

## Pinning Down the Phantasmagorical:

## Discourse of Pain and the Rupture of Post-Humanism

in Evelyne Accad's *The Wounded Breast* and Audre Lorde's *The Cancer Journals*

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When my copy of Evelyne Accad's *The Wounded Breast* arrived at my office, my colleagues gathered around the Amazon.com box with the usual zeal of bibliophiles, asking "What did you get?" as though the little brown box were a present from beloved relative. While the gasp that erupted at the cover was not akin to that within a film, there was a palpable pause at the cover. I received the customary comment germane to most speechless academics: "Interesting." The cover is a photo of the author's nude chest, exposing her post-mastectomy bosom, radiation markings, and bald head. The author is reclined with one hand behind her head. In the next weeks, perhaps in an effort to shock and awe, I left the book on my desk, cover up. Many people picked it up and had the same reaction – a look, a pause, and an "interesting."

What became clear to me was that their reactions were very much indicative of the discourse surrounding pain itself. Specifically, my colleagues' (and my students') reactions to the text demonstrated a discomfort with the pain of other people. In the face of Accad's cover, there was a disintegration of language - much like Elaine Scarry describes in her text, *The Body in Pain*. Yet, there was something more to their remarks of "interesting." They succeeded, in a way peculiar to most of us academics, in giving voice to their own discomfort in a way that highlighted the discomfort itself. For me, the critical question about these texts surfaced at these moments: How do these authors describe their own pain? It wasn't just that language disintegrated, but that there was an

articulation within the gaps of eloquence about pain. Their silences, their moments of stutter and rambling coagulate to pin down that which appears elusive, to pin down the phantasm of pain.

What I noticed about Evelynne Accad's text was that it was remarkably similar to one with which she has a great deal of intertextuality, Audre Lorde's *The Cancer Journals*. Not only are these women discussing the same issues, approximately thirty years apart, but their concerns with illness, specifically cancer, and their bodies, particularly their gendered and racialized bodies, echoed one another. It is not that their pain, or their descriptions of pain are different from other women's cancer narratives, but their text bind up their discussions of pain with their being women of color. That is, they understand their experiences with cancer in terms that are particularly racialized and gendered.

It is important to note that both Evelynne Accad and Audre Lorde garnered fame and, for some people, notoriety as thorns in the side of hegemonic discourse that sanctions the oppression and silencing of women of color by ignoring or dismissing the circumstances that govern their experience. Their academic work pierces this discourse, elucidating that the issues of women of color point to systemic racism and sexism: in short, society's failure to appropriately address the double bind in which women of color exist<sup>1</sup>. Their personal breast cancer narratives, *The Wounded Breast* and *The Cancer*

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<sup>1</sup> Evelynne Accad's critical books *Sexuality and War: Literary Masks of the Middle East* and *Veil of Shame: The Role of Women in the Contemporary Fiction of North Africa and the Arab World* explore the differences between women's and men's narratives of war. The former posits that women's narratives demand an overhaul of contemporary attitudes vis-à-vis women's sexuality. The latter examines men's and women's narratives side by side, arguing that men's narratives are dismissive of an alternative to war, whereas women's narratives seek peace-keeping alternatives. Both have been critiqued and lauded

*Journals* respectively, extend their scholarship by directing their gazes at the health care and pharmaceutical industries. Of central import to their discussions is the issue of pain: for Accad, this comes principally in the form of mental suffering and agonizing, while Lorde focuses primarily on pain within the body. In these narratives, pain is a starting point, a fact of the experience of breast cancer. Pain, then, because of the certainty with which they describe it, underscores the severity of the other socio-political issues they bring to the fore. Both texts mobilize discourses with which Accad and Lorde are already engaged – gender, sexuality and race – but, undergird them with a discourse of pain, thwarting a master narrative of illness which would further ensconce all women, particularly women of color, in silence.

This discourse of pain is not simply a purging of their emotions. That is, the disintegration of language that they undergo advances beyond a personal narrative; they each make stringent critiques of the health care system, its treatment of cancer patients, and its lack of concern about issues women with cancer face. Though their critiques are

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for their idealism, breadth of scope and her illumination of Arab women's narratives regarding war. See Miriam Cooke. Rev. of *Sexuality and War: Literary Masks of the Middle East*. by Evelyne Accad and *Accommodating Protest: Working Women, the New Veiling and Change in Cairo*. by Arlene Elowe Macleod. *Middle Eastern Studies*. 28.4 (1992): 812-814; Marilyn Booth. "Crossing the Demarcation Line." Rev. of *Sexuality and War: Literary Masks of the Middle East*. by Evelyne Accad. *The Women's Review of Books*. 8.8 (1991) 18; Margaret Fete. Rev. of *Veil of Shame: The Role of Women in the Contemporary Fiction of North Africa and the Arab World*. By Evelyne Accad *The French Review*. 53.2 (1979): 332-333; and Issac Yetiv. Rev. of *Veil of Shame: The Role of Women in the Contemporary Fiction of North Africa and the Arab World*. by Evelyne Accad. *Research in African Literatures*. 10.3 (1979): 394-396.

