American, lesbian, cancer and post mastectomy survivor Audre Lorde portrays Cancer as a metaphor for the disease in society that differentiates citizens of the world based on the colour of their skin, their gender, their sexuality and, the greatest disease of all, on the issues of the 'normal'. Lorde has been surviving the battle against differences long before she was diagnosed with breast cancer in late 1978, followed by a modified radical mastectomy of her right breast. Her experiences and knowledge about difference from the perspective of a cancer survivor are as intense, vigorous and passionate as that of a black lesbian feminist survivor. The differences within and outside the black community are asserted by Lorde using the erotic and sisterhood as sources of power and growth. The erotic and sisterhood are terms which represent the trilogy of the body, mind and soul; the core of black women's personal yet collective experience of pain, memory and survival. The body is the coloured canvas where language, song and dance are woven together while memory and sharing have always been the conjuring tools for survival leading to unity and peace. The cancer in Lorde's body helped her to reread and consider differences from the light of how a 'disease' which is silently alive, spreading and multiplying beyond control and killing the life-sustaining cells in the patient's body; it is dormant and invisible until it is too late to be conquered. Cancer is read metaphorically to represent the degree of racism, sexism, homophobia and capitalism which work silently, conspiring and creating the 'other'. Lorde in her journal entry dated on "10/3/79" which was selected and edited by Lorde for the "Introduction" to *The Cancer Journals* says, "I am defined as the other in every group I'm part of. The outsider both strength and weakness. Yet without community there is certainly no liberation, no future only the temporary armistice between me and my oppression" (12).

Alice Walker in her essay "In the Closet of the Soul" examines the underlined fear and isolation which are related to the disease and the diseased. A disease as dreadful as

cancer is painful and oppressive upon the body. Similarly the oppressions caused by the uncontrollable and silent spread of cancers in society kill the growth and well-being of a nation.

“Cancer” focuses on breast cancer, the disease that strikes Lorde and the tumor in her right breast which was diagnosed as malignant in 1978. It is her testimony of survival through mastectomy and chemotherapy, against prosthesis, about pain, anger, fear of survival, and her constant confrontation with death and the recurrence of the disease in 1984 which presented itself as liver cancer. Lorde dedicates two of her works *The Cancer Journals* and *A Burst of Light* both of which are collections of her selected journal entries and essays written with the responsibility of being a Black Lesbian Feminist battling with the issues of ‘cancer’ and on survival.

Lorde’s work “Apartheid U.S.A” reads racism as an internal affair within the black community and thus is taken advantage of by the white colonial tool now called with refinement as capitalism. In the essay, Lorde emphasizes the need for people of colour to recognize “institutionalized racism grown more and more aggressive in the shrinking of the profit-oriented economies” (*Sister Outsider* 65). Her essay, “Sexism: An American Disease” which was first published as “The Great American Disease” in response to Robert Staples “The Myth of Black Macho: A Response to Angry Black Feminists” looks at how internal racist prejudice leads towards gender domination and separatism within the community. Staple argues that capitalism has left the Black man with physical and psychological dominance over his ‘black’ woman and a ‘curious rage’. Is this rage any more legitimate asks Lorde than the rage of the coloured woman battling with the degrees of differences, where the ‘master’ is proud to cloak the principles of justice and liberty (be it the natural liberty as in the state of nature, civil and political liberty and liberty of thought) the pillars of his nation. “No reasonable Black man can possibly condone the rape and slaughter of Black women by Black men as a fitting response to capitalist oppression and destruction of Black women by Black men clearly cuts across all class lines” (Lorde, *SO* 64) and is a great American disease says Lorde. Ignorance is used safely as a ploy for profit and it serves as nourishment for racial, sexual and gender prejudice.

Anger is a grief of distortions between peers, and its object is change” (Lorde, *SO* 129) says Lorde. She elaborates upon this argument thus: “But anger expressed and translated

into action in the service of our vision and our future is a liberating and strengthening act of clarification” (Lorde, *SO* 127). An introspective, historical and collective and journey to identify, “our allies with whom we have grave differences, and who are our genuine enemies” (Lorde, *SO* 127). Anger serves as an emotional response for the understanding and sharing of differences and of connection which Lorde defines as “the essence of a truly global feminism” (Lorde, *SO* 175) in the essay “Forward to the English Edition of *Farbe Bekennen*.”

Cancer is also metaphor for the differences drawn against the choice of one’s sexuality, against the homosexuals and bisexuals in the heterosexual world. Lorde calls it “somasochism” and by the capitalist industry it has been marketed as the obscene and pornographic. Within the feminist circles blackness is treated with hatred and within the women community lesbianism is treated with fear, contempt and ignorance.