Audre Lorde's texts *A Burst of Light*, *Sister Outsider*, *Zami: A New Spelling of My Name* and others are indicative of her long time commitment to complicating the essentialized version of woman, emphasizing her identity as multiple – black, lesbian and feminist - and pointing to the virulence of totalizing narratives and institutionalized systems of oppression. See Alexis De Veaux. *Warrior Poet: A Biography of Audre Lorde* (New York: Norton, 2004).

far-reaching, I am much more concerned with their discussions of treatment, and breast prosthetics and reconstruction, as these discussions are particularly undergirded by their understanding of physical pain and emotional suffering. Each woman advocates activism as a way to combat the difficulties within the health care system: Evelyne Accad's activism is situated within her text; she uses her writing as a discursive activism that spans three continents, and cuts across class lines. Audre Lorde, in addition to using her text in this way, advocates a more overt form of political activism, including the protests by post-mastectomy women who do not wear prosthetics or have surgically reconstructed breasts. Their stances, because their discourse is underscored by an inability to articulate pain and a disintegration of language, posit a new understanding of the discourse of pain: namely, that their silence and lack of language is a starting point for useful political action.

I also contend that their insistence on activism, whether discursive or political, undercuts – because of its insistence on the body in pain – multiple points within post humanist thought. Given that post-humanism questions the cogitating subject of Cartesian philosophy, asking whether that subject's act of being puts her at the center of the universe, it would seem that post-humanism would be especially apt for understanding a cancer narrative. After all, it would promote the constitution of a community of women who are intimately linked with machines, and underscore efforts to incorporate the patient into a medical team whose existence also incorporates that of machinery. For women of color especially, post-humanism would, in the eyes of Donna Haraway, cut across racial and class lines to reveal that we are all the same in our cyborg identities. As useful as Haraway's formulations may be, they obfuscate the lived

experience of illness, and silence any possible political critique that arises from that corporeality. Accad and Lorde's narratives call attention to their bodies as disruptive of the cyborg ideal, suggesting that embodied experience need be ushered into the post-humanist discussion of political critique.

Before delving into either Accad or Lorde's text, we first encounter the covers. What is most striking is that both covers challenge particular misconceptions vis-à-vis breast cancer and pain: namely, that it cannot be discussed explicitly and, in the case of Lorde, with humor. Accad's cover (see Figure 1) foregrounds the image of the post-mastectomy woman, reclined with a serious expression looking directly at the reader. The photo appears to be lit from above, with a pinkish light, mirroring that of a radiation therapy. Though the top of the book cuts across the woman's head, it is obvious that she is bald. The center of the photograph holds Accad's lack of breast – not with a medical gaze or a sexualized gaze – but, instead, with a gaze that is forthright. To borrow from Kenny Fries, Accad 'stares back.' Her forward stare, radiation marks and missing breast emphasize the medical procedures that she has undergone and the aftermath of those procedures with regard to her body. In her photo, Accad does not lower her outward gaze, nor does she invite comfort. The photo appears to be a simple declarative statement: I am here. Lorde's cover (see Figure 2) makes a similar statement. On her cover is Audre Lorde, smiling and peering straight ahead, with her head tilted toward the title on the left. She looks out from a blank backdrop, which makes her smiling presence

more insistent. As Elizabeth Alexander notes, this cover art foregrounds the fact of her existence (703): she is alive and talking<sup>2</sup>.

But, the covers do not limit themselves to being declarative statements of presence. Because cancer is so often discussed through the metaphor of war, these images act as images of survivors and, indeed, the existence of the personal narrative buttresses the idea that this is a testimony of their experience. I do not intend to suggest that understanding cancer through a metaphor of war is unproblematic, especially given that the texts themselves go against such an understanding; however, the covers, as points of entry, rely somewhat on, if only to thwart, the dominant narratives created by photographs of war: sympathy for the survivors, treatment of subjects as victims, and the sensationalism of images. This is why Susan Sontag's *Regarding the Pain of Others* becomes apposite in reading these images as representations of an atrocity. In Sontag's text, she meditates on the depictions of war and their implications for how we understand war, sympathy and responsibility. Sontag argues that the images of war give primacy to the identity of the subjects and await a caption to explain them. Accad's cover image functions according to this understanding, giving primacy to female identity and the caption or, in this case, the book's author, title and subtitle – Evelyne Accad, *The Wounded Breast: Intimate Journeys through Cancer* – explains what the image is supposed to represent: a specific person, a wound, an intimate journey and cancer. Yet, this image also complicates female identity, identifying a missing breast as equally feminine to a present breast. That is, despite the sexualized narratives that require two

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<sup>2</sup> It is important to note that this text has had two covers: The original edition features Audre Lorde in the positions I've described. The special edition features Audre Lorde smiling, with a scenic background, and the title is above her head.