Lorde in her speech addressed at the Third World Gay and Lesbian Conference (later published as an essay), “When Will the Ignorance End: Keynote Speech at the National Third World Gay and Lesbian Conference, October 13, 1979” says, “ ... AND we have survived. That survival is a testament to our strength. We have survived, and we have come together now to use that strength to implement a future, hopefully, a future that shall be free from the mistakes of our oppressors, as well as our own” (Lorde, *SO*, 211). But how do these interpretations of cancer perform themselves in society? The cancer testimony of Lorde serves to overcome and share the silences of women with women who have been attacked by cancer, by breast cancer—the pain and fury of the diagnosis, of the disease, of its treatment, challenges and the decision of mastectomy and its side effects, the acceptance and need for reconstructive procedures, living with the make-believe prosthesis and confronting this constant reminder, death. Walker in “In Search of Our Mothers’ Gardens” says: “[M]y history starts not with the taking of lands, battles, and deaths of Great men, but with one woman asking another for her underwear” (356). This leads us back to Walker’s definition of womanist in the same essay where “the talk is called ‘How to Speak about Practically Everything, Briefly, from the Heart’” (334). In 1978 the first biopsy for malignancy was negative. “The Transformation of Silence into Language and Action” reproduces Lorde’s feelings and shares her pain and anxiety of having to confront the killer disease cancer: “Between the telling and the actual surgery, there was a three week period of the agony of an involuntary reorganization of my entire life. The surgery was completed and the growth was benign” (Lorde, *Cancer* 20). Lorde’s “involuntary reorganization of her entire life” (Lorde,

Cancer 20) helped her to deal with the power of “self-revelation” (21), “selfhealing” (22), “self-determination” (22) and her responsibility to speak, share and love women. In “Breast Cancer: A Black Lesbian Feminist Experience, “Lorde expresses her courage to face cancer in all its myriad differences and . . . Trying to even set this all down step by step is a process of focusing in from the periphery towards the center” (*Cancer* 26). In late 1978 Lorde went in for a second biopsy and this time the result showed that the tumor that had invaded her right breast was malignant. She records the moment in the recovery room as she slowly wakes up from the effect of the anesthesia in the following words: “Being ‘out’ really means only that you can’t answer back or protect yourself from what you are absorbing through your ears and other senses” (*Cancer* 26). This reflection echoes the various Western readings that Lorde’s work reflects upon silently but conscious enough to not utter the terms of Foucault’s “Repressive Hypothesis” from his work , *The History of Sexuality* published in 1978 and later on his and Owen’s discussions on the archaeological and genealogical methods of criticism based upon the values of truth, knowledge, meaning and power (“Bio-power”). For Lorde it was this Bio-power which detected and dictated the operations that organised, regulated and controlled the body in terms of beauty, healthy and normalcy.

The cancers that are conquering society are being allowed to invade, multiply and spread with silence and invisibility. Susan Sontag in her work *Illness as Metaphor and AIDS and its Metaphors* says, “Metaphorically cancer is not so much as a disease of time as a disease or pathology of space. Its principal metaphors refer to topography (cancer ‘spreads’ or ‘proliferates’ or is ‘diffused’; tumors are surgically ‘excised’), and its most dreaded consequence, short of death, is the mutilation or amputation of part of the body” (15). With Lorde’s biopsy reports being confirmed as positive she had to decide on the method of treatment. If surgery, it would mean modified radical mastectomy followed by chemotherapy or alternative treatment. The chaos involved in the decision was not merely about the disease and treatment methods but about “fragile mortality” (Lorde, *Cancer* 31), the physical and psychological pain and loss of “such a cherished part of me as my breast” (Lorde, *Cancer* 31) and the sense of isolation, dread and anger attached to the disease. Sontag adds to our understanding of cancer in *Illness as Metaphor* about the “conventions of treating cancer as no mere disease but a demonic enemy makes cancer not just a lethal disease but a shameful one” (59). Through the emotional and intellectual journey that Lorde undertakes in the process of having to decide upon the mode of treatment she realizes the power of sisterhood,

of shared experiences and the concern and care of her women 'lovers' who were "prepared to go along with whatever I would decide" (Lorde, *Cancer* 32). Lorde's decision to proceed with the modified radical mastectomy meant the removal of her malignant breast. The next stage was for her to come to terms with the physical and psychological sense of loss of the organ and the disfiguration of the body and the social and cultural hi(s)stories and politics attached to breasts as an organ symbolising femininity, beauty and lust.

Mary Deshazer in her article, "Fractured Borders: Women's Cancer and Feminist Theatre" quotes Nancy Datan, a feminist psychologist who succumbed to breast cancer: "'It is a central tenet of feminism that women's invisible and private wounds often reflect social and political injustices. It is a commitment central to feminism to share burdens and it is an axiom of feminism that the personal is political'" (3). Lorde's "waking up out of the anaesthetic" (Lorde, *Cancer* 28) sensation forces her to confront the physical realities of pain that she explains as the forceful nature of cultural and societal numbness which negotiates with her space to understand and experience the sense of loss. The treatment protocol for cancer is blunt and it features the qualities of being detached, harmful and impersonal to the psychological understanding of the patient and her body. Stella Bolaki in her article, "Recovering the Scarred Body: Textual and Photographic Narratives of Breast Cancer" dwells on the heterogeneous socio-cultural norms and practices which are associated with the politics of cancer, its diagnosis and treatment through the work of Maren Klawiter's, *The Biopolitics of Breast Cancer*:

. . . the regime of medicalization 'isolated women with breast cancer from each other, 'protected' them from knowledge of their diagnosis, prevented them from participating in decision making about their treatment, treated them with a one-step, one-size-fits-all radical surgery, encouraged them to hide the evidence of their treatment and maintain a normal, heterofeminine appearance. [. . .] it reinforced the architecture of the closet [. . .] and inhibited the formation of disease- 116 based identities, social networks and solidarities among women with breast cancer.' (Bolaki 6)

After the mastectomy and the sense of her lost breast being fully absorbed and accepted physically, all that Lorde desired was to speak to women who had mastectomies and could understand her language of pain, suffering, fear and loss. The nurse who attended

Lorde when she was screaming with pain after the mastectomy ignored her as being over-reactive and the reaction seemed as if it was a day to day affair. A white post mastectomy patient tried to convince and reassure Lorde of her loss; her words were: “don’t feel bad . . . they weren’t that much good anyway” (Lorde, *Cancer* 41), and all that the woman from the Reach for Recovery could offer Lorde was lambswool prosthesis with the advice or rather an advertisement, “nobody’ll ever know the difference” (Lorde, *Cancer* 42). When Lorde returned to her surgeon ten days after the mastectomy to remove her stitches the nurse found her without prosthesis. She was advised to wear one, and the look good, feel good principles were taught to her before she left the hospital with the explanation that her arrival to the hospital without one “was bad for the morale of the office” (Lorde, *Cancer* 58). Lorde realized that her new lambswool make-believe breasts were of the wrong shape, wrong fit, wrong colour, and there was nothing sensual about it: “I looked away, thinking, ‘I wonder if there are any lesbian feminists in Reach for Recovery?’” (Lorde, *Cancer* 42).

Lorde shared her gratefulness to Little sister (Lorde’s sister-in-law) who had gone through mastectomy ten years ago. She came down to speak and share the “common language no matter how diverse” (Lorde, *Cancer* 42) for little sister was not a lesbian but she was a black woman, a post mastectomy survivor and was against prosthesis. The difference of being diseased and with a scarred body is tolerated with contempt, often with invisibility and shame, and is followed by a sympathetic gesture towards the patient. The patient under normal circumstances is led to the unconscious pretense of being and looking normal under a pad with a little silicone gel and puffed up lambswool shaped to perfection and gaze. The pretence in the form of prosthesis engages her into a journey of self-denial, helplessness and conformity to the norms of appearance to which her body is being designed. Disguise happens through make-up, wigs and prosthesis as the visual culture of illness is being pronounced publicly says Lochlann Jain in her article “Cancer Butch”. Jain refers to the Look Good Feel Better classes conducted for women who have undergone mastectomy as they “teach women how to use cosmetics to make themselves look good throughout treatment” (504). The culture becomes a cult which is funded by the billion dollar industrial kings of global capitalism under the pink ribbon campaigns. Jain refers to the campaigns held by BMW, Ford, and the gas industries who claim to organize social campaigns to raise money for breast cancer and cure for the disease. BMW organizes the social, cultural and corporate meet under the slogan, “Show your care with style”. Jain refers to Adrienne Rich’s views on

breast cancer which juxtapose the BMW's all is well slogan as "unfair", unfashionable, unforgiveable woman's death, pink has made breast cancer practically into a stereotype, a parody of itself' (Jain 505-506).

The pamphlets distributed at the social and charity gatherings for the cure of cancer focus upon the survivor's comfort which is associated with the colour pink, and the ways to look cheerful and normal during the course of the disease rather than dealing with the reality of the disease which is gloomy, unpredictable and painful. Jain notices that the organization's focus tends to kill the truth and ignore the darker and natural identity of the disease and its performance upon the victim; the brutal silence of death is kept off the scenes. The aim of the organizers and their charity meets tend to float upon the imaginary and not so sure results of the cure of cancer, but the disease which lives, occupies and extends its growth at an alarming fast pace is kept away and left undiscussed. Above all the victims' voice is never heard for she has been well disguised and shielded behind pink, cosmetics and prosthesis. Jain's "Cancer Butch" looks at the politicization of gender and the "relentless hyper- and heterosexualization of the disease results in something of a recursive process through which gender is produced and policed" (506). This policy also helps the straight and heterosexual world to silence, isolate and discriminate the homosexual cancer patient. Jain in her article states that the isolation and contempt attached to lesbians is one of the causes of increased breast cancer mortalities among them. The discussion is substantiated with reference to Adrienne Rich's poem "A Woman Dead in Her Forties". The poem refers to the intimate touch as the experience of pleasure shared in a lesbian sexual act and transcends to the feel and sharing of pain and sorrow of a diseased breast with a sincere need to be caressed with intimacy and without difference. The disgust and social stigma attached to lesbianism keeps several medical professionals from examining the breasts of lesbians fearing the touch of their breasts leading to misdiagnosis and complications. . The 'touch' of the erotic that speaks of pleasure, understanding and sharing between women and lovers is often restricted, closeted and pronounced as taboo in public. But the touch and feel on the breasts become mandatory for an oncologist to detect, isolate and excise the malignant tumor in breast cancer. Lorde in the "Introduction" of *Cancer Journals* explains the fear associated with touch on a diseased body. Even the touch on a normal site says Lorde is filled with pain and fear of the spread of the disease. "...Oh Seboulisa ma, help me remember what I have paid so much to learn. I could die of difference, or live—myriad selves" (*Cancer* 11). The realities of the disease