(full) breasts as a prerequisite for womanhood, she is a woman whether she has one breast or two. Both the missing breast and the present breast support the notion that femininity and female identity are still present, despite the fact that the breasts in this photo are neither sexualized nor medicalized. In addition, the captions point to a plurality not present in the image itself. The plural noun 'journeys' repositions the woman as a representative. She becomes both an individual and an icon. Much like the war images in Sontag's text, this cover requires the engagement of images and ideas that exist outside the camera's scope to delineate a remodeled (excuse the pun) idea of femininity and the experience of cancer.

In *Regarding the Pain of Others*, Sontag problematizes these types of images because they are staged and rely primarily on identity. She rightly suggests that these images can be undercut by the narratives created about them and, certainly, taken out of context to mislead an audience. For Sontag, staged images create a mockery of the reality of suffering and undermine it as performative, a gesture that ultimately works to dismiss the responsibility of the viewer. Accad's cover image amplifies this theory, suggesting that an image can create its own context and narrative. In this case, the image where a subject owns her pain challenges the idea of the pain itself. First, the seriousness of the woman's expression, unflinching to be sure, implies that the portrait, the staged photo, is secondary to the reality of the missing breast. Here, the breast cannot be ignored or dismissed; it is precisely the presumed discomfort with the missing breast and the subject's forward stare that turn what would be a spectacle into a meditation on the reality of the missing breast. What appears to be performative – the large earrings, the hand at the back of the head – underscores the main subject of the photo: the focal point,

the missing breast. In fact, the pose, the earrings and the nude present breast demonstrate an acceptance of the lack as a reality. As a result, the image invites engagement with itself and its subject matter. Nonetheless, the woman's ownership of (her presumed) pain does not invite pity;<sup>3</sup> instead, it prompts an interrogation of mastectomies and the experience of breast cancer.

Both Accad and Lorde's cover images point to a question central to Sontag's meditation on images: "What to do with such knowledge as photographs bring of faraway suffering? People are often unable to take in the sufferings of those close to them" (99). Sontag decides – interrogating a statement she made in *On Photography* (1977)<sup>4</sup> – that images continue to have power depending upon their context. Accad's cover relies on the unused image of the one-breasted woman to create an impact. Likewise, Lorde's cover relies on the oft-used image of the laughing black woman to thwart the understanding of cancer. On Lorde's cover, the image insists on her presence, her happy

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<sup>3</sup> There is a great deal of conversation about the usefulness of pity within Disability Studies. Many scholars repudiate pity as a reaction that is infantilizing and not useful for changing social and political realities. Some view pity as a useful and necessary stepping stone to begin discussions on disability and disability rights. My main concern with Accad's book cover is that it seems to shun pity and validate the embodied experience of her missing breast. Precisely what I discuss in relation to Sontag's argument is that pity positions the object thereof as outside oneself and has the ability to create a space to assist and hear the subject or create a space to ignore the subject, a space that exists with a façade of interest or feigned support. The woman on the cover inhabits her own body, beckoning engagement, not dismissal.

<sup>4</sup> Sontag notes, "In the first of the six essays in *On Photography* (1977), I argued that while an event known through photographs certainly becomes more real than it would have been had one never seen the photographs, after repeated exposure it also becomes less real. As much as they create sympathy, I wrote, photographs shrivel sympathy. Is this true? I thought it was when I wrote it. I'm not so sure now. What is the evidence that photographs have a diminishing impact, that our culture of spectatorship neutralizes the moral force of photographs of atrocities?" (105). Sontag's questioning of her statement points to the idea that a photograph can linger – in the imagination and on the page – long after the photograph has been taken and viewed. Given the context, the photograph can also be reimagined and reinterpreted to multiple ends.



presence. Nonetheless, this is not the smiling face of any stereotypical image of black women; she is not Jezebel or mammy. She is not scantily clad, nor is she taking care of anyone else in a domestic capacity. The blank background reinforces her presence by foregrounding it and also makes clearer the fact that her head tilts toward the title, *The Cancer Journals*. The pose and laughter add a sense of irony to the cover: the so-called victim of cancer (and implied victim of sexist and racist oppression) is not without a sense of humor. What becomes present in this interplay of categories – black, female, ill – is precisely its interplay and the fact that her subjectivity cannot be harnessed or completely explained by one identity category. This cover's power as an image lies precisely in the confusion elucidated by Sontag's question. What do we do with the suffering of this woman? In this way, Lorde's cover, as does Accad's, positions the text as the answer to these questions.