which disrupts life and growth, cancer and in most cases breast cancer is treated with hazardous and lethal chemical combinations that are injected into her body and her breasts are excised and re-constructed to look normal. The breast as part of the female anatomy is discussed by the doctors as diseased and treated, while in this process the chaos of the patient, her confrontation with death, the pain involved in the process of modifying the geography of her body, her fear, agony and distress are forced to be associated with loneliness, silence, prosthesis and disguise. Shlomith Rimmon-Kenan in her article, “The Story of ‘I’: Illness and Narrative Identity” says: “[I]n Western society, the first commandment of illness seems to be ‘get well’ . . . and if this fails—atleast conceal disruption under a semblance of continuity and /or victory” (14). Lorde’s first encounter with the two white breast cancer survivors who were straight and who had experienced mastectomy tried to console the loss of her breast. One was the white lady called by the head nurse at the hospital and the other, the woman from the Reach for Recovery. Both seemed well convinced that there really wasn’t a great loss. The white post mastectomy patients felt that “they weren’t that much good anyway” (Lorde, *Cancer* 41) and the woman from the Reach for Recovery truly believed that nobody would know the difference with her prosthesis on. The irony is whether she would ever know if the difference was a question she was never allowed to ask nor think. Robert Murphy in his work *The Body Silent* looks at the society that kills the diseased or the disabled by channeling or rather tailoring her emotions for her caretakers who wish to see her normal or disease free. Murphy says, “they must confront others about their own condition. They cannot show fear, sorrow, depression, sexuality or anger, for this disturbs the able bodied . . . as for the rest of the world, I must sustain their faith in their own immunity by looking resolutely cheery. Have a nice day!” (92). The breast cancer patient is expected to be silent and projected as composed, brave and controlled like the soldier who carries his valour and dignity at the face of death. Lorde opposes the obscene language where the woman’s emotions are expected to be hidden, to be shed only within the walls of her private space, and in public she is to maintain her composure so that her constructors are not disturbed.

Lorde on the other hand appreciates the valour and bravery of the Amazon girls of Dahomey who willingly cut off their right breasts to become able and effective archers (Lorde, *Cancer* 35). They were brave, black, women, warriors who fulfilled their responsibility of guarding and protecting their community. Lorde’s constant reference of the Amazon girls of Dahomey helps her to reflect upon the strength and responsibility that she

carries and owes to the world as a poet, lesbian and feminist. The cancer within her metamorphosises into fury and the urgent need to question the politics of the body, the construction of femininity, the role of the American Cancer Society, the commercialization of the 'disease' and treatment, chemical warfare which emits toxic carcinogens into the atmosphere way above its legal thresholds and the role of women with breast cancer in a cancerous world of hegemonies, dominant power politics and capitalism. Lorde's fight is still going on, and we, the community are still a part of it constantly battling against a womanphobic world to make the Man more comfortable. Mary Deshazer in her article, "Fractured Borders" looks into the theory that Zillah Eisenstein, a feminist and breast cancer survivor believes and lives with. Zillah puts forth the argument of the autonomy of her body where she is the sole owner and architect that pronounces and design of her beauty. Beauty in terms of its construction has always been problematic when it has been defined and designed for her by her male counterparts who claim to be her protector. As the shape of his art of feminizing his muse and the object of his gaze is graphically drawn he marks the politics of femininity, form and behaviour. Mary Deshazer in her article, "Fractured Bodies" represents, performs and displays the voices of women with cancer and of her "medicalized body" (6). The aim of these feminist illness testimonials are to increase the awareness of women's cancers (breast, ovarian and uterine cancers), ovarian being the most silent and brutal killer of all. A play, *The Waiting Room* by Lisa Loomer is a breast cancer testimonial. Loomer's protagonist, Wanda has opted for reconstructive surgery and "she flaunts her prosthetic body, especially her enormous breasts, the products of cosmetic surgery, until she learns that a faulty implant may have caused or hidden an incipient cancer" (Deshazer 10). Wanda's diagnostic report shows cancerous seeding in several lymph nodes and she grapples between the choice of conservative and alternate treatments. The play raises two crucial concerns that are constantly in war with the American Cancer Society. The first concern follows just after mastectomy of the decision to wear a prosthetic breast. *The Waiting Room* reflects the cancer motifs that are loomed into the discourse of sexuality dominated by heterosexual male desire and its profit gained by the billion dollar corporate and cosmetic industries while the underlying question of woman's autonomy over her body remains dormant. The play opens with three 'disabled' women confronting pain to the doctor over their 'diseased' body parts. An eighteenth century Chinese woman has got her bound feet infected. She comes to her doctor to relieve herself of the pain and the stink caused by the oozing feet, "but my husband is crazy of the smell" (Loomer 14). The irony is that she is

called Forgiveness from heaven. The scene advances with a nineteenth century English woman called Victoria who is under treatment for shrunken ovaries while her husband restricts her from reading romantic novels fearing an ovarian atrophy. Wanda, the third patient, is the protagonist in Loomer's play. She is bountiful, full of energy, flamboyant, unmarried and independent. She is characterized as an embodiment of heterosexual and cultural beauty. Wanda confides to her nurse Brenda as she waits for nervously for her breast biopsy results, that her father had presented her a pair of silicone breast implants for her thirtieth birthday. She followed his instructions over the years to reconstruct her nose, chin, cheekbones, stomach, thighs and everything. Brenda reads the fear and apprehension on Wanda's face as she waits for the reports. Brenda flashes the ironic truth upon her saying, "We don't even know you got cancer. Where are you goin' get cancer? You don't have a single body part that's real" (Loomer 40). The concepts of beauty have been drawn to satisfy the male gaze and for breast cancer victims, she is forced to confront the importance of her breast, if not native, then re-produced. Her breasts are associated either as a reproductive organ or as the breasts for gaze which either way they do not belong to her. Prosthesis serves merely as a cosmetic tool where the norms of beauty are documented. Lorde in her essay, "Breast Cancer: Power vs. Prosthesis" says: "Any woman who has had a breast removed because of cancer knows she does not feel the same. . . . With quick cosmetic reassurance, we are told that our feelings are not important, our appearance is all, the sum total of self (*Cancer* 57). She continues her argument on beauty vs. self saying:

"When I mourn my right breast, it is not the appearance of it I mourn, but the feeling and the fact. But where the superficial is supreme, the idea that a woman can be beautiful and one-breasted is considered depraved, or at best, bizarre, a threat to 'morale'. . . . Pretense has never brought about lasting change or progress" (Lorde, *Cancer* 65).

The political discourse of 'beauty' forces women to adorn themselves with prosthetic breasts or to consider reconstructive surgeries because of social insecurities. While economic insecurities force women to adorn themselves with cheap and faulty implants that serve as carcinogens and the adverse effects being life-threatening in most cases. Lorde in "Power vs. Prosthesis" says:

Where a woman's job is at risk because of her health history, employment discrimination cannot be fought with a sack of silicone gel, nor with the constant fear and anxiety to which subterfuge gives rise. Suggesting prosthesis as a solution to employment discrimination is like saying the way to fight race prejudice is for Black people to pretend to be white. Employment discrimination against post-mastectomy women can only be fought in the open, with head-on attacks by strong and self-accepting women who refuse to be relegated to an inferior position, or to corner because they have one breast. (*Cancer* 66)

Wanda in *The Waiting Room* realizes that her faulty silicone implants was the cause for cancer and the malignancy had spread to a stage where lumpectomy was not an option. The only way says her doctor is to have a radical mastectomy with aggressive doses of chemotherapy post mastectomy as the cancer had spread into several of her lymph nodes. After the mastectomy Wanda decides upon an alternate treatment for cancer available in Mexico. Wanda voices her decision saying: "This cancer is . . . mine. For better or worse, till death do us part, it's about the one thing I got left that's all— mine" (Loomer 40). In Lorde's *A Burst of Light*, Lorde pronounces her decision to go for alternate treatment when she is diagnosed with a recurrence, this time as liver cancer. Lorde in her journal entry on "March 18, 1984 En route to St. Croix, Virgin Islands" writes, "this mass in my liver is not primary liver tumor, so if it is malignant, it's most likely metastasized breast cancer. Not curable, Arrestable, not curable (*B of L* 54). Lorde keeping in mind her very limited available options decides upon homeopathy as an alternative treatment to surgery. She clings on to hope and self-determination saying , " my decision to maintain some control over my life for as long as possible I believe that decision has prolonged my life, together with the loving energies of women who supported me in that decision and in the work which gives that life shape"(Lorde, *B of L* 49). The treatment for cancer which is slowly invading the body is not intended towards the destruction and cure of the disease, rather the chemical toxins precisely loaded into the body serves only to arrest the metabolic rate of the disease. Lorde in her journal entry in "A Burst of Light" writes: "either way I'm a hostage. So what's new? Coming to terms with the sadness and the fury. And the curiosity" (*B of L* 54). The cosmetic industry has always catered to and pampered the affluent skin and so has prosthesis. Here once again the conscious correlation between class and beauty has been well drawn in relation to cancers, breast prosthesis and cancer charity organizations. Lorde in "Power vs.

Prosthesis” says: “. . . the many reputable makes of cosmetic breast forms which, although outrageously overpriced, can still serve a real function for the woman who is free enough to choose when and why she wears one or not” (*Cancer* 67). Sandy Fernandez in her work “Think before You Pink: History of the Pink Ribbon”, looks at the logistic construction of the ribbon and its colour which has served the billion dollar industries to speak for cancer.