Sontag's answer to the same question relies on the viewer to be sensitive to the images before him; she understands the image and, therefore, the obligation of conscience to be more powerful when coupled with compassion that translates to action. As she says,

It is because a war, any war, doesn't seem as if it can be stopped that [sic] people become less responsive to the horrors. Compassion is an unstable emotion. It needs to be translated into action, or it withers. The question is what to do with the feelings that have been aroused, the knowledge that has been communicated. (101)

Accad and Lorde's texts attempt to translate images of cancer – both the concrete images of the covers and dominant images in the American imaginary – into specific issues that

require action. For both authors, more than just the readers' sympathies and pity are at stake; there is political action to be done. That is to say, the texts work to harness sympathy and motivate to political action.

The structure of Accad's *The Wounded Breast* emphasizes the severity of cancer, not just the experience of the disease, but also the overabundance of it, the possibility of prevention and the systemic hindrances to a cure. *The Wounded Breast* traverses three continents and is flanked by a prologue and an epilogue written by the author. The multiplicity of places and people Accad encounters with cancer underscore the prevalence of cancer as minatory. Within her journal entries, Accad frequently laments the suffering of the people, particularly women, whom she loves and those with whom she has spoken. She also complains about the narratives that she hears but does not record; she talks about being bombarded with cancer stories. Her prologue and epilogue act as mirrors of the cover, forcing the text to reflect on its own subject and its author – both the missing breast(s) and the person(s) who've had them excised. Though the majority of the text is penned by Accad, her friends' marginalia riddles the text, punctuating, confirming and complicating Accad's words. Not only do we experience Accad's thoughts but those of her lover, Alban, her masseuse, Bettina, and her friends, Jane, Manicha, and Gilles. This chorus tends to support Accad most when she discusses her experiences with the health care system: the idea that her cancer was prompted by her doctor's error in prescribing Estrogen Replacement Therapy (ERT), the rude bed-side manner of other doctors, the possibility of healing through the mind and the simultaneous guilt and duty these experiences place upon the patient, patient advocacy and patient rights and, among other topics, the curative function of friendship. Their responses to

Accad and to each other highlight the ways in which some experiences with cancer, namely unnecessary radiation, carcinogenic ERT and confusion on the part of patients, can be prevented. In her discussion of these experiences, Accad discusses the ways in which they affect women in particular; her critique relies on the female body. Accad also begins and ends each chapter with paragraph length quotes from other memoirs and meditations on cancer among them, Jeane Hyvrard's *Le cercan*, Sandra Steingraber's *Living Downstream: An Ecologist Looks at Cancer and the Environment* and Gilles-Eric Séralini's *Le sursis de l'espèce humaine*. These quotes buttress Accad's journal entries by stating what she only hints at or briefly covers: the environmental causes of cancer, the officials that ignore toxic waste dumping and the capitalist impulse preventing change in the status quo. In this manner, the suffering of Accad and others becomes needless and their anguish preventable.

The structure of Lorde's text also works to provoke political action. She nestles her journal entries within larger essays, mixing personal reflection with a critical eye. At times, this structure can be disorienting, but it does not verge into being desultory. In fact, her selected journal entries marshal her text just as much as her essays. The result of which is not just a meditation by an accomplished raconteur, but a self-reflexivity and introspection, which implies that, though Lorde has felt the effects of systems of oppression, she chooses to speak and act and, by extension, so can the reader. In other words, Lorde exposes the fallacies of the health care industry and how they affect women of color, and, because she reflects upon her position her subsequent choice, to write and to not "obscure [her] painful feelings surrounding mastectomy with a blanket of business-as-usual" (9), the text renders her political position the only natural outgrowth of reading

this text. For example, in the chapter entitled, “Breast Cancer: Power vs. Prosthesis,” Lorde enters her doctor’s office, feeling confident of her style and flair without her breast only to be told by a nurse that Lorde’s lack of prosthetic is “bad for the morale of the office” (59). This anecdote is flanked by critical contemplation of the understanding of a mastectomy as purely a cosmetic incident and a journal entry that buttresses Lorde’s feelings with regard to the nurse’s comment. The result of these multiple types of storytelling is a trifecta that fully demonstrates Lorde’s point: Prosthetics mask the other issues surrounding breast cancer, most notably, but not limited to a confrontation with one’s own mortality, the criminalization of patients, dominant standards of beauty (which do not include Lorde anyway), fear of recurrence and the environmental factors that prompt cancer. The nurse’s behavior demonstrates that she is not only concerned with the less relevant topic of aesthetics, but also is incapable of providing the kind of psychic support needed by the patients for whom she cares. So, when Lorde calls the prosthesis a “lie” (60), the text supports this claim and clearly delineates what can be done about it. It makes Lorde’s call for a march of post-mastectomy women particularly apropos.