While the colour pink has been associated with being girlish, it symbolizes health, youth and happiness and is also playful and life-affirming. Fernandez quotes Margarell Welch, the director of the Colour Associations of the United States who states that: “pink is the quintessential female color. . . . [Pastel pink] is a shade known to be healthgiving; that’s why we have expressions like ‘in the pink’. You can’t say a bad thing about it” (Fernandez N. pag.).

In the discourse of the partnership between capitalism and cancer, Jain in the essay “Cancer Butch” comments on the amount of funds collected for cancer. She gives a statistical report of companies like Ford which has gathered 128 forty million dollars, Avon, two hundred and fifty million dollars, Revlon’s forty million dollars and the essay begins with the BMW’s nine million dollars collected from a single charity meet. Though the amount of money that people keep aside for cancer research is large enough, the war against the disease says Jain is “never launched in an organized way” (Jain 529). It works two ways, the companies that promote their products use carcinogenic chemicals and the fumes that the companies spew out into the atmosphere are also known to cause cancer. But the companies never mention the darker and dangerous realities of production and commercialization of their finished products. Through charity meets these companies gather millions of dollars ostensibly for cancer from their expected clients but in effect are the cause of cancer. Jain mentions the introduction of a feminine car, “La Femme” by Dodge, targeted for the rising upper class women’s market in America. The car was painted pink and was fully loaded with women’s accessories: a pink lipstick, cigarette cases stuffed into a pink purse, a pink umbrella and a matching raincoat. The carcinogenic chemicals used by the lead and plastic industries are the murderers of large sections of the world’s population who are captured by the dreaded disease cancer cutting across age. The chemical vinyl chloride is known to be a common carcinogen used by the industries who manufacture cosmetics and domestic products like hair sprays, deodorants, insecticides and spray paints in five times the legal threshold. The company’s share an illegal conspiracy with the governments of the concerned

nations to whom the secret of the carcinogens in their products are revealed, but the governments do not feel obliged to inform their citizens. The carcinogenic materials involved in the manufacture of artificial breast implants are known to cause breast cancers. The breast and prosthetic implant companies do not take up the responsibility of accidental and faulty implants and their after-effects. This is another face of Lorde's presentation of sadomasochism, the cancer which feeds into the society in the form of capitalism. The commercialization of breast cancer leads to the pornographic use of the diseased body where hospitals and advertisements sponsored by the cancer care organizations provide free demonstration of physical self-examination to detect lumps in breasts. Jain in "Cancer Butch" says:

It can be hard not to conclude that much of breast cancer culture performs a literal pornography of death, with its constant representation of young women in sexualized poses in everything from the medical posters pinned in the doctor's office, to the covers of cancer magazines such as *Mamm* and *Cure*, to the ubiquitous cards about how to do a breast self-exam. A recent ad by the Breast Cancer Fund of Canada featured a young, purposely slim teenager named 'Cam' who offers free service of doing breast exams ('877-Ring-Cam').

Playing on the long standing joke of adolescent boys, the primary violence of the ad is the collaboration—even in its purported goal of early detection—in the same logic that has belittled the disease. Is any other medical procedure sexualized in this way? (Jain 525) Lorde in her work "Power vs. Prosthesis" delves into the corporate world of prosthetic implant companies, their economies and ethical issues in relation to their products and customers. She brings to her readers notice the issue of a Manhattan company, Apers Body Replacement which was charged for cheating on its customers. The company had taken orders from women who had been promised that the prosthesis would be made from cast taken from their own bodies to get the perfectly desired size and shape of the reconstructed breast. But when the product was sent and tried the customers felt that it had no resemblance to what they expected it to be and some of the customers never received their products even after their bill payments were cleared. Breast reconstructive procedures and centres were becoming highly popular in the 1980's as more and more breast cancer patients and others began to opt for reconstructive procedures as mainly a cosmetic issue. Breast cancer patients were immediately consulted after mastectomy to undergo another operation simultaneously which

introduces “interesting silicone gel implants under the skin of the chest” (Lorde, *Cancer* 68) to the size and shape customized for each patient. At times the plastic surgeons recommend the removal of the normal breast along with the malignant one so as to get the “desired degree of symmetry under these circumstances with unilateral prosthesis” (Lorde, *Cancer* 68). In effect the cosmetic companies and the dominant male society promise the woman that she is never going to miss her original breasts while the capitalist agendas in collaboration with the American Cancer Society are framed to objectify women and their loss merely to its cosmetic realm, destroying personal feelings, pain and fear that surround cancer. “Breast reconstruction will not recreate a perfect replica of the lost breast, but it will enable many women who have had mastectomies to wear a normal bra or bikini. (Lorde, *Cancer* 68-69). Cancer and its treatment are often associated with the metaphors of war as it invades, destroys and conquers life. The diagnosis of the silent and invading disease is often treated with chemotherapy and radiation which literally embodies lack; hairless and hormone-less it restricts the growth of nails, mouth cells and the tissues surrounding the stomach lining. Mastectomy associates itself with the loss of breasts but the scar metaphorically questions the disappearing markers of feminine identity. Newman in her article, “Poison: Fallout in the Breast Cancer Veteran’s Jungle” looks at the historical reasons which associate cancer with the metaphors of war. Newman says: “The relationship between chemotherapy and war metaphors stems from actual war technology. Ironically, chemotherapy drugs in wide use today were discovered during WWII, a war plagued with history of employing toxic chemicals to poison civilians in Germany and in Japan” (183). Newman uses James Patterson’s theory of the chemical warfare in history which helped researchers to suspect that the toxin infused chemicals could be used for treating and restricting the spread of cancer. Though the chemical warfare triggered new and ‘effective’ treatments in controlling the multiplication of malignant neoplasms, technology and industrialization have become potential producers of carcinogens which trigger cancer. Thus cancer as a disease becomes a metaphorical text which symbolizes society, culture, age and technology. Howard F. Stein in his work, “Disease as Metaphor” says:

Diseases may likewise become powerful social symbols, metaphors of whole cultures and ages. These metaphors, if not their associated diseases, are themselves the outcomes and articulators of whole historical epochs. When diseases become

organizing metaphors, their bearers become social cynosures—categories of people who are given considerable social attention and visibility. (85)

The modern nuclear and atomic chemical warfare which emits radioactive elements in disastrous volumes into the atmosphere is learned to be one of the causes for thyroid cancer. Jain quotes an article in the New York Times which tries to find a reason or a cause for the rise of thyroid cancers in the country and the article quotes Dr. Sloan Kettering who feels radiation is one of the causes for thyroid cancer. But the doctor does not mention the nuclear disaster at Chernobyl and the high risk of exposure to cancerous carcinogens for people living in the radiation detected areas. America has tested several nuclear bombs in its own land and waters hundred times to the power of those exploded at Hiroshima and Nagasaki. Jain quotes from the maps provided by the American government which shows that the radiation levels carried by wind in the country is expected to rise the risk of cancer victims to a soaring 70,000 to 80,000 a year, and the documents recording these facts are stamped as confidential government files. Lorde in “A Burst of Light” shares the following in her journal entry dated June 9, 1984 written when she was in Berlin for a poetry reading at Zurich, “At the conference there, women wanted to discuss the rise of breast cancer epidemic caused by the emissions from the chemical plants in Zurich and Base”¹ (Lorde, *B of L* 60). As Lorde and her partner Gloria shared their experiences of the illness and the dread associated with the disease Lorde says, “For the first time in Europe, I felt I was not alone but answering as one of a group of black women—not just Audre Lorde” (*B of L* 60). Jain’s article discusses the biomedical and consumer-care nexus gets even more complicated by the dismissal of women’s complaints in medical cure, misdiagnosis of the disease and the use of carcinogenic toxins in medicines. Women who find abnormalities in the feel of their breasts consult their doctors who at times take their complaints lightly, later as the cancer spreads and invades her metabolic system she is left with no choice but mastectomy, paranoia of recurrence and the dread of death. The article also throws light upon how medicines with carcinogenic formulae could trigger abnormal growths that can turn malignant several years after the consummation of the product. She cites the example of DES (diethylstilbestrol) a drug considered effective in preventing miscarriage. It was found in the 1930’s that the pill had carcinogenic components which caused rare kinds of cervical and vaginal cancers. The product continued to be marketed and was prescribed till the 50’s when it was discovered that the pill was ineffective in preventing miscarriage. A similar scenario clouds the present day wonder drug,

the oral contraceptive pill known to trigger ovarian cancer but continues to be advertised and marketed.

Medical politics is elaborated by Laura Pott in her work, “Publishing the Personal: Autobiographical Narratives of Breast Cancer and the Self”, Pott refers to the “hegemony of the discourse of medical practice” (117) where the patient becomes the still body upon which the medical vocabulary that is complex and closely guarded becomes alien to her understanding. Her body suddenly becomes a text for research, as subjects or case sheets for medical examination and sites on which the formulated aggressive doses of mixed toxins are flushed into her body killing the disease and restricting or rather temporarily arresting the attack. Deshaizer in “Fractured Borders” says: “In the doctor’s office or the hospital room, they often suffer physical, verbal and psychological indignities. Moreover, they face invasive treatments with painful side effects and uncertain outcomes rivaling the malignancy of the cancer itself” (15). Lorde says: “[S]urvival isn’t some theory operating in a vacuum. It’s a matter of my everyday living and making decisions” (B of L 60). Thus cancer for Lorde is war against disguise and war against the world that produces cancer. And of all, silence forced in the name of domination, gender construction, economic power and shame are to be fought like fighting the dreaded disease cancer. Lorde says in her journal entry written on December 25, 1985 from Arlesheim where she was registered for alternate treatment for liver cancer:

Good morning, Christmas. A Swiss bubble is keeping me from talking to my children and the women I love. The front desk won’t put my calls through. Nobody here wants to pierce this fragile, delicate bubble that is the best of all possible worlds, they believe. So frighteningly insular. Don’t they know good things get better by opening them up to others, giving and taking and changing? Most people here seem to feel that rigidity is a bona fide pathway to peace, and every fiber of me rebels against that. (*B of L 90*)