As the structure of both texts certainly elucidate the necessity of political action and rally for environmental changes, *The Wounded Breast* and *The Cancer Journals* point to a familiar feminist discourse: namely, that the ‘personal is political.’ More specifically, each text integrates homo-social bonds into the healing process. Their friendships are not incidental or accidental; Accad and Lorde rely on these friendships to process their experiences with breast cancer. In their wrestling with these experiences and in particular their pain, their homo-social bonds allow them to vacillate between fatigue and strength, feeling disenfranchised and feeling empowered. Because of this

vacillation, both women's political action appears more necessary, more urgent. For instance, Accad narrates her difficulty with remaining inspired enough to fight for herself. Her friends' marginalia provide her the space to be fatigued. She notes that this contradicts the sentiments of Dr. Bernie Siegel, a medical professional who promotes people's ability to heal themselves and cultivate the inner peace that will help them defeat cancer. Accad's text discusses this issue directly saying, "I want to develop this inner peace and overcome the disease. At the same time, though, I find it revolting to always project responsibility on to the patient without talking about the political and environmental factors that are so obviously involved" (72). Indeed, she wrestles with a desire for inner peace and the projection of responsibility onto herself throughout the text, often vacillating between the two and attempting to acknowledge the importance of both. Her wrestling is actually the source of what she describes as her suffering. She does not understand how or why one must undergo the loss of a mastectomy and the painful experiences of chemotherapy and radiation. The text's polyvocality, made possible by her friends' inserted comments, points to a reconciliation of having "inner peace" and fighting the system. To give an example, Accad's discussion of her doctors' poor bedside manner and the contradictions within the medical community (specifically those contradictions that result in poor patient care or uninformed consent) elicits remarks that support her political action and remind her to take care of herself. Fusing the two acknowledges the importance of the journal entries themselves, as acts that, in Lorde's words, combat the silences that would be destructive (23).

In addition to the homo-social bonds of friendship, both Accad and Lorde tout the erotic as integral to healing as well. In so doing, they respond to the sterility of medical

practice and, in opposition to the silence with which it is so often treated, voice the sexual concerns of breast cancer patients. Accad's discussion focuses on the transformation of intimacy and only briefly discusses the physical pain of penetration, saying that her vagina has shrunk. She laments the loss of a vibrant sexual life with her lover, Alban, and points out that "[her] intimate relationship with Alban was a real letdown that [she] needed to express" (106). Nonetheless, she also describes the happiness she feels when they are physically intimate, even if they cannot, as she says, "'take the elevator', as [they] used to" (106). She and Alban remain sexual with one another and this love and intimacy become a source from which she draws strength. During her travels, she is anxious to return to him and longs to comfort him when he is diagnosed with prostate cancer. The intimate space of their sexual relationship positions sexuality and the erotic as antidotes to the silence surrounding sexuality and the rhetorical (and at times physical) sterilization of cancer patients by the medical establishment.

Lorde also privileges her relationship to the erotic as integral to her healing. She writes about her desire to masturbate in one of her journal entries saying, "one day when I found I could finally masturbate again, [I made] love to myself for hours at a time" (25). According to David Morris in his article "Un-forgetting Asclepius: An Erotics of Illness," Lorde's candor about her need for auto-eroticism and other erotic experiences "enlists desire in aid of healing. It honors a tradition respectful of dream, ritual, and a bodily presence that cannot be reduced to manageable concepts or meanings" (434). Morris resituates sexuality into a discussion of the medical. His argument with respect to Lorde is that her erotic encounters disrupt the notion that she no longer has a sexual identity or sexual desires. I would add that her auto-erotic experiences in particular posit that she

still has a sexual desire for herself and still views her body sexually after her mastectomy. The aforementioned journal entry appears in the chapter entitled “Breast Cancer: A Black Lesbian Feminist Experience.” This narratological choice is especially apt given that erotic spaces complicate her identity in the face of a master narrative of illness that would totalize her experience and reduce her to being an asexual post-mastectomy woman. This title, much like the rest of the book, insists upon Lorde’s identity as inclusive of many facets. Her text avoids reducing her to a woman who has had cancer, but ensures that her narrative about cancer evinces that she experienced cancer as a black, lesbian, feminist woman.

Thus far, I’ve discussed the ways in which Accad and Lorde use pain as an impetus for political activity and building alternative ways of healing. Their more direct discussions of pain tend to speak specifically to the master narratives governing cancer and cancer treatment. Because of this, Elaine Scarry’s meditation on torture in *The Body in Pain* provides a lens to understanding both Accad and Lorde’s larger critiques of the health care industry. In each narrative, the discussions of pain highlight the disintegration of language and the inability of others, particularly doctors and medical personnel, to view the post-mastectomy woman’s pain as visible. Accad focuses on the “poison, cut and burn” (58) of chemotherapy, mastectomy and radiation as treatment; whereas, Lorde engages in a discussion about phantom pains and other physical effects of the mastectomy. Scarry understands the collapse of language and the rendering of the tortured subject as invisible as two steps in a three-step process, the last of which is an insistence on the power of the regime that sanctions the torture. Both Accad and Lorde’s texts point toward an understanding of cancer and cancer treatment as torturous – indeed,

Accad writes explicitly that it is torturous – and, highlight that these processes function to solidify the power of the medical establishment.

Accad's choice to not write extensively about her physical pain proves Scarry's claim that the descriptions of pain are few and, where they exist, approximate. This is why Lorde's elaborate descriptions of her phantom pain become especially powerful. Lorde's meditations bring the reader inside the body, emphasizing the fact of loss and the act of mourning and necessitating political responsibility. When Scarry interrogates the act of describing pain, she says "physical pain is not identical with (and often exists without) either agency or damage, but these things are referential; consequently we often call on them to convey the experience of the pain itself" (15). Scarry views the language of approximation as an inroad to describing pain, which is exactly what Lorde takes advantage of in her descriptions. She writes:

On the morning of the third day, the pain returned home bringing all of its kinfolk. Not that any single one of them was overwhelming, but just that all in concert, or even in small repertory groups, they were excruciating. There were constant ones and intermittent ones. There were short sharp and long dull and various combinations of the same ones. The muscles in my back and right shoulder began to screech as if they'd been pulled apart and now were coming back to life slowly and against their will. My chest wall was beginning to ache and burn and stab by turns. My breast which was no longer there would hurt as if it were being squeezed in a vise. That was perhaps the worst pain of all, because it would come with a full complement of horror that I was to be forever reminded of my loss by suffering in a part of me which



was no longer there. (38)

In Lorde's words, we find exactly what Scarry describes – approximations, temporal distinctions and spatial distinctions. Lorde's words take advantage of this disintegration of language in that the approximations disorient rather than describe, confuse rather than clarify. After all, her body was not always home to the pain and its kinfolk. The different types of pain certainly do not conjure up the close-knit image alluded to with the term 'kinfolk.' Muscles also do not, as personified here, screech. This description of pain indicates the very inability to describe it and the excruciating prerequisite for such a loss of language. When juxtaposed with the laughing woman on the cover, this description of pain also highlights the multifaceted nature of dealing with cancer. In this moment, Lorde's text crystallizes the vacillation between feeling disempowered and feeling triumphant. She also, like Accad, amplifies Sontag's idea, demonstrating that the image can work alongside the narrative, rather than simply be undercut by it.

In Accad's narrative, the descriptions of physical pain are not present at all; she opts for simple declarations that pain has occurred: It hurts. It stings. Or, it burns. This silence does not function in the same way as Accad's but it certainly highlights the inability to articulate pain. Accad's silence coupled with the cover and her very detailed delineations of her treatment operate to emphasize the existence of her pain. It seems to surround the text, without being called upon explicitly. In so doing, Accad creates a discourse of pain not unlike that of Lorde's. Her minimal mention of it operates in the same way as Lorde's explicit mention of it in that both mark a disintegration of language. As I mentioned before, these gaps of eloquence in Accad have a critical utility. Given the verbosity of her text on other issues, particularly those that are the result of pain, like

strained sexuality, strained patient-doctor relationships, and difficulty cultivating inner peace, this rhetorical reticence vis-à-vis physical pain underscores the existence of that pain and amplifies the existence of her psychological suffering (which Accad does give voice to).