Breaking the silence is to refuse the disguise and wear it plain and native. Silence in breast cancer is the disguise adapted by breast reconstructive procedures, silicone gel implants, wigs and ‘pink’ cosmetics to look and feel good. This is the personal politics that each woman invaded by cancer has to fight against and the political makers that will invariably promote

her gendered identity with capitalism and economics as their main and hidden agenda. Lorde in “A Burst of Light” says:

I am determined to fight it even when I am not sure of the terms of the battle nor the face of victory. I just know I must not surrender my body to others unless I completely understand and agree with what they think should be done to it. I’ve got to look at all my options carefully, even the ones I find distasteful. I know I can broaden the definition of winning to the point where I can’t lose. (*B of L* 61)

When Lorde says: “I know I can broaden the definition of winning to the point where I can’t lose” (*B of L* 60), she negates the paranoia attached to cancer, Death as the final fate which will cloud her identity. The discourse of cancer is equated with death and silence. Howard Stein in “Disease as Metaphor” says: “[T]he prevailing image of cancer is of a mechanized body that has lost complete control of its own machinery of life and is overtaken by an alien force that consumes the body. Cancer is the most durable metaphorical vessel of our paranoia” (86). In the last lines in “Power vs. Prosthesis” Lorde reflects on life in “a perspective of urgency” (*Cancer* 76) to “speak those things that I really do believe, that power comes from moving into whatever I fear the most that cannot be avoided. But I will be strong enough again to open my mouth and not have a cry of raw pain leap out?” (Lorde, *Cancer* 76). Lorde’s poems especially the poems in *The Marvelous Arithmetics of Distance* which was posthumously published in 1993 looks at the triangular equation of the past, present and future that she bravely accepts as being, death. In her poem “Today is Not the Day”, she refuses to merely stare at death, wasting away in sorrow and being helpless. Rather Lorde writes: “I am dying / but I do not want to do it / looking the other way” (*Collected* 7-9). The poem continues to build upon the sense of urgency, correlating her timed life with work, love and hope with Seboulisa, the black mother Goddess, Afrekete her daughter, the trickster figure and Gloria: binding our paths . . . exchanging sweet oil along each other’s ashy legs . . . By this rising some piece of our labor is already half-done the taste of loving doing a bit of work having some fun riding my wheels so close to the line my eyelashes blaze (Lorde, *Collected* 24, 29-30,33-40). Lorde’s prose and poetical works are very deeply interwoven with her journal entries; it is the personal space in which she describes the interconnectivity between life, language, love, work and death. Her war was towards the two opposing forces; the ethics of herself and the aesthetics of an already beautified existence, for survival. Her poetic spaces speak of the political cancers that are elaborated

from her journal entries as she extends herself as part of a community belonging to the Black race, Afro-American / Grenadian culture, women and lesbian women across colour and cultures. In “Breast Cancer: A Black Lesbian Feminist Experience” she pronounces her role as a cancer patient, “cancer as it affects my life and my consciousness as a woman, a black lesbian feminist mother lover poet all I am” (Lorde *Cancer* 30). Lorde in poems like “Seasoning” and “Never to Dream of Spiders” she confronts cancer, the diagnosis of the disease, chemotherapy and its pain, and the silence and reality of the disease, death that she faces like “an iron wall” (Lorde, *Collected* 4) and “one word is made” (9). The word links to the intricate bonding between knowledge and wisdom, intellect and the emotional and spiritual that speak of her fear and paranoia associated upon the impending silence and the urgency of the work that is needed to be done. The word is the erotic. Lorde in her journal dated April 20, 1986 written in St. Croix says:

And of course cancer is political—look at how many of our comrades have died of it during the last ten years! As warriors, our job is to actively and consciously survive it for as long as possible, remembering that in order to win, the aggressor must conquer, but the resisters need only survive. Our battle is to define survival in ways that are acceptable and nourishing to us, meaning with substance and style. Substance. Our work. Style. True to our selves. (*B of L* 98-99)

Cancer has constructed a wall between life and hope. The wall is made of diseased hierarchies, domination, sadomasochism, masochism, and other evils and phobias which feed on differences. This cancer needs to be arrested, excised and destroyed with the help of the erotic. This includes a prayer, to conjure with the past and paving a way into the present where time and space constantly shifts between past and present, the personal and the public yet greatly focussed on identities and of an identity. The erotic in the lesbian body is to break the silence and to refuse disguise. The erotic is to wear one’s identity, just plain and native.

As we read Lorde’s works we understand the various isolations she battled with courage, dignity and determination and we are also well aware that this is not the last of the ‘cancer’ journals we will come across. Lorde succumbed to the disease cancer in 1992 ten years later we have June Jordan succumbing to this very disease in 2002. Her journals, essays and poems speak of the same isolations and the same degrees of pain and fear. Even after these many decades or rather centuries of repeated retelling of African American histories

these confessions and discriminations are still blocked and buried by the baptised phobias and norms set by the democratic and secular authorities of power.

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