Though Accad is silent about much of her physical pain and, to her friends, much of her psychological adjustment, she does not participate in the silencing of her own voice. What Accad experiences, at the hands of family, strangers, medical personnel and other healers, bears striking similarity to that of the tortured subject in Scarry's text. For Scarry, the tortured subject loses language just as the torturer doubles his language, hereby creating a silence for the tortured subject (36). She also argues that language can be taken away to immobilize the victim and undermine the possibility of representation. For Accad this occurs on several occasions. Within her doctors' offices, her doctors, specifically Dr. JE, deny her information or hide behind medical jargon, which usually results in her receiving poor care. Accad's sister, Adelaïde, calls cancer "Satanic" and admonishes Accad to repent; Adelaïde's commentary usurps Accad's understanding of her illness, so that she is at a loss for how to describe her life except in religious terms in the journal entries that follow. In both cases, Accad has not only undergone physical pain, but a theft at the level of language that removes her linguistic agency and places it in the hands of another. In her journal entries, Accad fights against these blanket narratives, by questioning their validity in relation to her experience. She writes against Dr. JE and Adelaïde's narratives to recuperate her own voice. Her desire to write against them echoes Lorde's text. Lorde contends that these types of silencing, these usurpations of one's own voice, that force Lorde to write her text in the first place. She points out

that silences enable fear and reduce the possibility of political action.

This disintegration and usurpation of language, in Scarry's text, serves to reify the power of the regime responsible for the torture. In Accad's and Lorde's narratives, to stop at understanding language as disintegrated and usurped performs the same function as torture: reasserting the power of the medical establishment. However, Accad and Lorde stage a protest with their narratives, working against the dominant narratives of the health care industry. Their act of writing thwarts the ability of the regime to, as Scarry says, "translat[e] all the objectified elements of pain into the insignia of power, [and convert] the enlarged map of human suffering into an emblem of regime's strength" (56). For both of them, their pain transforms into the insignia of power, but it is their power. Their narratives reclaim agency and language as their own. To be specific, Accad draws on the discourse of the Holocaust ("never forget") and the necessity of survivors' stories in post-war Lebanon. The latter is the subject of one of her books, *Sexuality and War: Literary Masks of the Middle East*, and is, to be sure, a subject with which she is admittedly more familiar; nonetheless, she draws on both the Holocaust and the space of Lebanon to create parallels between women trans-nationally and cross culturally. This link becomes especially important given the way in which she arrays research and cancer narratives from across the United States, Europe and the Middle East. Lorde's text mobilizes the discourse of black queer feminist politics, emphasizing the multiplicity within identity categories. She demands that the government recognize the threat of environmental forces acting on the body rather than focus solely on the body as a site of cancer.

Both *The Wounded Breast* and *The Cancer Journals* continue Evelyne Accad and

Audre Lorde's work as advocates of women of color. Their meditations on the experience of cancer and, in particular, the experiences of pain re-imagine the narratives of illness. In their texts, the patient is not immobilized either physically or verbally; she is capable of political action and she resists the totalizing usurpation of her voice by a regime that neglects her under the guise of acting on her behalf. Accad and Lorde's critiques of the health care industry work toward a new understanding of illness itself, one that resists pandering to fear and demands agency for patients.

In their discursive acts of resistance, both Accad and Lorde challenge the notion of fragmentation most often touted by post-humanism. To amplify, post-humanism argues against the notion of the cogitating human as intrinsically different or, for lack of a better term, special. The field refuses to take humanity's uniqueness for granted, preferring instead to complicate our understanding of humanism by interjecting that humans share characteristics with animals and machines. In the case of Donna Haraway's landmark text, "A Cyborg Manifesto: Science, Technology, and the Socialist-Feminism in the Late Twentieth Century," the cyborg becomes a central figure for rethinking essentialism within multiple ontological categories and allowing those categories to do the political work of combating social and political discourse. Interestingly enough, Haraway's delineations of ontological categories does not include disability in any form.<sup>5</sup> It is precisely at this juncture that Accad and Lorde's texts trouble her work. Their texts raise the issue of the place of illness within this model of thinking. By positioning physical and psychic pain at the center of their political critique, Accad and Lorde disrupt the

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<sup>5</sup> It need be understood that disability is a vast field and I do not intent to conflate disability & illness here. Instead, I mention disability as a category that Haraway does not account for in her "informatics of domination."

notion that you have to transgress boundaries in order to “explore [them] as one part of needed political work” (Haraway 74). They remain very much connected to their bodies as they participate in political work.

Specifically, Accad uses her body as the impetus for her political work. Her prose is guided by her intuition in many places and she explores multiple avenues of political activism and searches for some form of psychological balance. When discussing Bernie Siegel’s work and her desire to cultivate inner peace, she mentions the environmental factors that she knows are involved in the proliferation of cancer (72). Her early journals link the Holocaust and cancer victims in terms of the scale of death (25); her later journals corroborate similar sentiments: namely, that cancer is akin to war (470 – 1). What is implicit in her link is that there is a responsible party. Though Accad does not specify, her suggestion aggregates her visceral response to her own mortality and her understanding of cancer as an epidemic to posit a critique of the wide spread capitalism and lackadaisical medical system.

Lorde’s discussion of her choice to not wear a prosthetic directly challenges the notion of the cyborg in that Lorde refuses a prosthetic that would mask her experience of cancer. For her the hybrid human/machine is not the answer, because the machine, in this case, the prosthesis, would erase the experience of the human. This is more than a humanist cry for the uniqueness of humanity; Lorde rejects the prosthesis because she is dissatisfied with the narrative it creates about the cohesion of humanity. From her purview, the prosthesis is another attempt at a totalizing narrative. The cyborg’s merger between humans and machines ignores the extent to which the machine is forced onto her body in significant ways. In the case of the prosthesis, the machine is a mechanism of

ostracization. After all, the original prosthesis is flesh-colored, but not the color of her flesh. In fact, the only skin tone it matches is that of white person's, specifically one whose flesh has pinkish undertones. Needless to say, this also leaves out other women of color and white women whose flesh has olive or golden undertones. The prosthetic also becomes a mechanism to create guilt and shame. The nurse's statement that her lack of prosthesis is bad for morale indicates that Lorde's acceptance of her own body disrupts the narrative of supposed normalcy created by prosthetics. In addition, the nurse's comments blame Lorde for not being a specific type of cancer survivor. Here, the machine emphasizes the very boundaries Haraway's cyborg is supposed to critique.

One critic, Diane Price Herndl, argues that Lorde's complaint about prosthetics has been changed by the advent of posthumanist thought. Herndl engages in a theoretical self-analysis to justify her own choice to wear a prosthetic and understand her choice in relation to her feminism. After chastising herself for making an anti-feminist decision vis-à-vis reconstruction, she notes, "I rethought what I meant by feminist theory and realized that feminist relations to the body are different now than they were twenty years ago for Lorde and that feminist relations to breast cancer are different" (149). This difference, she states, is due to post-humanism. Because the cyborg allows an understanding of oneself as already alien, the post-humanist feminist can embrace the prosthetic. Certainly, Herndl correctly identifies the differences between Lorde's historical moment and her own (circa 1999); however, millennial feminists still have to contend with narratives that privilege two breasts, more specifically two white perky B or C cup breasts between 18 and 25 and engaged in heterosexual coupling. This ideal, which still does not include women similar to Audre Lorde – black, with large breasts,

well above the age of 25 and lesbian – needs to be interrogated. Herndl’s commentary obfuscates the ways in which a desire for the ideal and an adherence to it dictates the possibility of political critique. While I do not find Herndl’s decision less than feminist, it does appear to minimize the way that reconstructive surgery reaffirms the status quo and silences some of the political critique available. Though Herndl’s choice, in her mind, becomes a way to embrace the post-human, her joint kinship with machines, and her cyborg identity, it does not explore the vacuum of political critique created by her “partiality for a normal appearance” (151).

Herndl argues cogently that a mastectomy scar and a reconstructed breast would be the same for her in that both remind her of her missing breast. She confesses, “prosthesis is technology, and it never lets me forget” (152). She understands that she will forever feel like Haraway’s cyborg: not completely human, nor completely machine, but, certainly, alien and ready to voice a political critique. Here, Haraway’s cyborg, in the form of Herndl, does perform necessary political work. Nevertheless, Herndl neglects a salient point in Lorde’s critique of the prosthesis (and, by extension, reconstructive surgery): that her lack of prosthesis is not simply about how she conceives of her body, but how others understand her. Lorde understands prostheses as a barrier to forming support networks (16) and asks where are the black, lesbian, feminist role models for her (28 – 9). These remarks demonstrate that Lorde’s choice was, in addition to being about her understanding of her own body, a matter of making herself recognizable to others. Lorde privileges her body’s power to speak for itself, as a focal point for generating political power and creating viable communities. Inasmuch as a woman with reconstructed breasts can speak, as Herndl bravely chooses to do, she still has a visible

disconnect between her body and her voice. This disembodiment subtracts from the possibility of critique and reinscribes the body into so-called normalcy.

What's more, the disconnect between embodied experience and disembodied voice ratifies silence. According to Elaine Scarry, hearing about someone's pain creates doubt, unlike the certainty of actually having pain (6 – 7). A reconstructed breast or a prosthesis positions the wearer to always create some modicum of doubt vis-a-vis her experience. Here, with the experience of cancer, the body is essential to expressing the certainty of that pain and the necessity of political mobilization. As with Evelyne Accad's book cover and the oft-cited Matuschka photo in the *New York Times Magazine*, the viewer cannot look away. For Accad and Lorde, there is no room for doubting their pain. Even when their language disintegrates, both women urge a meditation on their corporeal experience as an inroad to changing the medical system. They do ratify the ways in which their recovery hinges upon their relationship to machines and surgical procedures, but they refuse to allow technology to silence their embodied experience.



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